



# **DARLINGTON**

Borough Council

## **Children's Social Care Complaints, Compliments and Comments Annual Report 2022/23**

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## **Introduction**

1. Darlington Children's Social Care welcomes complaints, compliments and comments as a way of improving service delivery to children, young people and their families. The purpose of this report is to inform the service users, carers, the public, Council Members and Children's Social Care staff of the effectiveness of the Children's Social Care Complaints, Compliments and Comments Procedure (the Procedure). The report identifies topics and trends in relation to complaints information, makes suggestions for service improvements, where appropriate and identifies areas of organisational learning that have taken place in relation to people, policy and process.

## **The Law**

2. The Council is required by law to have management arrangements in place for considering children's social care representations, including complaints, under the Children Act 1989. National legislative procedures for social care were amended in September 2006 with the introduction of the Children Act 1989 Representation Procedure (England) Regulations 2006 (the Regulations). It is a requirement of the Regulations that the Council publishes an annual report. In addition to the Regulations the Department for Education and Skills produced some comprehensive guidance for local authorities on managing complaints, called 'Getting the Best from Complaints'.
3. Key features of the Regulations include:
  - (a) A requirement for local authorities to appoint a Complaints Manager;
  - (b) A requirement for review panels to be retained by local authorities but with more robust arrangements for constituting and running them; and
  - (c) A 12 month time limit to make complaints.

## **Complaints and Information Governance Team**

4. The Complaints and Information Governance Manager is appointed as the 'Complaints Manager' in accordance with the requirements of the Regulations. The Complaints and Information Governance (CIG) Team is independent of Children's Social Care operational line management. This ensures a high level of independence in the way children's social care complaints are managed within the Council.

## **Public Information**

5. We are committed to making sure that everyone has equal access to all our services, including the Procedure. To help make the Procedure easily accessible we have produced two leaflets (one for children and young people and one for adults) covering all Council services to reflect the single point of access for complainants within the Council. The leaflets are available in all Council buildings. They have been written in line with the Plain English Campaign standards. The title is written in the most commonly used community languages and it contains details on how to access the information in other formats, for example, large print, audio and Braille.

6. Information is available on the Council's website. There is also an electronic form which people can use to make a complaint, pay someone a compliment or pass comment on Council services. People may make a complaint in any format they wish.
7. This can be in writing, by email, via the web, over the phone, in person or by any other reasonable means.
8. The Complaints Manager can arrange advocates and interpreters (including British Sign Language interpreters) where appropriate.

## **Children's Services Social Care Complaints Process**

### **Stage 1 – Local Resolution**

9. This initial stage allows children's social care managers the opportunity to try and resolve complaints locally, usually within the team being complained about.

### **Stage 2 – Investigation**

10. Stage 2 involves a full and formal investigation. An 'Independent Person' must also be appointed to oversee the investigation and report independently to Children's Social Care Services. Both the Investigating Officer and Independent Person produce reports, which are submitted to a senior manager who writes the final response to the complainant.

### **Stage 3 – Review Panel**

11. A review panel is convened when the complainant is dissatisfied with the Stage 2 response. The panel consists of an independent chairperson and two individuals who are independent of the Council.

### **The Local Government and Social Care Ombudsman**

12. Although complainants can refer complaints at any stage to the Local Government and Social Care Ombudsman (LGSCO) they will not normally investigate until the Council has conducted its own investigation and provided a response.

### **External Support to the Complaints Process**

#### **Advocacy**

13. The Council commissions an advocacy service for children and young people who make a complaint. This is an independent service provided by NYAS.

#### **Investigating Officers**

14. While the Regulations do not require investigating officers to be independent of the Council, we have signed up to a contract for the provision of Independent Investigating Officers.

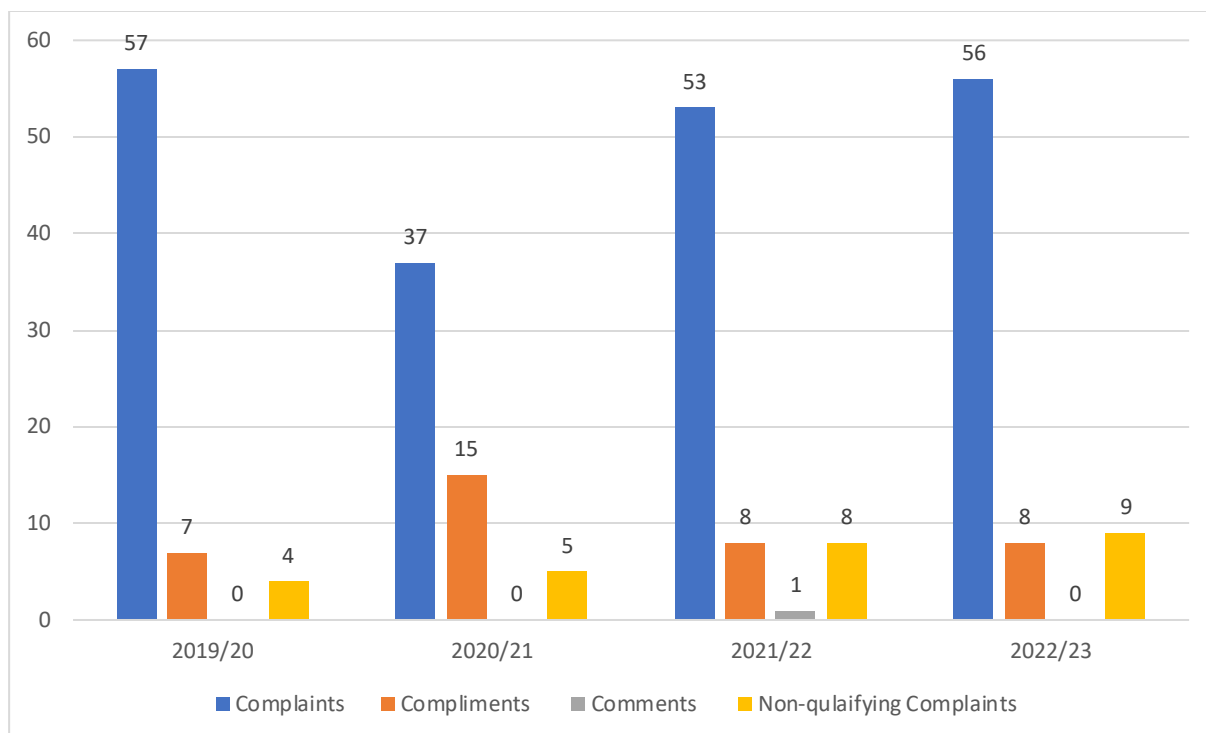
#### **Independent Persons**

15. The Council has signed up to a contract for the provision of independent persons.

#### **Review Panels**

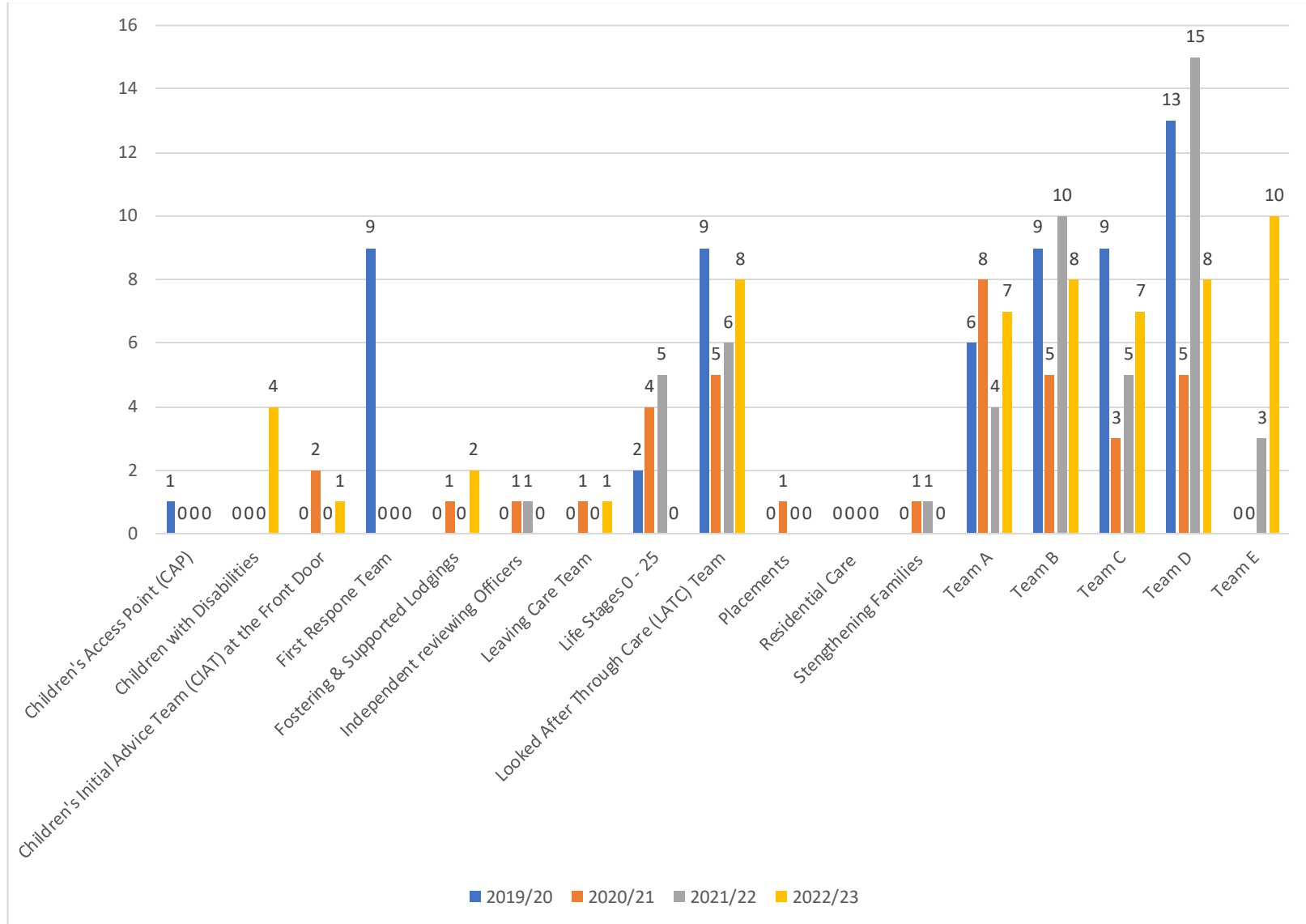
16. The Council has also signed up to a contract for the provision of an independent chair and independent panellist service.

### Total Complaints, Compliments and Comments received



17. The Council investigated 56 complaints, an increase from 53 in 2021/22 and 37 in 2020/21, bringing the total number of complaints investigated back to pre-pandemic levels. All 56 complaints were initially investigated at Stage 1 of the procedure.
18. The Council also received nine non-qualifying complaints, an increase from eight in 2021/22, five in 2020/21 and four in 2019/20.
19. The overall number of complaints considered by the Council under the procedure was 65, an increase from 61 in 2021/22, 42 in 2019/20 and 61 in 2019/20.
20. The Council received eight compliments, the same number as in 2021/22, a reduction from 15 in 2020/21 and an increase from seven in 2019/20.
21. The Council did not receive any comments, compared to one in 2021/22, and zero in 2020/21 and 2019/20.

### Breakdown of Stage 1 Complaints by Service Area/Team



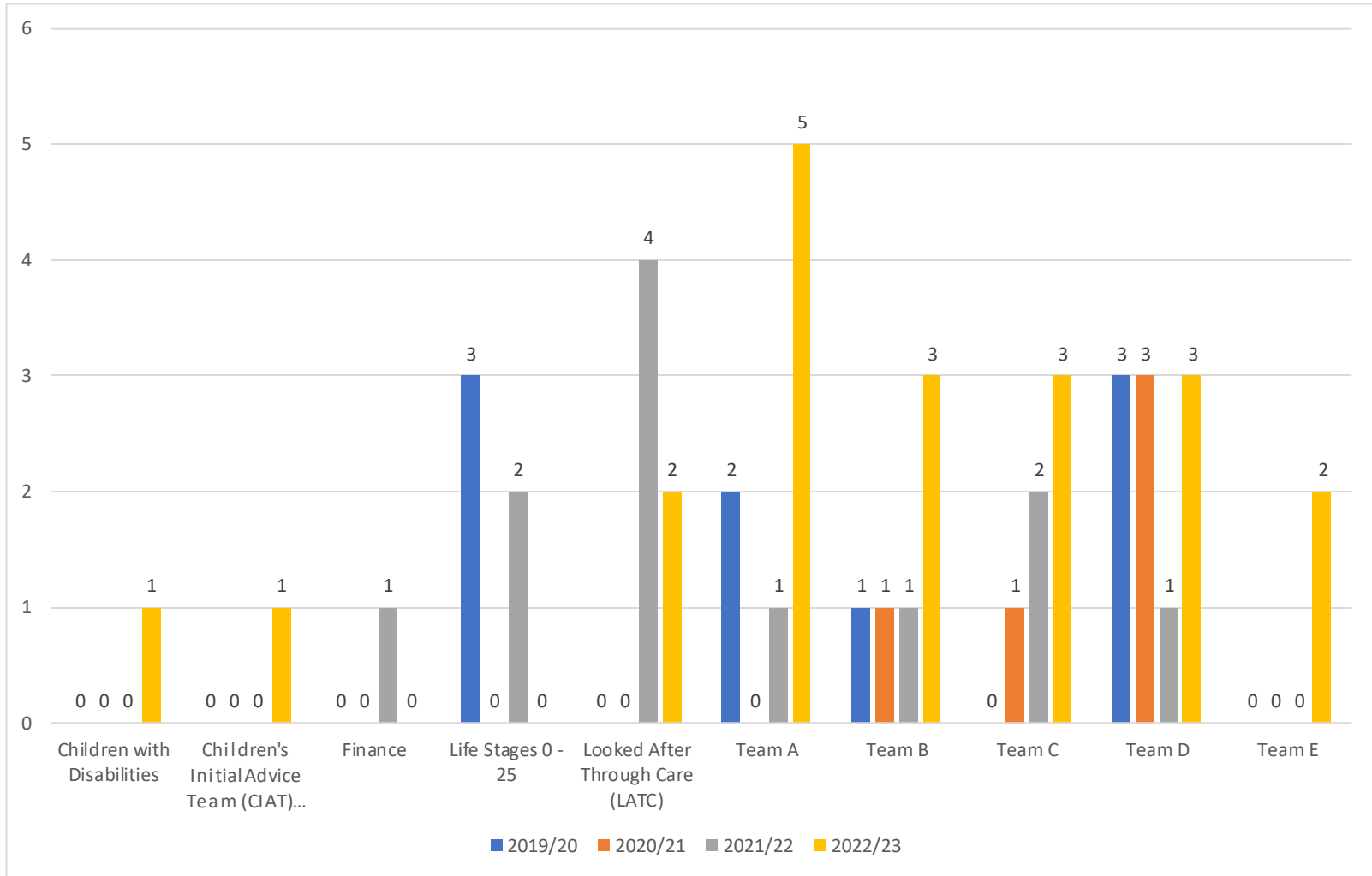
*N.B. Those teams that are not listed did not receive any complaints during 2022/23. Comparison data is not available for all teams due to changes in the Council's organisational structure.*

22. Children's Initial Advice Team (CIAT) at the Front Door received one complaint, an increase from zero in 2021/22, a decrease from two in 2020/21 and 10 in 2019/20\* (*\*see Children's Access Point (CAP) and First Response Team*).
23. Children with Disabilities received four complaints, a decrease from five in 2021/22\*, the same number as in 2020/21\* and an increase from two in 2019/20\* (*\*see Life Stages 0 – 25*). Two complaints concerned communication and two related to the attitude of the social worker.
24. Fostering and Supported Lodgings received two complaints, an increase from zero in 2021/22, one in 2020/21 and zero in 2019/20.
25. Independent Reviewing Officers received zero complaints, a decrease from one in 2021/22 and 2020/21 and the same number as in 2019/20.
26. The Leaving Care Team received one complaint, an increase from zero in 2021/22, the same number as in 2020/21 and an increase from zero in 2019/20.
27. Looked After Through Care (LATC) Team received eight complaints, an increase from six in 2021/22, five in 2020/21, although a decrease from nine in 2019/20. The most common cause of complaint was dissatisfaction with the service provided by the social worker and issues with communication.
28. Strengthening Families received zero complaints, a decrease from one in 2021/22 and 2020/21 and the same number as in 2019/20.
29. Team A received seven complaints, an increase from four complaints in 2021/22, a decrease from eight in 2020/21 and an increase from six in 2019/20. Themes included, general dissatisfaction with the service provided by the social worker, communication issues and the accuracy of information contained within assessments.
30. Team B received eight complaints, a decrease from 10 complaints in 2021/22, an increase from five in 2020/21 and a decrease from nine in 2019/20. The most common cause of complaint was people's dissatisfaction with the behaviour of, treatment by and their relationship with the social worker.
31. Team C received seven complaints, an increase from five during 2021/22, three in 2020/21, although less than the nine received in 2019/20. Complaints concerned delays in completing assessments and issues with communication.
32. Team D received eight complaints, a decrease from 15 complaints during 2021/22, an increase from five in 2020/21, and a decrease from 13 in 2019/20. Complaints concerned general dissatisfaction with the service provided by the social worker and communication issues.
33. Team E received 10 complaints, an increase from three complaints during 2021/22 and zero in 2020/21 and 2019/20. Complaints for Team E also concerned general dissatisfaction with the service provided by the social worker and communication issues.



### Breakdown of Stage 2 Complaints by Service Area/Team

34. 20 complaints were investigated at Stage 2, an increase from 12 in 2021/22, seven in 2020/21 and 10 in 2019/20.

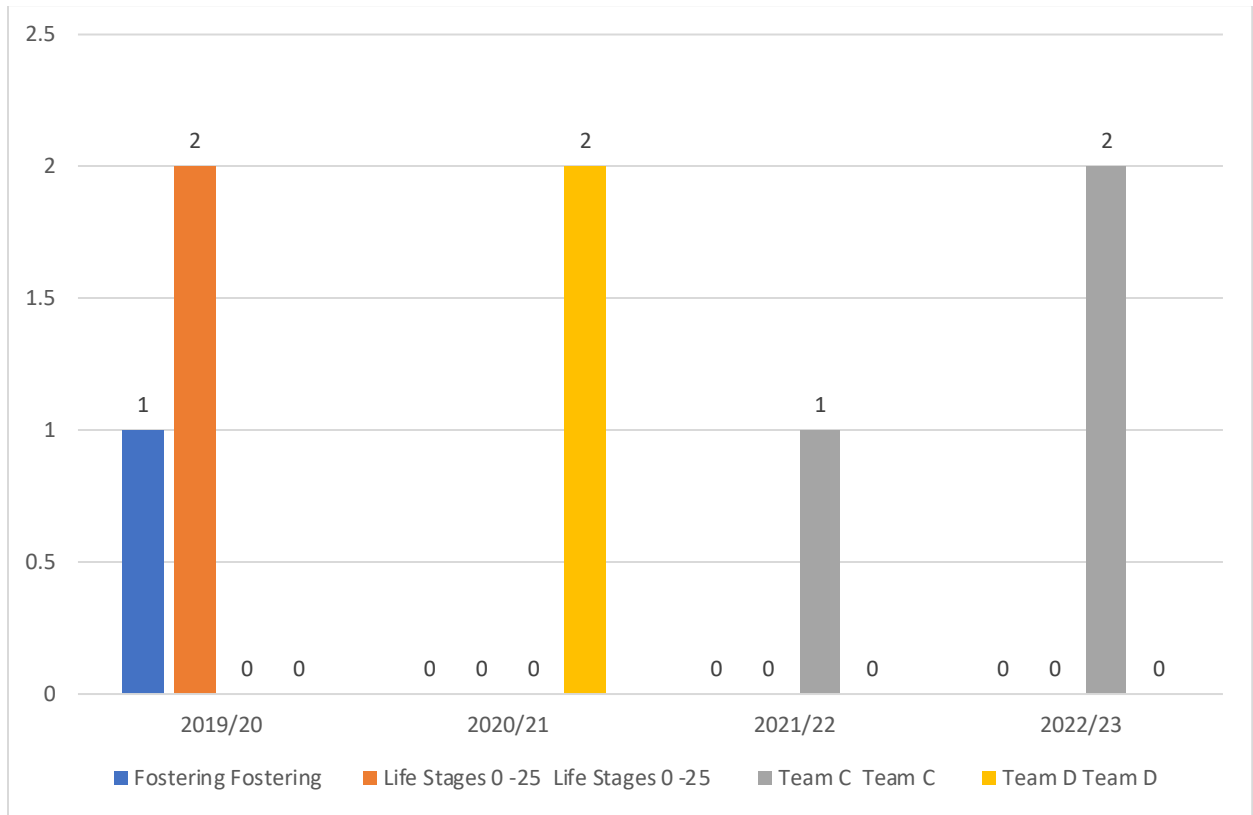


*N.B. Those teams that are not listed did not receive any complaints during 2022/23. Comparison data is not available for all teams due to changes in the Council's organisational structure.*

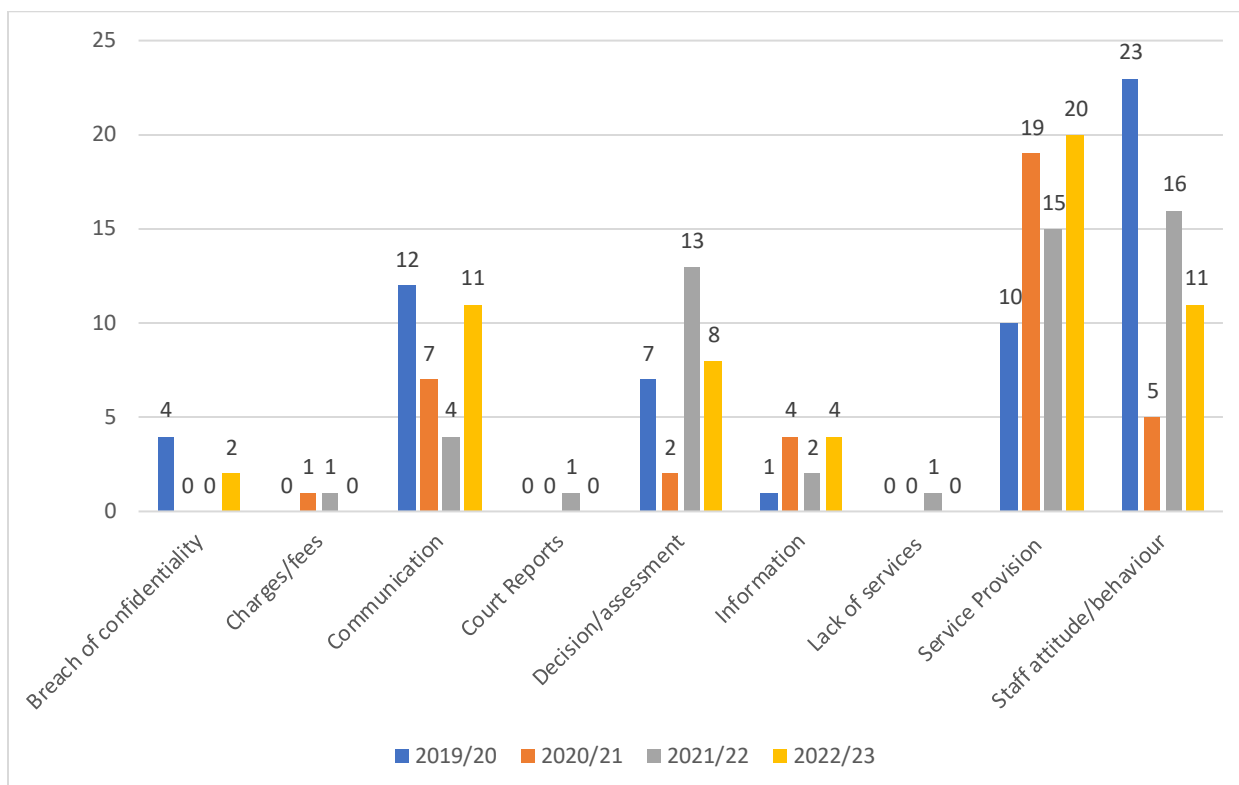
35. Children with Disabilities received one complaint, a decrease from two in 2021/22\*, an increase from zero in 2020/21\* and a decrease from three in 2019/20\* (\*see Life Stages 0 – 25).
36. Children’s Initial Advice Team (CIAT) at the Front Door received one complaint, an increase from zero in 2021/22, 2020/21 and 2019/20.
37. Finance received zero complaints, a decrease from one in 2021/22 and the same number as in 2020/21 and 2019/20.
38. Looked After Through Care (LATC) Team received two complaints, a decrease from four in 2021/22 and zero in 2020/21 and 2019/20.
39. Team A received five complaints, an increase from one complaint in 2021/22, zero in 2020/21 and two in 2019/20. Complaints concerned inaccuracies in reports, delays in providing information, lack of organisation and communication issues.
40. Team B received three complaints, an increase from one complaint in 2021/22, 2020/21 and 2019/20.
41. Team C received three complaints, an increase from two 2021/22, one in 2020/21 and zero in 2019/20.
42. Team D received three complaints, an increase from one in 2021/22 and the same number as in 2020/21 and 2019/20.
43. Team E received two complaints, an increase from zero in 2021/22, 2020/21 and 2019/20.

### Breakdown of Stage 3 complaints by Service Area/Team

44. Two complaints were escalated to Stage 3, an increase from one in 2021/22, the same number as in 2020/21 and a decrease from three in 2019/20.



### Breakdown of complaints by Issue

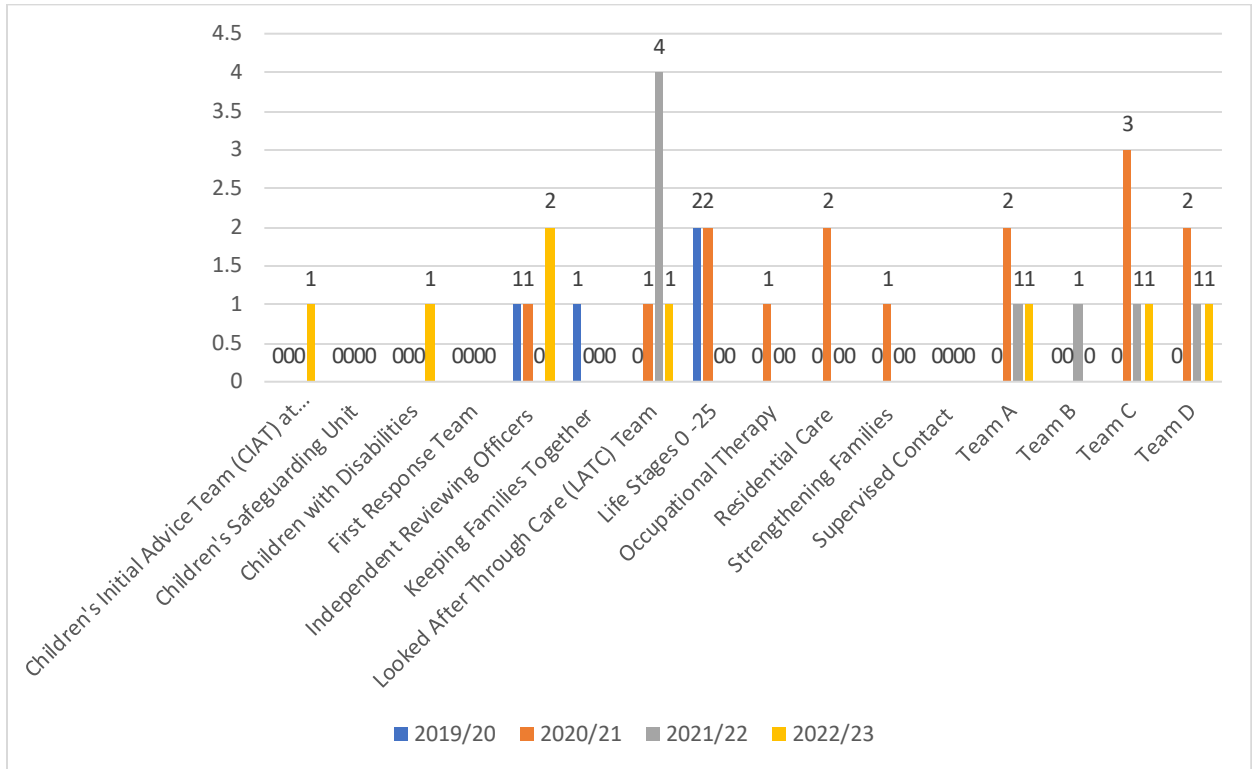


45. Service/provision was the most commonly complained about issue in 2022/23. The Council received 20 complaints about this issue, an increase from 15 in 2021/22, 19 in 2020/21 and 10 in 2019/20.
46. Staff attitude/behaviour and communication were the second most commonly complained about issues during 2022/23. The Council received 11 complaints about staff attitude/behaviour, a decrease from 16 in 2021/22, an increase from five in 2020/21, and significantly less than the 23 complaints received in 2019/20.
47. The Council also received 11 complaints about communication, an increase from four in 2021/22 and seven in 2020/21, although less than the 12 complaints received in 2019/20.
48. Decision/assessment was the third most complained about issues in 2022/23. The Council received eight complaints about this issue, a decrease from 13 in 2021/22, although more than the two complaints received in 2020/21 and seven in 2019/20.
49. The fourth most complaint about issue was information. The Council received four complaints about this issue during 2022/23, an increase from two 2021/22, the same number as in 2020/21 and an increase from one in 2019/20.
50. Breach of confidentiality was the fifth most complained about issue in 2022/23. The Council received two complaints about this issue during 2022/23, an increase from zero 2021/22 and 2020/21 and a decrease from four in 2019/20.

### Breakdown of Comments by Service Area/Team

51. The Council did not receive any comments during 2022/23, a decrease from one during 2021/22, and the same number as in 2020/21 and 2019/20.

### Breakdown of Compliments by Service Area/Team



52. The Council received eight compliments, the same number as in 2021/22, a decrease in from 15 in 2020/21, although an increase from the four received in 2019/20.

### Complaint Outcomes

**Stage 1** - The below table shows the decisions reached on Stage 1 complaints during 2022/23.

Service Area/Team	Escalated to Stage 2 (No S1 Response)	Inconclusive	Not Upheld	Partially Upheld	Upheld	Withdrawn	Total
Team A	2	0	1	4	0	1	8
Team B	0	0	1	2	2	2	7
Team C	0	0	4	3	0	1	8
Team D	1	0	1	4	1	0	7
Team E	0	0	3	3	2	1	9
Locality West	0	0	0	0	0	1	1
Locality Central	0	0	0	0	1	0	1
Leaving Care Team	0	0	0	0	0	1	1
Looked After Through Care (LATC) Team	1	0	1	4	0	1	7
Fostering & Supported Lodgings	0	0	0	1	0	0	1
Children with Disabilities	0	0	0	3	1	0	4
Children's Initial Advice Team (CIAT) at the Front Door	0	0	0	0	1	0	1
<b>Totals</b>	<b>4</b>	<b>0</b>	<b>11</b>	<b>24</b>	<b>8</b>	<b>8</b>	<b>55</b>

**Stage 2** - The below table shows the decisions reached on Stage 2 complaints during 2022/23.

<b>Service Area/Team</b>	<b>Inconclusive</b>	<b>Not Upheld</b>	<b>Partially Upheld</b>	<b>Upheld</b>	<b>Withdrawn</b>	<b>Suspended (ongoing proceedings)</b>	<b>Total</b>
Team A	0	0	1	0	0	0	<b>1</b>
Team C	0	2	1	0	0	1	<b>4</b>
Team D	0	0	2	0	0	0	<b>2</b>
Team E	0	0	1	0	0	0	<b>1</b>
Looked After Through Care (LATC) Team	0	1	1	0	1	0	<b>3</b>
Life Stages 0 - 25	0	0	2	0	0	0	<b>2</b>
Children with Disabilities	0	0	1	0	0	0	<b>1</b>
<b>Totals</b>	<b>0</b>	<b>3</b>	<b>9</b>	<b>0</b>	<b>1</b>	<b>1</b>	<b>14</b>

**Stage 3** - The below table shows the decisions reached on Stage 3 complaints during 2022/23.

<b>Service Area/Team</b>	<b>Inconclusive</b>	<b>Not Upheld</b>	<b>Partially Upheld</b>	<b>Upheld</b>	<b>Withdrawn</b>	<b>Total</b>
Team C	0	1	1	0	0	<b>2</b>
<b>Total</b>	<b>0</b>	<b>1</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>2</b>

### **Local Government and Social Care Ombudsman (LGSCO) Complaints**

53. One complaint was referred to the LGSCO during 2022/23, the same number as in 2022/23, a decrease from two in 2020/21 and the same number as in 2019/20.
54. No complaints were determined by the LGSCO during 2022/23, a decrease from one 2021/22, two in 2020/21 and one in 2019/20.

### **Organisational Learning**

55. All resolution and organisational learning actions identified as a result of complaints are assigned to a responsible manager and progress against those actions is monitored by the Complaints Manager. In addition to those actions taken to resolve individual complaints several service improvements were made following complaint investigations during 2022/23. Some examples of these are detailed below.

### **Children with Disabilities**

56. It was agreed all care team and looked after review meeting minutes would be distributed in a timely manner.

### **Fostering and Supported Lodgings**

57. It was agreed Children's Services would develop a policy regarding re-allocation/support from a supervising social worker when the usually allocated worker is on sick leave.

### **Team A**

58. It was agreed Children's Services would consider if it is possible to amend the assessment templates to include "both" parents individually to prompt social worker to seek both views where parents are separated.

### **Team B**

59. It was agreed the importance of detailed case recordings would be discussed at the monthly Practice Development Group and that the group would look for evidence of this happening or otherwise as part of their regular case file audits.

### **Team C**

60. It was agreed that the importance of best practice in relation to clear and consistent communication is shared within Children's Services Senior Leadership Team. It was also agreed Children's Services would review their Case Management System to amend the issue around "return to adoptive family" being an option for families to avoid any distress in the future.
61. It was also agreed Children's Services would consider that when arranging meetings, the purpose is explained in writing in order for all participants to be fully informed; consider the use of communication plans with families where there are specific difficulties, to ensure all



parties are aware of expectations and clear about their role; put into writing to families an explanation of the role of the social worker and limitations of such if there are complexities and overlap with private court proceedings; and remind staff of the importance of professional courtesy when addressing family members, and to ensure appropriate names/titles are used.

#### **Team D**

62. It was agreed Children's Services would remind staff of the need to ensure concerns raised are addressed fully at the earliest opportunity to avoid an escalation. It was also agreed Children's Services would ensure consent to CIN is recorded (whether positive or negative) and that the CIN process is explained fully to parents. Social workers were also reminded that all up to date relevant information must be included in assessments and of the importance of meeting with parents to discuss assessments and their outcomes.
63. It was also agreed Children's Services would consider providing guidance/training for social workers about how to explicitly check understanding and make reasonable adjustments for parents with learning difficulties; consider amending internal processes to ensure that where parents have learning difficulties, their individual needs/difficulties are clearly highlighted on case records along with any reasonable adjustments that need to be made; and to consider developing simplified, accessible summaries of child and family assessments for parents with learning difficulties.

#### **Team E**

64. It was agreed Children's Social Care would remind practitioners that where historic information is used within Child and Family Assessments, that the context for such information should also be provided and that where information within a Child and Family Assessment summarises information gleaned from a report, that this is clearly described for the avoidance of doubt.

## **Performance against the Children's Social Care Complaints, Compliments and Comments Procedure**

65. The below performance measures are in relation to those complaints responded to during 2022/23.

### **Timescales**

#### **Stage 1**

66. The target for responding to a complaint at Stage 1 is 10 working days, with a possible extension of up to 20 working days if the complaint is complex.

- (a) 26% of Stage 1 complaint responses were sent within 10 working days. This was a decrease in performance from 36.84% in 2021/22.
- (b) A further 34% of Stage 1 complaint responses were sent within 20 working days.
- (c) In total 60% of Stage 1 complaint responses were sent within the maximum 20 working day timescale, a decrease in performance from 81.58% in 2021/22.

#### **Stage 2**

67. The target for responding to a complaint at Stage 2 is 25 working days, extendable up to a maximum of 65 working days.

- (a) 0% of Stage 2 complaint responses were sent within 25 working days during 2022/23, as was the case in 2021/22.
- (b) 7.14% of Stage 2 complaint responses were sent within the maximum timescale allowed (65 working days), a decrease in performance from 11.11% in 2021/22.
- (c) 92.86% of Stage 2 complaint responses were sent after 65 working days, a decrease in performance from 88.89% in 2021/22.

#### **Stage 3**

68. At Stage 3 the Review Panel should be held within 30 working days of the request. 50% of Review Panels were held within 30 working days.

69. The Review Panel should write to the Director within 5 working days of the panel. They did so in 100% of cases.

70. The Director should write to the complainant within 15 working days of receiving the Panel's response. The Director wrote to the complainants within 15 working days in 100% of cases, as was the case in 2021/22.

### **Performance against key performance indicators**

71. In relation to children's social care complaints the Council's key performance indicator is the number of maladministration decisions received from the Local Government and Social Care Ombudsman (LGSCO). Children's Services did not received any maladministration decisions during 2022/23, as was the case in 2021/22, a decrease from one in 2020/21 and the same number as in 2019/20.
72. Full details of those complaints determined by the Local Government and Social Care Ombudsman are included in the Cabinet reports of 6 December 2022 and 5 September 2023 entitled [Review of Outcome of Complaints Made to Ombudsman](#).

### **Further recommendations**

73. Children's Services should work to improve the timeliness and quality of Stage 1 responses, in order to reduce the number of complaints being escalated to Stage 2.
74. Children's Services should work to improve performance against the Stage 2 timescale for Children's Social Care complaints.