



# Statutory Complaints and Representations Annual Report 2020–2021

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## Introduction

This report outlines the feedback received by the Customer Relations Team about statutory social care children's and adult services during 2020-2021. It includes compliments, concerns, representations, complaints and learning from complaints. Due to a transition to a new complaints system part way through the reporting year, the relevant data was unavailable for a report to be compiled for 2019-2020.

## Overview

367 new compliments, concerns, representations and complaints were received between 1 April 2020 and 31 March 2021. The table below shows the types of feedback received.

Type of Record	2018/19				2020/21			
	Children		Adults		Children		Adults	
	No	%	No	%	No	%	No	%
Compliments	25	15%	74	27%	15	14%	82	32%
Concerns/representations	104	67%	70	26%	78	72%	95	37%
Complaints	27	18%	130	47%	15	14%	82	32%
<b>Total</b>	<b>156</b>	<b>100%</b>	<b>274</b>	<b>100%</b>	<b>108</b>	<b>100%</b>	<b>259</b>	<b>100%</b>

When a concern or representation is received, an initial assessment is made to decide whether it needs to be considered using the complaints procedure. This includes establishing whether another route is more appropriate or if relatively minor issues can be resolved very quickly and locally by a manager. The figures below show that many concerns and representations fell outside of the complaints procedure and that others were resolved quickly to the satisfaction of complainants. 173 concerns and representations were received during the period. The table below shows the outcomes.

Number		Outcome	Comments
Children	Adults		
10	9	Anonymous	passed to appropriate managers for their attention but no response could be given
1	13	No further contact	complainant did not pursue their concerns when asked for further information
16	11	Outside procedure	e.g. court proceedings relating to complaint issues (9), complaints related to events which took place over a year ago (3), person complaining had insufficient interest in or no consent from child/service user (3), repeat complaint (2), record was deemed to be an enquiry, not a complaint (1) complaint was dealt with within the data breach procedure instead (2)
9	7	Referred to external organisation	e.g. another local authority (8), NHS (2), private company providing a service to complainant (3)
43	26	Resolved	through timely discussions, meetings, explanations
7	29	Safeguarding	current safeguarding concerns are referred to adult or children's safeguarding services or area services for appropriate investigation or follow up.

## Who complained or complimented

We have received complaints or compliments from the following people:

- Service users. These complaints come directly from a young person or adult receiving, or having received, a service. These complaints may also be made on their behalf via an advocate.
- Parents. These form the majority of complaints about children's services e.g. of children in care, children in need or who are subject to child protection investigations.
- Family members. These complaints are often made by children or grandchildren of adults receiving care, raising concerns over the quality of care, communication and finance.
- Professionals. Complaints may be raised on behalf of service users by a solicitor or medical professional or practitioner.
- Carers. Complaints may be made directly by carers. The majority of these complaints in children's services relate to foster carers.

Due to a transition to a new complaints system, we are currently unable to provide data to specify numbers of who raised complaints and compliments in 2020-2021. Further analysis, broken down by type of complaint, follows.

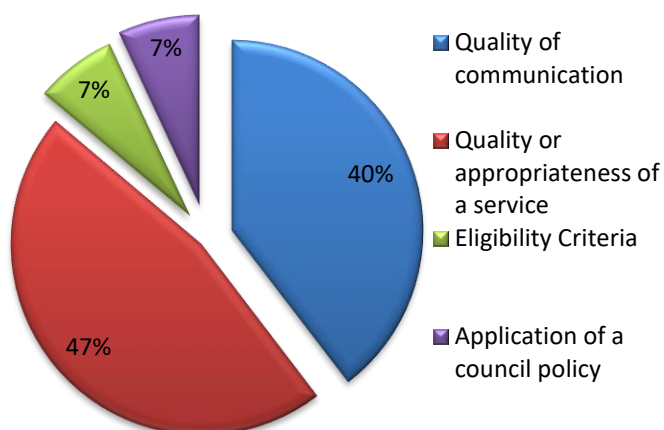
### Complaints about children's services

Appendix 1 explains the stages of the Children Act statutory social care complaints procedure. The tables in this section relate to complaints responded to during the period and do not include concerns or compliments.

The table below shows the number of complaints responded to at each stage and compares with previous years.

Children's social care				
Number of Social Care Complaints	Stage One	Stage Two	Stage Three	Ombudsman
2015 – 2016	18	4	4	5
2016 – 2017	23	6	3	4
2017 – 2018	27	5	2	3
2017 – 2018	21	6	1	8
<b>2020 – 2021</b>	<b>15</b>	<b>5</b>	<b>2</b>	<b>1</b>

## Subject of children's social care complaints



Quality of service was the main cause for complaints about social work this year. Parents and grandparents have raised complaints about not feeling listened to by social workers and that their own concerns for children's safety or quality of care haven't been taken seriously. Communication was a further factor leading to complaints about social workers, these ranged from disagreements over interpretations of what had been said during meetings to accusations of disclosures of information without consent. Children have also raised complaints regarding the quality of their care, delays in assessments and insufficient support.

## Service areas of children's social care complaints

Service area	2017/18		2018/19		2020/21	
	No	%	No	%	No	%
Area social work	15	56%	13	62%	3	20%
Through care services	7	26%	3	14%	6	40%
Disabled children	3	11%	0	0%	3	20%
First response and PDT	1	4%	3	14%	1	7%
Families in Focus (early help)	1	4%	1	5%	1	7%
Fostering and adoption	0	0%	1	5%	1	7%
<b>Total</b>	<b>27</b>	<b>100%</b>	<b>21</b>	<b>100%</b>	<b>15</b>	<b>100%</b>

## Children's social care complaint outcomes

The table below shows the outcomes of complaints responded to at each stage of the procedure.

Outcomes	Stage 1	Stage 2	Stage 3	Ombudsman
Not Upheld	4		1	
Partially Upheld	6	3	1	
Upheld	5	2		
Closed after initial enquiries – no further action				1

The Local Government and Social Care Ombudsman uses distinct classifications to record complaint outcomes. Some complaints cannot be considered by the Ombudsman, often because of court proceedings or because they are out of time. In this instance, there was one complaint in which the Ombudsman closed their investigation after their initial enquiries. This related to a parent who complained on behalf of himself and his now adult children about the Council's failure to protect them in the past and its failure to tell him when they went into foster care. The Ombudsman noted that the Council had apologised for not informing the parent and that they could not add anything further so would not investigate this aspect of the complaint. Furthermore, as the children concerned are now adults, the Ombudsman advised that they would not be able to investigate further without their consent, and that the Council has not had the opportunity to investigate any complaints submitted directly by them.

### Children's social care response performance

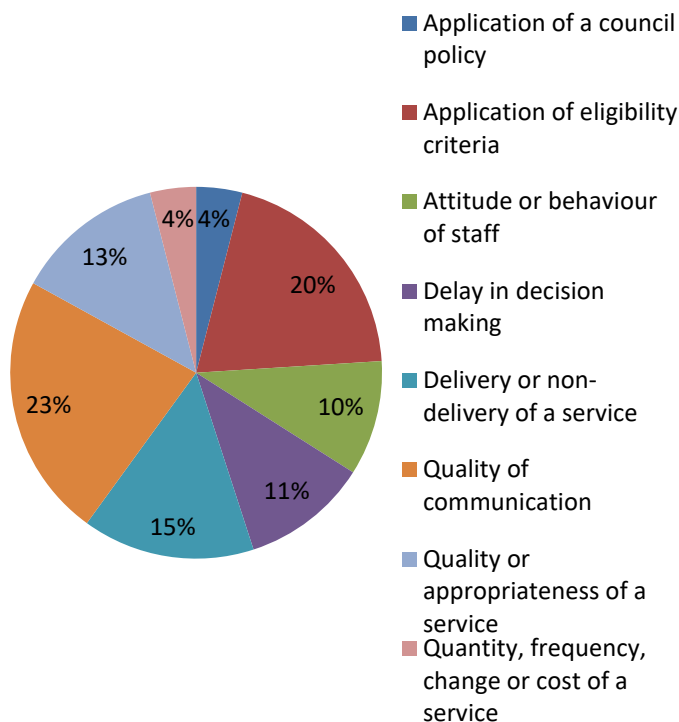
There are statutory deadlines for responding to social care complaints. The table in Appendix 2 shows the structure of the complaints procedure. The deadlines for response are given at each stage with the possibilities for extensions in brackets. Extensions occur where cases are complex or there are difficulties arranging meetings with a number of professionals etc. The table below shows the percentage of complaints which were responded to on time, at each stage.

Stage of procedure	2015/16	2016/17	2017/18	2018/19	2020/21
Stage 1	53%	52%	56%	67%	<b>80%</b>
Stage 2	50%	100%	100%	100%	<b>100%</b>
Stage 3	75%	100%	50%	100%	<b>100%</b>
Ombudsman	80%	100%	100%	100%	<b>100%</b>

### Complaints about adult services

Appendix 2 explains the statutory adult social care complaints procedure which is different from the procedure for children's services. The tables in this section relate to complaints responded to during the period and do not include concerns or compliments. The table below shows the number of complaints responded to at each stage.

Response	2015/16	2016/17	2017/18	2018/19	2020/21
Response	92	90	84	<b>114</b>	<b>89</b>
Review	10	1	11	<b>8</b>	<b>5</b>
Ombudsman	3	5	3	<b>7</b>	<b>5</b>



### Subject of adult social care complaints

Quality of communication and application of eligibility criteria have been the main causes for complaints generated this year. Family members have raised complaints regarding infrequency of contact from their relatives' social workers, this being exacerbated by the Covid-19 pandemic, during which vulnerable adults have felt cut off and are more reliant on support. Complainants have also felt that they have received incorrect information, particularly in regards to invoices when they have been provided with conflicting information about money owed. Complaints about application of eligibility criteria are mainly from family members frustrated that their relative isn't receiving the care they believe they are entitled to, or may have until recently received. These range from attendance at day centres to assisted living provision.

### Service areas of adult social care complaints

The table below shows the distribution of complaints among service areas.

Service area	2017/18		2018/19		2020/21	
	No	%	No	%	No	%
Area services	60	71%	57	50%	39	48%
Hospital social work	3	4%	17	15%	18	22%
Finance	11	13%	10	9%	0	0
Commissioning, contracts and quality	0	0	4	4%	9	11%
Early intervention and targeted services	0	0	4	4%	0	0
Intermediate care	2	2%	4	4%	8	10%
Mental health	1	1%	4	4%	2	2%
Care Direct	2	2%	3	3%	0	0

Other	5	6%	11	10%	6	7%
<b>Total</b>	<b>84</b>	<b>99%*</b>	<b>114</b>	<b>100%</b>	<b>82</b>	<b>100%</b>

\*due to rounding

## Adult social care complaint outcomes

The table below shows the outcomes of complaints responded to at each stage of the adult procedure.

Outcomes	Response	Review	Ombudsman
Not Upheld	25		
Partially Upheld	43	3	
Upheld	20	3	
Withdrawn	11		
Upheld: maladministration and injustice			2
Upheld: no injustice			1
Upheld: no further action			1
Not upheld: no maladministration			1

The review stage is discretionary. If a Head of Service is satisfied that the original complaint was fully investigated and that a complete response has been provided, a review request will be declined and the complainant signposted to the Local Government and Social Care Ombudsman. The LGSCO uses distinct classifications to record complaint outcomes. In two cases investigated by the LGSCO during this period, they found fault with the Council's actions which caused injustice to the complainants. Appropriate remedies were recommended by the LGSCO which were accepted and implemented by the Council. One case was upheld as the LGSCO found some fault in the Council's initial safeguarding enquiry and record keeping but not with the outcome of the enquiry. In another case the LGSCO found the Council at fault for telling a resident they could have adaptations made to their property before completing its assessment but not in the way it reached its decision.

## Adult social care response performance

The Council sets a target of 15 working days for response but deadlines can be agreed between the manager with responsibility for responding to the complaint and the complainant, within six months. The manager must keep the complainant informed of any delays, giving reasons. The table below shows the percentage of complaints which were responded to on time, at each stage.

Stage of procedure	2015/16	2016/17	2017/18	2018/19	2020/21
Response	43%	54%	42%	<b>66%</b>	<b>62%</b>
Review	20%	0%	64%	<b>75%</b>	<b>0%</b>
Ombudsman	67%	100%	67%	<b>86%</b>	<b>67%</b>

## Advocacy

Children and young people are entitled to independent and confidential advocacy support to help them make social care complaints and representations. Reconstruct Advocacy provides this service. Advocates work closely with children and young people in care and frequently support them to raise concerns informally with staff so that they can be resolved without using the complaints procedure. Reconstruct also supports young people using the complaints procedure.

Complaints Procedure Advocacy (CPA), part of the Care Forum, provides support to adults making complaints on behalf of children and to adults complaining in their own right about adult social care services. Complainants are supported to look at different options and possible outcomes to equip them to make informed choices. CPA works to ensure people can represent their own interests as far as possible and does not offer advice on how an individual should act. They undertake brief intervention work in the majority of cases to support people to reach an outcome quickly, including signposting, sending out self-help packs and supporting clients to self-advocate. Other clients are given more support, depending on their level of vulnerability.

## **Learning from complaints**

One of the key principles of statutory social care complaints regulations is that local authorities learn from complaints and improve services. All actions agreed when complaints are concluded are monitored by the Customer Relations Team to ensure they are implemented within agreed timescales. Some examples of how individual complaints have led to service improvements are given here.

### **Children's social care**

A young person complained that she was not adequately supported when leaving care, specifically in enabling them to secure suitable accommodation. Following this complaint, which was upheld, The Council agreed to review the existing Keeping Bristol Safe Partnership (KBSP) escalation policy and consider how the principles of this policy can be implemented to robustly address any future disagreements that may arise in respect of housing provision for children living outside of Bristol.

A Foster Carer complained that they had been provided with insufficient support from Bristol City Council and frequently felt left out. The outcome of the complaint meant that it was agreed that staff would be reminded in team training about the needs of new carers and to continue to ensure that they provide thoughtful support to new carers and liaise with their Fostering Agency to check that support is in place via their Supervising Social Worker. Furthermore, the Council liaised with the foster care agency involved in this complaint to ensure that the Foster Carer Handbook gives guidance to their foster carers about the Independent Reviewing Officer (IRO) service (including what to expect at Child in Care reviews and from IRO home visits), the role of social workers and which meetings Foster carers would be expected to attend and their purpose.

A young person in the care of the Council complained about a foster placement which she then had to leave with no suitable alternative accommodation and no support provided to be placed elsewhere. The issues were raised with the young person's social worker explaining how they felt about that there was no attempt to mediate in the situation, the lack of planning and support for the move and the ongoing lack of support once they had moved. The learning from this complaint was shared with all the social work teams to identify and deliver any specific training.

A father complained about the quality of an assessment of his children. As a result, the importance of fully involving fathers, and in particular non-resident fathers, in all aspects of a social work team's work with a family was discussed by senior managers and the findings from this complaint were disseminated within service areas where subsequent practice discussions took place. A working group was established to consider how to improve working with fathers to be discussed with partner agencies as well as within the service.



## **Adult social care**

We received a complaint from a daughter unhappy with the financial charges her mother received from her care. Following the complaint investigation, the case was referred to the commissioning and quality assurance teams to ensure they were aware of the concerns in relation to the unsatisfactory standard of service provided.

A family member raised a complaint about her grandmother as she felt that she was not receiving sufficient care. When she initially raised these concerns, she was not satisfied that the response from the relevant manager adequately addressed all her points. Furthermore, it was identified that the capacity assessments undertaken, were not explained to the complainant by the team when the case was open. As a remedy for this, the case was reopened to look at specific areas and feedback was provided to the manager concerned.

A family member complained that she hadn't received clear and consistent information regarding her father in care during the Covid-19 pandemic. It was identified that advice given had been inconsistent and feedback was provided to staff to remind them to follow up telephone conversations in writing.

We received a complaint from a family member about the quality of care provided to her grandmother from a home care provider. Insufficient meals were being prepared for her and laundry and personal care duties were not being undertaken. It was identified that the failings had been caused by poor recording and communication. The provider was made aware of this outcome and for the need to ensure care notes are sufficient and in fitting with their record keeping policy. Feedback was also provided to the social worker and the rest of the team to ensure support plans remain task specific and personal to the individual being supported.

## Appendix 1 – Children’s social care complaints procedure

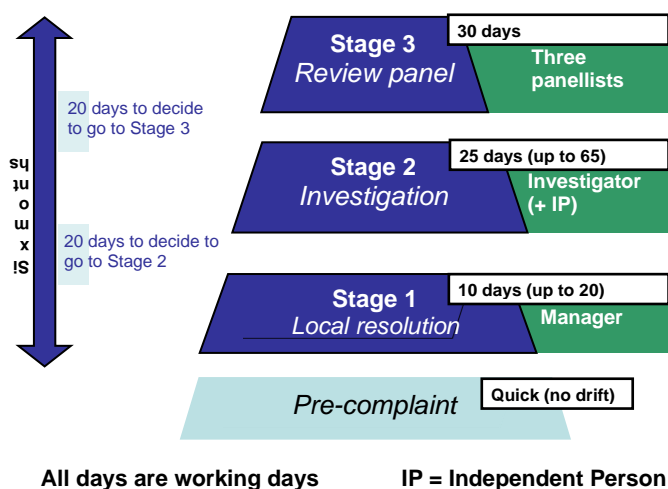
The Children Act 1989 Representations Procedure (England) Regulations 2006 requires local authorities to have in place procedures for handling complaints made by or on behalf of service users (or potential users) of social care services provided to children and young people.

The children’s social care complaints procedure consists of three stages:

- ❑ Stage 1 – Local, informal resolution (usually conducted by a first line manager)
- ❑ Stage 2 – Formal, detailed investigation (conducted by an investigator and independent person)
- ❑ Stage 3 – Formal review (considered by a panel of three independent people).

In some circumstances, a complaint can be investigated at Stage 2 of the procedure, without being considered at Stage 1. However, complainants are generally encouraged not to skip Stage 1 if local managers have not previously had an opportunity to look into the concerns raised. A review panel will only be held once a Stage 2 investigation is completed.

### Structure of children’s complaints procedure



### Ombudsman

At any time, complainants can approach the Local Government and Social Care Ombudsman for a review of the case. Usually, the LGSCO only considers complaints once the local authority’s complaints procedure has been fully exhausted.

## Appendix 2 – Adult social care complaints procedure

The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 requires local authorities to have in place procedures for handling complaints made by or on behalf of service users (or potential users) of social care services provided to adults.

When a complaint is received, a risk assessment is undertaken as follows:

### Risk assessment

#### Step One: Decide how serious the issue is?

Seriousness	Description
Low	<p>Unsatisfactory service or experience not directly related to care. No impact or risk to provision of care</p> <p style="text-align: center;"><b>Or</b></p> <p>Unsatisfactory service or experience related to care, usually a single resolvable issue. Minimal impact and relative minimal risk to the provision of care or the service. No real risk of litigation.</p>
Medium	<p>Service or experience below reasonable expectations in several ways, but not causing lasting problems. Has potential to impact on service provision. Some potential for litigation.</p>
High	<p>Significant issues regarding standards, quality of care and safeguarding of or denial of rights. Complaints with clear quality assurance or risk management issues that may cause lasting problems for the organisation, and so require investigation. Possibility of litigation and adverse local publicity.</p> <p style="text-align: center;"><b>Or</b></p> <p>Seriousness issues that may cause long term damage, such as grossly substandard care, professional misconduct or death. Will require immediate and in depth investigating. May involve serious safety issues. A high probability of litigation and string possibility of adverse national publicity.</p>

#### Step two: Decide how likely the issue is to recur

Likelihood	Description
Rare	Isolated or "one off" – slight or vague connection to service provision
Unlikely	Rare – unusual but may have happened before
Possible	Happens from time to time – not frequently or regularly.
Likely	Will probably occur several times a year
Almost certain	Recurring and frequent, predictable

### Step three: Categorise the risk

#### Seriousness | Likelihood of recurrence

	Rare	Unlikely	Possible	Likely	Almost Certain
Low	Low				
		Moderate			
Medium					
			High		
High				Extreme	

#### Response

After this, the manager dealing with the complaint develops a Complaint Investigation Plan (CIP) with the complainant which defines how the complaint will be handled and the time frame within which it will be completed. A written response is subsequently sent to the complainant by the manager which explains how the complaint was investigated, conclusions reached and actions taken as a result of the complaint.

#### Review

If the complainant is not satisfied with the response, they can request a review by a more senior manager. Although not required by the regulations, the local authority will then decide whether a review is warranted and respond accordingly.

The local authority must complete its response to a complaint within 6 months of receipt. If it is unable to do this, it must provide a written explanation which outlines when they can expect to receive their response.

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