



Haverling

L O N D O N B O R O U G H

PEOPLE OVERVIEW & SCRUTINY SUB COMMITTEE AGENDA

7.00 pm

Tuesday
5 September 2023

Appointment Centre
Room 10 & 11, Town
Hall, Romford

Members 12: Quorum 4

COUNCILLORS:

Robert Benham
Patricia Brown
Jason Frost (Chairman)
Laurance Garrard

Judith Holt
Jacqueline McArdle
Christine Smith
Bryan Vincent

Frankie Walker (Vice-Chair)
Julie Wilkes

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 (NUT)

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

Under the Committee Procedure Rules within the Council's Constitution the Chairman of the meeting may exercise the powers conferred upon the Mayor in relation to the conduct of full Council meetings. As such, should any member of the public interrupt proceedings, the Chairman will warn the person concerned. If they continue to interrupt, the Chairman will order their removal from the meeting room and may adjourn the meeting while this takes place.

Excessive noise and talking should also be kept to a minimum whilst the meeting is in progress in order that the scheduled business may proceed as planned.

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

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

Reporting means:-

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

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

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

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

What is Overview & Scrutiny?

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

The sub-committees have a number of key roles:

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

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

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

Terms of Reference

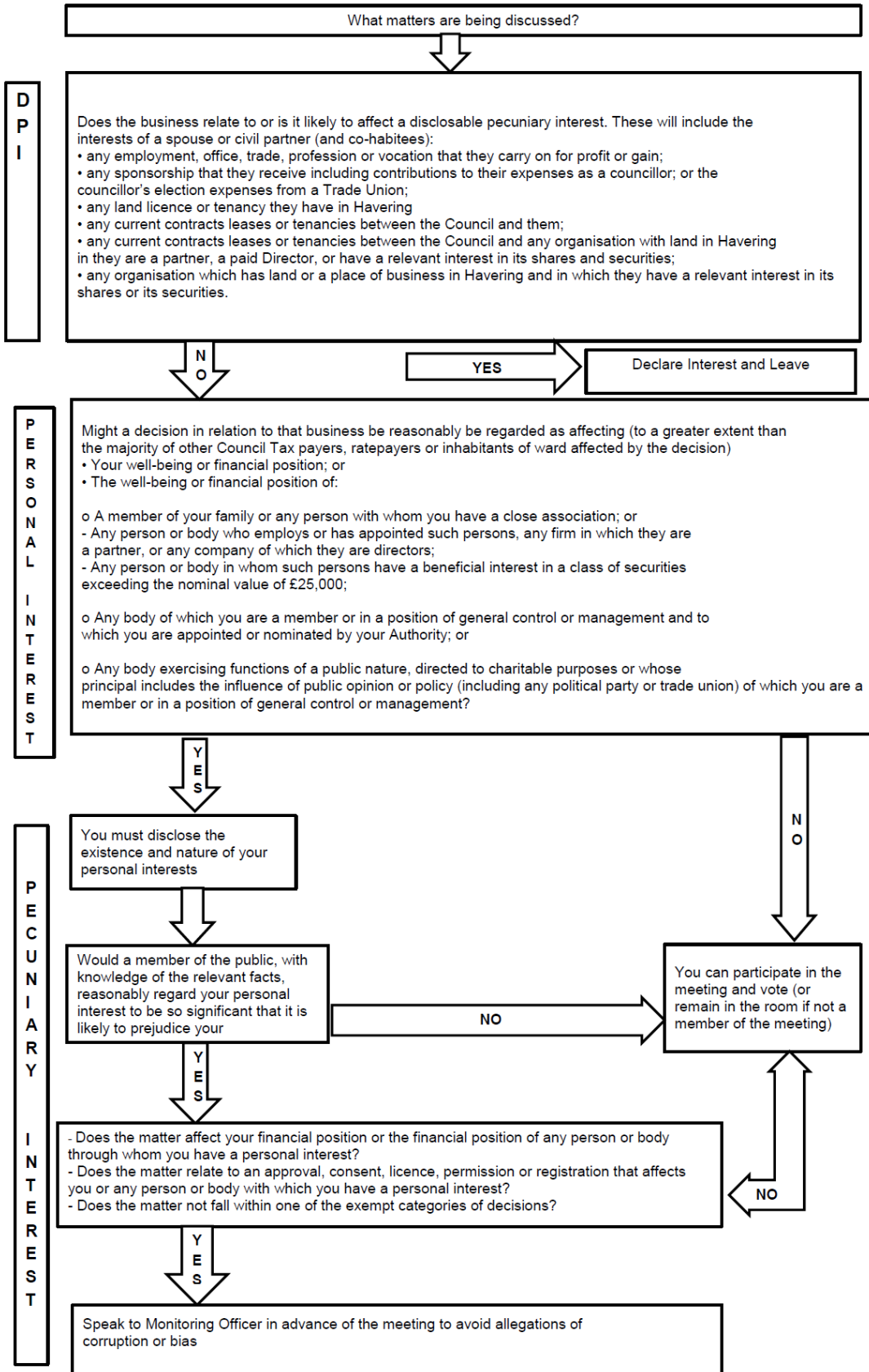
The areas scrutinised by the Committee are:

- Drug, Alcohol & sexual Services
- Health & Wellbeing
- Health O & Scrutiny
- Adult Care
- Learning and Physical Disabilities
- Employment & Skills
- Education
- Child Protection
- Youth Services

People Overview & Scrutiny Sub Committee, 5 September 2023

- 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 **APOLOGIES FOR ABSENCE AND ANNOUNCEMENT OF SUBSTITUTE MEMBERS**

To receive (if any)

2 **DISCLOSURE OF INTERESTS**

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

3 **CHAIRMAN'S ANNOUNCEMENTS**

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

4 **MINUTES** (Pages 1 - 8)

To approve as a correct record the Minutes of the meeting of the Sub-Committee held on 11th July 2023 and special meeting held on 2nd August 2023 (attached) and authorise the Chairman to sign them

5 **HEALTHWATCH HAVERING ANNUAL REPORT 22/23** (Pages 9 - 40)

Report and appendix attached

6 **ADULT SERVICES COMPLAINTS REPORT** (Pages 41 - 74)

Report and appendix attached.

7 **CHILDREN SERVICES COMPLAINTS REPORT** (Pages 75 - 114)

Report and appendices attached

8 **ADULT SEND TOPIC GROUP REPORT** (Pages 115 - 156)

Report and exempt appendices attached (exempt appendices not available to press or public).

Zena Smith
Head of Committee and Election Services

**MINUTES OF A MEETING OF THE
PEOPLE OVERVIEW & SCRUTINY SUB COMMITTEE
Appointment Centre Room 10 & 11, Town Hall, Romford
11 July 2023 (7.00 - 9.15 pm)**

Present:

COUNCILLORS

Conservative Group	Jason Frost (Chairman) and Christine Smith
Havering Residents' Group	Laurance Garrard, Jacqueline McArdle, Bryan Vincent and Julie Wilkes
Labour Group	Mandy Anderson (In place of Frankie Walker) and Patricia Brown

40 APOLOGIES FOR ABSENCE AND ANNOUNCEMENT OF SUBSTITUTE MEMBERS

Apologies were received for the absence of Councillor Frankie Walker and co-optees Jack How and Julie Lamb.

41 DISCLOSURE OF INTERESTS

There were no disclosures of interests.

42 CHAIRMAN'S ANNOUNCEMENTS

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

43 MINUTES

The minutes of the previous meeting held on 9th March 2023 and special meeting held on 16th March 2023 were agreed as a correct record and signed by the Chairman.

44 POLICE STRATEGY ON RECRUITING OFFICERS FROM MINORITY GROUPS

Members were pleased to have Chief Superintendent (CS) Stuart Bell and Chris Nixon from the East Area Basic Command Unit (BCU) to present the Police's recruitment strategy.

It was agreed to exclude the public and press for the entirety of the item under paragraph 2 and 3 of Schedule 12A to the Local Government Act 1972.

It was explained to the members of the Committee that Newham was the best performing Borough in London in terms of diversity of recruitment however the East Area BCU was the best performing BCU in the same regards. CS Bell agreed to contact Newham to understand what their strategy was and how that could be implemented within Havering. CS Bell explained that there had been media campaigns to encourage enrolment and the Police was keen to fix reputation in communities to also boost enrolment of younger officers. It was described to the Sub-Committee that the full training of new officers was a 3 year course with 5 months dedicated to learning the law which ensured new recruits had the best knowledge to allow them to undertake their key role in communities.

CS Bell updated members on the vacancies of all neighbourhood teams which satisfied the Sub-Committee members. It was also explained that the BCU is hopeful to double the current neighbourhood team numbers.

The Sub-Committee made no recommendations following the report and noted its contents.

45 POLICE STRATEGY ON VIOLENCE AGAINST WOMEN AND GIRLS

Chief Superintendent (CS) Stuart Bell and Chris Nixon from the East Area Basic Command Unit (BCU) to present the Police's Violence against Women and Girls (VAWG) Strategy.

It was agreed to exclude the public and press for the entirety of the item under paragraph 2 and 3 of Schedule 12A to the Local Government Act 1972.

Members were pleased to hear that VAWG was the BCU's top priority and the whole BCU works to prevent it. It was explained by CS Bell that the percentage of rape cases in the BCU that had been solved had increased but members still exclaimed that this was still too low. Police officers undertake regular 'walk and talk' activities with women and women's groups within the local communities with the aim to increase the confidence women and girls have with the Police and it also provides opportunities for Police Officers to explain the current VAWG strategies.

46 COST OF LIVING MARKETING SUMMARY

The Sub-Committee were presented with the Council's Cost of Living Marketing Strategy.

Members received an extensive presentation from an officer which explained the work the Council had done in terms of a new marketing strategy to bring help to residents who need it, when they need it whilst being data driven.

Members noted the strategy was mainly trial and error to gauge the uptake from residents and which processes to use to obtain the highest engagement across the Borough. The best method found was using links, mainly embedded in text messages, to direct residents to information. The '/energyrebate' URL had 400 views per day from residents.

Members of the People OSSC noted the report and made no recommendations.

47 ADULT SEND TOPIC GROUP FINAL REPORT

The Chairman agreed to remove this item from the agenda due to apologies from key members and officers.

Chairman

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Public Document Pack

**MINUTES OF A MEETING OF THE
PEOPLE OVERVIEW & SCRUTINY SUB COMMITTEE
Council Chamber
2 August 2023 (7.00 - 8.55 pm)**

Present:

COUNCILLORS

Conservative Group	Jason Frost (Chairman), Timothy Ryan (In place of Judith Holt) and Christine Smith
Havering Residents' Group	Laurance Garrard, Jacqueline McArdle, Bryan Vincent and Julie Wilkes
Labour Group	Mandy Anderson, Patricia Brown and Frankie Walker (Vice-Chair)
Also in attendance	David Taylor, Mandy Anderson and Matthew Stanton (Chair and Members of Places OSSC) and Gerry O'Sullivan (Chair of O&S Board)

53 APOLOGIES FOR ABSENCE AND ANNOUNCEMENT OF SUBSTITUTE MEMBERS

Apologies were received from Lucy Goodfellow and Councillor Judith Holt.

54 DISCLOSURE OF INTERESTS

There were no disclosures of interests.

55 CHAIRMAN'S ANNOUNCEMENTS

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

56 WENNINGTON FIRE 2022 - SUPPORTING VULNERABLE PERSONS, RECOVERY PROCESS AND LESSONS LEARNED

The Sub-Committee, along with Places Overview & Scrutiny Sub-Committee colleagues, were presented with information following the Wennington wildfires on 19th July 2022.

Before the presentation started, the Sub-Committee noted a letter by Rev'd Peterson, Vicar of Wennington Parish Church who could not attend the meeting.

Officers of the council began by giving their presentation where it was explained to members that the fires experienced were the worst local catastrophe in over 600 years with 18 houses totally destroyed and 1 left inhabitable. 200 residents were displaced which included 100 council staff, all of which were invited to attend 'one stop shops' for help, for example GP consultations. Of the 200 displaced residents there were a large range of disabilities which had all been catered for. It was also noted that a high number of personal documents, for example passports, birth and marriage certificates, deeds for homes, had been destroyed and the Council was working with residents to reobtain them.

A fire recovery board had been established a week after the fire with a high level of communication between the Council and the effected residents. Officers undertook regular walkabouts within the affected community to uphold the communication. The Council collaborated with multiple providers to arranged free gas and electric checks. A full position on the repair and rebuilding of homes could not be given due to some of the affected homeowners not having the correct, or any insurance. A mechanism for donations was agreed and the money was split across all affected residents based on criteria which was deemed largely successful.

It was noted that the Council had suffered a direct cost of around £100,000 but this would not be reimbursed by central government as it was not enough of a cost to meet the criteria which displeased Councillors.

In the aftermath of the fires, the Council alongside volunteer groups searched for lost or displaced pets for residents and helped them collect personal belongings from cars within the affected areas. Members of the Sub-Committee were pleased to hear how helpful the Council had been and commended the local ward Councillors on how they reacted to the situation given the fact they had only just been elected as new Councillors.

After the Council officers gave their presentation, the Sub-Committee welcomed officers from the London Fire Brigade (LFB) who also presented information to the Sub-Committee.

It was explained that on the day of the fires, the LFB received 2469 calls and attended 359 incidents which is a huge increase of the average. The LFB declared the Wennington site a major incident which is extremely rare. The LFB officers described the equipment used to contain and put out the wildfire, which included a hose with pre-prepared holes to create a wall of water to preserve life and buildings. LFB firefighters undergo enhanced wildfire response training and the LFB have introduced wildfire officers, of which Havering have 2, and 30 tactical advisors. Members were pleased to hear learnings had been made by the LFB from fire brigades across Europe.

It was discussed that increased local bin collections and a clamp down on disposable barbeques would hopefully lead to a decrease in fires of the same nature and the LFB continually hold checks of fire hydrants to ensure their database is as up to date as possible. The LFB could not confirm the

cause of the Wennington fires as it had been declared as inconclusive and when questioned on this by members, confirmed that this was due to there being too many theories on the cause after investigations had taken place.

The LFB confirmed that Havering is at 100% staff, 100% of the time but some incidents require Havering to call on Essex and vice versa. Members questioned if foam could be used to tackle fires of this sort but it had been ruled out due to being detrimental to the Environment.

The Sub-Committee noted the presentations and, the Chair Cllr Jason Frost proposed 2 recommendations. Both were seconded by Cllr Tim Ryan and agreed unanimously:

- 1) Request Council Officers explore the option producing a policy to set up an emergency fund or obtain insurance for any future emergencies similar to the one experienced in Wennington.
- 2) Investigate good practice at other London and National Local Authorities and also any other Local Governments overseas.

Chairman

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PEOPLE OVERVIEW AND SCRUTINY SUB-COMMITTEE

Subject Heading:

Healthwatch Havering Annual Report
2022/23

Report Author and contact details:

Ian Buckmaster

SUMMARY

Healthwatch Havering will present their annual report for 2022/23.

RECOMMENDATIONS

That the People OSSC;

1. Note the contents of the annual report
2. Make any recommendations it deems necessary

REPORT DETAIL

Officers from Healthwatch Havering will present their annual report for the period of 2022/23 which is attached to the end of the report.

IMPLICATIONS AND RISKS

Financial implications and risks: None as report is for noting

Legal implications and risks: None as report is for noting

Human Resources implications and risks: None as report is for noting

Equalities implications and risks: None as report is for noting

ENVIRONMENTAL AND CLIMATE CHANGE IMPLICATIONS AND RISKS

None as report is for noting

BACKGROUND PAPERS

None

Together

we're making health
and social care better



Annual Report 2022-23

Contents

Message from our Chair	2
About us	3
Community Engagement, Enter & View and Community Insights	8
Advice and signposting	24
Volunteering	25
Working with others	26
Our finances	27
How we work	28
Compliance with statutory requirements	29



This year we, like everyone else, have experienced huge changes and challenges in health and social care. However, no matter what the enormity or the delicacy of the task, the willingness of our volunteer members to give their help and support has, as always, been amazing. That the community has a voice and that health and social care leaders can hear the community's voice is paramount to them. This is our tenth report: please enjoy it – it includes many of the pieces of work that we have undertaken on your behalf

Anne-Marie Dean, Chair, Healthwatch
Havering

About us

We are part of a national network of local Healthwatch, who share the same vision and commitment. We are co-ordinated by Healthwatch England whose statutory role is to provide advice and guidance and to work with government and NHS England.



Our vision

A world where we can all get the health and care we need.



Our mission

To make sure people's experiences help make health and care better.



Our values are:

- **Listening** to people and making sure their voices are heard.
- **Including** everyone in the conversation – especially those who don't always have their voice heard.
- **Analysing** different people's experiences to learn how to improve care.
- **Acting** on feedback and driving change.
- **Partnering** with care providers, Government, and the voluntary sector – serving as the public's independent advocate.

A one page résumé

Our report this year demonstrates our commitment to ensuring the voices of local people are heard, and that our role is included in the new health and social care management arrangements in the borough.

Ensuring the voices of local people are heard

We have reported on some of the major health services in Havering, working in partnership with other organisations enabling sharing of information.

The project reports which will drive change in services for this year are covered in further detail in the report and include

- Maternity Services
- Accident and Emergency Services at Queen's Hospital
- London Ambulance Service
- Care Homes
- The effects of Long Covid
- Accessing GPs
- Two very important projects which are being undertaken and close to finalising are Learning Disabilities, Autism and Deafness. Commissioned by the Borough to support their commissioning intentions.
- Enter and View visits have recommenced, and more are planned

A partner in health and social care

During the summer the Havering Place-based Partnership came into being, bringing together NHS services and Havering Council; our Healthwatch is a full member of the Partnership.

The changes are to be welcomed as our role has been included in many of the new systems, which therefore greatly enables our ability to ensure that residents/patients voices are heard.

This has provided new opportunities such as

- Membership of the appointment panels for Clinical and Care leadership roles
- Assessors for Health inequalities funding
- Working with Public Health on the obesity strategy and dealing with Long Covid

Our year in review

Over 40,000 people shared their experiences of health and social care services with us, helping to raise awareness of issues and improve care.



146 people came to us for clear advice and information about health and social care issues, such as accessing GPs or dentists and dealing with adult social care issues..

Making a difference to care

We published **8 reports** about the improvements people would like to see to health and social care services.

Health and care that works for you

The most popular report was our **GP extended access survey** which highlighted patients' views on accessing their GPs' services



We're lucky to have **14** active volunteers who give up their time to make care better for our community.

We're funded by our local authority. In 2022-23 we received **£117,359** from them (which is the same as the previous year).



We also generated **£23,484** from NHS North East London and the London Ambulance Service on carrying out work commissioned for them.

We currently employ **6 staff** who help us carry out our work.

How we have made a difference this year

Spring and Summer 2022

- Home Care Survey for LBH – undertaken twice yearly. A random selection of residents receive calls from Healthwatch seeking views on the standard of domiciliary services
- Join the Drug and Alcohol Prevention Partnership – volunteer member with wide experience in this field
- Consultation on the NEL Community Diagnostic Centre
- Long Covid Workshop – this work developed and we published a full report. Importantly, this work is now re-starting with Public Health team leading a new initiative

Autumn and Winter 2022/23

- Safeguarding Survey – annual independent survey that Healthwatch undertake on behalf of the Havering Adult Safeguarding Board – findings from the survey are presented to that Board
- Streets Apart Walking Schedule – volunteer members supporting local residents
- Frailty services at BHRUT are raised as the new winter plan for A & E comes into place
- Community Chest Grants is established creating for the first time a real opportunity to help small organisations to make a difference

“At LAS, we are committed to listening to patients and the public as a fundamental part of our mission to improve standards of care for everyone. London has a hugely diverse population with a wide variety of needs and Healthwatch is uniquely embedded within London communities, so we have been delighted to work with them on this by commissioning engagement reports. The rich insights from their reports will inform the development of our five year strategy and help us to put the people we serve at the heart of all we do.”

*Director of Strategy and Transformation,
London Ambulance Service*

Ten years of improving care – taken from previous Annual Reports

Healthwatch was formed in April 2013, so we have just celebrated our tenth Anniversary.

This is brief retrospective of some of our achievements of the past ten years.

✓ 2013 -2014

Twenty-three Enter and View visits carried out

✓ 2014 – 2015

Joint review (with the Council's Health Overview & Scrutiny Committee) of delayed treatment at BHRUT due to a backlog of referrals to treatment (RTT)

✓ 2015 – 2016

This year the CQC completed its inspection of GP practices and Healthwatch undertook 17 GP visits to support the CQC to complete its inspections in the borough

✓ 2016 – 2017

Visits to 10 residential homes, 10 GP practices, 3 Nursing Homes, 3 Queen's Hospital, 1 mental health service

✓ 2017 – 2018

Over 600 service users, carers and relatives contributed their views and concerns. 111 recommendations were made for service improvement

✓ 2018 – 2019

We launched our Friends Network and worked with 60 third sector organisations

✓ 2019- 2020

We launched our Dental survey following concerns from residents, our report supported the work of NHS England and Healthwatch England called for national action to deal with the problems identified

✓ 2021 – 2022

Our members helped at the vaccination centres, with providing transport, and importantly networking with often hard to reach communities to ensure that they had every opportunity to visit the vaccination centres

Community Engagement, Enter & View and Community Insights

The statutory role of Healthwatch is to:

- ❖ promote, and support, the involvement of people in the commissioning, provision and scrutiny of local care services
- ❖ enable people to monitor the commissioning and provision of local care services by considering
 - the standard of provision of local care services
 - how local care services could be improved
 - how local care services ought to be improved
- ❖ obtain the views of people about their needs for, and their experiences of, local care services

and to ensure that commissioners, providers and managers of services, and the Council's Overview and Scrutiny Committees, are made aware of those views and experiences.

We do this in several ways:

- By carrying out surveys of local people
- By undertaking Enter and View visits to health and social care facilities
- Through our membership of the Healthwatch North East London Community Insights System
- Through attendance at a range of meetings with NHS, local authority and third sector colleagues and provider organisations

The next few pages give several examples of the work we have done over the past year.

Community Engagement – Equity and Equality in Maternity Services

In March 2022, NHS North East London commissioned the Healthwatch organisations in North East London carry out a consultation exercise to co-produce an equity and equality analysis and action plan for Maternity and Neonatal care.

The intention was to co-produce plans setting out how the NHS would work in partnership to ensure equity for women and babies and race equality for staff, ensuring it was aligned with the health inequalities work of the Integrated Care System.

The project was timed to begin during Maternity Choices week in February 2023.

This work was carried out in two phases during 2022/23.

We contacted a wide range of community groups, children's centres, ante-natal groups, parent and toddler groups and day nurseries, who were asked to alert their participants to the survey and to encourage those in the target population to respond to it.

In addition to a formal survey, interview sessions were held at the Maternity Unit of Queen's Hospital, Romford and a children's centre, and a focus group was held in conjunction with Mums Matter.

As part of the project, our staff and volunteers visited Antenatal clinics at both Queen's Hospital, Romford and King George Hospital, Goodmayes, where mums-to-be were interviewed and children's centres where new mums were seen.

Community Engagement – Equity and Equality in Maternity Services (continued)

Survey questionnaires were distributed to GP surgeries, church groups, nurseries and toddler groups, Early Help Centres and community groups including Mums Matter, Mumsnet and the Sycamore Trust.

The final report was accepted by NHS North East London shortly before publication of this Annual Report. Its recommendations are already having an impact – for example, as a result, maternity healthcare professionals are now receiving cultural sensitivity training. [You can read the full report on the NHS North East London website.](#)

“I just wanted to say ... thank you for all your energy and investment in the maternity engagement over the past year. ... we honestly couldn't have done it without you. You were able to reach communities we never would have been able to reach on our own, and with that it meant the engagement was genuine, sensitive and considered.”

“... you collectively engaged with over 1,500 maternity stakeholders [which] provided ... analysis far beyond what we were expecting. All the insight and feedback you gathered really has set actions and recommendations to deliver meaningful change in maternity care ...”

“It was invaluable having all the north east London Healthwatch's working together ... listening to our communities and supporting the ongoing work of our maternity units. ...working together on identifying those improvement areas [has] been a shining example of partnership working.”

*Senior Communications and Campaigns Manager
Maternity and Babies, Children and Young People's*

Programmes

Community Engagement – Experience of Post-Covid syndrome (Long Covid)

First identified during the Covid pandemic, Long Covid is a new and evolving syndrome that can greatly impact the health and quality of life of many people. The precise causes of Long Covid are not yet known and the recovery time varies for each patient.

In March 2022, we joined our Healthwatch colleagues in Barking & Dagenham and Redbridge in carrying out a survey of people living in the three boroughs in conjunction with the Long Covid Clinic at King George Hospital, Goodmayes (provided by the community health provider, NELFT).

The survey was designed in collaboration with the NELFT Long Covid service and BHRUT Clinic, with a focus on inequalities and deprivation.

During March–June 2022, 169 people completed the survey, 10 service users gave in-depth interviews and 4 GPs also gave interviews. Only 29% of the respondents to the survey were referred for support for Long Covid, of whom only 16% had accessed the Long Covid service. The findings therefore, included a 71% majority of patients who had experienced help only from primary care or other services.

The survey resulted in considerable interest from the Public Health services in the three boroughs as well as the GPs and Long Covid Clinic leadership.

Community Engagement – Experience of Post-Covid syndrome (Long Covid) (continued)

Subsequently, we have been approached by Public Health Havering to carry out further work in conjunction with them to find out how people in the borough who have experienced Long Covid are faring, a year on (this outside the scope of this report but will appear in next year's Annual Report).

You can read our full report by downloading it from the link below.

[Our report about Long Covid](#)

'The partnership between Healthwatch and NELCCG has been helpful in generating understanding of local patient experience of Post-Covid-19 syndrome (Long COVID), with a high quality of life impact and complexities of access to our specialist provision. It has been good to see the high value given by patients to the Long COVID Clinic here at King George Hospital in the survey and interviews. We are working to increase the referrals to this clinic as a system in the light of the findings and are pleased to see recent data suggesting this is now taking place.'

*Planned Care Programme Manager for North East London
Clinical Commissioning Group,*

Community Engagement – London Ambulance Service Five Year Strategy

In October 2022, the London Ambulance Service (LAS) asked Healthwatch organisations across London to help with a public consultation exercise to identify priorities for the LAS for its development of an Organisational Strategy for the years 2023/28.

The LAS was particularly interested in finding out how the public responded to five questions:

- 1. What is the LAS getting right?**
- 2. How can the LAS improve emergency care?**
- 3. How can the LAS enhance urgent care?**
- 4. How should the LAS work with other parts of the healthcare system to improve care?**
- 5. How can the LAS do more to contribute to life in London?**

Most respondents were overwhelmingly supportive and appreciative of the Service. The conduct and expertise of crew members were highly regarded, and response times were generally thought of as reasonable in all the circumstances of the NHS as it currently reacts to winter and other pressures. We also joined with colleagues across North East London using Community Insights to produce a North East London-wide report of views about the LAS.

Both our Havering-specific report and the Community Insights report were used by the LAS in formulating their Five Year Strategy, which also took account of views obtained by Healthwatch from the other parts of London.

Community Engagement – London Ambulance Service Five Year Strategy (continued)

You can read our full report by downloading it from the link below. You can also read the summary report of the responses from people across North East London by clicking the second link below.

[Our report of the views of people in Havering](#)

[Summary of views across North East London](#)

“Whilst we can't give you measurable data of the impact of your work at this stage, we can certainly confirm that the engagement you and your Healthwatch colleagues led ... has been one of the key data inputs into LAS five year strategy development process [which has] heavily influenced by the voice of the residents that Healthwatch engaged with. A couple of examples:

- *We heard that patients wanted 111 clinicians to return calls more promptly ... consistent with what we have heard from other residents from across London and as a result [we have] committed to a target of 90% of patients requiring urgent clinical assessment ... receiving a call back within 1 hour ...*
- *In response to feedback on how LAS could support its employees to develop its 'bedside manner' competencies for patients who are elderly or living with dementia, autism, learning disabilities, deafness, sight loss etc we have launched mandatory 'Tackling discrimination and promoting inclusivity' training workshops with a target of circa 50% of staff undertaking it by year end (March 2024)”*

Community Engagement – Safeguarding

We collaborate with the Havering Safeguarding Adults Board and are developing a similar relationship with the Havering Safeguarding Children Partnership.

For the second year running, the Safeguarding Adults Board asked us to carry out a survey to ascertain what people knew, and thought, of safeguarding.

We found the great majority of respondents had a good or better understanding of the general parameters of safeguarding and were able to identify the key forms that safeguarding needs may take. They were also aware of the key agencies and other possible avenues for reporting safeguarding concerns. But there was also uncertainty about who best to turn to in the event of discovering something untoward; there was reasonable awareness of what constitutes safeguarding but not how to report it.

This reinforced the view that there may be a need to reach out to local voluntary organisations and agencies that are not normally thought of as part of the usual safeguarding networks to ensure that they are apprised of the actions to take if they are approached by someone with a safeguarding issue.

[You can read our report here](#)

Community Engagement – Access to GPs

We work closely with Havering Over Fifties Forum (HOFF), an umbrella body that brings together a range of local organisations and individuals who are interested in the wellbeing of older people living in the borough.

One of the key issues for the HOFF is accessibility to GPs' surgeries and so, in February and March of this year, we conducted a survey of people's views about their ability to access their GPs.

We received a large number of replies – not only from HOFF members, but also the wider population.

The results included the following:

The average age of responders =

- **65 or older – 57.43%,**

How long have you been with your GP Practice =

- **More than 10 years = 78.32%**

How did you make your last appointment =

- **By telephone = 81.79%**

What time did you phone for an appointment =

- **8am – 9am = 58.28%**

How long did it take for your surgery to answer =

- **More than 20mins = 22.30%**
- **Less than 5 mins = 22.95%**

What were you offered if not an appointment =

- **Call again at another time = 42.64%**

Were you aware of later evening or weekend appointments =

- **No = 82.95%**

Have you had a later evening or weekend appointment =

- **No = 86.13%**

Community Engagement – Access to GPs (continued)

We subsequently shared the outcome of the survey with the Havering Place-based Partnership.

The results showed that most respondents were unaware of the extended hours available for GP consultations since October 2022, and that not all surgery staff were making patients aware of them.

In addition, around three quarters of patients preferred to make an appointment by telephone (only about 4% were happy to use an online app to do so).

Most respondents had been with their GP practice for more than 10 years.

Havering is an area with a significant population aged 50 or over, many of whom are digitally excluded. The survey indicated that many feel that practices should continue to be contactable by telephone. The moves by the NHS and government to improve practices' telephone infrastructure are therefore most welcome.

Community Engagement – Care Home Designated Enhanced Services

Healthwatch across North East London came together to deliver this project, commissioned by NHS North East London, seeking insight into GP services provided to Care Home residents.

Direct Enhanced Service (DES) are primary medical services that GPs are additionally funded to provide. There is a DES for Care Homes which provides services such as enhanced primary care and community care support, access to out of hours/ urgent care when needed, multi-disciplinary team support, end-of-life care, home rounds, GP care plans and more.

156 of 252 Homes were contacted by our volunteers, with an additional 19 Homes that had previously been surveyed. This led to an overall 70% completion rate using 156 volunteer and staff hours.

Two reports are available - the Havering-specific version and the overall report, bringing together the data obtained by all eight Healthwatch organisations

[Click here for the Havering report](#)

[Click here for the full North East London report](#)

"[we] have been working with Healthwatch to hear the voice of care providers across NEL. Healthwatch completed a survey with over 156 Care home managers across NEL, to have a deeper understanding of their knowledge of what the Primary Care Network (DES) outlines. The findings have fed into work to develop a one-page infographic for Care Homes and GP Practices ... to facilitate clear understanding of the DES ..."

Page 28
Care Homes Lead, NHS North East London ICB

Community Engagement – Services for people who have a Learning Disability or are living with autism, and those who are Deaf

In November 2022, the Havering Place-based Partnership commissioned us to carry out two projects, to find out specific groups of service-users felt about the services they are receiving: people living with a Learning Disability or Autism, and people who are Deaf or living with impaired hearing.

This a major project which extends into 2023/24, in which we are gathering data and insights into what the people in the two groups (including children) think of the services they get from both Havering Council and the NHS locally.

We are obtaining this information from surveys, contact with service users themselves, clubs and community groups and through Community Insights.

We will report fully on these projects in our next Annual Report but the Havering Place-based Partnership and the Council and NHS services for which it is responsible will be using the outcome to inform their development of service plans and strategies.

“Disability legislation and health advocacy groups such as yourselves help people like us enormously by keeping the rights of people with LD and autism on the agenda. Thank you!”

– A respondent to our survey of family and friends of people living with a learning disability

Enter and View – Abbcross Nursing Home

Prior to 2020, we had run an intensive programme of Enter & View visits to a range of health and social care facilities. The advent in 2020 of the Covid disruption brought that programme to an abrupt halt and it was only in 2022, with Covid receding, that we felt able to resume such visits, taking care to ensure that both our volunteers and the people they would be visited were protected from the possibility of Covid infection.

We therefore took our first tentative steps to resuming an Enter & View programme by arranging to visit Abbcross Nursing Home in April 2022. Using a different process to before the disruption, we first held a videoconference with the Manager, to establish facts about the Home, in which we discussed with her the accommodation and facilities available, the Home's response to Covid, the Discharge to Assess Scheme, staffing and residents' feeding. This was followed by a visit by two of our volunteers who were able to go around the Home and view its facilities.

The volunteers concluded that, overall, good care was motivated by the Manager and all agencies worked together to ensure care ran smoothly. The home itself was clean and fresh, and the carers and residents were relaxed and content.

[You can read our report here](#)

Enter and View – Accident and Emergency Services at Queen's Hospital Romford

Our second Enter and View visit took place in September at Queen's Hospital, Romford. Over three days we visited the three separate centres of operation that together form the Accident and Emergency Services: the hospital's Emergency Department, the Urgent Treatment Centre (including streaming) and the Ambulance Receiving Centre.

This visit was our most ambitious yet, involving three separate NHS provider organisations: Barking, Havering & Redbridge University Hospitals Trust, PELC (operators of the UTC) and the London Ambulance Service. Again, initial videoconferences were held with representatives of the providers before our visitors went to each of the centres.

At the time of the visit, the three centres were relatively quiet as the winter pressures time had not yet begun.

It was clear that the physical environment (about which we had previously reported pre-Covid) had altered significantly as a result of the Covid disruption, mainly for the better.

Continued..

Enter and View – Accident and Emergency Services at Queen's Hospital Romford (continued)

We were able to make a number of suggestions for further improvement.

It was therefore somewhat disappointing to learn in February that the CQC (which inspected the A&E Services two months after our visit) had rated them as Inadequate. Our recommendations following the visit had identified several areas where improvements could be made.

But is gratifying that our visiting teams were able to identify similar issues to those later found by the CQC inspectors.

[You can read our report here](#)

"Thanks to Healthwatch for their the role they play – they are really important partners in terms of improving the quality of our local services, everything that was picked up in the CQC report was anticipated by Healthwatch and correctly identified as concerns when they were in in September and we will continue to work with them, as vital local partners as we work with PELC and others to improve the quality of services at the front door. I look forward to them visiting us again in due course this year."

CEO of Barking, Havering and Redbridge Trust

Community Insights

Developed and led by our colleagues at Healthwatch Waltham Forest and funded by NHS North East London, the Community Insights System analyses data, comments and feedback from a wide variety of sources, including reports from Healthwatch, local Councils and NHS bodies, Twitter and Trip Advisor feedback from patients and service users, articles in local newspapers and providers' websites.

Community Insights is a collaboration of Healthwatch in Barking & Dagenham, City of London, Hackney, Havering, Newham, Redbridge, Tower Hamlets and Waltham Forest.

This data is analysed to identify what local people think about the services they receive, and their experiences – good or bad – at health and social care facilities including hospital services, GP surgeries and care homes.

Key Insights produced by Community Insights include data about individual GP surgeries and hospital services. These Insights include what people feel about the advice and information they receive, access to GPs, contacting surgeries, and staff attitudes. These factors are then aggregated to produce Insights into how people view facilities overall.

The Insights can be used by service commissioners and providers to assess how their services are perceived and where they need to concentrate resources to make improvements.

Advice and signposting

In common with most Healthwatch organisations, we are contacted by many people seeking help with health and social care provision and facilities.

During 2022/23, we received calls looking for our help about many issues, including:

- Finding an NHS dentist
- Arranging an appointment to see a GP
- Arranging transport to get to a hospital appointment
- Complaints about lack of support in the community
- Complaints about poor treatment at Queens Hospital and GPs
- Delays on receiving responses when complaining to PALS
- Delays in receiving appointments for surgery
- Help and advice needed to make an NHS complaint eg Advocacy
- Help needed for family members with mental health issues

We also dealt with issues/complaints forwarded to us from Healthwatch England and other Healthwatch

Volunteering

We're supported by a team of amazing volunteers who are at the heart of what we do. Thanks to their efforts in the community, we're able to understand what is working and what needs improving.

This year our volunteers:

- Visited communities to promote what we have to offer
- Collected experiences and supported communities to share their views
- Carried out enter and view visits to a care home and to A & E services
- Reviewed GP and dentist websites to assess their accessibility
- Collected the most up-to-date information on changes to services, such as whether NHS dental appointments were available at a practice

Throughout the Covid disruption, when we were unable to do many of the activities that our volunteers had previously participated in, we maintained weekly contact with them by video conference. In 2022/23, as normal activity gradually resumed, we changed to meeting fortnightly.

Maintaining contact in this way has been invaluable, for keeping in touch with our volunteers, helping them maintain contact with each other, but also as a means of gaining useful community insights from them.

Working with others

During 2022/23, our Directors, staff and volunteers attended 298 meetings with partner organisations. These meetings covered a wide range of issues, and included:

- Barking, Havering and Redbridge University Hospitals Trust
- Barking, Havering and Redbridge Patient Engagement Forum
- Havering Health & Wellbeing Board
- Havering Over Fifties Forum (HOFF)
- Havering Health Overview & Scrutiny Committee
- Havering Place-based Partnership
- Havering Safeguarding Adults Board
- Havering Substance Misuse Strategy Group
- Havering Volunteer Management Forum
- Havering Voluntary Organisations Compact
- Healthwatch England London Network
- Healthwatch North East London Community Insights Steering Group
- London Ambulance Service Public & Patients' Council
- NHS North East London ICB
- NHS Special Allocations Service (SAS)
- North East London Local Quality Surveillance Group
- Older People & Frailty Transformation Board
- Outer North East London Joint Health Overview & Scrutiny Committee
- Pharmaceutical Needs Assessment for Barking, Havering and Redbridge
- St George's Health and Wellbeing Centre Development Board

Our finances

We receive funding from Havering Council under the Health and Social Care Act 2012. This year we also received funding from other sources for specific projects, not all of which we spent in the year.

Income	
Local Authority funding	£117,359
Other income	£23,484
Interest received	£8
Total	£140,851

Expenditure	
Staff costs	£89,265
Operational expenses	£34,973
Taxes, fees and added to reserves	£8,031
Project funding carried forward	£8,582
Total	£140,851

How we work

- **Involving volunteer members in our governance and decision-making**

Our Governance Board consists of eleven members (two Executive Directors, two Non-Executive Directors, two staff members and five volunteers) who provide direction, oversight and scrutiny of our activities. Through 2022/23 the board met ten times and made decisions on matters such as our finances, the HWE Quality Framework and internal policies and procedures.

Every quarter, all of our volunteer members meet in a formal Members' Meeting as the ultimate decision-making body. Additional meetings are occasionally held. We ensure wider public involvement in deciding our work priorities.

- **Methods and systems used across the year's work to obtain people's views and experience**

We use a wide range of approaches to ensure that as many people as possible have the opportunity to provide us with insight about their experience of health and care services. During 2022/23 we have continued to be available by phone, by email, provided a webform on our website, provided a feedback centre/rate and review system, attended virtual meetings of community groups and forums, provided our own virtual activities and engaged with the public.

We are committed to taking additional steps to ensure we obtain the views of people from diverse backgrounds who are often not heard by health and care decision makers. This year we have done this by, for example, developing links with a local voluntary organisation that works with people who are Deaf.

We ensure that this annual report is made available to as many members of the public and partner organisations as possible. We publish it on our website, send it to our Friends' Network and circulate it by email to a wide range of stakeholders.

- **Responses to recommendations and requests**

No provider failed to respond to requests for information or recommendations. There were no issues or recommendations escalated by our Healthwatch to the Healthwatch England Committee or resulting special reviews or investigations.

Compliance with statutory requirements

- We have maintained our engagement with the Havering Health and Wellbeing Board, Health and other Overview & Scrutiny Committees and the Outer North East London Joint Health Overview & Scrutiny Committee. We have been represented at most meetings of these bodies.
- We have used the Healthwatch logo on stationery, reports and on our website. We continue to hold a licence from Healthwatch England to do so.
- Copies of this Annual Report will be sent to various stakeholders, including Healthwatch England, Havering Council, Havering CCG and the British Library.
- We are registered as a Community Interest Company with Companies House and for data protection purposes by the Information Commissioner.




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PEOPLE OVERVIEW & SCRUTINY SUB-COMMITTEE – 5 SEPTEMBER 2023

Subject Heading:	Adult Social Care Annual Complaints & Compliments Report
SLT Lead:	Barbara Nicholls
Report Author and contact details:	<i>Johannah Philp</i> Tel: 01708 431998 johannah.philp@havering.gov.uk
Policy context:	An annual report is required as part of the remit of 'The Local Authority Social Services & NHS Complaints (England) Regulations 2009 and Health and Social Care (Community Health and Standards) Act 2003.
Financial summary:	There are no financial implications as this report is for information purposes and is required as part of the statutory complaints regulations

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

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

SUMMARY

The Adult Social Care Annual Complaints Report 2022-23 is attached as Appendix 1. The report outlines the complaints, enquiries, compliments and Member correspondence received during the period April 2022 – March 2023.

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 2022-23 with the added pressures resulting from the coronavirus (COVID-19) pandemic, cost of living crisis and the continued efforts in resolving and learning from complaints.
2. That Members note:
 - (a) the continued use of complaints as a learning tool to identify actions to improve services.
 - (b) 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. In 2022-23, Adult Social Care received 115 statutory complaints, representing a 31% increase from 2021-22(74). The increase in complaints over the last year could be attributed to commissioned providers re-opening post-lockdown and being more open more widely to family members following the lingering aftermath of the Covid 19 pandemic.
2. Ombudsman enquiries in 2022-23 (7) were similar to the number received in 2020-21. Of the 6 enquiries, there were 2 decisions for maladministration (injustice with penalty) and 5 closed after initial enquiries (no further action). One of the upheld investigations concluded that The Council had acted with fault in how it processed and considered Mr X's application for replacement windows. The other found that The Council failed to ensure they understood the service users mental capacity when corresponding with him about financial matters..
3. Financial issues continue to be the highest reason for complaints during 2022-23 followed by Standard of service which is the same as in 2021-22. Where financial issues were 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 which explains why the Joint Assessment and Discharge Team have seen the highest number of complaints. Standard of Service was the second highest during 2022-23, and remains mainly around the poor quality of care by Home Care Providers and these also tend to lead to disputes regarding charges and invoices. Dispute Decision was the third highest with the majority of these also referring to being given incorrect information at the point of a hospital discharge free care.

4. The number of complaints upheld (28) or partially upheld (21) represented 42.6% of the total complaints responded to in 2022-23, with 52 (36.5%) not upheld and 14 (12%) complaints withdrawn. Of those upheld, the majority resulted in an apology or information/explanation given with the next highest resulting in a financial adjustment.
5. Learning from complaints continues to be a focus within Adult Social Care. During 2022-23, with rising financial demands on residents the priority and focus for Adult Social Care was 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.
6. Response times for complaints improved in 2022-23, with 58% of complaints responded to within 20 working days, compared to 52% in 2021-22.
7. During 2022-23 complaints received in relation to those aged 75 to 84 almost doubled, increasing by 84%. Complaints regarding those aged 85+ slowed down in 2022-23 only increasing by 8%. It is noted that during 2022-23 complaints relating to females were 83% higher than those for males. Females have the highest number of complaints recorded across all age ranges in 2022-23 with the exception of 2020-21 there was a much higher number of females to males across the age ranges with the exception of the aged 35-44 range.
8. As reflected in the population of Havering, 'White British' is the highest ethnicity and there was an 84.7% representation in this category for 2022-23 as against 78% recorded for 2021-22. 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', 'Black/Black British – African' and 'Black/Black British – Caribbean'. Whilst underrepresented groups have not changed over the years, we are closely monitoring our resident involvement process in view of Havering's changing demographics.
9. There has been a significant increase in the number of service users who have no religion recorded, this has increased from 26 in 2021-22 to 88 in

2022-23 up 238%, and greater emphasis will be placed on case file auditing to address this. There have been marginal increases in those recorded as Catholic and Christian and a small decrease in those recorded as Church of England during the year 2022-23.

10. Email continues to be the favoured method of contact during 2022-23 at 50.4%, with telephone being the second highest method of contact at 20%, which remains consistent with 2021-22.
11. 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.
12. Expenditure on complaints totalled £10,501.26 in 2022-23, a significant increase on the £350 in 2021-22. This is made up of £2024.42 reduction of invoices charges following a LGSCO investigation, £8282.14 invoices waived in relation to discharge to assess disputes and delays in assessments being undertaken, and a one off payment of goodwill of £195.00.
13. The number of compliments received during 2022-23 reduced to 48 from 52 in 2021-22. A plausible reason for this could be attributed to the correlating increase in complaints over the past year. Despite this, the examples of compliments shows the positive work by Adult Social Care staff during a very difficult period.
14. Member enquiries decreased by 17% in 2022-2 (48) compared to 2021-22 (58) with 89.5% (43) being responded to within the timeframe compared to 81% (47) in 2021-22.

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. With the increase in the number of complaints highlighted in the report, there is still a risk of consequential compensation payments, which is being managed in the service by ensuring lessons are learned and procedures reviewed to minimise the risk of compensation arising from future complaints.

Legal implications and risks:

The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 require the Local Authority to have a complaints

process for adult social care complaints. These Regulations set out the types of complaint that can be made, by whom and how they are to be processed.

Regulation 18 requires as follows:

- (1) Each responsible body must prepare an annual report for each year which must—
 - (a) specify the number of complaints which the responsible body received;
 - (b) specify the number of complaints which the responsible body decided were well-founded;
 - (c) specify the number of complaints which the responsible body has been informed have been referred to—
 - (i) the Health Service Commissioner to consider under the 1993 Act; or
 - (ii) the Local Commissioner to consider under the Local Government Act 1974; and
 - (d) summarise—
 - (i) the subject matter of complaints that the responsible body received;
 - (ii) any matters of general importance arising out of those complaints, or the way in which the complaints were handled;
 - (iii) any matters where action has been or is to be taken to improve services as a consequence of those complaints.

The Annual Report appears to comply with these Regulations and therefore 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 2022-23

ADULT SOCIAL CARE

Complaints, Comments and Compliments

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

**Prepared by: Johannah Philp
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
4.2	Total Number of Complaints	6
4.3	- Stages	7-8
4.4	- Service Areas	8-9
4.5	- Themes	9-10
4.6	- Outcome & Learning	10-13
4.7	- Response Times	13
4.8	- Monitoring Information	14-17
5	Method of Contact	17
6	Expenditure	18
7	Compliments & Resident Satisfaction	18-21
8	Member Enquiries	21-22
9	Conclusion	23
10	Complaints Action Plan	24-27

1. Executive Summary

Adult Social Care (ASC) 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 from April 2022 to March 2023.

There was an increase in ASC complaints during 2022-23. Many of the additional complaints related to client financial contributions towards care. In 2021-2022 during the pandemic, discharge processes continued to be altered to continue to cope with the impacts on the NHS and discharge care was free (under government funded NHS pathways) for this time. These arrangements ceased in 2022-23 at the end of the pandemic and the Local Authority was able to revert to assessing client contributions to care from the point of discharge. The change in discharge pathways and charging caused confusion for a small number of clients, which resulted in an increase in complaints. In addition, clients have found themselves struggling financially due to the cost of living crisis and this has likely had an impact on the complaints around charging for care and affordability.

The Service is working hard to mitigate the issues that are most impacting on ASC clients with an aim to reduce the number of complaints and drive continuous learning and improvement across the Directorate. Outcomes from the complaints process have been incorporated into the ASC Action Plan (Appendix 1) in order to aid learning and improve performance.

Whilst there was an increase in the number of complaints received in 2022-23, the compliments received within the same period highlighted the continued dedication and positive work across the Service.

2. Introduction

Local authorities have a statutory process for complaints, which are set out in the Local Authority Social Services and National Health Service Complaints Regulations 2009 and the Secretary of State for Health and Social Care's recommendation in paragraph 3.55. It is a requirement for the local authority ASC and Children's Services to have a system of receiving representations by, or on behalf of, users of those services. Havering ASC welcomes all feedback, whether this is a comment on improving the service, a complaint on what has gone wrong, or a 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

Enquiries - Anyone can make an enquiry of the service for any reason, they do not need to have been adversely affected or be in receipt of a social care service. If a response is appropriate either the service can respond directly or SCCI can respond on their behalf. Responses can be provided over the phone or face to face as long as a record is kept.

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

ASC is responsible for ensuring the most vulnerable adults in our community, and their carers, are provided with support to meet their assessed needs. Safeguarding is a priority, with a personalised, outcome focused 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 well-being at the heart of every decision.

ASC supports and works with individuals across our communities: older adults; adults who have physical disabilities; those with sensory impairment; mental health needs; and/or learning disabilities; as well as carers in the community.

The Service has the 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. ASC provides direct delivery of services namely day opportunities for people with learning disabilities and physical disabilities.

For those that do not meet the eligibility criteria, we also have a duty to provide information and advice to all residents, and to signpost to services. The Service operates a strength-based approach to frontline social care to support clients to make the 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, such as the Integrated Care Board and wider Health colleagues, to help people remain well and active for as long as they are able.

ASC is further supported through the commissioning and brokerage of care, as well as quality and contract monitoring of provider services. In addition, the Service supports clients with the management of direct payments; Appointee and Deputyship and managing client finance arrangements; and assessing client financial contributions to their care to generate income for the Council.

4. Complaints Received

4.1 Ombudsman referrals

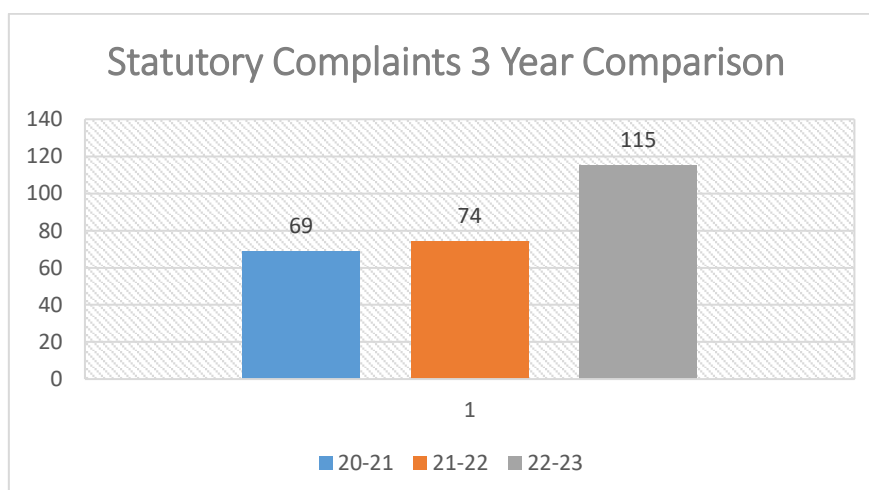
In 2022-23, there were a total of 7 Ombudsman investigations regarding ASC decisions. There were 2 decisions for maladministration (injustice with penalty) and 5 closed after initial enquiries (no further action).

One of the decisions returned for maladministration was regarding the level and quality of care provided by a home care agency along with poor communication in relation to care costs. The other decision related to an assessment for a Disabled Facilities Grant.

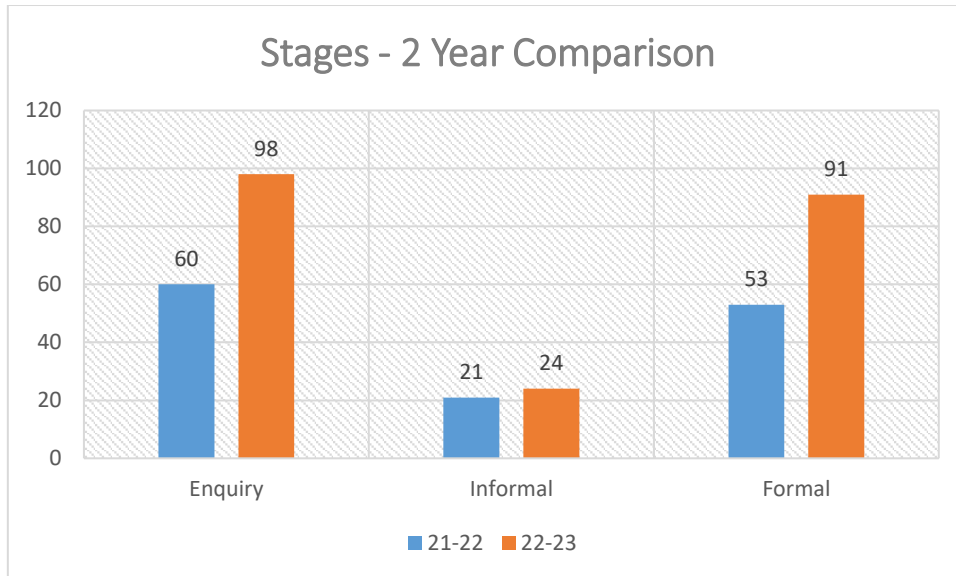
	Apr22 – Mar23	Apr21 – Mar22	Apr20 – Mar21
Maladministration (no injustice)			
Maladministration Injustice with penalty	2	2	3
Maladministration injustice no penalty			
No maladministration after investigation			
Ombudsman discretion			
-Cases under investigation/ongoing			
-Investigation not started/discontinued			
Not upheld no maladministration/service failure		1	1
Closed after initial enquiries: no further action	5	3	1
Closed after initial enquiries: out of jurisdiction			1
Premature/Informal enquiries			
Total	7	6	6

4.2 Total number of complaints

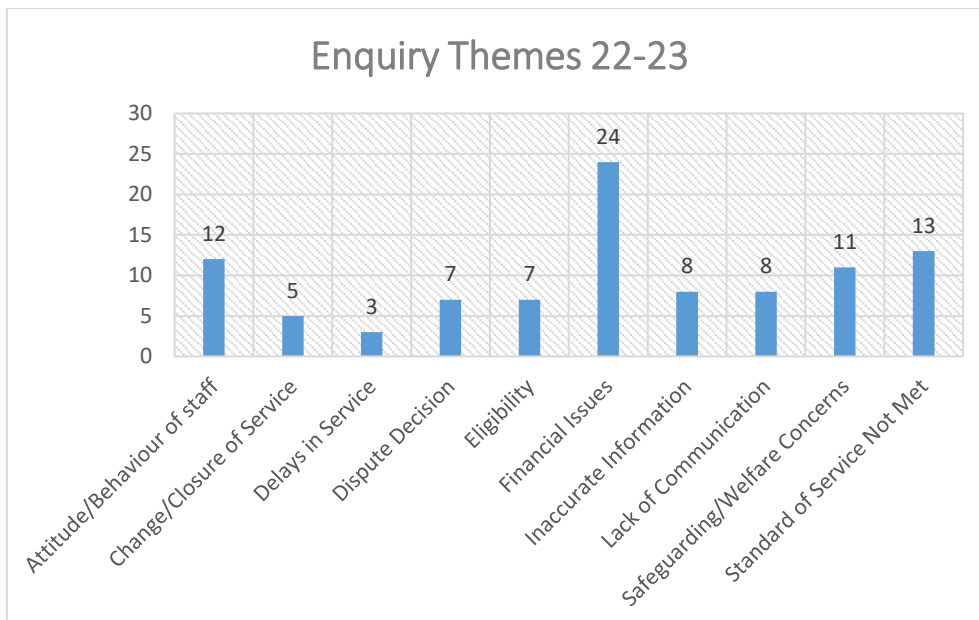
In 2022-23, there were 115 statutory complaints, representing a 31% increase from 2021-22 (74). This was likely impacted by services opening up fully following the pandemic and changes to the charging methods for services following discharge from hospital.



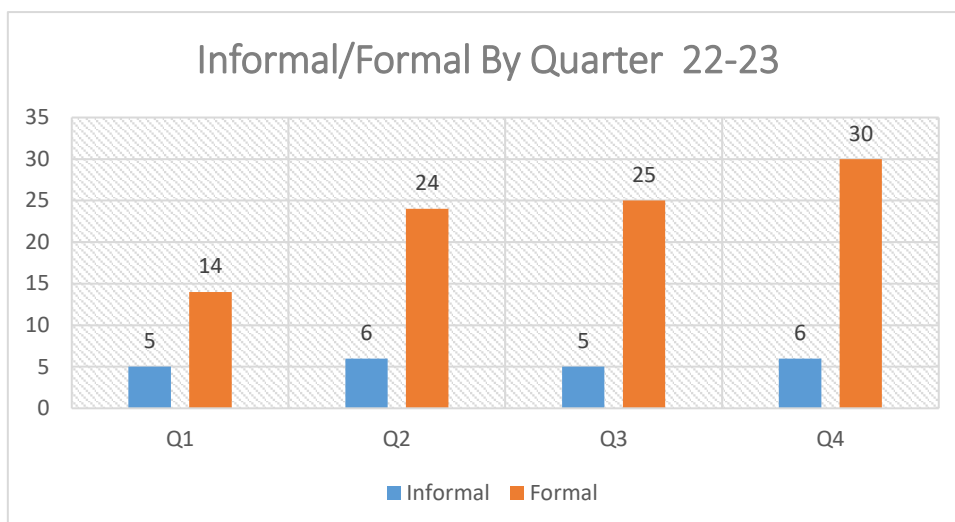
4.3 Stages



The number of enquiries received has risen sharply from 60 in 2021-22 to 98 in 2022-23, a 63% increase. The chart below gives an indication of the type of enquiries being received. Given the current financial climate and the changes in post pandemic discharge arrangements and charging, it is unsurprising to see that 25% of the enquiries relate to financial issues which are generally about financial charging, client contributions and cost of care enquiries. There also continued to be complaints about the quality of care provided by home care services and the provided hours. Information has been shared with providers regarding the importance of accurate record keeping and the complaints manager continues to work with the quality team to identify where improvements can be made.



There has also been a significant increase of 42% in formal complaints (linked to the increase in complaints relating to financial charging) whilst the informal complaints showed a nominal increase of 12% during 2022-23 from 2021-22 (linked to standard of service of home care/domiciliary provision).



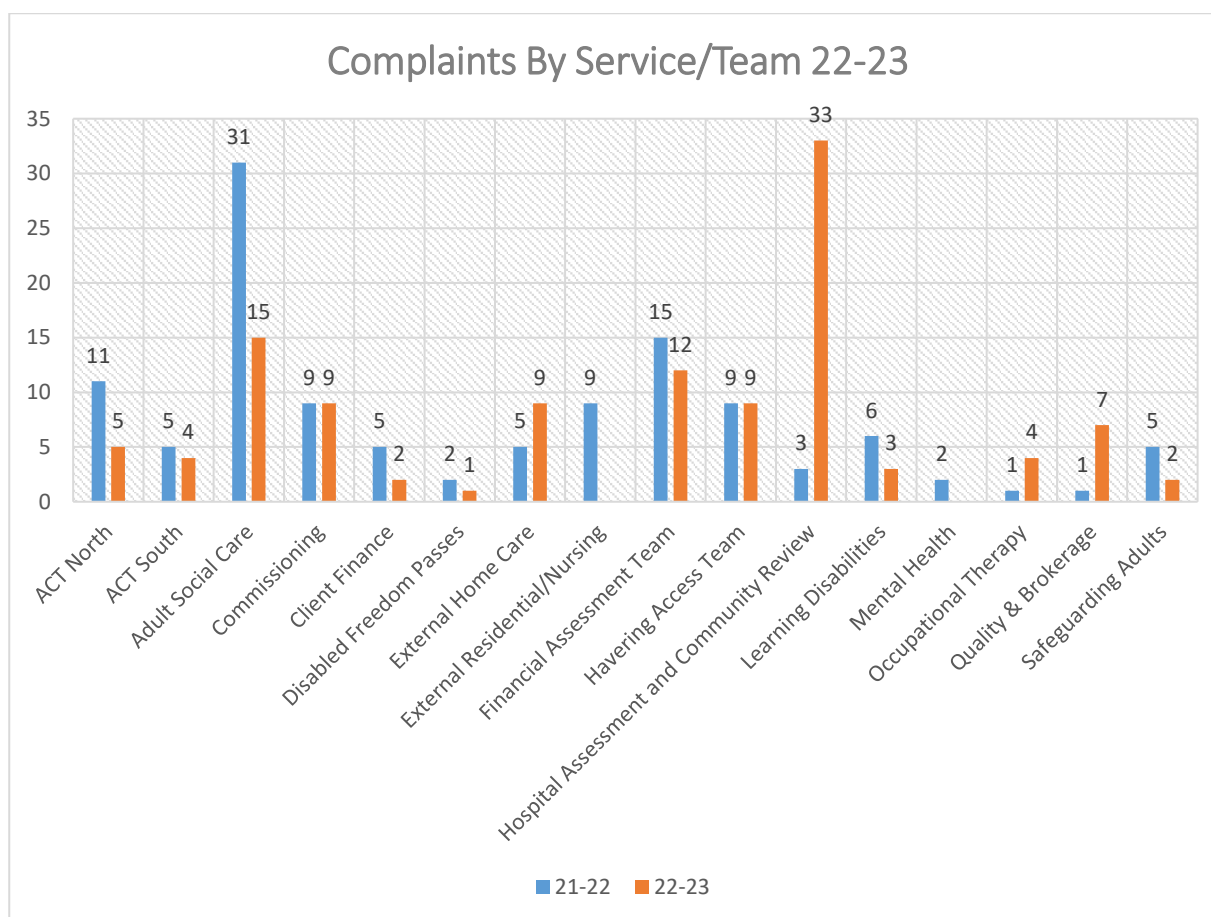
The last quarter showed an increase of 20% in complaints received compared to the previous quarter. Formal complaints have continued to increase throughout the year which could be attributed to additional pressures being faced by clients and their families as the cost of living crisis continues.

4.4 Service Areas

The Havering Assessment and Community Review Team showed a significant increase in the number of complaints during 2022-23 with 33 being received compared to 3 in 2021-22. These were predominately regarding client financial contributions to the cost of care. During the pandemic, discharge pathways from hospital were changed to expedite discharge. Discharge for many clients during 2021-22 was under Health pathways and therefore not chargeable by the Local Authority. This changed at the end of the pandemic and Havering was once again able to charge for services at the point of discharge which cause confusion and lead to a relatively small number of additional complaints.

Explanatory leaflets were designed for hospital ward staff to provide to clients at the point of discharge, and these were somewhat successful in informing individuals that they would have to contribute to care costs. To improve information sharing further a new process has now been developed (in 23/24) so that all Havering clients (or their carers) are contacted shortly after discharge to ensure they understand the discharge pathway and financial charging process.

Despite the fact that complaints around charging for care increased; reassuringly, the number of complaints received around the financial assessment process and the Financial Assessment Team reduced. This confirms that the financial assessment process is clear, but clients understanding and expectations about having to contribute was an issue.



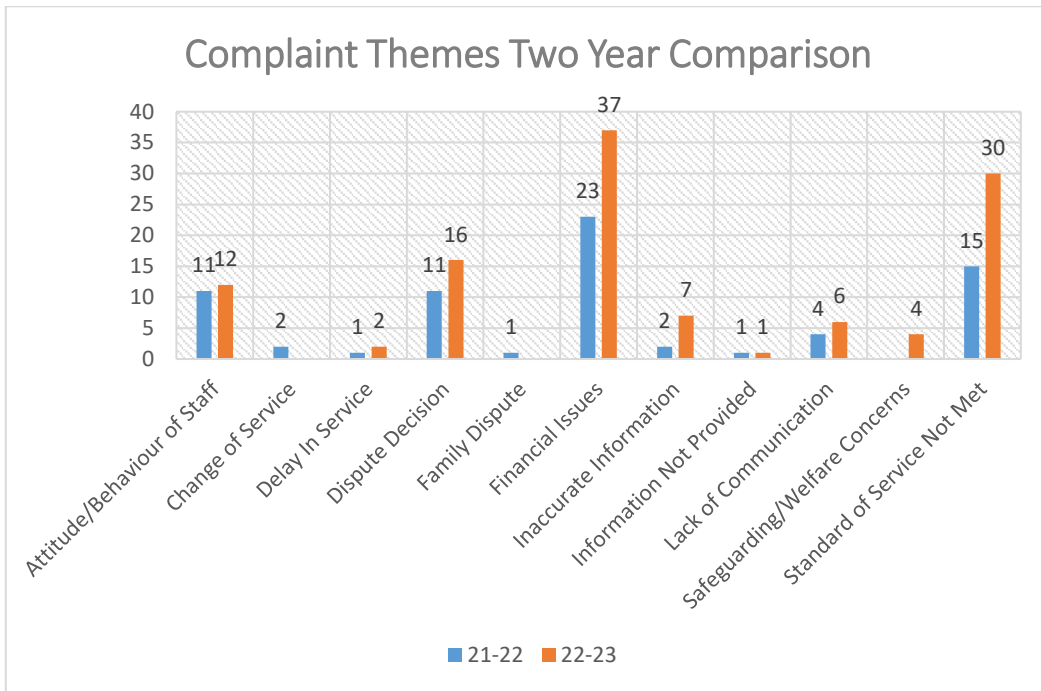
Complaints that relate to multiple areas of the Service (Cross Service - Adults Social Care) have seen a 50% decrease in the number of complaints recorded in 2022-23 and many other frontline teams have also reduced in the number of complaints they receive. This is likely due to the fact that assessments and reviews of client care are now back to being face-to-face (held virtually during the pandemic) and this means that frontline workers are able to have more quality conversations with clients to understand the issues faced. Quality & Brokerage and Occupational Therapy have seen a small rise in the number of complaints received again linked to the provision of home care.

4.5 Themes

‘Financial Issues’ were the highest reason for complaints during 2022-23 followed by ‘Standard of Service’ (linked predominately to home care provision) which is the same as in 2021-22.

Where financial issues were given as the primary reason this is not just related to a lack of clarity around discharge information, but also due to clients raising concerns over the amount of care delivered by home care agencies and subsequently charged for. Standard of service remains mainly around the quality of care by home care providers and these also subsequently tend to lead to disputes regarding charges and invoices.

‘Dispute Decision’ was the third highest relating to the discharge pathways (and the associated financial contributions) and frontline social care assessments reducing care packages in accordance with reassessed needs.

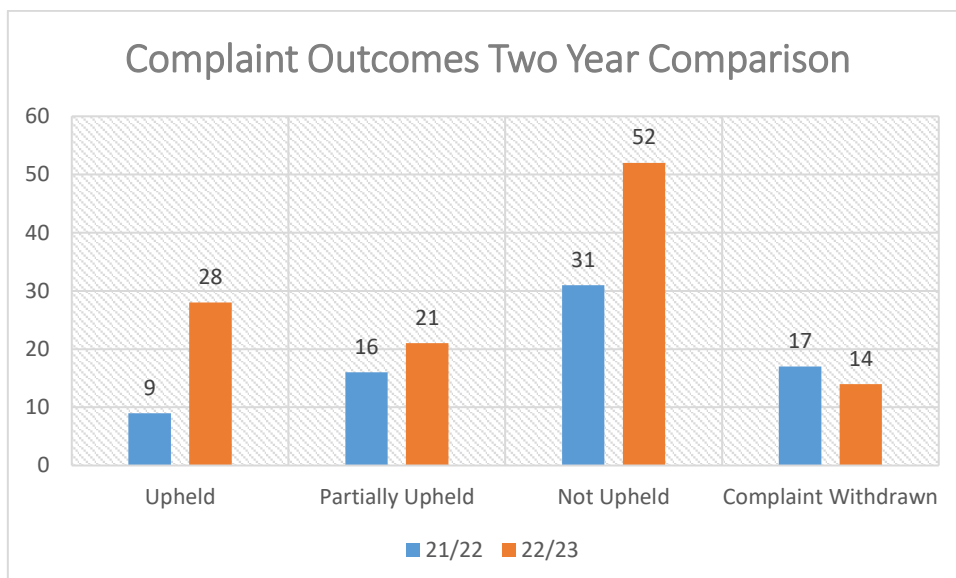


4.6 Outcomes & Learning

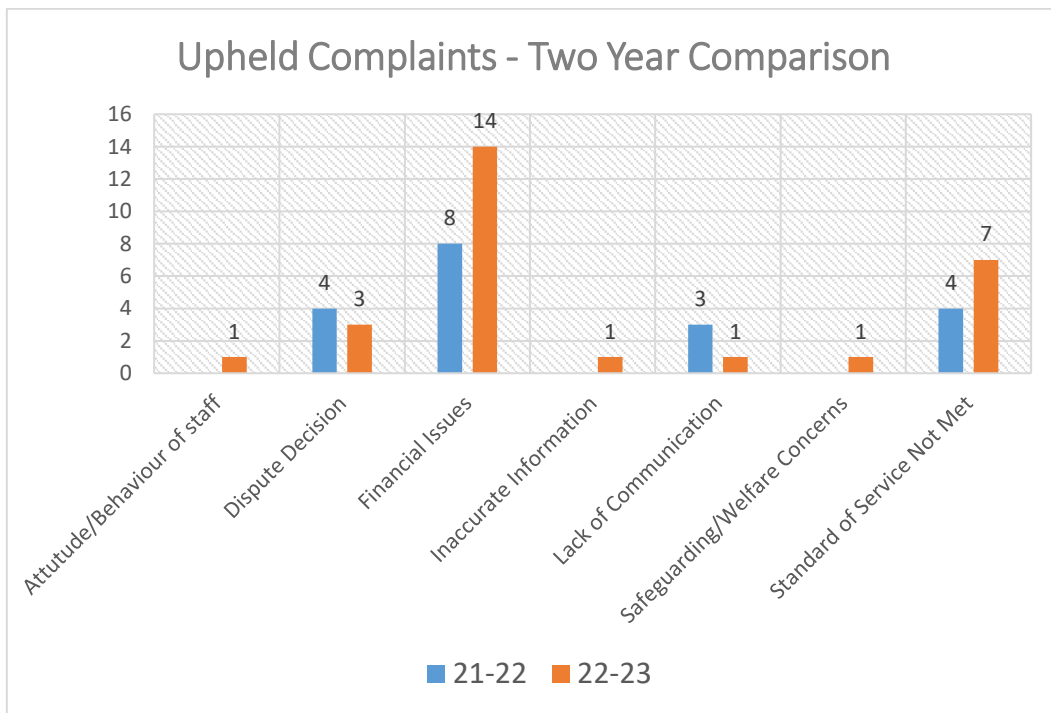
Of the 115 complaints which recorded an outcome, 24.3% were upheld, 18.2% were partially upheld, 45.2% were not upheld, and 12% were withdrawn.

There was a significant increase in the number of complaints ‘not upheld’. A number around financial charging were able to be rejected due to evidence that discussions had taken place with the client or family members around the charging processes in advance.

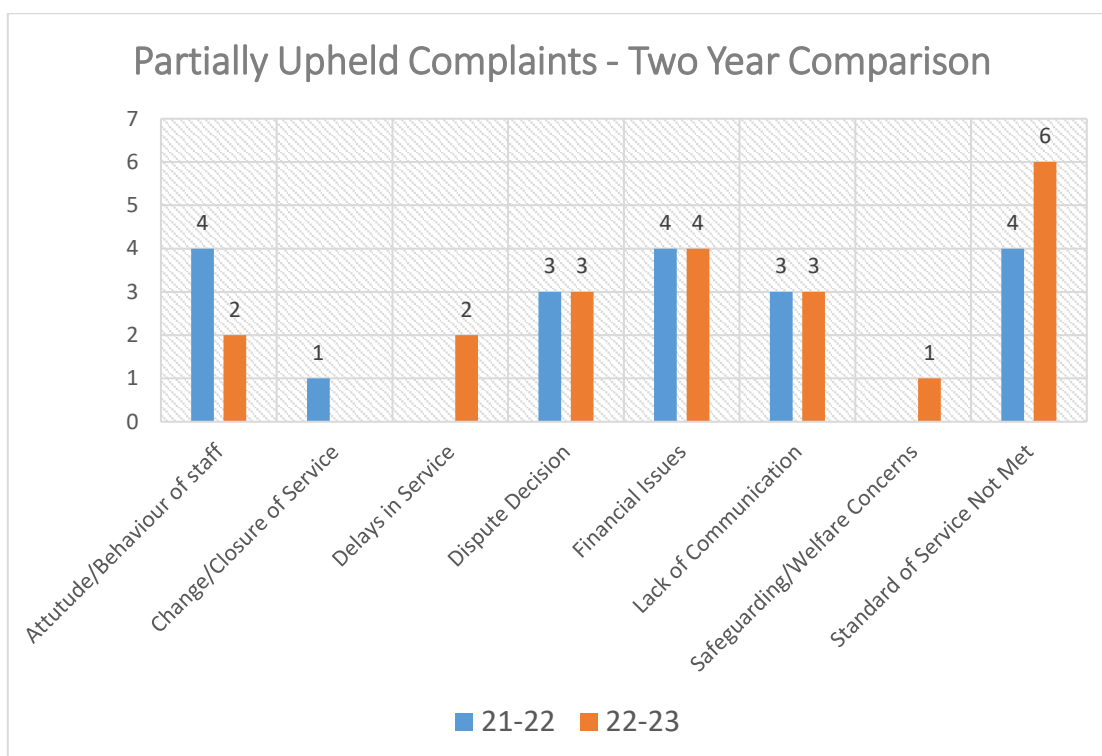
Complaints upheld increased by 12% in 2022-23 compared to 2021-22; however, the number of complaints received also significantly increased. Those partially upheld decreased slightly by 3% in 2022-23 compared to 2021-22.



For complaints that were upheld 53.5% resulted in an apology being given and 46.4% resulted in a financial adjustment being made. The financial adjustments were due to the Service not being able to evidence from the client database records that information about client financial charging was given in a timely manner. Processes have already been updated (as explained previously) to mitigate this in future as far as possible. Furthermore, home care charges are reimbursed when clients challenge the care hours received and this is upheld by the Service. These costs are recouped from the payments to the providers where they have erroneously charged.



For complaints that were partially upheld 47.6% resulted in an apology being given and 28.5% resulted in a financial adjustment being made. The remaining 23.8% 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.



4.6.1 Learning from Complaints

During 2022-23, with rising financial demands on residents the priority and focus for ASC was 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 clients and family members received appropriate, relevant and accurate information. This resulted in frontline workers being reminded across the teams as part of team meetings, and 1:1 supervision about the importance of recording decisions and when information is provided and to whom. This is also reinforced through quality case file audits that are conducted twice a year looking at cases across the Service. Many of the financial adjustments were in relation to a lack, or incorrect information being given at the point of hospital discharge with regard to care costs. The council continues to work closely with health partners to ensure the right information is being given.

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.

It is important to note that where ASC 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 were reinstated and are progressing. This is also reinforced through the Quality and Safeguarding Board meetings that take place in ASC, which cover safeguarding concerns, quality concerns, and complaints.

As a result of an Ombudsman’s decision received in 2022-23, there were areas which required improvement in relation to being clear about when care costs would start to be chargeable following hospital discharge. The decision also highlighted that when domiciliary carers were unable to use their telephone to log in and out, the system automatically defaulted to 30 minutes; however, carers were often there for less time than the chargeable amount. The investigation also highlighted poor quality of care and poor record keeping by carers.

The Council takes its responsibility for commissioned care packages seriously and robustly investigates issues with provision. The domiciliary agency was asked to supply data which was checked by the Quality and Outcomes Team. An inspection was completed and there were a number of issues identified, which were set out into an Action Plan for improvement. These were robustly followed up in Quality & Safeguarding Meetings. CQC subsequently inspected the provider and rated the provision as ‘Requires Improvement’ overall after a focused inspection. A suspension was put in place due to the issues already identified and those in the CQC inspection report. The agency subsequently worked through the Action Plans, which were monitored to ensure compliance. The suspension was able to be lifted after demonstrated improvements and support and a ‘Place with Caution’ was applied which allowed a maximum of 2 new packages per week while the provider was kept under review until all restrictions were able to be lifted successfully some months later.

4.7 Response times

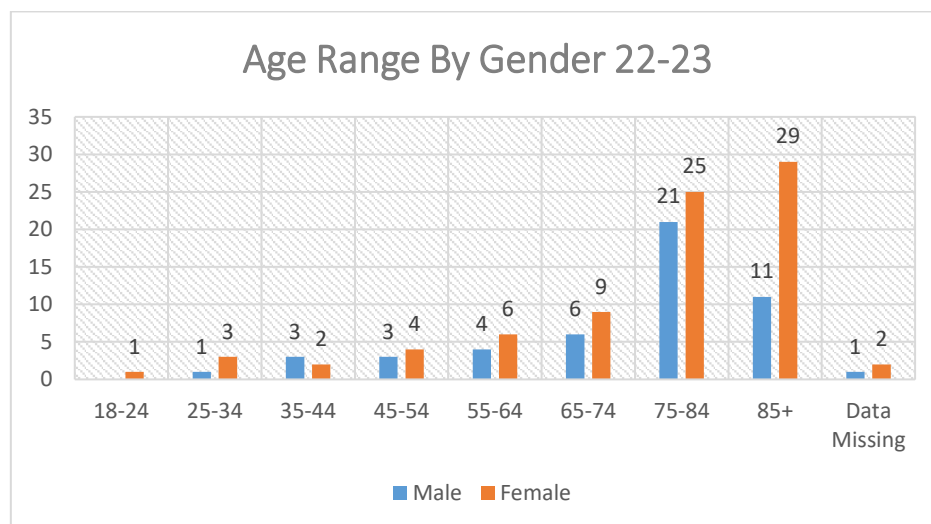
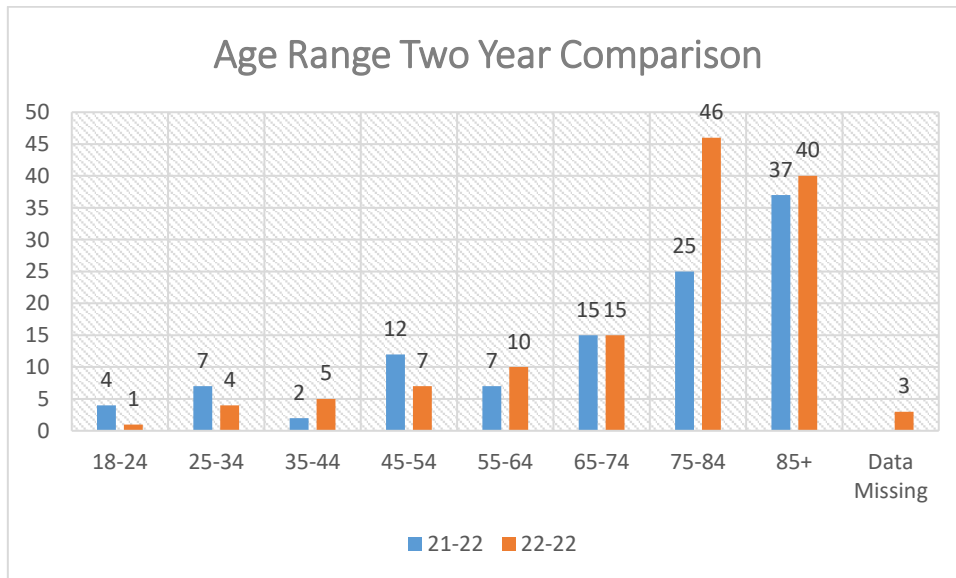
Response times improved for complaints responded to within 20 working days in 2022-23, 58.2%, against 43% in 2021-22. The increased performance was a testament to the hard work of staff and the strategies put into place to deal with complaints in time. Responses over 20 working days showed an improvement in 2022-23 at 41.6%, compared to 45% in 2021-22, this is also encouraging given that many of the complaints received in 2022-23 have seen more complexities and often involve care providers and require more thorough investigation.

	Within 10 days	%	11-20 days	%	20+ days	%	25+ days	%
2021-22	11	15%	28	38%	13	18%	20	27%
2022-23	21	18.20%	46	40.00%	11	9.50%	37	32.10%

4.8 Monitoring information

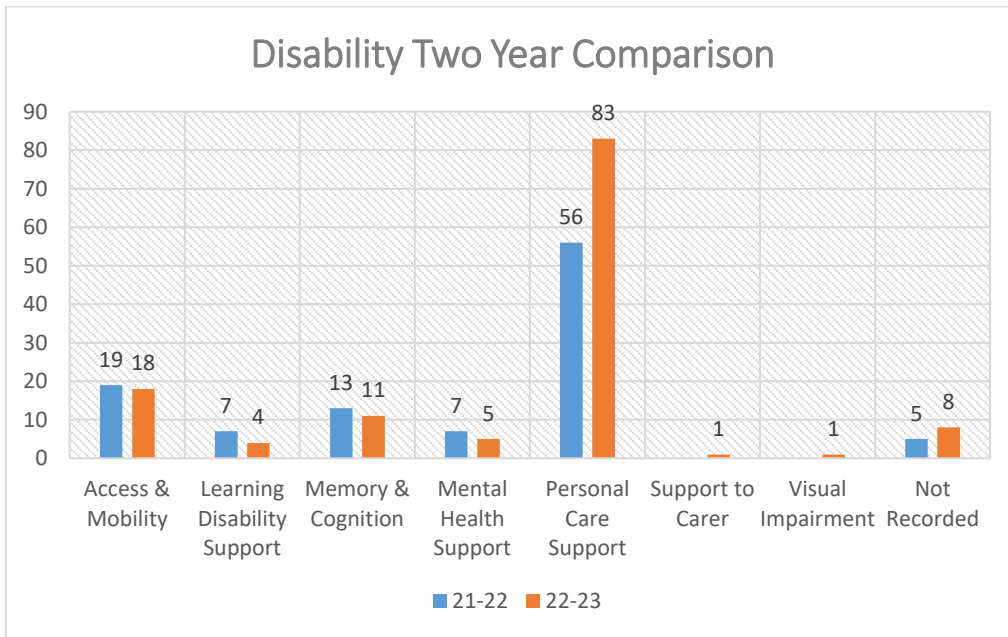
4.8.1 Age

During 2022-23 complaints received in relation to those aged 75 to 84 almost doubled, increasing by 84%. Complaints regarding those aged 85+ slowed down in 2022-23 only increasing by 8%. It is noted that during 2022-23 complaints relating to females were 83% higher than those for males. Females have the highest number of complaints recorded across all age ranges in 2022-23.



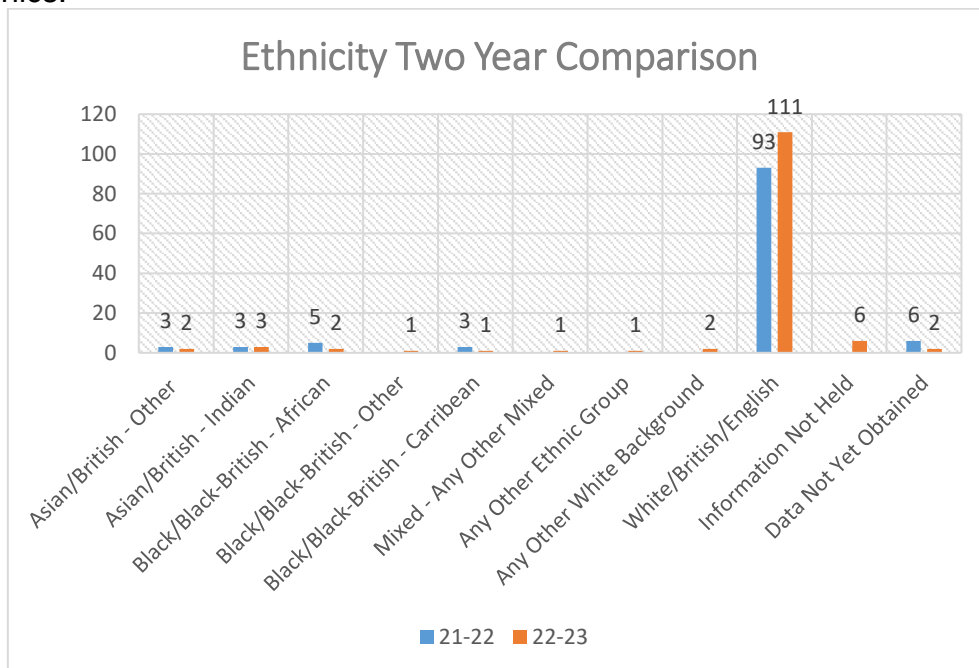
4.8.2 Disability

Complaints received by those requiring 'Personal Care Support' have risen by 53% in 2022-23 from 56 to 83. Complaints from those recorded as having other types of disability have all reduced slightly, and there have been 8 complaints from those who have a disability marker on record but it is not recorded which type of disability they have.



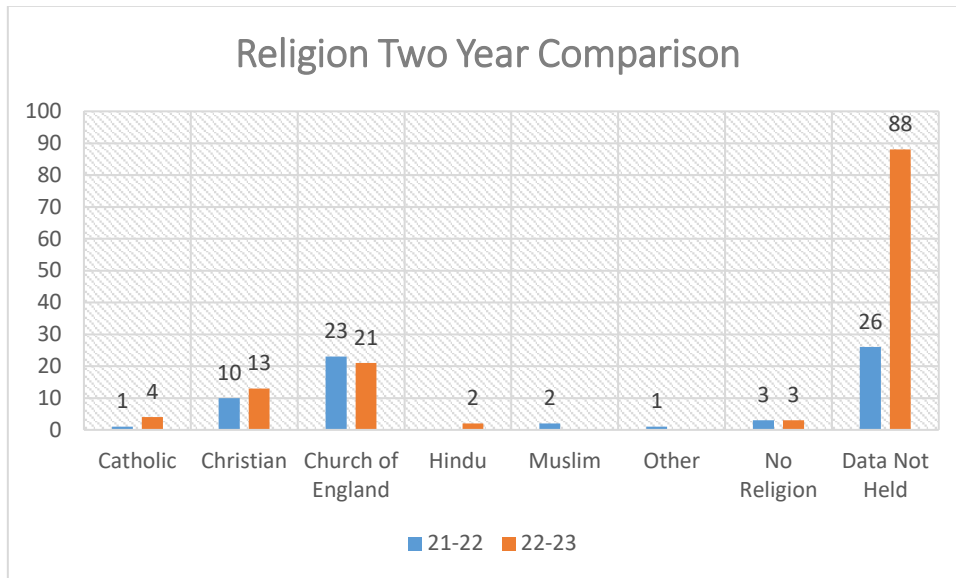
4.8.3 Ethnicity

As reflected in the population of Havering, 'White British' is the highest ethnicity and there was an 84.7% representation in this category for 2022-23 as against 78% recorded for 2021-22. 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', 'Black/Black British – African' and 'Black/Black British – Caribbean'. Whilst underrepresented groups have not changed significantly over the years, we continue to monitor our resident involvement in view of Havering's changing demographics.



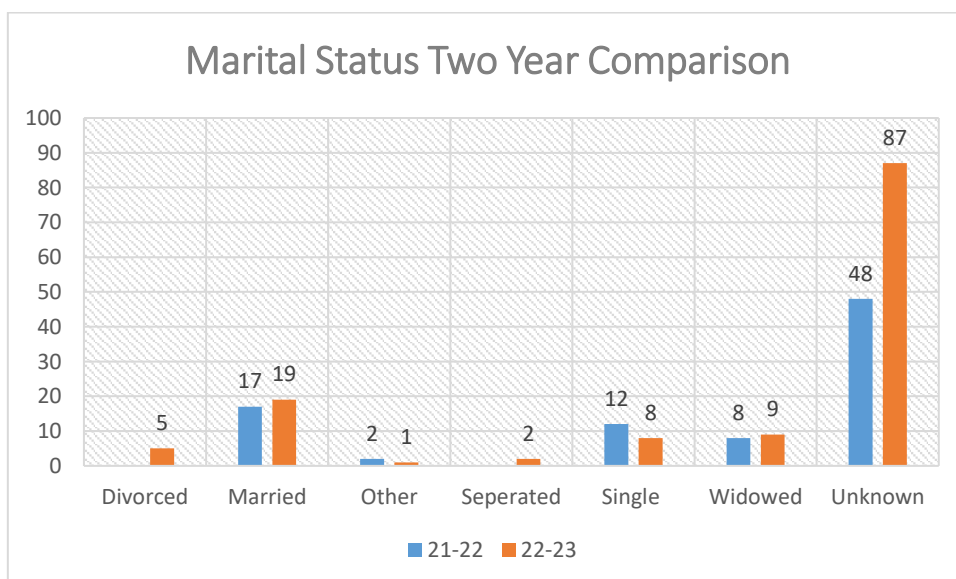
4.8.4 Religion

There has been a significant increase in the number of service users who have no religion recorded, this has increased from 26 in 2021-22 to 88 in 2022-23 up 238%, and greater emphasis will be placed on case file auditing to address this recording. There have been marginal increases in those recorded as Catholic and Christian and a small decrease in those recorded as Church of England during the year 2022-23.



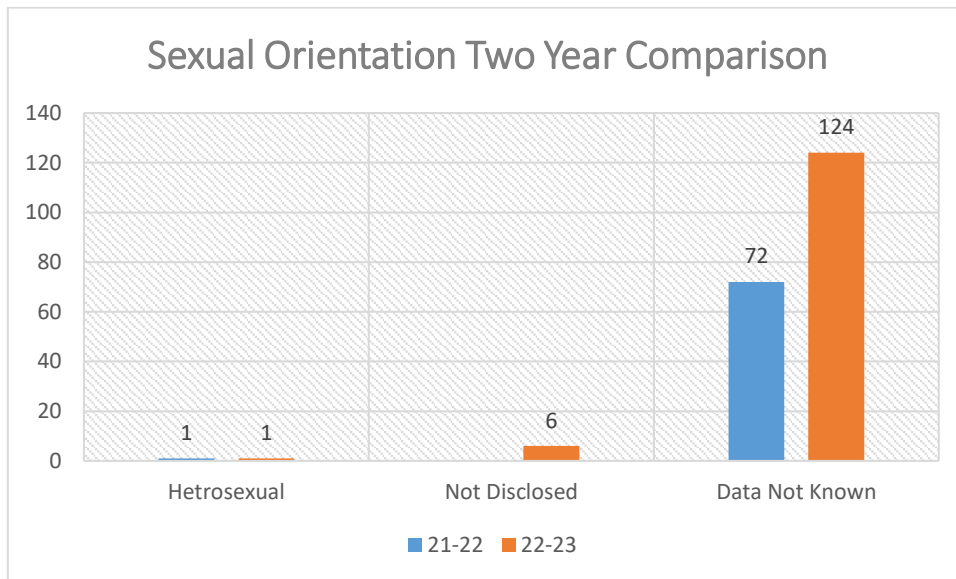
Marital Status

In 2022-23, 5 service users are recorded as being divorced up from 0 in 2021-22. Those recorded as single dropped from 12 to 8 (33%). There are very small changes in other marital statuses, however, the number recorded as unknown has gone up significantly in 2022-23 to 87 from 48 in 2021-22 (48%).



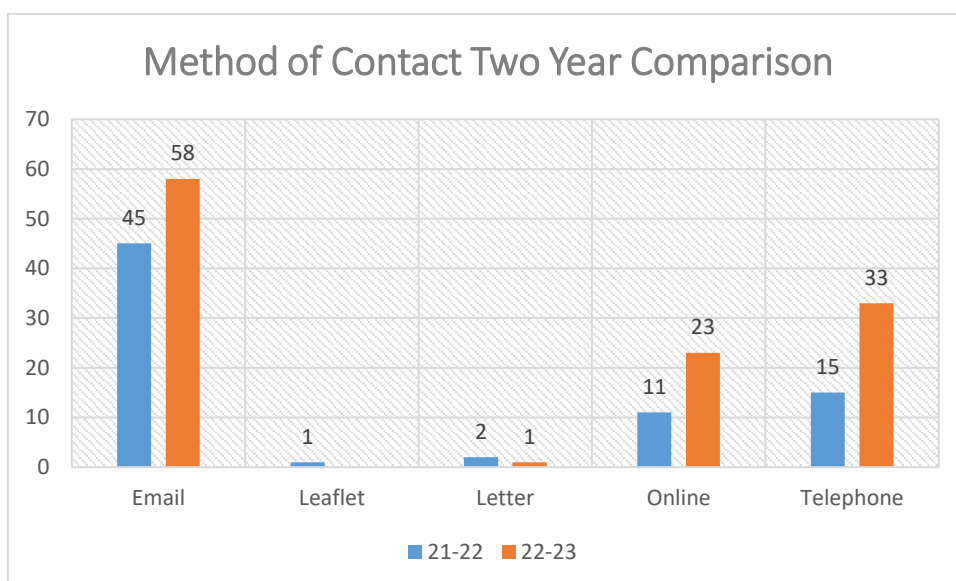
4.8.5 Sexual Orientation

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’.



5 Method of Contact

Email continues to be the favoured method of contact during 2022-23 at 50.4%, with telephone being the second highest method of contact at 20%, which remains consistent with 2021-22. It is encouraging to see that those choosing to complain using the online service increased in 2022-23 and represented 20% of complaints received. 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

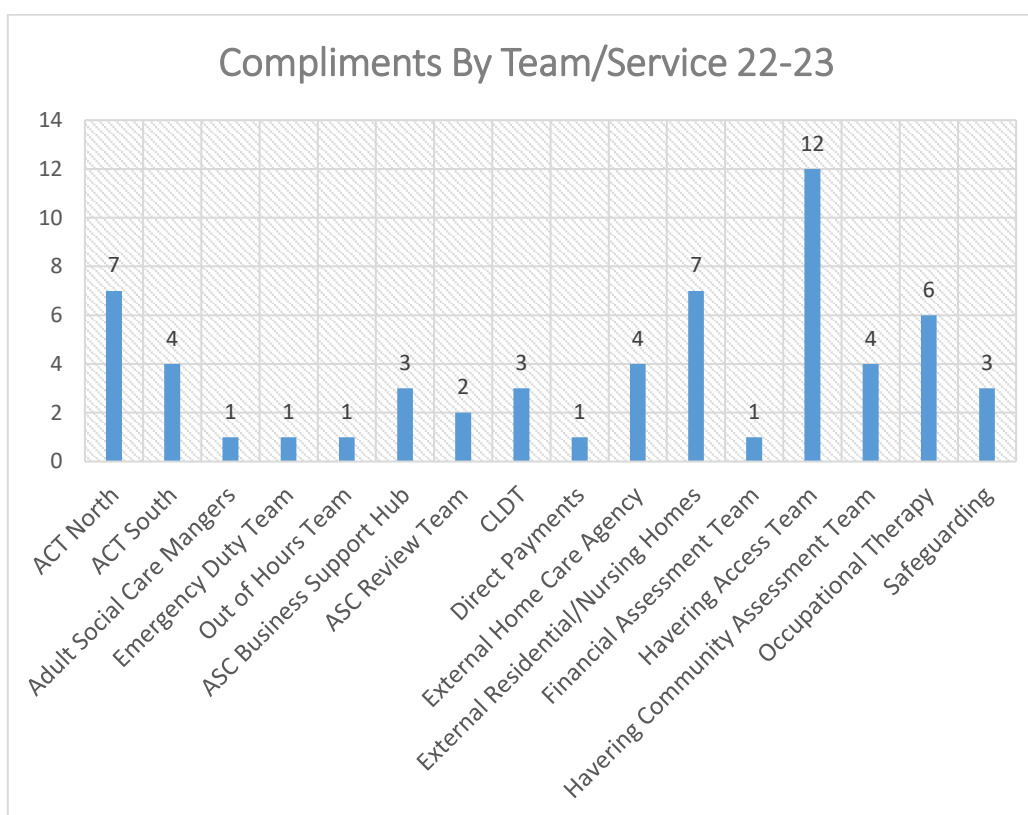
Whilst expenditure has significantly increased in 2022-23 this mainly represents invoices waived in relation to care charges following hospital discharge. The exceptionally low levels seen in 21/22 are predominately linked to the change in hospital discharge pathways during the pandemic, which meant that clients were not having to pay for their discharge care for at least the first 6 weeks. The Ombudsman expenditure relates to a recommendation to a refund of a third of care costs paid by the complainant.

	Ombudsman	Invoices Waived	Goodwill Payment	Total
Apr 2021- Mar 2022	£350	Not reported		350.00
Apr 2022-Mar 2023	£2024.42	£8282.14	£195	£10,501.56

7. Compliments and resident satisfaction

7.1 Compliments

The number of compliments received during 2022-23 reduced slightly to 48 from 52 in 2021-22. A plausible reason for this could be attributed to the correlating increase in complaints over the past year. There is a likelihood that we will continue to see a rise in complaints as the cost of living crisis and pressures on Local Authorities to deliver services increases.



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

Safeguarding

*Jenny
Thank you for listening,
again I thank you for your
call and most importantly for
your attitude as I felt very
comfortable relating to you*

ACT South

*I felt compelled to write to you
regarding Dan. He has been
dealing with my elderly
mother. I wanted to write and
tell you (in case you didn't
already know) that he has
been exceptional in his work
related to my Mum.*

ASC Review Team

*Hi Lynne,
Thank you for everything
you have done, you have
been amazing and I want
to let you know how much
we appreciate what you
have done.*

Financial Assessments
Team

*I especially wanted to thank
Sandra and Marie who
have been really helpful
and clear in their
explanations to her.*

Home Care Agency

*My special thanks to Carl for
the compassion he always
showed, a very special young
man*

CLDT

*Dear Eunice,
Thank you for everything and
helping supporting my sister. I
just know without LBH providing
vital care support at her most
vulnerable time my sister would
have deteriorated further.*

Residential/Nursing

To Hari and all the carers and staff past and present

We wanted to express our deepest gratitude for everyone's no ending care and affection given

Community Assessment Team

I cannot thank you enough for all your care and attention to his needs and requirements, you really have been such a help and we have now managed to achieve success



Havering Access Team

Ruhena was very kind, thorough, caring and extremely professional. She went over and above to help me and for that I am very appreciative

Occupational Therapy

I'm sending you a hug, I'd like to thank you, Sandra. They've brought a bath lift, from their store Just like the one I had before. So bath times now, will be sheer bliss

ACT North

Thank you Tracy, I cannot thank you enough for all you have done - you are an inspiring example of your profession.

EDT

I would like to make a compliment about Lawrence. He was extremely helpful, professional, and flexible in his approach

7.2 Adult Social Care Outcomes Framework – Survey 2022/23

The chart below shows comparative data against 2021-22. In line with the statutory guidance, it should be noted that the 'Quality of Life' outturn is not calculated as a percentage (all others are), this is a weighted combination of a number of questions answered in the survey to come up with an outturn.

The data shows an improvement in almost all of the categories with the exception of the proportion of people who use services who find it easy to find information about services which dropped by 0.3%. The 5% increase in those who feel they have as much social contact as they would like is expected as things began to return to 'normal' following pandemic restrictions.

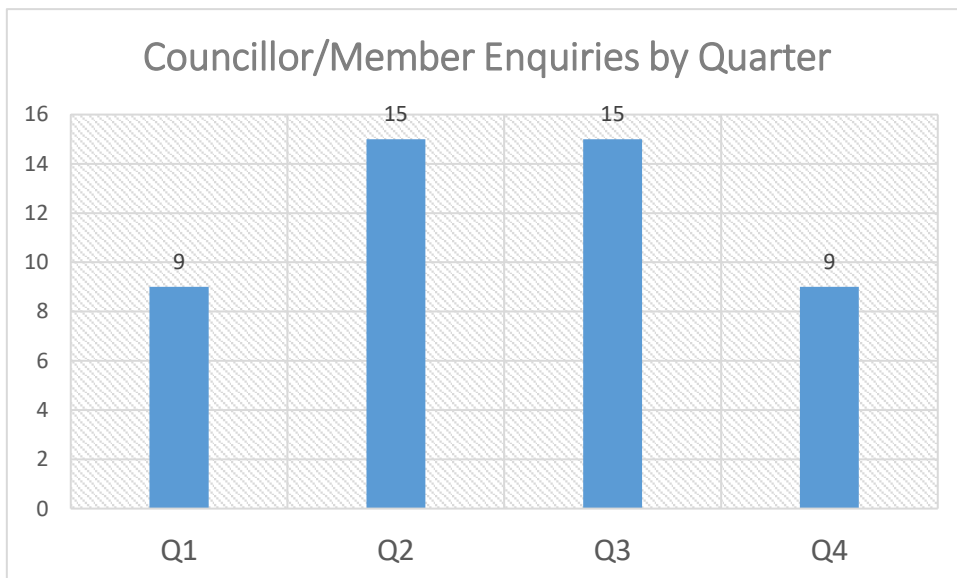
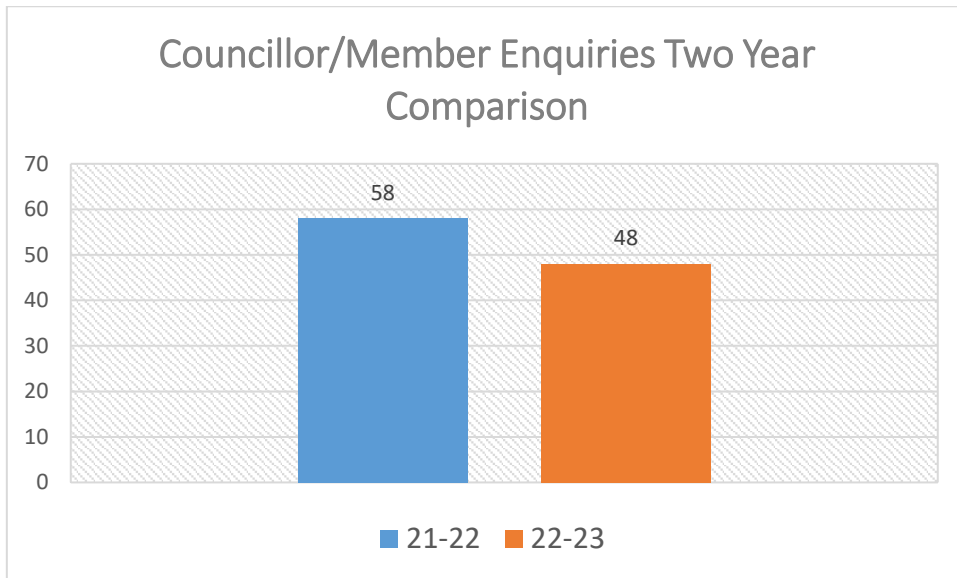
Service User Survey	22/23	21/22
Social care-related quality of life	19.0	
The proportion of people who use services who have control over their daily life	75.8%	74.2%
The proportion of people who use services who reported that they had as much social contact as they would like	43.0%	38.0%
Adjusted Social care-related quality of life – impact of Adult Social Care services	0.442	0.423
Overall satisfaction of people who use services with their care and support	63.1%	61.8%
The proportion of people who use services who find it easy to find information about services	65.3%	65.6%
The proportion of people who use services who feel safe	73.7%	68.8%
The proportion of people who use services who say that those services have made them feel safe and secure	87.7%	85.8%

8. Member Enquiries

The number of MP/Councillor enquiries received in 2022-23 was 48, a 17% decrease from 2021-22 (58), with 89.5% (43) being responded to within the timeframe in 2022-23, an improvement on the 81% in 2021-22. Those that were not responded to within the timeframe were related to complex cases that required further investigations to be undertaken in order to provide a robust response.

The Service is aware that some Councillor/Member enquiries are being sent directly to Officers and therefore may not be captured in the performance data. Staff across ASC are reminded to forward these to the SCCI Complaints Team for inclusion in the figures.

The majority of the enquiries centred on social care need related issues (51%), welfare concerns (14.5%), housing (12.5%), quality of care (10.4%), and financial concerns (10.4%).



9. Conclusion

ASC continues to embrace complaints as a learning tool, and the senior management team continue to ensure that improvements are embedded in the Service. Complaint levels have increased following 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. Learning from complaints will continue with improved monitoring on actions arising from complaints to improve service provision.

ASC complaints recording will be transferring to a new Complaints Handling Management System in 2023-24 and it is anticipated, as this matures, that this will lead to better monitoring to provide evidence-based learning, through the action plan incorporated within it.

There is also a review and restructure of complaints teams across the Council being carried out currently, due to be implemented by October 2023. The new Service will have a specific focus on service improvement, which will also aim to support a further reduction in the number of complaints and will aim to improve the consistency of responses and create a single point access for all residents to access.

9. ASC Complaints Action Plan

Issues Identified	Lessons Learnt	Action to be taken	Department	Timescale	Review/Progress
Information about the financial assessment process and potential client contributions has not always been communicated clearly or consistently	<ul style="list-style-type: none"> • Communications need to be improved and made more consistent in all arenas, especially when people are coming out of hospital • Material covering the financial assessment process must be regularly reviewed and updated • Evidence of information being shared with client's needs to be recorded in the LAS database 	<ul style="list-style-type: none"> • Gather customer views on the Financial Charge Leaflets to ensure issues are understood • Review of all financial assessment information including leaflets and policy in 23/24 • Review and improve the information available on the Havering website to support the Financial Charing Leaflets and improve customer understanding • The Financial Assessment Team will continue to promote the online financial assessment tool • Communications with clients going through hospital discharge process to be improved • Frontline staff and business support staff to record in case notes as standard when financial charging information is shared 	<ul style="list-style-type: none"> • Financial Assessment Team Team Manager, Salim Rabah • Havering Access and Review Team Sophie Webster, Service Manager 	Material to be reviewed throughout 23/24 and thereafter monitored and refreshed yearly or sooner if required	<ul style="list-style-type: none"> • Succinct information leaflet produced to be shared with all clients undergoing discharge to make clear to them their individual discharge pathway and whether this is a chargeable service • Hospital admin unit are providing follow up call to all Havering discharges to ensure they are aware of discharge pathway and that most Council services are chargeable • Customer feedback received on existing leaflets has been taken into account in design of new leaflet

Adult Social Care Complaints & Compliments Annual Report 2022-23

Issues Identified	Lessons Learnt	Action to be taken	Department	Timescale	Review/Progress
Quality and level of service received from commissioned providers is monitored robustly	<ul style="list-style-type: none"> • Quality of commissioned providers must be continually reviewed and proactively managed where problems are identified through the complaints process • Commissioning Leads to continue to quickly address themes of poor performance (such as poorly recorded care hours or mischarging) with identified providers 	<ul style="list-style-type: none"> • Providers are engaged with regularly to understand recruitment and retention pressures • Feedback from complaints shared with Quality Team and Commissioning Leads to highlight areas of poor practice or providers that have increased complaints 	<ul style="list-style-type: none"> • Joint Commissioning Unit <p>Acting Assistant Director - Laura Nielson</p>	Provider forum attendance – throughout 2023/24	<ul style="list-style-type: none"> • Proactive work with providers via Quality and Outcomes Team and Safeguarding Team to address areas of concerns • Provider Forums in place for Care Home and Domiciliary Care providers to pick up on issues impacting provision, recruitment and sustainability
Ensure an approach of continuous improvement relating to information about adult social care ensuring that information is easily accessible	<ul style="list-style-type: none"> • Review ASC information on the Havering Website to ensure it is available in the right places and is accessible, and is provided to people in timely fashion 	<ul style="list-style-type: none"> • Review the information available to residents on our websites • Invite service user feedback on services • Expansion of local area coordinators to improve information sharing • Better Living approach to social care to be understood by clients that access services 	<ul style="list-style-type: none"> • Integrated Services Director Ageing Well - Annette Kinsella • Joint Commissioning Unit <p>Acting Assistant Director - Laura Nielson</p> <ul style="list-style-type: none"> • Business Management Hannah Thorogood 	Website to be updated and reviewed throughout 2023	<ul style="list-style-type: none"> • Review of Information and Advice underway across the service involving all areas

Adult Social Care Complaints & Compliments Annual Report 2022-23

Issues Identified	Lessons Learnt	Action to be taken	Department	Timescale	Review/Progress
Continue to improve the percentage of complaints responded to within timescales	<ul style="list-style-type: none"> Response times require improvement 	<ul style="list-style-type: none"> Complaints involving other NHS agencies – adult social care element to be responded to within 20 days. It is noted that NHS timescales for response are longer than 20 days Commissioning is to support the Complaints Team in getting information from external social care providers back within the timescale 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). 	<ul style="list-style-type: none"> Integrated Services Assistant Director - Annette Kinsella Joint Commissioning Unit Acting Assistant Director - Laura Nielson Complaints and Information Team Team Manager - Johannah Philp 	March 2024	
Assessments and support plans must be shared with clients	<ul style="list-style-type: none"> Assessments and support plans (including budget information and clear recording showing start and end dates of provision) are shared with clients before provision begins where possible 	<ul style="list-style-type: none"> Develop an improved process via the Quality Assurance Working Group for frontline staff send out the assessments and evidence this on the LAS system 	<ul style="list-style-type: none"> Frontline Adult Social Care Teams Jackie Lawson & Chibuike Oji – Service Managers Professional Practice Lead Movita Hussain 	Ongoing	<ul style="list-style-type: none"> The process for sharing assessments and reviews is being reviewed by Service Managers and Practice leads to improve ease of recording in the area to demonstrate auditable compliance
Learning from Complaints	<ul style="list-style-type: none"> Staff are empowered to improve services by understanding issues related to complaints received where the reason for the complaint reflects on practice or communication 	<ul style="list-style-type: none"> Responding managers to ensure that relevant staff have sight of complaints and responses and these should be discussed in supervision meetings Complaints and compliments to be added 	<ul style="list-style-type: none"> All managers 	To Start in June 2023	<ul style="list-style-type: none"> Complaints Manager produces quarterly information on complaints included lessons learned and common issues and reports to Senior Leadership

Adult Social Care Complaints & Compliments Annual Report 2022-23

Issues Identified	Lessons Learnt	Action to be taken	Department	Timescale	Review/Progress
		as a standing item on team meeting agendas to discuss complaints received and learning opportunities • Lessons Learned to be communicated via Service Team briefings			
Contribute to the Council Wide Complaints Service Redesign	• Ensure that the new Service takes account of Statutory Complaints Process	• Ensure that Adults Statutory Complaints are understood and processed effectively • Ensure complaints process is effectively advertised • Ensure that clients are easily able to access the complaints process in the new structure	• Integrated Services Assistant Director - Annette Kinsella • Business Management Hannah Thorogood • Complaints Johannah Philp	September 2023	• The Complaints and Information Restructure is underway and due to transfer to a single central service in Autumn 2023 • The current Team manager is involved in designing pathways and systems in the new Service to support Statuary complaints
development of a new Complaints Handling Management System across the Council	• New system will support easier and more accurate data on complaint numbers; waiting times and issues identified	• New system to be embedded across all areas of the Council • Clients to be able to make complaints via the new system using a more simplified system	• Complaints Johannah Philp & Caroline Little	March 24	• Tender process for new Complaints Handling Management System completed • New system being tested in key areas – roll out expected for statutory complaints in Jan 24

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PEOPLE OVERVIEW & SCRUTINY SUB-COMMITTEE – 5 SEPTEMBER 2023

Subject Heading:	Children’s Services Annual Complaints and Compliments Report 2022-23
SLT Lead:	Tara Geere
Report Author and contact details:	Johannah Philp, 01708 431998 johannah.philp@haverling.gov.uk
Policy context:	As part of the remit of the Children Act 1989 Representations Procedure (England) Regulations 2006’
Financial summary:	There are no direct financial implications arising from this report. However adverse performance against some performance indicators may have financial implications for the Council.

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

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

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 2022–23, attached as Appendix 1 and The Learning & Achievement Complaints and Compliments Report for 2022–23, attached as Appendix 2, 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 2022-23 attached as Appendix 1.
2. That Members note the content of the Learning & Achievement Complaints and Compliments Report 2022-23 attached as Appendix 2.
3. That Members note the continued learning from complaints and the recognition of good practice through compliments.

REPORT DETAIL

1. Children's services saw a 3.9% decrease in the number of complaints received during 2022-23 (76) compared to 2021-22 (79). The number of enquiries increased slightly by 8.1% (80) in 2022-23 compared to 2021-22 (74). There was a significant decrease in complaints escalating to Stage 2, with only one investigation in total for 2022-23 compared to seven in 2021-22. No complaints were escalated to Stage 3 in 2022/2, There were 2 Ombudsman Investigations, of which one was not progressed and one was found to be Maladministration and injustice which resulted in a goodwill payment of £150.00.

For the Education Service the total number of Corporate Complaints has decreased by 30% in 2022-23 to 18 from 26 in 2021-22, and are reported within the Corporate Complaints reports. Enquiries however have increased by 51% to 95 in 2022-23 from 49 in 2021-22.

2. Improvements were seen in the number of complaints against the Triage/MASH & Assessment, with a decrease of 64% in 2022-23 compared to 2021-22. Despite the decrease in complaints, it is noted that the most common themes for complaints received were in relation to attitude/behaviour of staff and lack of communication.

The Intervention Support Service saw an increase (26%) in the number of complaints from 33 in 2021-22 to 45 in 2022-23.

3. The three main reasons for these complaints continued to be 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 2022 saw a further 5% increase in staff leavers compared with the year before (which saw a 77% increase in 2020). This resulted in an increase in our turnover rate, from 24.9% in 2021 to 26.2% in 2022.
4. A large increase in the volume of contacts in September 2022 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 was addressed by escalation from the Assistant Director of Children's Services.
5. During 2022-23 the number of complaints that were 'upheld' decreased by 42.8%. Those 'partially upheld' stayed consistent with 2021-22 at 18. Complaints 'not upheld' rose by 17% in 2022-23(25) compared to 2021-22(17). 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.. Consideration needs to be given to 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.
6. Stage 1 complaint responses within 10 working days improved slightly in 2022-23 (28) compared to 2021-22 (24) an increase of 6% being responded to within the statutory timeframe. 32.8% of complaints were responded to within 20 days which is another improvement compared to 2021-22. The number of complaints taking over 20 days has also reduced compared to 2021-22 from 27 to 22 a reduction from 34.1% to 28.9%.
7. Monitoring information is based on the child(ren) within the family unit in which a complaint was made. During 2022-23 there has been a decrease across all age groups. Within our complaint data there are a low number of children that had a recorded disability, with the majority having Autism/Aspergers syndrome in 2022-23. We know that overall we have a growing number of children accessing SEN (Special Educational Needs) Support in Schools, and the number of requests for Education, Health and Care Plan assessments has increased significantly, and is 48% higher in January 2023 than in

January 2022, and we expect to see this continue in 2023-24. The higher number of 'White British' complainants continues to reflect the population within Havering. However, it is not representative of the service users across Children's Services. There are representations across many ethnicities with slight increases shown across any other mixed background and African.

8. There has been a significant increase in the number of compliments received from service users from 16 to 55, a 29% increase which is an amazing achievement and testimony to the excellent work being undertaken by our staff to support children, young people and their families

There has also been a further 99 compliments recorded which have been submitted both by internal and external partners which should be recognised as equally important as this strengthens Havering's Children's Services reputation with partners and the wider community.

9. 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 for complaints in relation to children under s 26 (3) Children Act 1989.

Under the Children Act 1989 Representations Procedure (England) Regulations 2006

"13 (2) Local authorities must monitor those arrangements by keeping a record of—

- (a) each representation under section 26 received;

(b) the outcome of each such representation; and
(c) whether there was compliance with the time limits specified in these Regulations.

(3) For the purposes of such monitoring every local authority must as soon as possible after the end of each financial year compile a report on the operation in that year of the procedure set out in these Regulations.”

The Children’s Services Annual Complaints and Compliments Report 2022-23 complies with these Regulations.

Whilst there is no statutory duty to provide a complaint service, or Report in relation to Education issues this is clearly good practice.

Otherwise 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.

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Children's Services

Annual Complaints and Compliments Report 2022 – 2023

Prepared for: Tara Geere, Director of Children's Services

Prepared by: Johannah Philp Complaints & Information Team Manager

Date 24th May 2023

Contents

Executive Summary.....	3
Complaints.....	4
1.1 Ombudsman Referrals.....	4
1.2 Total number of complaints.....	5
1.3 Stages.....	5
1.4 Teams.....	6
1.5 Complaint Themes.....	7
1.6 Outcomes & Learning.....	9
1.7 Response times.....	10
1.8 Expenditure.....	10
1.9 Method of Contact.....	11
2.1 Age and Gender.....	11
2.3 Disability.....	12
2.4 Ethnicity.....	13
2.5 Religion.....	13
Members Correspondence.....	14
Compliments.....	14
Conclusion and recommendations.....	17
Complaints and Compliments Action Plan.....	19

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 2022 to March 2023.

Children's services saw a 3.9% decrease in the number of complaints received during 2022-23. 76 complaints were received of which 12 were upheld, 18 were partially upheld, 25 were not upheld and 20 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 lack of communication. However, although this increased to 22, only 3 of the complaints were upheld. The majority of concerns raised were made on behalf of children and we have continued to see low levels of complaints received directly from children and young people.

There was a significant decrease in complaints escalating to Stage 2, with only one investigation in total for 2022-23 compared to seven in 2021-22. There were a further 5 requests for Stage 2 investigations, which were resolved through successful resolution meetings with complainants.

There was a huge increase in the number of compliments in 2022-23 (154), 55 of which were from service users and 99 from professionals compared to 2021-22. The relevance of capturing all compliments received continues to be highlighted across all service areas. The relaunch of our Mind of My Own 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 and has supported the increase in compliments from them.

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) Children's social work Workforce report for 2022 highlighted nationally the number of children and family Social Workers in post fell for the first time since reporting started in 2017, with more leaving the profession during 2022 (the highest numbers in the last six years). It also highlighted a rise in vacancies from the previous year (again the highest number in the last six 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.

With regards to contacts and referrals, Children's Services has seen some stability when compared with 2021/22. The number of contacts received remains consistent with the previous year, although the number of referrals has dropped by 4%. We also saw the number of children coming into care decrease by 19% from last year.

Demand modelling makes clear that we can expect contacts to continue to grow through 2023 - 2024, both as a result of the impact of the pandemic on children's mental health and as a result of the cost-of-living impact on families. 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 during 2022-23 was mental health: parent/carer up from 737 to 864, an increase of 17%, replacing domestic violence: parent/carer which was down from 865 to 787, a decrease of 9%. We have also seen a continued increase in assessments identifying mental health of the child as a factor, up 15% from 474 to 547, as well as a significant increase in contacts relating to abuse or neglect up 46% from 844 to 1230.

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 the 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 2022-2023 the number of Ombudsman enquiries dropped to two enquiries compared to the four enquiries in 2021-22. This is a continued positive performance over the past three years and suggests that initial complaint responses are improving in quality.

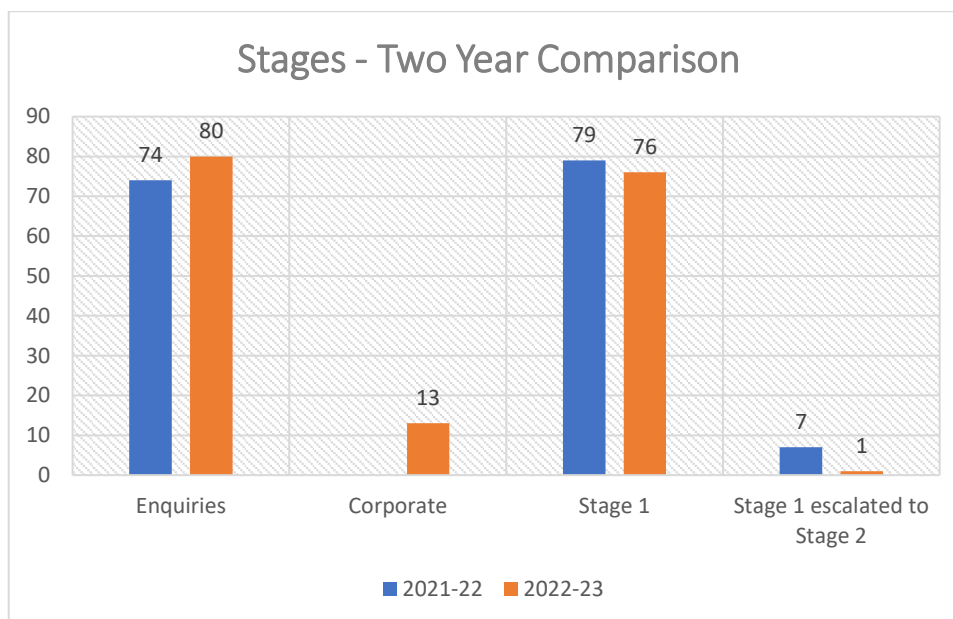
One found maladministration with injustice; relating to the delay in response to Stage 2 complaint handling, this resulted in an apology being issued along with a goodwill payment of £150.00. The Ombudsman finding also suggested that the local authority complete a further stage 2 investigation into the complaint.

	Apr 22-Mar 23	Apr 21-Mar 22	Apr 20-Mar 21
Maladministration (no injustice)		1	
Maladministration & Injustice	1	1	2
No maladministration after investigation			1
Ombudsman discretion			
Investigation with Local settlement			
Outside Jurisdiction		1	
Investigation Discontinued		1	
Premature/Informal enquiries			2
Closed after initial enquiries – no further action	1		1
Total	2	4	6

1.2 Total number of complaints

During 2022-23 we saw a slight (8.1%) increase in the number of enquiries received (80) compared to 2021-22 (74). Enquiries do not fall within the remit of statutory or corporate complaints and are not included in any further data within this report.

A total of 76 complaints went through the formal Stage 1 process in 2022-23, a 4% decrease compared to the number received in 2021-22. This means that 2.89% of the children and young people receiving services within Havering Children's Services made a formal complaint.



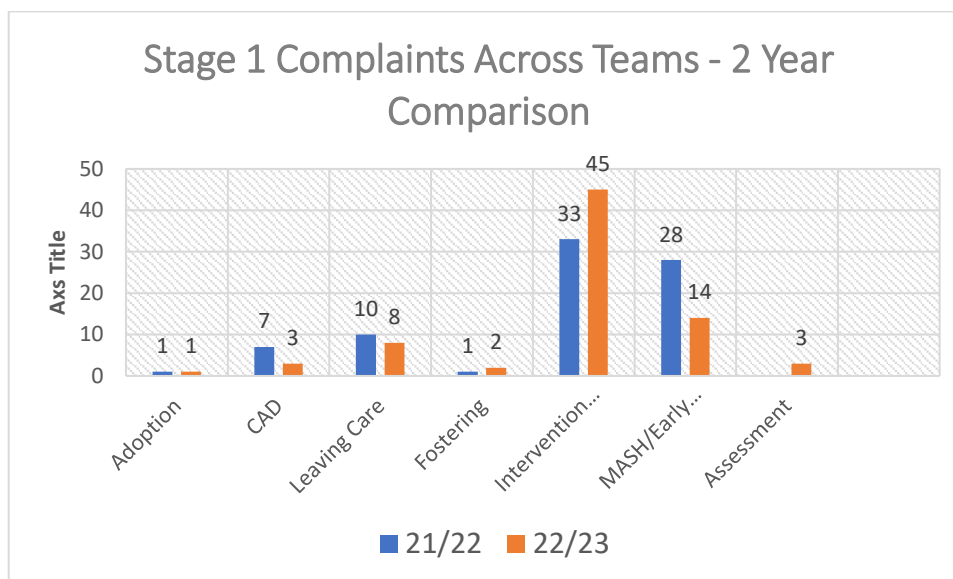
1.3 Stages

There are a very small number of complaints that have escalated to a stage 2 investigation in 2022- 23.

The number of complaints progressing to Stage 2 went down to 1, from 7 the previous year. There were a further 5 requests for Stage 2 investigations, that were not progressed following successful meetings with complainants to resolve issues.

No complaints were escalated to Stage 3 this reporting year.

1.4 Teams



Improvements were seen in the number of complaints against the Triage/MASH & Assessment, with a decrease of 64% in 2022-23 compared to 2021-22. Despite the decrease in complaints, it is noted that the most common themes for complaints received were in relation to attitude/behaviour of staff and lack of communication.

The Intervention Support Service saw an increase (26%) in the number of complaints from 33 in 2021-22 to 45 in 2022-23. The three main reasons for these complaints continued to be 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 2022 saw a further 5% increase in staff leavers compared with the year before (which saw a 77% increase in 2020). This resulted in an increase in our turnover rate, from 24.9% in 2021 to 26.2% in 2022.

Havering is not unique. The DfE Children's social work workforce report 2022 in England highlighted the number of children and family Social Workers leaving during 2022 went up by 11% compared to 2021.

Nationally vacancy rates were up by 20% from 2021 (the highest number in the last seven years). In Havering, our vacancy rate on 30 September 2022 was a 38% increase from the already high figure of 29.1% in 2021.

Nationally, sickness rates rose to 3.5% while Havering saw an increase from 2.0% to 6.3% absence. The use of agency workers increased by 14% nationally, Havering saw an increase of 76%. This significant increase in the use of agency staff is directly linked to the high vacancy rate detailed above. The impact of the high levels of staff turnover and high caseloads caused by vacancies accounts for the reduction in communication and staff not meeting standards of service. There has been a concerted effort to recruit permanent staff including a larger tranche of newly qualified staff, which has been successful however the cumulative impact continues to be felt.

This large increase in the volume of contacts in September 2022 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 was addressed by escalation from the Assistant Director of Children's Services.

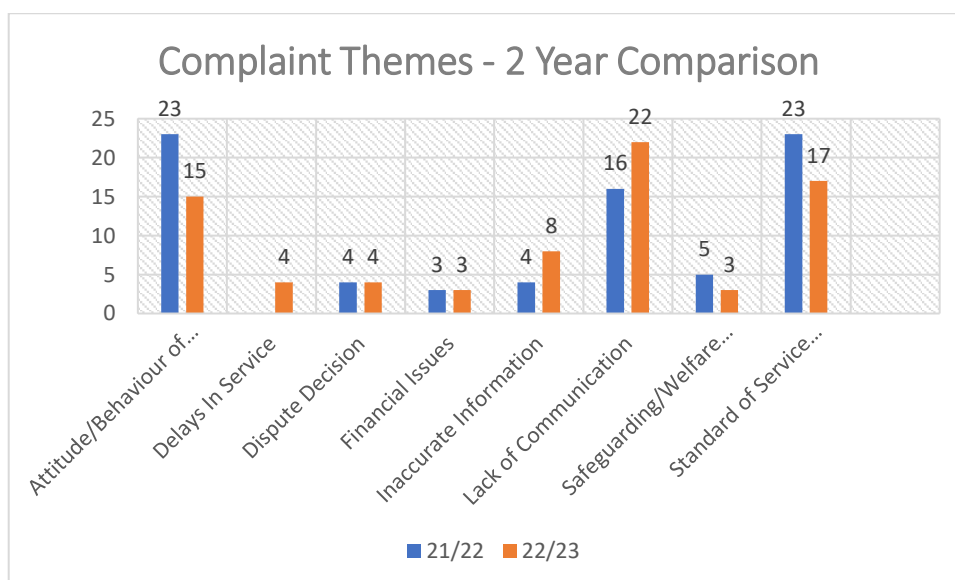
There are now clear communication pathways in place to ensure that partners and families are informed of outcomes of contacts by way of letter and email communication. We have continued to have strategic leads linked to school clusters to keep open-door communication in place. Revised structure charts of the service are regularly shared with 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 being shared by Early Help and Multi-Agency Safeguarding Hub which started in September 2022 and offers partners updates to service changes. There are also regular Inward Speaking events scheduled throughout the year that informs and updates on the service offer for Havering.

We have seen decreases in complaints against all other areas across Children's Services with the exception of Fostering which received two complaints in 2022-23 compared to one in 2021-22.

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 7 in 2021-22 to 3 in 2022-23. We continue to see a significant increase in behaviour support requests linked to the ongoing impact of the pandemic, as well as the ongoing increase in requests for children to be assessed for Education, Health and Care Plans. We continue to work with our safeguarding partners and third-sector colleagues to ensure that children are '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.

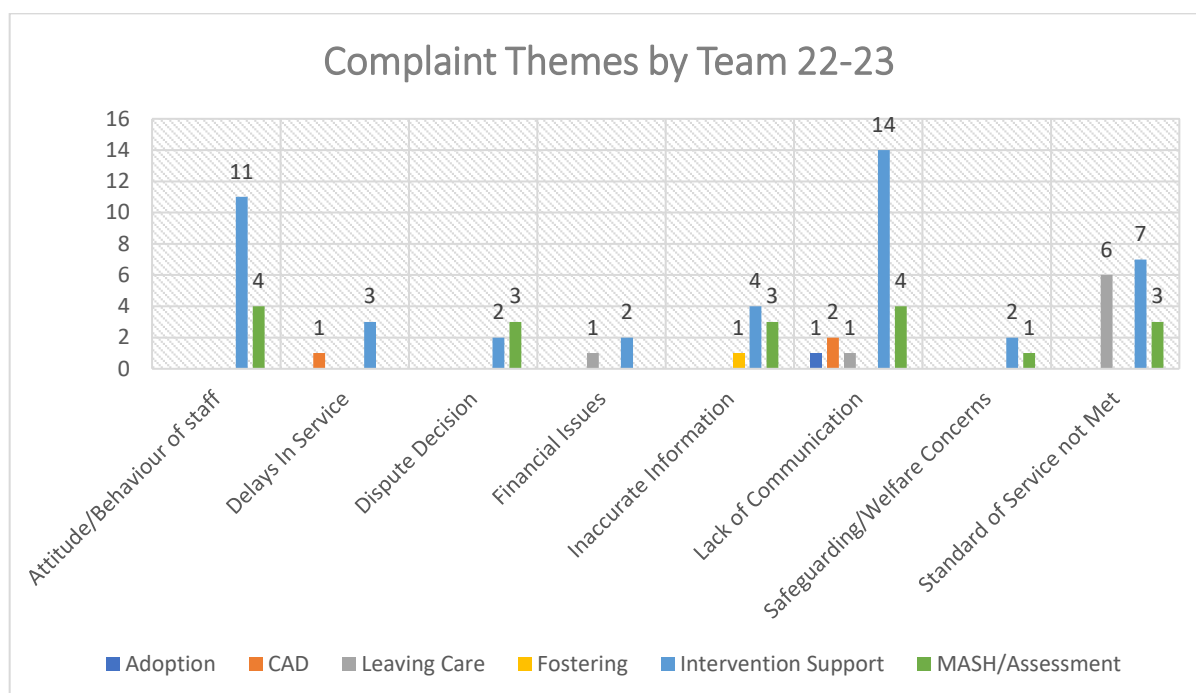


As you can see from the table above the two highest number of complaint themes in 2021- 22 were the standard of service and attitude/behaviour of staff. During 2022-23 there have been improvements and a reduction in the number of complaints in these areas. Encouragingly for Children's Services, there has been a significant drop in the number of complaints for 'attitude/behaviour of staff' which has reduced from 23 to 15 (34%). The 'Standard of service' complaints have also reduced from 23 to 17

Children's Services Annual Complaints and Compliments Report 2022-23

(26%). There have also been improvements across all areas other than inaccurate information and lack of communication.

In 2022-23 we saw an increase in the number of complaints in relation to 'lack of communication' which increased by 37.5%. However, over half (12) of the reported complaints in this area were either withdrawn or not 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 challenges. The service continues to model our systemic model of practice and we are working with staff on reducing 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 supervision and group supervision to invite reflections from staff as to their relationships and communication with children and families and how our interventions can empower families.



Complaint themes by team are illustrated above, unsurprisingly with the greatest volume of children's cases the Intervention Support Service has the greatest number of complaints across the different areas, however, of the 45 complaints received for the team 27 (60%) of these were either withdrawn or not upheld. Our MASH/Assessment Team saw the next highest number of complaints, 17 with 10 (58.8%) being withdrawn or not upheld.

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.

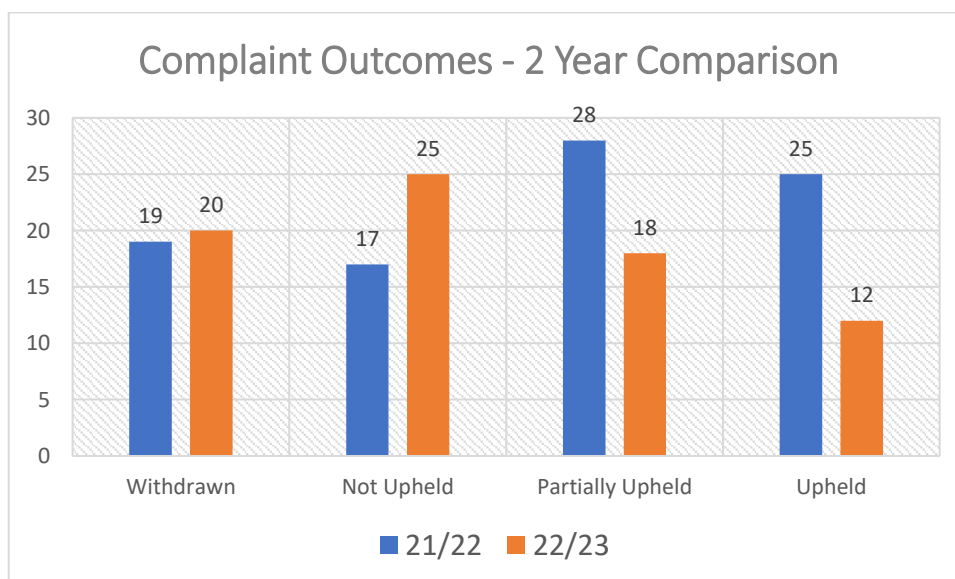
During 2022-23 the Complaints Team Manager has been working closely with the Social Work Practice Development Manager whereby complainants have been offered the opportunity to discuss their experiences with Children's Services in order to make service improvements. This work is done outside of the complaints process and is only offered once the complaint has been responded to.

During 2022-23 the number of complaints that were 'upheld' decreased by 42.8%. Those 'partially upheld' stayed consistent with 2021-22 at 18. Complaints 'not upheld' rose by 17% in 2022-23(25) compared to 2021-22(17).

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.. Consideration needs to be given to 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 children, young people, parents/families and carers to ensure consistency and to provide clarity of the expectations and role of Children's Services when it comes to their intervention.

As much as the pandemic provided accelerated progression in the use of technology in our working lives, it is evident that the impact of face-to-face conversations cannot be replicated digitally. The service position is that all visits and statutory meetings are undertaken in person, unless there is a valid reason not to and the rationale is agreed and recorded by a manager.

Of the one Ombudsman Investigation that was partially upheld the main issue 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 Director, Heads of Service and Complaints & Information Team Manager are working collaboratively to achieve more timely responses.



Children's Services Annual Complaints and Compliments Report 2022-23

During 2022- 2023 Children's Services continued to work to 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. Ongoing 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 with this there has been further learning and support materials for staff via the academy SharePoint site online, including online webinars.

Children's Services have undertaken a significant amount of work to improve the forms and processes of the case management system to improve accuracy and efficiency. Further work is planned for 2023 – 2024.

1.7 Response times

Stage 1 complaint responses within 10 working days improved slightly in 2022-23 (28) compared to 2021-22 (24) an increase of 6% being responded to within the statutory timeframe. 32.8% of complaints were responded to within 20 days which is another improvement compared to 2021-22. The number of complaints taking over 20 days has also reduced compared to 2021-22 from 27 to 22 a reduction from 34.1% to 28.9%.

This is an area covered in the complaint team improvement plan and the manager is working closely with the Director to ensure there are further improvements in this area.

	Within 10 days		11-20 days		Over 20 days	
	Apr 22- Mar 23	Apr 21- Mar 22	Apr 22- Mar 23	Apr 21- Mar 22	Apr 22- Mar 23	Apr 21- Mar 22
Stage 1	28	24	25	28	22	27
%	36.8%	30.3%	32.8%	35.4%	28.9%	34.1%

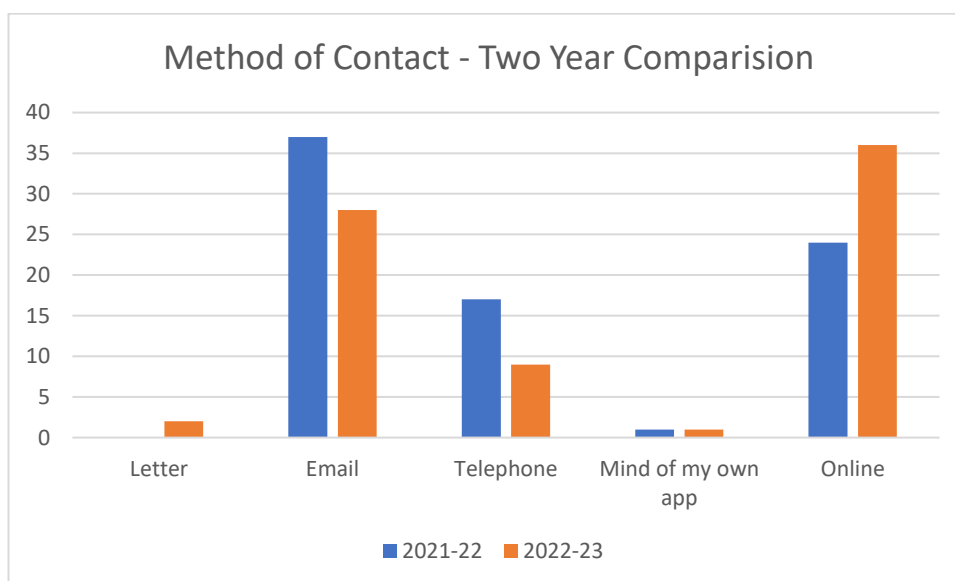
1.8 Expenditure

The cost of independent investigations decreased significantly in 2022-23, due to the number of stage 2 investigations reducing. This is as a result of the excellent work done by managers in the service committing to stage 1 resolution meetings and due to stage 1 responses improving.

	Publicity/ leaflets	Independent investigators	Payments	Total
Apr 2022 – Mar 2023		£1876	£150	£2026
Apr 2021 – Mar 2022		£14,413		£14,413

1.9 Method of Contact

Email had been the preferred method of contact in previous years, however, encouragingly we have seen this figure reduce by 37% in 2022-23. It is also encouraging to see an increase in the number of people opting to use Havering’s online form during 2022-23 which has increased by 50% compared to 2021-22. Complaints received by telephone have decreased in 2022-23 by 88%, it is important to note that telephone calls are always followed up with an email outlining the content of the conversation. Havering is currently in the process of procuring a new complaints and information case management system from ROL Solutions, Freedom of Information requests will be rolled out first, followed by Subject Access Requests, and then complaints. It is hoped that this will enhance user experience and improve on reporting capabilities.



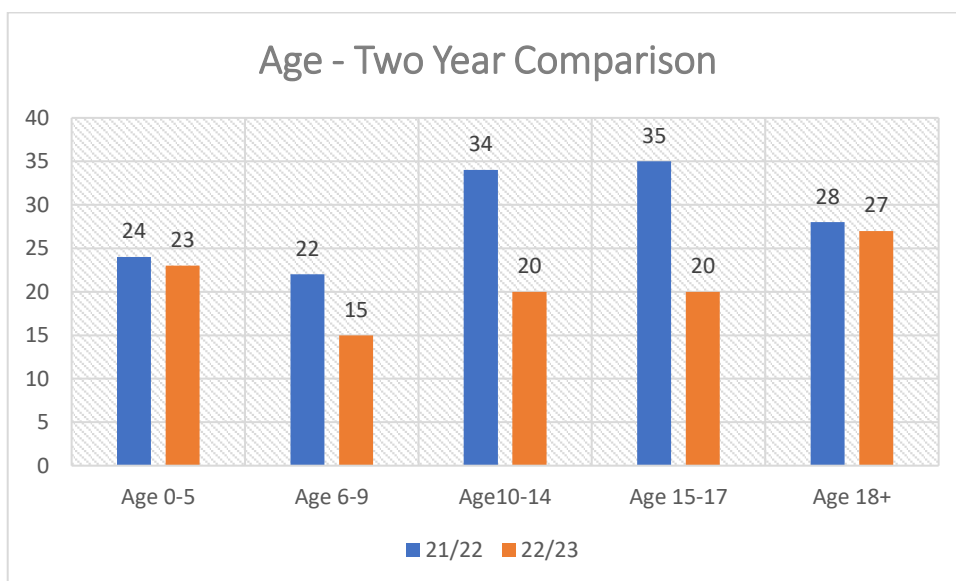
Monitoring Information

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 76 Stage 1 complaints received, 66 were submitted by parents or family members, 9 were submitted by young people receiving social care support and 6 were submitted by advocates on behalf of the young person.

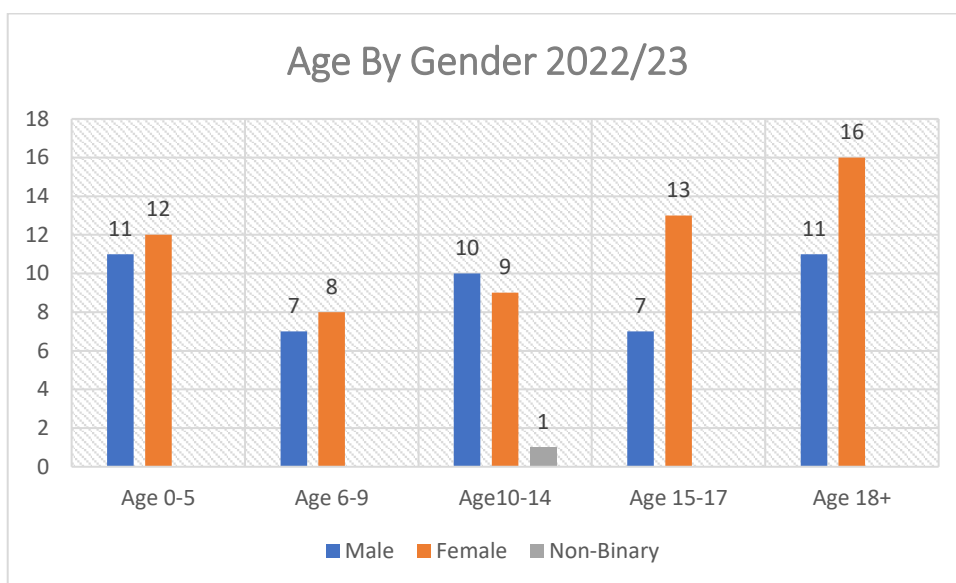
2.1 Age and Gender

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 2022-23 there has been a decrease in complaints across all age groups.

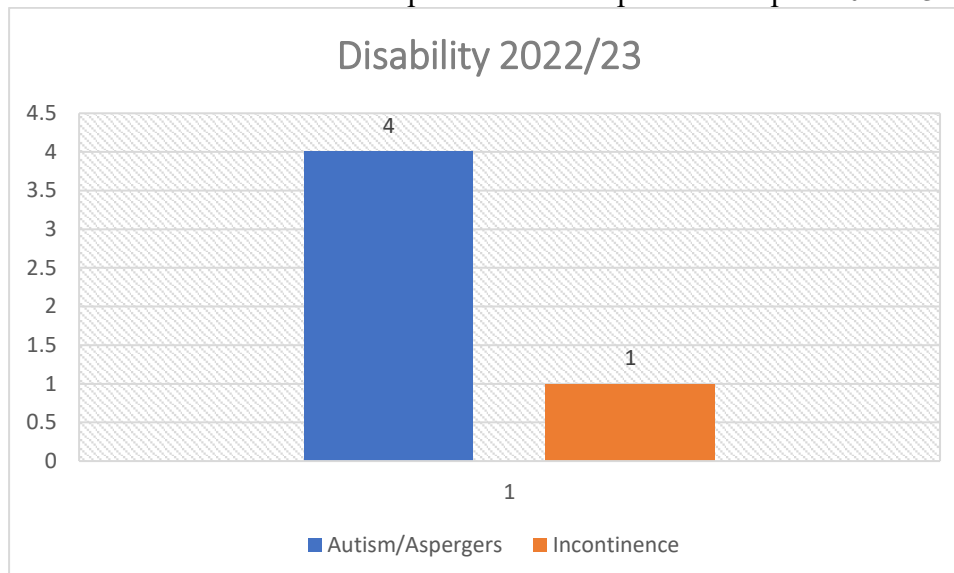


With the exception of the age group 10-14, there were a higher number of complaints in relation to females in 2022/23.



2.3 Disability

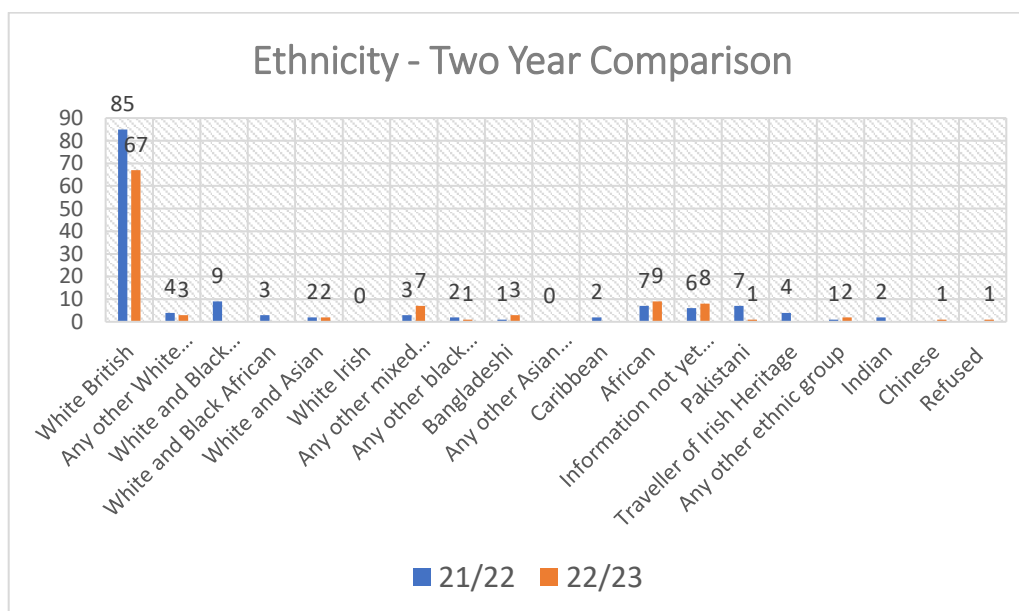
Within our complaint data there are a low number of children that had a recorded disability, with the majority having Autism/Aspergers syndrome in 2022-23. We know that overall we have a growing number of children accessing SEN (Special Educational Needs) Support in Schools, and the number of requests for Education, Health and Care Plan assessments has increased significantly, and is 48% higher in January 2023 than in January 2022, and we expect to see this continue in 2023-24.



2.4 Ethnicity

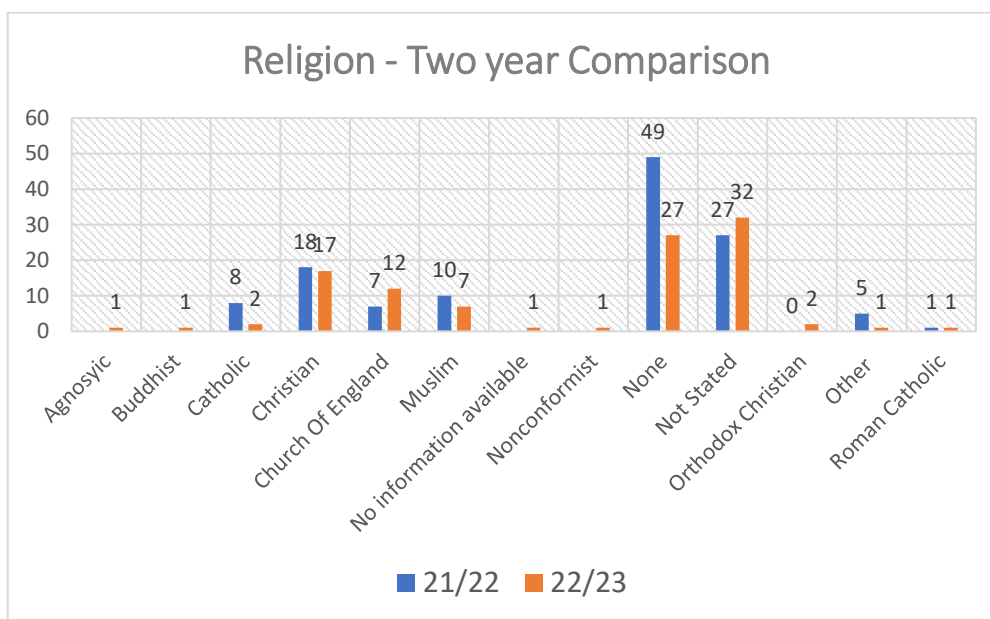
The higher number of 'White British' complainants continues to reflect the population within Havering. However, it is not representative of the service users across Children's Services. There are representations across many ethnicities with slight increases shown across any other mixed background and African.

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 decrease in 2022-23 in those recorded as having 'none'. There is a slight increase in 2022-23 where religion is not stated.



Members Correspondence

The number of Members correspondence decreased by 24% in 2022-23 (45) compared to 2021-22 (56). There has been a significant improvement in response times with 91% having been responded to within timeframe over the course of 2022-23 which is a great achievement compared to the 71% achieved in 2021-22.

	2022-23	2021-22
Members Correspondence	45	56

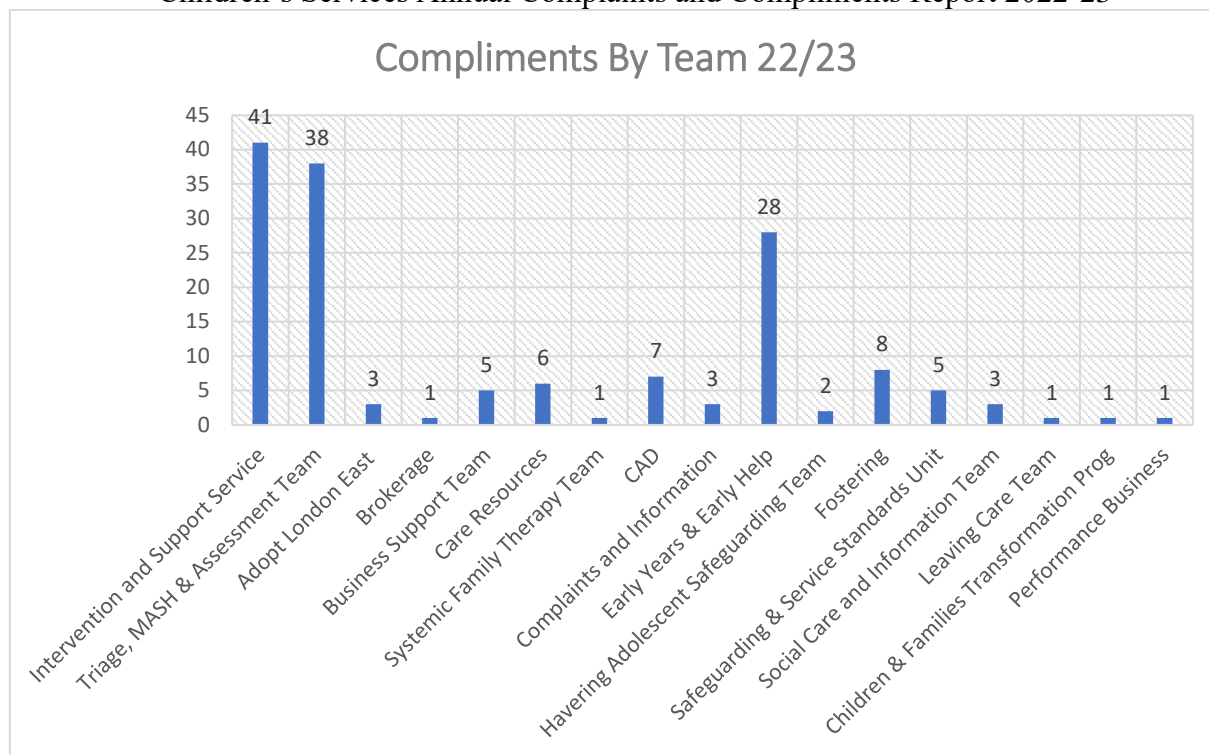
Compliments

There have been 154 compliments received in total for Children’s Social Care during 2022-23.

There has been a significant increase in the number of compliments received from service users from 16 to 55, a 29% increase which is an amazing achievement and testimony to the excellent work being undertaken by our staff to support children, young people and their families

There has also been a further 99 compliments recorded which have been submitted both by internal and external partners which should be recognised as equally important as this strengthens Havering’s Children’s Services reputation with partners and the wider community.

It is particularly encouraging to see that the Intervention Support Service and Triage, MASH & Assessment received the highest number of compliments, and acknowledge even though they also received the highest number of complaints, their good work was appreciated.



Some examples of the appreciation shown are given below:

Social Worker Adopt London

We are so thankful that B was there to support us through this time. She has gone over and beyond her 'duty' and we are ever so grateful.

Leaving Care

A had a big talk with me about X and how for me to cope, she had made me feel a lot better and gave me a big speech on how to handle the situation she also has been looking at father rights and cafcass 😊

CAD

Thank you for your concern and continued assistance. Myself, my wife and my daughter will never forget the effort and patience you showed. God bless you.'

ISS

Nothing needs to change because M..... is the best carer in the world and A is the best social worker in the world

Early Help

I wanted to bring to your attention the amazing work D has done and is doing with a family currently allocated to me. In just a few sessions she has built such a good rapport with the family that they feel supported and held. Mother was extremely appreciative of the work that D is doing with the family

Fostering

X received her financial update yesterday and called me to say thank you to you ladies for sorting this out for her. She was tearful and grateful for the financial support and I wanted to pass on her thanks

Systemic Family Therapy

Hello K,
Just wanted to thank you for the systemic session just now. I found it really powerful and informative. Very much appreciated your time, thank you

ISS

Today, one of our families was stepped off a CP plan and mother cited that F was *'a beautiful social worker'*, in the pre meeting she was very appreciative of her SW interventions.

Systemic Family Therapy

Thank you for the sessions over the last year. It has helped me so much put things into perspective.

You helped me change my perspective on myself and how I should approach things in the future.

SSSU

We have had a meeting with new IRO A a few months ago which, we were really impressed with him, it was a good meeting and he gave us a lot of hope that things will improve for X

MASH

I received a phone call from Today in regards to an incident regarding my son, I would just like to say how helpful R was, and how very understanding she was, she offered me all the help available and took the time to listen to me when I felt no one else was. What a great member of your team!

Assessment

Hi V,
I just wanted to say thank you so much for being my first and best social worker you've done such an amazing job and i'm actually gonna miss you so much

Conclusion and recommendations

We have seen a decrease in the number of Stage 1 complaints in 2022-23 and in those progressing 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. Whilst there have been improvements, response times are not yet 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 Director of Children's services has been appointed from her Assistant Director role and has worked closely with the manager of the complaints team to taking forward learning in a more robust timely manner.

Liquid Logic, the Social Care case recording system was due to be further developed in 2022-23 however this work was halted due to a new Complaints & Information case management system being procured with ROL Solutions. Work is currently underway with building the system and testing will take place in the near future and should prove a better tool to record and report complaints.

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 Director of Children's Services will continue to collaborate on in 2023-24.

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 are better recording compliments, teams will again be reminded to forward compliments for recording purposes, as we are aware the numbers may not be representative of all compliments actually received recognising the good work being done within teams. Managers and staff will be reminded to record compliments with the Complaints & Information Team

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Complaints and Compliments Action Plan

	Task / Action	Owner	By Date	Intended Outcome / Impact	Target Completion Date	Quarterly Update
1	<p>Continue to review and update process as necessary for receiving, allocating and responding to complaints within Children's Services including clear roles and responsibilities when new complaints recording system is launched.</p> <p>Further development of the 'closing the loop' interview with complainants after the complaint is resolved.</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/ Johannah Philp	By April 2024	Response timescales will be improved with a clear process in place, and regular senior management oversight.	The revised process to be in place by October 2023	
2	<p>Quarterly meetings between SCCI team and children's senior management team to be diarised and quarterly presentation of complaints and compliments themes to extended managers meeting</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 / Johannah Philp	By June 2023	Improved management oversight of complaints, themes and learning -will improve the timeliness and quality of responses	Meetings will take place quarterly during '23-'24	

Page 99

Children's Services Annual Complaints and Compliments Report 2022-23

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 24	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 Nov 2023	
4	All managers to ensure that compliments are captured and shared with SCCI team for collation and reporting. SCCI 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/ SCCI	From April 23	Compliments are recognised and celebrated with the workforce and any learning from good practice is utilised.	As received and 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 staff PDR's for all case holding practitioners and managers.	All Heads of Service and Group Managers	From April 23	Improved case recording should result in fewer complaints regarding improper or inaccurate recording of information.	To be in all PDRs for 2023/24	
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 23	Practice development and learning is disseminated across the service to ensure positive changes occur as a result of serious incidents during practice weeks.	TBC	
7	Process to be developed for families to be notified in writing of any significant changes to service delivery, and the reasons why e.g., new social worker or any significant	Tamsyn Basson / Helen Harding	From April 23	Improved communication regarding significant changes should result in fewer	September 2023	

Children's Services Annual Complaints and Compliments Report 2022-23

	decisions made (for example, family time arrangements, change of care plan or end of intervention)			complaints regarding poor communication		
8	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	From April 23	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	
9	All responding managers to ensure that complaints and responses are shared with relevant staff members and are discussed during supervision meetings	All Heads of Service, Group Managers and Team Managers	From April 23	Learning from complaints and accountability	On-going	
10	Managers to include complaints and compliments as a standing item on team meeting agendas	All Heads of Service, Group Managers and Team Managers	From April 23	Learning from complaints and accountability	On-going	

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APPENDIX 2

Children's Services - Learning & Achievement

Annual Report 2022 – 23 Complaints and Compliments

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

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

	<u>Contents</u>	<u>Pages</u>
	Executive Summary	3
1	Ombudsman Referrals	4
2	Total Number of Complaints	4
2.1	- Service Areas	4-5
2.2	- Themes	5-6
2.3	- Outcomes	6-7
2.4	- Response Times	7-8
3	Members Correspondence	8-9
4	Method of contact	9
5	Compliments	10
6	Conclusion	11

Executive Summary

At the London Borough of Havering our Education Service is focused on 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 developed and maintained 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 is 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's social care statutory processes around Children in need, Child protection and looked after Children.

We saw the number of Corporate complaints decrease within the 2022- 2023 period. We did however receive , many complaints relating to schools, the majority of which need to be referred to the school's 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 for both corporate complaints and enquires have improved significantly to 81% in 2022 – 2023 being responded to within timescale, compared to 65.3% in 2021-22 despite numbers received increasing by over 80%.

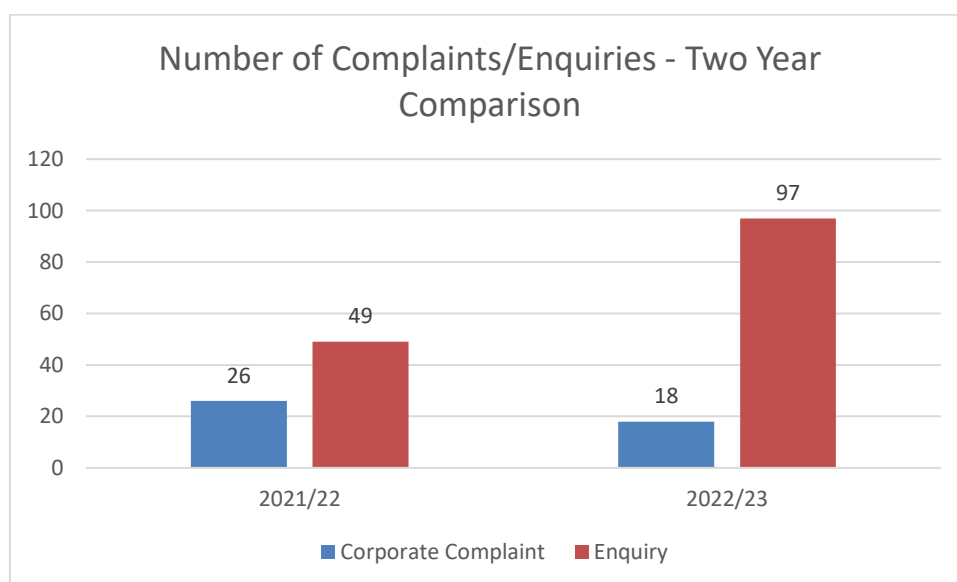
Our action plan for 2023 – 2024 is focused on continuing to improve response times, across complaints. We are also focused on improving the member enquiry response times which were slightly down, on 2021 – 2022 figures.

1. Ombudsman referrals

Encouragingly there has been only one Ombudsman enquiry for 2022-23 however this was not investigated due to robust evidence of the actions taken by Havering Services being provided.

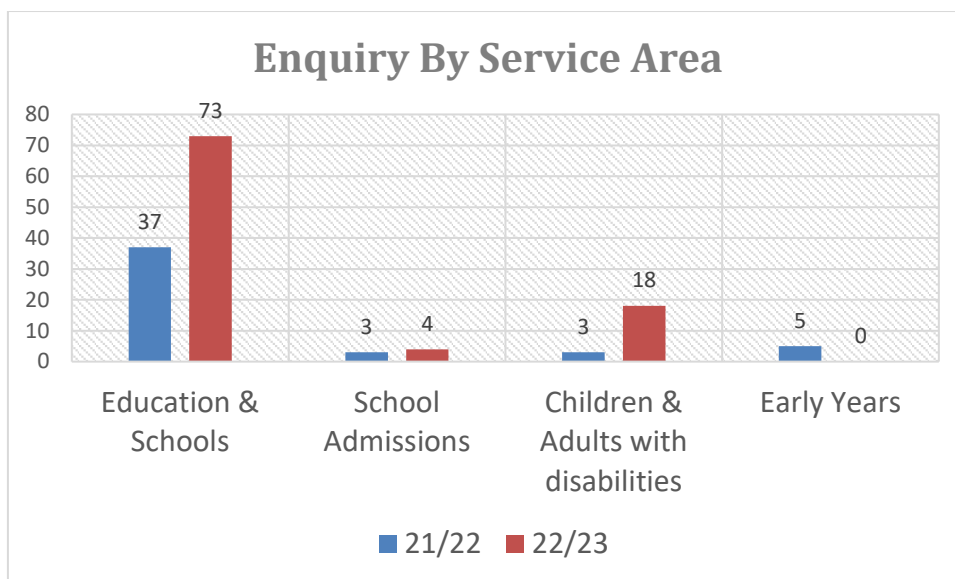
2. Total number of complaints

The total number of Corporate Complaints has decreased by 30% from 26 in 2021 - 2022 to 18 in 2022-23, and these are reported within the Corporate Complaints reports. However, enquiries have significantly increased by 51% to 95 in 2022-23 from 49 in 2021-22. Enquiries are complaints received by the authority that relate to schools, academies or colleges that may need to be taken through their own complaints procedure. It is likely that the increase in enquiries received relating to schools is a result of schools returning to normal practice following the Covid-19 pandemic.

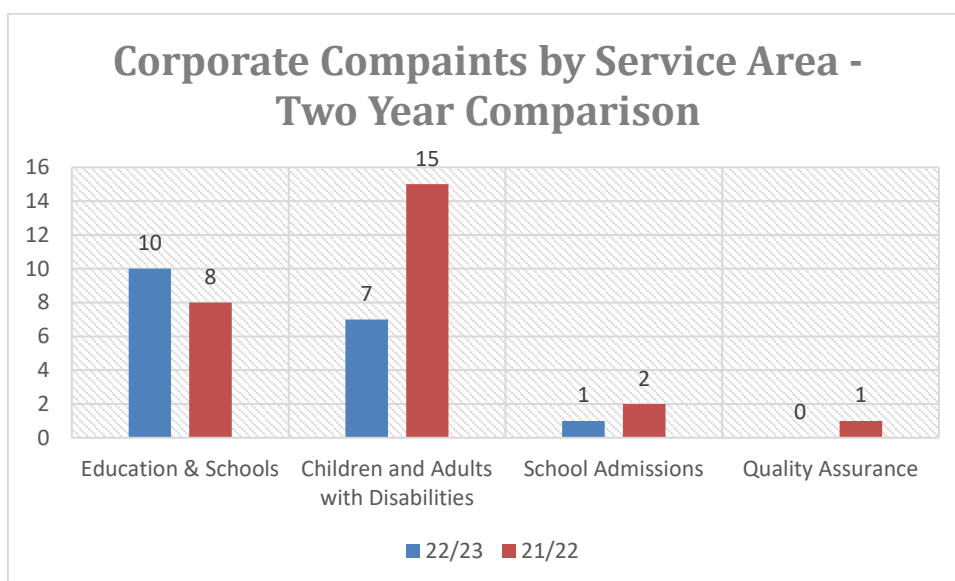


2.1 Service Areas

The following chart (2) shows the breakdown of enquiries received in 2022-23. As expected the highest number (73) are those for Education & Schools, referred to the relevant education provision.

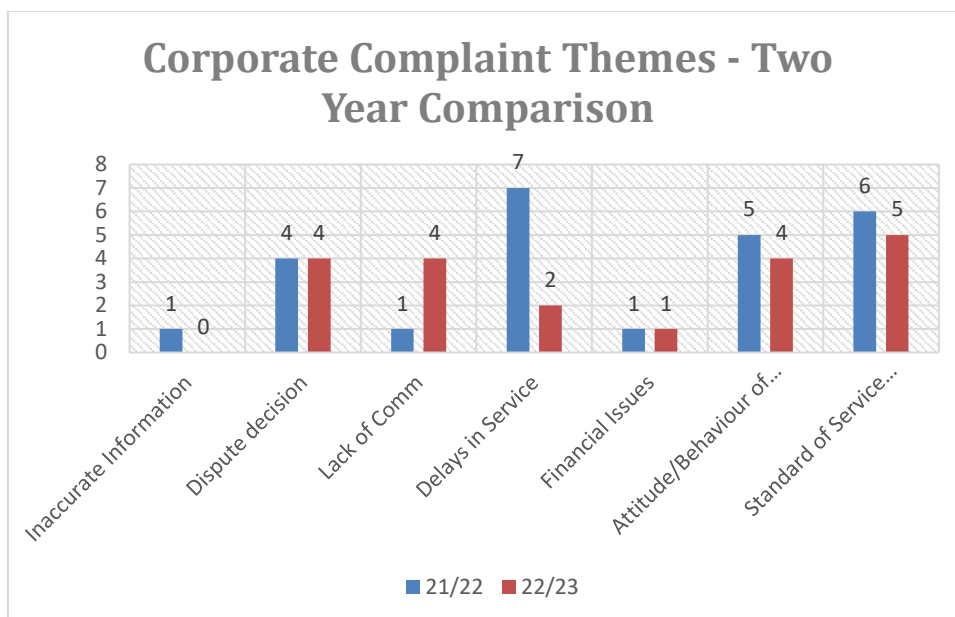


The following chart (3) shows the breakdown of Corporate complaints received. Across the teams 2022-23 saw a reduction in the number of corporate complaints received with the exception of Education & Schools where there has been a small increase.

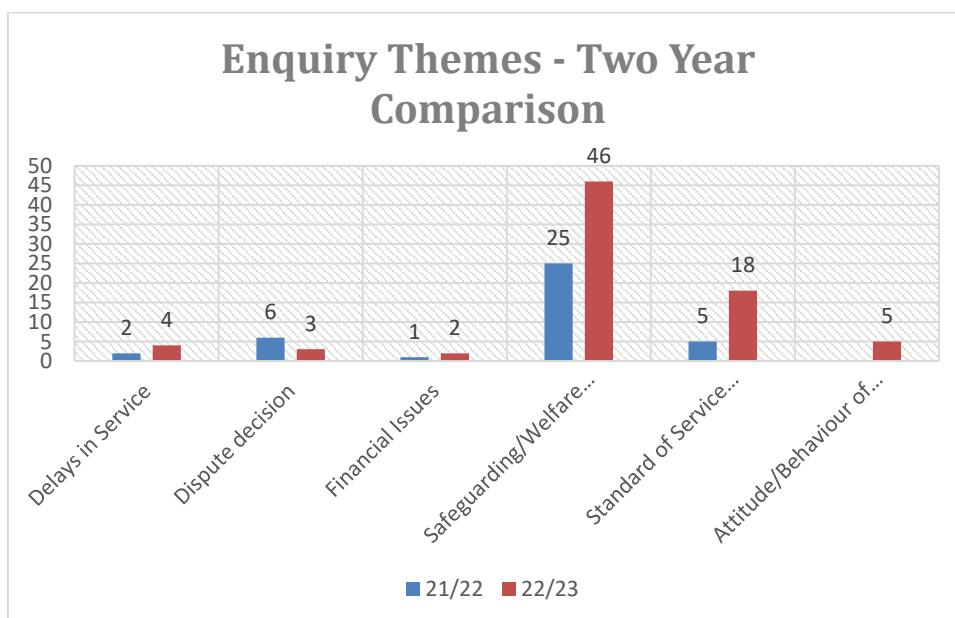


2.2 Themes

The Chart (4) below shows the breakdown of Corporate Complaints themes. Dispute decisions, Lack of communication, standard of service not being met and attitude/behaviour of staff are the main reasons for complaints received. Encouragingly there has been a reduction in the number of complaints received in relation to delays in service during 2022-23 to two from seven in 2021-22.



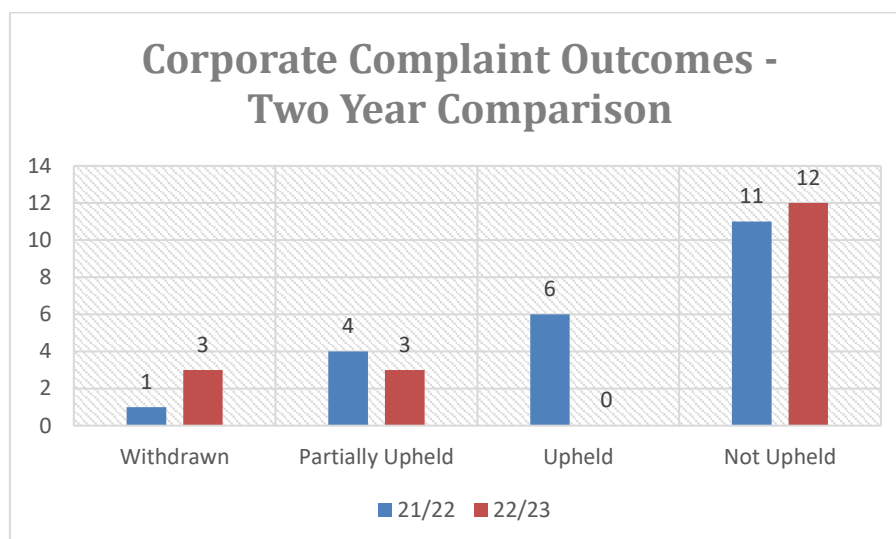
The chart below (5) shows a breakdown of themes for enquiries received and relate to those complaints relating to schools, academy or college issues. The main reason by far is safeguarding/welfare concerns which make up 59% of all enquiries received, 83% of which were received from Ofsted. There has also been an increase of 28% in the number of enquiries received in relation to standard of service not met in 2022-23 to 18 compared to five in 2021-22, these generally relate to a lack of support being provided by the education provision.



2.3 Outcomes

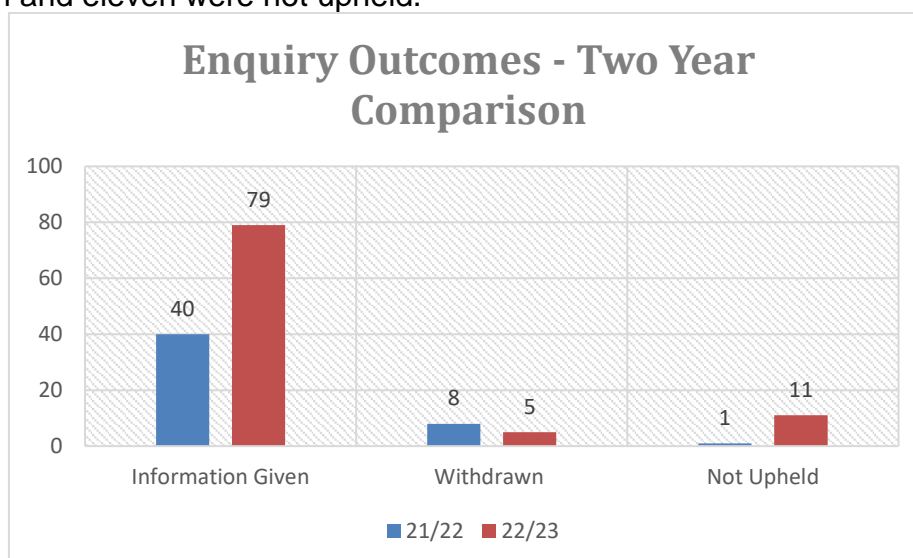
Corporate Complaint Outcomes

Of the Corporate Complaints received in 2022-23, 12 were not upheld and explanations were given, 3 were partially upheld and explanations given, no complaints were upheld and 3 were withdrawn. Upheld complaints are always reviewed in order to feed into learning for the service and to identify areas for improvement.



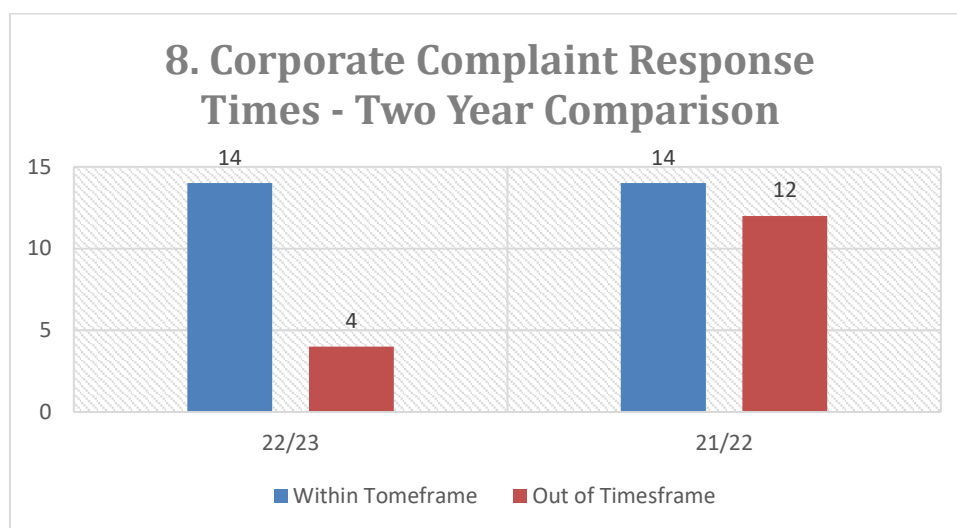
Enquiry Outcomes

Enquiry outcomes are shown below with 79 being 'information given' to advise complainants of the correct process. There was a 50% increase in the number of Ofsted enquiries received in 2022-23. 59% of the enquiries received from Ofsted were mainly in relation to safeguarding concerns, these enquiries are routinely sent on for the attention of the Assistant Director for Education Services, and some may result in follow-up enquiries with the school or academy. Five enquiries were withdrawn and eleven were not upheld.

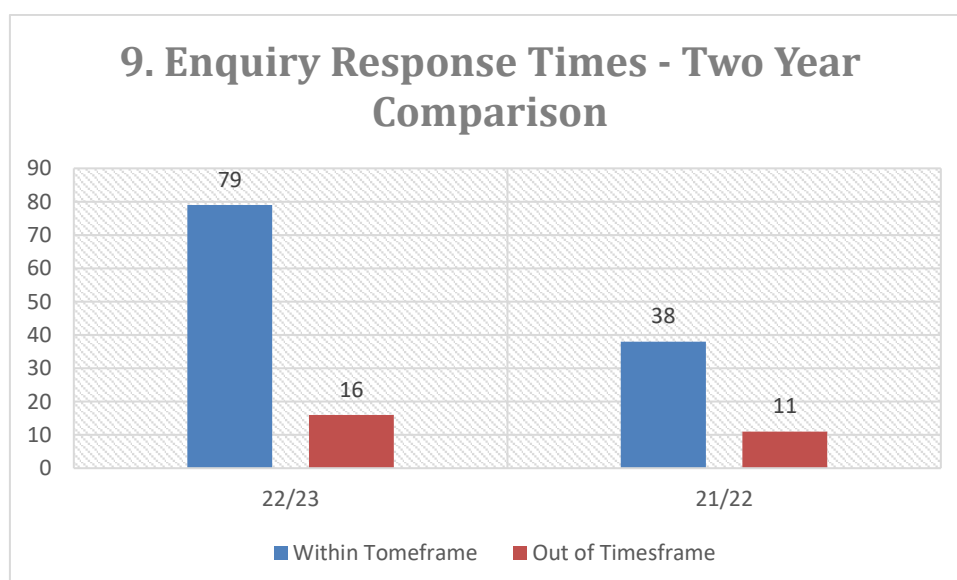


2.4 Response times

There has been a slight reduction in the number of corporate complaints being responded to within timeframe down to 77% during 2022-23 compared to 85% in 2021-22. However, we have hypothesised this is likely due to the higher volume of enquiries that were received throughout the year.

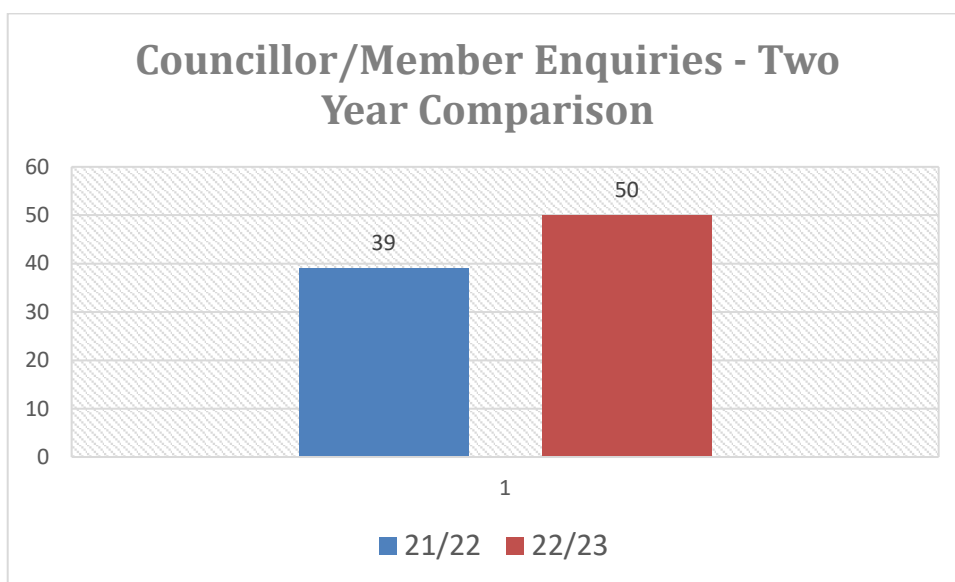


Of the 95 enquiries received during 2022-23, 79 (80%) were responded to within timeframe an improvement on the 72% in 2021-22, coupled with the fact that the number of enquiries received rose by 93% in 2022-23, this is very encouraging.



3. Members' Correspondence

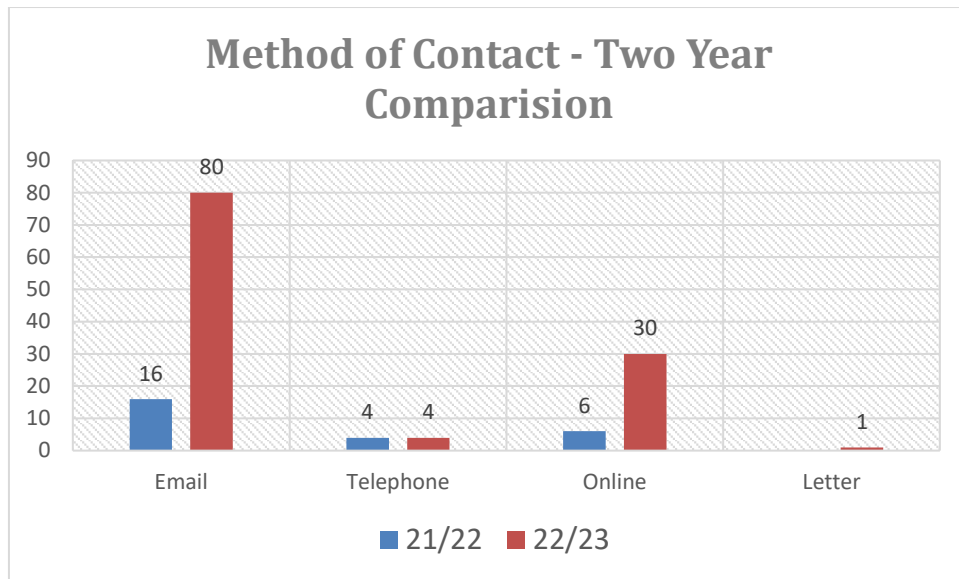
Councillor and Member enquiries increased by 28% to 50 in 2022/23 compared to 39 in 2021/22, with 92% being responded to within timescale. It should be noted that it is likely that there may have been many more enquiries than the numbers being reported here due to them being sent directly to officers within the service. Officers are reminded to ensure that SCCI is aware of such enquiries so that we can report on them more accurately.



4. Method of Contact

Email continues to be the preferred method of contact for Corporate Complaints and Enquiries in 2022/23 at 69%. Despite numbers still being relatively low, we have seen an encouraging increase in those coming through online with a rise of 80% from six in 2021-22 to 30 in 2022-23.

Havering is currently in the process of procuring a new complaints and information case management system from ROL Solutions, Freedom of Information requests will be rolled out first, followed by Subject Access Requests, and then complaints. It is hoped that this will enhance user experience and improve on reporting capabilities.



5. Compliments

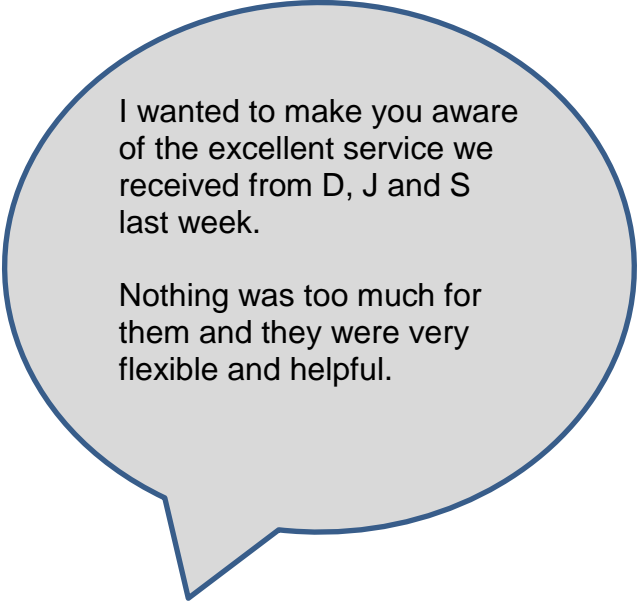
There was an increase in the number of compliments received for Education from two in 201-23 to 13 in 2022-23, however, the low numbers reported here are likely to be a result of compliments not being shared with SCCI by the officers within the service. Officers are reminded to share all compliments so that we are able to accurately reflect the good work being undertaken.

Overall, the service provided is exceptional and impactful

We have found the service of a superior quality and we really appreciate your time and efforts.

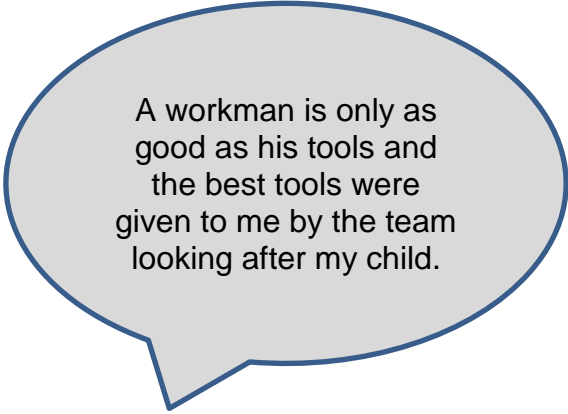
It's a real relief, I can't describe just how elated I am. So, this is just a little note from me on behalf of J to say we are grateful and what you do makes a big difference.

Doing a job is one thing but to understand you job and do it with love and dedication is something which B is an expert in. Thanku so much for all the help love and affection u have given to H me and my family.♥



I wanted to make you aware of the excellent service we received from D, J and S last week.

Nothing was too much for them and they were very flexible and helpful.



A workman is only as good as his tools and the best tools were given to me by the team looking after my child.

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, and 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 2022-23 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.

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**PEOPLE OVERVIEW &
SCRUTINY SUB-COMMITTEE**

Subject Heading:

REPORT INTO ADULTS WITH
DISABILITIES PROVISIONS TOPIC
GROUP

Cabinet Member:

Gillian Ford – Deputy Leader of the
Council and Cabinet Member for Adults
and Health

SLT Lead:

Barbara Nicholls - Strategic Director of
People

Report Author and contact details:

Anisah Rahman– National Management
Trainee
Anisah.Rahman@havering.gov.uk

Policy context:

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

Financial summary:

Should the decision be agreed that will be
the subject of a separate Report-
Recommendation 1 would need further
work to identify an appropriate budget

Is this a Key Decision?

No- a non-key decision

When should this matter be reviewed?

March 2024- Ahead of the new financial
year and subject to Cabinet approving the
initial recommendations highlighted in the
report- the appropriate considerations will
be undertaken to assess the job post
grading and position under the new TOM
structure.

Reviewing OSC:

People OSSC

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

People - Things that matter for residents **X**

Place - A great place to live, work and enjoy

Resources - A well run Council that delivers for People and Place.

SUMMARY

This report contains the findings and recommendations that have emerged after the Topic Group scrutinised the topic selected by the Committee in December 2022.

RECOMMENDATIONS

That the People OSSC:

Note the report and recommendation of the adults with disabilities provisions Topic Group (attached):

1. Agreed to ask Cabinet to agree in principle that, subject to sufficient funding being available, Havering to employ a specialist Supported Employment Adviser for adults with disabilities to work alongside day provision and support transition to internships and paid employment. If agreed, authorisation to create this post will be delegated to the appropriate member of the Executive Leadership team.
 - a. Improving employability opportunities and the delivery of such routes ensuring accessibility for all with the Council engaging with adults with disabilities by supporting and signposting these opportunities, and creating relationships with local businesses to employ adults with disabilities.
 - b. Create an action plan/recommendations aligned to actions in the All Age Autism Strategy
 - c. Develop schemes with local businesses to help provide employment opportunities for adults with disabilities over the age of 25
 - d. Employers to complete the Oliver McGowan mandatory training in line with national legislation passed July 2022

- e. Expanding Council operated services for jobs i.e Avelon Day Centre, explore options around social enterprise schemes

- 2. Ensure Havering's local offer (covering ages 16-25) is comprehensive and detailed with signposting to identify current apprenticeships available for young adults with disabilities.

- 3. To create, maintain and monitor "Quality Standards" for providers within Havering and benchmarking against other North East London boroughs. Setting standards in place to monitor the quality of provisions and their individual, tailored offer to service users. Establishing a formal framework for providers to set their standards against including frequency of monitoring and inspection.
 - a. A specialised, meaningful set of activity programs for 25+ residents with disabilities - with person-specific requirements to help improve the quality of the services provided.

REPORT DETAIL

At its meeting in December 2022, the Peoples' Overview & Scrutiny Sub Committee agreed to establish a Topic Group to review the adult SEND provisions within Havering.

Below is a copy of the Topic Group's report. The report includes details of the research that it undertook in reaching the conclusions and recommendations set out.

BACKGROUND

At its meeting on 6 December 2022, the People Overview & Scrutiny Sub-Committee commissioned a Topic Group for an insight into the current provisions available for adults with a range of disabilities within Havering including learning disabilities and autism, but also people with physical and sensory disabilities and mental health issues.

The terms of this review related to the impact on adults with disabilities over the age of 25 years old, exploring the avenues into employment and opportunity within Havering.

The Group established a timetable to hold meetings with Council officers and third sector providers.

The Topic Group consisted of Councillors Darren Wise (Chairman) Jacqueline McArdle and Julie Lamb, (Special) Statutory member representing SEND parents. On many occasions due to other competing priorities, Councillor Darren Wise and Julie Lamb carried out the scrutinising of the meetings and objectives.

The Group met fortnightly between January 2023 to March 2023 and has now concluded its review; identifying recommendations and findings which are detailed in this report.

THE SCOPE OF THE REVIEW

The focus for this Topic Group concentrated on the following key areas:

- To understand the current access routes to education and employment as well as social care provisions for adults with disabilities and to assess their strengths and weaknesses
- Create and then monitor a local authority quality assurance process and written framework for current and future adult day service provisions
- Signposting for current 16-25 provisions and employment opportunities and improving the content of the local offer
- Investigate current employment provisions for 25+ and explore the areas to improve employability opportunities
- Scrutinise Havering Borough's own delivery to modernise/update the current service model in place

METHODOLOGY

The Group agreed that the list of people to be interviewed would comprise the following members of staff and external colleagues:

Carmel McKeogh, Director of Operations, DFN Project Search Foundation
Amanda Montague, Employment and Skills Team, LBH
Andrew Sykes, Service Manager for Disabilities, Adult Social Care, LBH
Samantha Saunders, Commissioning Programme Manager – Disabilities, Joint Commissioning Unit, LBH

Members were grateful for the commitment of staff and witnesses to the review, many of whom took time out of work hours to contribute to the review.

THE REVIEW

The notes of the topic group meetings and discussions are attached to this report. Set out under the heading **RECOMMENDATIONS** are the key issues that emerged from the topic group's scrutiny.

MEETINGS

The Topic Group met on nine occasions conducting the review between January to March 2023:

30th September 2022- Scope finalising

15th December 2022- Initial Plan Discussion

10th January 2023

19th January 2023- Discussion with DFN Project Search representative

7th February 2023- Discussion with Sam Saunders, Commissioning Programme Manager, JCU and Andrew Sykes, Services Manager, Disabilities Management Team

21st February 2023- Cost Evaluation of DFN Project Search within Havering

7th March 2023 – Discussion with Councillors Gillian and Oscar Ford

21st March 2023

27th March 2023

The first meeting held detailed discussions on the timeline and speakers to consult for the meetings. At the second meeting, a representative from DFN Project Search presented information on the programme (see Appendix A- DFN Presentation). After consulting with the representative, the costs of running the adult programme were sent over (see Appendix B), alongside a spreadsheet from Amanda Montague into the start-up costs for the planning year and the annual cost of running a three-year pilot (see Appendix C). After a cost benefit analysis was taken into consideration, the group decided to withdraw it as a possible recommendation.

Officers from the Joint Commissioning Unit and Disabilities Management Team within Havering provided their involvement around quality assurance functions provided for adults with disabilities currently.

FINDINGS

1. Day Care Provisions and Quality Standards

Members consulted with Havering Officers managing the current adult day care provisions and shared concerns over the lack of quality assurance guidelines and frameworks in place for provisions for adults with disabilities. Members were pleased to hear Officers were carrying out initial benchmarking and identifying neighbouring boroughs who similarly do not have a quality standard in place but

instead commit to yearly audits. Moving forward there is a working group for the North East London boroughs and a working group for London Wide Boroughs to discuss and implement a standard as a whole. Once the working groups are set up and a meeting held with Havering Officers, then they will report back with updates.

2. Employability Schemes and Transitioning Process

Members noted many of the current schemes in place for SEND provisions were allocated to those within the age group of 16-25 year olds due to the Education Health Care Plan funding available within the timeframe. Members considered the weakness in the lack of progression from internship to paid employment available for those aged 25+ years with disabilities, transitioned support from day provisions into paid employment, and the limitation of having three Officers dedicated to the general service of supporting unemployed adults into work who may or may not have disabilities. Members noted employing a specialist Supported Employment Adviser for adults with disabilities to work alongside day provision and support transition to internships and paid employment would be beneficial.

Appendices A- DFN Project Search

Appendices B- Report Temp for LA's Adult Programme

Appendices C- DFN Projected Costs

REASONS AND OPTIONS

Reasons for the decision:

The Council should continue to support employment of adults with disabilities and enable wider employment opportunities with the borough. Improving employability opportunities and the delivery of such routes ensuring accessibility for all with the Council engaging with adults with disabilities by supporting and signposting these opportunities, and creating relationships with local businesses to employ adults with disabilities.

Other options considered:

An option that was considered was implementing a Local Authority adult programme run by DFN Project Search, however the financial commitment and estimated running costs were high.

IMPLICATIONS AND RISKS

Financial implications and risks:

Recommendation 1 in this report will have financial implications, further work and a restructure report will need to be undertaken in order to identify the full financial implications and appropriate budget to identify the resources to fund the recommendation. The level of funding required would be established with the grading of the post. This service funding could be considered as part of the ongoing TOM work. Recommendations 2 and 3 have no financial implications.

Legal implications and risks:

The Local Authority has duties under the Children and Families Act 2014 to ensure that any educational provision required for an adult in the age range 18-25 and set out in an Education, Health and Care Plan (EHCP) is provided.

There have been recent amendments to the Health and Care Act 2008 which impose requirements on relevant health and care bodies to provide mandatory training to their employees on learning disability and autism (known as “McGowan training”).

The Committee cannot make an executive decision to implement the recommendation in this Report and if this is to be approved it will have to be considered by an executive decision maker before it can be implemented. It will of course have financial implications which may be relevant for any ultimate executive decision maker to consider.

Human Resources implications and risks:

The recommendations will require the creation of and recruitment to a new post of Supported Employment Adviser for Adults with disabilities which will be managed in accordance with the Council’s policies and procedures.

Equalities implications and risks:

None directly although the successful adoption of the recommendations in the Topic Group's report would serve to support adults with disabilities with employment and working skills in Havering.

Health and Wellbeing implications and Risks

Employment has positive impacts on health and wellbeing of individuals including those with disabilities. Access to Work Advisers are known to be effective when they are trained to the required standards and are supported by the local system. Therefore, adequate training and management support must be ensured to see results. Volunteering as health champions by the adults with disabilities may not only strengthen their job applications in care sector, but will increase their own knowledge on health and wellbeing which take can subsequently to support wellbeing in their workplaces.

ENVIRONMENTAL AND CLIMATE CHANGE IMPLICATIONS AND RISKS

There are no environmental and climate change implications and risks

BACKGROUND PAPERS

None

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of the Local Government Act 1972.

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of the Local Government Act 1972.

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