

# **Royal Borough Windsor & Maidenhead**

## **Adults and Children's Services Social Care Compliments and Complaints Annual Report**

**1 April 2014 – March 2015**

**“The Royal Borough of Windsor & Maidenhead is a great place to live, work, play and do business supported by a modern, dynamic and successful Council”**

**Our vision is underpinned by four principles:**

*Putting residents first*

*Delivering value for money*

*Delivering together with our partners*

*Equipping ourselves for the future*

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2014 – 15

### **Frequently used acronyms**

LGO	Local Government Ombudsman
RBWM	Royal Borough of Windsor and Maidenhead

## **NATIONAL, LOCAL AND LEGISLATIVE CONTEXT**

### **Children's services**

The legislation requires all local authorities to produce and publish an annual report.

The statutory Children's Services complaints process changed in September 2006 following new regulations and guidance, 'Getting the Best from Complaints'; the changes were designed to place a strong emphasis on learning from complaints and representations. The guidance emphasis is that "vulnerable children and young people must get the help they need, when they need it, however large or small their complaint". The scope of what can be complained about was also expanded and prospective adopters and foster carers are included as 'qualifying individuals' who can complain under the social care process. Qualifying individuals are defined in national guidance as the child or young person, their parent, carer or foster carer or 'anyone who could be seen to be acting in the best interests of the child.'

The Council's complaints procedures reflect national guidance on best practice. The statutory social care complaints procedure for children and young people seeks to ensure that they have their concerns resolved swiftly, and to support a culture where feedback received drives service improvement. The complaints process is, therefore, an integral part of a quality assurance framework.

### **Adult services**

Local Authorities have a statutory duty to have in place a complaints and representations procedure for Adult Social Care services. Furthermore, each local authority that has a responsibility to provide social care services is required to publish an annual report relating to the operations of its complaints and representations procedures.

The NHS and Community Care Act 1990 and the Children Act 1989 placed a statutory requirement on local authority social care departments to have a complaints procedure in place. The legislation and associated guidance was prescriptive about how the procedure should operate in practice. The procedures for children and adults were broadly similar but subsequent Regulations led to changes.

The Local Authority Social Services and NHS Complaints (England) Regulations 2009 introduced a single approach for dealing with complaints for both the NHS and Adult Social Care. Whilst there are some important differences in the operation of the complaints procedure to meet statutory requirements, the overarching approach and ethos is consistent across the Directorates.

The legislation requires Local Authorities to appoint a Complaints Manager, for Adult's and Children's Social Care who is responsible for the operation of the Complaints Procedure. This includes all aspects of activity:

- Managing, developing and administering the complaints procedure
- Providing assistance and advice to those who wish to complain
- Overseeing the investigating of complaints that cannot be managed at source
- Supporting and training existing and new members of staff
- Monitoring and report on complaints activity.

For Adult Social Care there was a significant change to the complaints procedure in 2009 with the introduction of Regulations with the objective of delivering a consistent approach to complaints handling for both health and social care.

The key principles of the existing procedure are:

- **Listening** establishing the facts and the required outcome
- **Responding** investigate and make a reasoned decision based on the facts/information
- **Improving** using complaints data to improve services and influence/inform the commissioning and business planning process.

## **1. INTRODUCTION**

- 1.1 This annual report covers the period of 1 April 2015 – 31 March 2016 and reports on the complaints and compliments made by or on behalf of adults, children, young people and other customers using the Council's social care services<sup>1</sup>. It is a statutory requirement to produce an annual report and publish this on the local authority's website.
- 1.2 The report details the number of complaints, representations and compliments received, the Council's performance in responding and handling these and how services have been changed/improved as a result.
- 1.3 The report has been organised across a number of sections. Section two of the paper provides an overview of the complaints process as it currently operates followed by an overview of the national policy and legislative context that governs how local authorities manage this area of work. The final sections provide details of the number of complaints, representations and compliments received and the Council's performance in respect of handling, responding and resolving these. This section also covers how the Council has used customer feedback as a mechanism to drive forward service improvement.

## **2 COMPLAINTS PROCEDURES**

- 2.1 Overall responsibility for services delivered through the Adult Services and Children's Services Directorates rests with the Strategic Director who works closely with the Lead Members.
- 2.2 An important facet of the statutory complaints process within RBWM is the independence of the post of complaints coordinator. Whilst working to the Adults and Children's Directorates, the complaints coordinator post sits within the Operations Directorate and has an arms length relationship with adults and children's services colleagues. This ensures there are no conflicts of interest and enables independent and impartial challenges to be made.

### **Children's services complaints**

- 2.3 RBWM's complaints process for children's social care comprises three stages:

#### **Stage one: local resolution**

- 2.4 This initial stage allows the opportunity to try and resolve issues of dissatisfaction by meeting with managers and staff who have responsibility for the case. Alternative Dispute Resolution meetings (ADR) are offered to

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<sup>1</sup> Please note that this report does not cover corporate complaints or complaints about the other services offered through the Adults and Children's Services Directorates.

complainants at stage one to promote agreed local resolution at the earliest possible stage. ADR meetings are also used at other points of the complaints process.

### **Stage two: independent investigation**

- 2.5 When a complaint has not been resolved to the satisfaction of the complainant at the conclusion of Stage 1, it moves to stage 2. This involves a full and formal investigation by an independent external investigator. The external investigator produces a report, which is submitted to the Director for his/her consideration.
- 2.6 An 'Independent Person' may also be appointed to oversee the investigation and report independently to Children's Services.
- 2.7 The final decision rests with the Director regarding the outcome of the complaint. The Director will write to the complainant including a copy of the findings of the investigation report and the recommendations made.

### **Stage three: review panel**

- 2.8 A review panel is convened when the complainant is either dissatisfied with a Stage 2 investigation or the response from the Director. The Panel comprises three independent people.

### **Adult services complaints**

- 2.9 The NHS and Community Care Act 1990 and the Children Act 1989 placed a statutory requirement on local authority social care departments to have a complaints procedure in place. The legislation and associated guidance was prescriptive about how the procedure should operate in practice. The procedures for children and adults were broadly similar but subsequent Regulations led to changes.
- 2.10 There are some important differences in the operation of the complaints procedure between children's services and adults' services to meet statutory requirements.
- 2.11 The legislation requires Local Authorities to appoint a Complaints Manager, for Adult's and Children's Social Care who is responsible for the operation of the Complaints Procedure. This includes all aspects of activity:
- Managing, developing and administering the complaints procedure
  - Providing assistance and advice to those who wish to complain
  - Overseeing the investigating of complaints that cannot be managed at source
  - Supporting and training existing and new members of staff
  - Monitoring and report on complaints activity.

- 2.12 For Adult Social Care there was a significant change to the complaints procedure in 2009 with the introduction of Regulations with the objective of delivering a consistent approach to complaints handling for both health and social care.
- 2.13 The key principles of the existing procedure are:
- **Listening** establishing the facts and the required outcome
  - **Responding** investigate and make a reasoned decision based on the facts/information and
  - **Improving** using complaints data to improve services and influence/inform the commissioning and business planning process.

### **The Local Government Ombudsman**

- 2.14 Although complainants can refer complaints onto the Local Government Ombudsman (LGO) at any stage, the LGO will not normally investigate until the local authority have exhausted the complaint procedure including, in the case of children's services, holding a Stage 3 Review Panel.

### **Improvements**

- 2.16 The council will continue to commit, adhere to and support the statutory complaints process, therefore putting service users first. The organisation will continue to improve the transparency and efficacy of the complaints process, increasing the current growing confidence on the part of service users to submit complaints with the understanding that the Council will take these seriously and respond. It will also continue to increase confidence amongst professionals through the use of 'good practice' from the statutory complaints process both internally and externally.
- 2.17 Robust relationship building, better understanding, recording, monitoring, evaluation, reporting and training will continue to contribute to raising awareness of the statutory complaints process, and identifying key themes and learning outcomes, which will assist the council to promote best practice throughout the directorates.
- 2.18 RBWM does not currently request demographic information from complainants; however, for equality monitoring purposes and in particular to identify whether all sections of the community are accessing the process, further work will be undertaken to improve the gathering and use of demographic data (race, gender and disability). This will, however, remain voluntary with service users not being obligated to provide this should they choose not to.
- 2.19 Adult Care Complaints responses are required to be proportionate to the issues raised. The only timescale in the process relates to the acknowledgement of the complaint, which is within three working days from



receipt. Although the regulations do not stipulate a time frame for further response, the Royal Borough of Windsor & Maidenhead aims to respond within 10-20 working days. This fits with the Local Authority's Corporate Complaint response time frame and the previous social care complaints regulations, and promotes good practice.

- 2.20 The One Stage response approach means staff must gauge how serious and what potential risks are involved with the complaint, and based on this carry out an appropriate investigation in to the complaint. This may be at Team Manager, Service Manager, Head of Service or Director-level. Depending on the complaint/complainant it may also be necessary to work with an independent investigating officer.
- 2.21 All complaints received, along with comments and compliments, are recorded on a complaints database. The database provides a formal record enabling monitoring of workflow, and is used to produce data on the number and types of complaints received by the directorate.

### **3. SUMMARY OF COMPLAINTS ACTIVITY, QUALITY ASSURANCE & LEARNING**

- 3.1 It is important to stress that there could be many factors that affect the level or number of complaints, such as satisfaction, access to and awareness of the complaints process; the extent of promotional activity to raise awareness; outreach work and so on. Therefore a high level of complaints cannot be simply interpreted as negative, nor conversely does a low level of complaints necessarily reflect a strong service area and high satisfaction. The following should not be read as a commentary on the 'quality' of the Children's services social care function. Rather this report is intended to provide an overview on complaints activity captured during the period covering April 2014 – March 2015, how the Council responded to the complaints received and what learning has been adopted to improve practice and services.

#### **Overview: Children's services**

- 3.2 During the period 2014/15, 61 statutory complaints were referred to Children's Social Care Services for investigation. This is less than in 2013/14 when 90 complaints were received.
- 3.3 Of the 61 complaints received during 2014/15:
- 13% related to the Child in Need Service.
  - 21% related to the Safeguarding and Child in Care Service.
  - 35% related to the Children and Young People Disability Service .
  - 21% related to the Referral and Assessment Service.
  - 10% of complaints received were spread across the remaining service areas.

- One complaint was withdrawn by the complainant after the investigation had commenced.
  - All of the complaints were investigated and responded to at stage 1.
  - There were no stage 2 or stage 3 investigations.
  - There were 34 contacts recorded that were not complaints, of which 30 were from MPs or Councillors.
- 3.4 100% of all complaints recorded were resolved at Stage 1. The resolution of such a high percentage of complaints at Stage 1 is very positive and demonstrates that Social Care staff and the Complaints Co-ordinator are ensuring that the complainant's views and the outcomes they require are listened to and documented.
- 3.5 The timescale for dealing with Stage 1 statutory Children's Services Social Care complaints is 10 working days. However, this can be extended to 20 working days for more complex complaints or if additional time is required. Of the 61 that were received during 2014/15, 46% were responded to within timescales.
- 3.6 Complaints that were responded to outside of timescales were complex issues requiring further investigations. Where there is a delay in the process, the Complaints Co-ordinator will continue to liaise with the complainant, providing the reasons for the delay and negotiating new timeframes..
- 3.7 The Local Government Ombudsman (LGO) referred three statutory complaints in 2014 – 2015, which compares to one in 2013 – 2014, an increase of 200%.

**Overview: Adults services**

- 3.8 During the period 2014/15, 21 statutory complaints were referred to Adults Social Care Services for investigation. This is less than in 2013/14 when 78 complaints were received.
- 3.9 Of the 21 complaints received during 2014/15:
- 14% related to the Community Mental Health Team.
  - 10% related to the Community Team for People with Learning Disabilities.
  - 33% related to the Hospital Team.
  - 19% related to the Long Term team.
  - 24% of complaints received were spread across the remaining service areas.
  - Three complaints were withdrawn by the complainants after the investigations had commenced.
  - All of the complaints were investigated and responded to at stage 1.
  - There were no stage 2 investigations.

- There were 3 contacts recorded that were not complaints, of which 3 were from MPs or Councillors..
- 3.10 100% of all complaints recorded were resolved at Stage 1. The resolution of such a high percentage of complaints at Stage 1 is very positive and demonstrates that Social Care staff and the Complaints Co-ordinator are ensuring that the complainant's views and the outcomes they require are listened to and documented.
- 3.11 The Royal Borough of Windsor and Maidenhead's timescale for dealing with Stage 1 statutory Adults Services Social Care complaints is 10 working days. However, this can be extended to 20 working days for more complex complaints or if additional time is required. Of the 23 that were received during 2014/15, 57% were responded to within timescales.
- 3.12 Complaints that were responded to outside of timescales were complex issues requiring further investigations. Where there is a delay in the process, the Complaints Co-ordinator will continue to liaise with the complainant, providing the reasons for the delay and negotiating new timeframes.
- 3.13 The Local Government Ombudsman (LGO) referred one statutory complaint in 2014 – 2015, the same number as in 2013 – 2014, with two to be determined.

#### **4. COMPLIMENTS**

- 4.1 In addition to logging complaints, the Council also logs compliments received by clients.

##### **Children's compliments**

- 4.2 For 2014/15 there were 10 compliments recorded. The majority of these related to the exemplary practice, support and interventions within the social worker function. Compliments received are fed back to the relevant service areas to ensure due recognition is given to staff. Positive practice is also flagged up at the monthly performance meeting to ensure that learning is shared and disseminated across the directorate.

- 4.3 It is likely that the low level of 10 compliments constitutes an under-reporting of compliments. Improving this remains a priority and more will be done to raise awareness and improve practice in this area.

##### **Adult compliments**

- 4.4 For 2014/15 there were 61 compliments recorded, which is a decrease on 2013/14 figures of 98 compliments. The majority of these related to the exemplary practice, support and interventions by carers and social workers.

Compliments received are fed back to the relevant service areas to ensure

due recognition is given to staff. Positive practice is also flagged up at the monthly performance meeting to ensure that learning is shared and disseminated across the directorate.

- 4.5 It is likely that the decrease in compliments constitutes an under-reporting. Improving this remains a priority and more will be done to raise awareness and improve practice in this area.

## **5. REPRESENTATIONS**

- 5.1 58 representations were made by children in care through their review process. This is a decrease in the number of representations made in 2013/14.
- 5.2 The representations from young people were reported separately from the 61 statutory complaints received through Children's services social care. Representations are logged according to eight generic categories; these were identified by the types of key themes being recorded during 2014-2015 (Complaints Analysis, page 11).
- 5.3 Where representations have been raised and upheld the young person's care plan has been amended accordingly. In addition the issues raised through representations form an integral part of case supervision and learning outcomes for the team and service area.

## **6. QUALITY ASSURANCE**

- 6.1 The Complaint Co-ordinator carries out ad-hoc quality assurance checks of Stage 1 complaint responses to ensure the language and terminology used is made easy for the complainant to understand, particularly if the complaint is from a child, young person or a service user with specific needs. The findings including key themes and recommendations are shared with senior managers at quarterly meetings and reports.

## **7 LEARNING FROM COMPLAINTS**

- 7.1 The number of complaints for Children's Services and Adult Services social care dropped in the last year. It is not clear why this is, as it does not follow the general trend over the last few years. This will be further explored in future annual reports.
- 7.2 Complaints and concerns provide essential and valuable feedback from our clients and customers. Listening to customers and reflecting on examples of where we have not got it right can reveal or highlight opportunities for improvement (for example, a deficiency in practice, communication or service

delivery). Even if a complaint is not upheld there can be learning from that complaint with improvements arising as a result. The complaints process and the feedback gained is an integral part of the quality assurance process, which feeds into the development and monitoring of services. Learning from complaints should be reviewed by Social Care teams regularly at their team meetings and form part of one to one supervision.

7.3 Effective recording, monitoring and evaluating of complaints enables the local authority to also celebrate good practice, and commend positive service delivery and implementation. Learning from best practice, is embraced by the local authority and disseminated to other service areas through Action Learning Sets. Detailed below are some examples of learning outcomes and service improvements made as a result of complaints received during the period 2014/15:

#### 7.4 **Children's services**

- Social Workers to act professionally at all times, and be clear about process.
- Ensure that sensitive information is checked before sharing with parents/service users.
- Transparency with decision making.
- Training on data protection.
- Whilst confidentiality was not breached, the complaint reinforced the need for staff to ensure identity of callers. The complaint also reinforced the need where possible to identify and contact a parent with PR prior to speaking to a child. This has been discussed at Team Meeting.
- To ensure that Service Users fully understand why certain processes and assessments need to be undertaken and why certain decisions are made by the Local Authority and partnership agencies.

#### 7.5 **Adults**

This information was not captured in 2014/15. This has been rectified for the year 2015/16

## Appendix 1

### CHILDREN'S AND ADULT'S SOCIAL CARE SERVICES – COMPLAINTS ANALYSIS 2014 – 15

#### METHODS USED TO MAKE A STATUTORY COMPLAINT

The most popular method of making a complaint (at Stage 1) was via email followed by letter, with phone calls coming last. All complainants are offered either a telephone discussion or a face-to-face meeting with the Complaints Co-ordinator or Investigating Officer at all Stages of the statutory complaints process.

#### DEMOGRAPHIC INFORMATION

RBWM does not currently request this information from complainants however for equality monitoring purposes and in particular to identify whether all sections of the community are accessing the process, further work will be undertaken to improve the gathering and use of demographic data (race, gender and disability). This will however remain voluntary with service users not being obligated to provide this should they choose not to.

The council will continue to commit, adhere to and support the statutory complaints process therefore putting service users first. The organisation will continue to improve the transparency and efficacy of the complaints process, increasing the current growing confidence on the part of the service users to submit complaints with the understanding that the Council will take these seriously and response. It will also continue to increase the confidence amongst professionals through the use of 'good practice' through the statutory complaints process both internally and externally.

Robust relationship building, better understanding, recording, monitoring, evaluation, reporting and training will continue to contribute to raising the awareness of the statutory complaints process, and identifying key themes and learning outcomes, which will assist the council to promote best practice throughout the directorate.

#### COMPLAINTS ABOUT CHILDREN'S SOCIAL CARE SERVICES

The following is an analysis of the complaints received relating to Children's Social Care Services during the year 2014-2015.

**Figure 1: Total number of complaints received from 2007 onwards (including those resolved by ADR and eventually withdrawn)**

Children's Services	2007	2008	2009	2010	2011	2012	2013	2014
	2008	2009	2010	2011	2012	2013	2014	2015
Stage 1	56	47	31	22	18	43	90	61
Stage 2	1	1	2	1	1	1	2	0
Stage 3	0	1	1	1	0	0	0	0

**Figure 2: Complaints received by Children’s Services Teams**

<b>Teams</b>	<b>Number of Complaints</b>	<b>Percentage</b>
Children in Need Service	8	13
Children & Young People Disability Service	22	36
Family Centre Service	1	2
Family Group Conference Service	1	2
Permanency & Placement Service	4	6
Referral & Assessment Team	13	21
Safeguarding and Children in Care Service	12	20
<b>Total</b>	<b>61</b>	<b>100</b>

There were 9 complaint types monitored. These are generic categories as they are corporate definitions for types of complaint

**Figure 3: Types of stage 1 complaints received during 2014/15**

<b>Type of Complaint</b>	<b>Number</b>	<b>Percentage</b>
Service provision	29	48
Conduct or Poor Practice of officers	15	26
Lack of or poor Communication	2	3
Lack of Support	1	1
Lack of information/ or incorrect Information	3	5
Safeguarding issues	1	1
Contact	5	9
Failure to Act	2	3
Financial Issues	2	3
Data protection	1	1
<b>Total</b>	<b>62</b>	<b>100</b>

For 2014/15 the highest grouping is for service provision. This is a return to the trend seen in years 2010 – 2013 (in 2013/14 the highest grouping of complaint issues related to conduct or practice of officers).

**Figure 4: The table below provides a breakdown on who made the complaint:**

<b>Who Made the Complaint</b>	<b>Number</b>	<b>Percentage</b>
Birth Parent	43	70
Adoptive Parent	2	3
Carer	2	3
Extended Family	11	19
Young Person	0	0
Professional Officer	3	5
<b>Total</b>	<b>61</b>	<b>100</b>

As in previous years the majority of complaints have been received from Birth Parents followed by Extended Family members (at 70% and 19% respectively).

## REPRESENTATIONS MADE BY CHILDREN IN CARE THROUGH THEIR REVIEW PROCESS

**Figure 5: Types of CIC Representations received during 2014/15**

Type of Representation	Number	Percentage
Contact Issues	9	16
Financial Assistance	3	5
Independent Living	8	14
Locality of Placement	1	2
Placement Issues (Generic)	13	22
Return to Parental Care Issues	6	10
Education Issues	4	7
Social Worker Practice/Conduct	1	2
Conduct of foster carers	2	3
Other/Adequate Care	11	19
<b>Total</b>	<b>58</b>	<b>100</b>

## COMPLAINTS ABOUT ADULT'S SOCIAL CARE SERVICES

The following is an analysis of the complaints received relating to Children's Social Care Services during the year 2014/15.

**Figure 1: Total number of complaints received from 2007 onwards**

Adult Services	2007 – 2008	2008 – 2009	2009 – 2010	2010 – 2011	2011 – 2012	2012 – 2013	2013 – 2014	2014 – 2015
Stage 1	60	43	34	19	16	49	78	21
Stage 2	3	2	2	1	0	0	3	0
Stage 3	2	1	1	1	0	0	0	0

**Figure 2: Complaints received by Adult Services Teams:**

Teams	Number of Complaints	Percentage
CMHT	3	14
CTPLD	2	10
Hospital team	7	33
Long Term team	4	19
Older people	1	5
Out of hours team	1	5
Not specified	3	14
<b>Total</b>	<b>21</b>	<b>100</b>

There were 9 complaint types monitored. These are generic categories as they are corporate definitions for types of complaint

**Figure 3: Types of stage 1 complaints received during 2014/15:**

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<b>Type of Complaint</b>	<b>Number</b>	<b>Percentage</b>
Care Costs	4	18
Quality of Services	7	30
Conduct of Officer/Staff Member	5	22
Lack of support	4	26
Request for services	1	4
<b>TOTAL</b>	<b>21</b>	<b>100</b>

For 2014/15 the highest grouping is for service provision. This is a return to the trend seen in years 2010 – 2013 (in 2013/14 the highest grouping of complaint issues related to conduct or practice of officers).

**Figure 4: The table below provides a breakdown on who made the complaint:**

<b>Who Made the Complaint</b>	<b>Number</b>	<b>Percentage</b>
Extended Family	7	33
Service user	4	19
Child of service user	3	14
Professional	3	14
Parent of service user	2	10
Spouse or partner	1	5
Not known	1	5
<b>Total</b>	<b>21</b>	<b>100</b>

The majority of complaints have been received from the extended family, followed by service users (at 33% and 19% respectively).

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