Mayor and Cabinet

Report title: Annual Complaints Report 2019-20

Date: 24 March 2021

Key decision: No.

Class: Part 1

Ward(s) affected: All wards

Contributors: Ag. Director of Public Services; Interim Complaints Service Manager; Customer Services Manager – Environment; Head of Programmes Lewisham Homes; Quality Assurance & Business Support Manager - Adult Social Care; Complaints &

Information Manager - Children's Social Care.

Outline and recommendations

The purpose of this report is to set out complaints and casework performance in 2019/20 as well as the improvement measures being put in place to improve complaint handling, performance and service delivery.

The main recommendations are:

- Note the contents of the report including the improvement action plan and recommendation to reduce corporate targets from 100% to 90%
- Agree the improvement plan within the report as set out in section 16.

Is this report easy to understand?

Please give us feedback so we can improve.

Timeline of engagement and decision-making

This report was reviewed by the Executive Management Team (EMT) on 24 February 2021. EMT's feedback on the report is included in paragraphs 17.7 and 17.8.

1. Summary

- 1.1. This annual report sets out performance information on complaints and casework dealt with by Lewisham Council at its housing partners in 2019/20. The main report focuses on corporate complaints from Stage 1 to the Ombudsman stage as well as enquiries to MPs, the Mayor, Councillors and the Chief Executive and general enquiries. This report also highlights a selection of compliments received during the year.
- 1.2. The Independent Adjudicator's (IA) report is attached at **Appendix 1** and the Local Government and Social Care Ombudsman (LGSCO) report is attached at **Appendix 2**.
- 1.3. The Adult Social Care and Children's Social Care complaints reports are attached in **Appendix 3** and **Appendix 4** respectively. These reports include an overview of statutory complaints in Adult Social Care and Children's Social Care
- 1.4. The 2019/20 data provided in this report is based on information record on the complaints system iCasework. Data for 2018/19 and previous years has been provided for comparison where available. The accuracy of the underlying data is dependent on how cases are recorded and categorised on the system by officers.
- 1.5. It is accepted that we need to improve complaints and casework handling across Lewisham Council and its housing partners. We need to continue to address our responsiveness in dealing complaints and enquiries. But more importantly we need to continue to use the learning from complaints to address service delivery issues and to help prevent complaints arising in the first place. We have initiated an Improvement Action Plan based on the data and learning from this report to help the Council to change and adapt to meet the needs of residents.

2. Recommendations

2.1 Note the contents of the report including the improvement action plan and recommendation to reduce corporate targets from 100% to 90%. The proposed reduction is to ensure that the target is realistic and achievable, although officers will continue to work hard throughout the year to resolve complaints and improve response times.

- 2.2 Agree the improvement plan within the report, including
 - Improving performance by increasing management oversight, ownership and accountability;
 - Preventing complaints by developing improvement plans with services for most common issues;
 - Improving performance and resourcing within the Corporate Team.

3. Policy Context

Corporate Complaints

3.1 One of our core values set out in Lewisham Council's Corporate Strategy is that 'we are open, honest and fair in all we do'. The Council welcomes customer feedback about its services and staff from residents and service users. The Council's Corporate Complaints Policy details how we handle the complaints and feedback that we receive. Corporate complaints are dealt with under a 3-stage complaints process. The Local Government & Social Care Ombudsman and Housing Ombudsman Service are external regulators with statutory powers to investigate complaints against councils.

Adult Social Care Statutory Complaints

3.2 Since 1991, the National Health Service and Community Care Act 1990 has charged each local authority with maintaining a statutory complaints process for adult social care services. The current regulations, The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009, came into force on 1 April 2009. Statutorily, local provision of the regulations is the responsibility of each council's Chief Executive Officer. In Lewisham, that responsibility has been delegated to the Director of Operations for Adult Social Care.

Children's Social Care Statutory Complaints

3.3 The Children's Act 1989 Representation Procedure (England) Regulations 2006 requires local authorities have a formal complaints handling procedure in place for children and young people who wish to make a representation or complaint about social care. The regulations set out three stages: Stage 1 – Local Resolution; Stage 2 – Independent Investigation, and Stage 3 – Review Panel.

4. Background

- 4.1 This report provides an overview of corporate complaints and casework handling performance by the Council and its housing partners in 2019/20. A summary of the Independent Adjudicator's report and a summary of the Local Government and Social Care Ombudsman (LGSCO's) Annual Review is included with the full reports attached as appendices.
- 4.2 Complaints concerning Adult and Children's social care come under separate statutory complaints procedures and separate reports have been provided in Appendix 3 and Appendix 4 respectively.
- 4.3 Data from 2018/19 (and other previous years where available) has been provided in this report for comparison. The data was extracted from the iCasework system and is based on how cases have been recorded on the system by officers.

Corporate Timescales & Responsibilities

4.4 The standard response times and responsibilities (in 2019/20) for responding to complaints at each stage are shown in Table 1 below:

Table 1 – Standard Response Times & Responsibilities

Is this report easy to understand?

Please give us feedback so we can improve.

| Complaint / Casework | Response Time | Responsibility |
|-------------------------------|-----------------|---------------------------------|
| Stage 1 Complaint | 10 working days | Service Manager |
| Stage 2 Complaint | 20 working days | Corporate Complaints & Casework |
| Stage 3 Complaint | 30 working days | Independent Adjudicator |
| MP / Mayor / Councillor / CEO | 10 working days | Corporate Complaints & Casework |

4.5 The Corporate Complaints & Casework team carry out Stage 2 investigations and administer the enquiries on behalf of the Director of Public Services or Executive Director in the Council.

5. Volume of Complaints & Enquiries Received

- 5.1 The total number of <u>new</u> complaints and enquiries received by Lewisham Council and Lewisham Homes in 2019/20 was **7,869** cases as shown in Table 2 below.
- 5.2 Of the 7,869 new cases received in 2019/20, there were 122 complaints escalated to Stage 2; 84 complaints escalated to Stage 3; and 122 cases referred to the Local Government & Social Care Ombudsman.
- 5.3 The volume of first stage complaints received in 2019/20 went down by 49 cases compared to the previous year and enquiries (of all types) went up by 141 cases in the same period. The net result was a modest increase of 92 cases (or 1%) in 2019/20 from the previous year. It should be noted that rate of new cases received slowed down significantly in the last two months of the year (February and March 2020) around the time of the Covid-19 outbreak.
- 5.4 New first stage complaints accounted for just over 30% of all casework received in 2019/20 (2,459 cases).
- 5.5 There were 5,410 new enquiries received in 2019/20. Just over half of these cases were general enquiries and the remainder were MP / Mayor / Member / CEO enquiries. The nature of general enquiries varies but can include a request for a service or advice and information.

Table 2 – Volume of New Cases Received by Lewisham Council & Lewisham Homes

| Complaints & Enquiries Received – Lewisham Council & Lewisham Homes | | | | | | |
|---|-------|-------|--------|--|--|--|
| Type of Case 2018/19 2019/20 % increase / decrease from previous year | | | | | | |
| Stage 1 Complaints | 2,508 | 2,459 | 2% ↓ | | | |
| Enquiries – all types | 5,269 | 5,410 | 2.5% 🔨 | | | |
| Total | 7,777 | 7,869 | 1% 🛧 | | | |

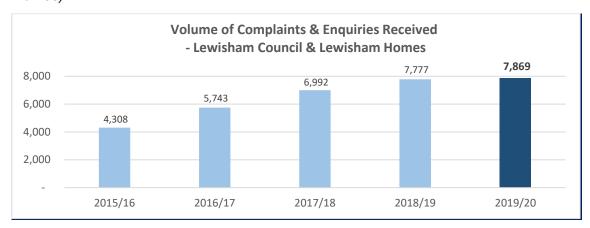
5.6 The breakdown of cases received by Council directorate and Lewisham Homes in shown in Table 3 below:

Table 3 – Volume of New Cases Received by Council Directorate & Lewisham Homes

| Complaints & Enquiries Received – Council Directorates & Lewisham Homes | | | | | | |
|---|---------|---------|--|--|--|--|
| Directorate | 2018/19 | 2019/20 | % increase / decrease from previous year | | | |
| Children and Young People | 212 | 222 | 5% ↑ | | | |
| Community Services | 312 | 355 | 14% 🔨 | | | |
| Customer Services | 3,755 | 3,329 | 11% ↓ | | | |
| Resources & Regeneration | 2,395 | 2,543 | 6% ↑ | | | |
| Lewisham Homes | 1,103 | 1,420 | 29% 🔨 | | | |
| Total | 7,777 | 7,869 | 1% 🛧 | | | |

5.7 Overall there has been a year on year increase in new cases received as shown in

Chart 1 – Volume of Complaints & Enquiries Received (Lewisham Council & Lewisham Homes)



<u>Improvement Actions – Case Volumes</u>

5.8 The complaints system is being reconfigured and the corporate team is also developing improved internal reporting of caseloads and other performance information. This will give senior managers greater insight into the complaint issues in their directorates so that appropriate management action can be taken to deal with any underlying service issues and to minimise complaints arising in the first place.

6. Root Cause of Complaints

6.1 The root cause of complaints should be recorded by officers when completing and closing a case on the complaints system. This information is not being consistently recorded therefore the information available for 2019/20 does not give us a complete or accurate view of the most common root causes of complaints across the Council. The improvement actions to help address this are listed in paragraph 6.7 below.

- 6.2 Based on the information recorded, the top 3 complaint issues in in 2019/20 regarding Council services were: Would be good to see the complaint reasons under Resources and Regen too but not for the report.
 - Request for new/replacement bin
 - Missed Collection
 - Disposal (mix of non-collections, food bin request and bag deliveries)
- 6.3 Table 4 below shows the volume of Top 3 complaint issues and decision outcomes respectively.

Table 4 – Outcome of Top 3 Complaint Issues in 2019/20 – Lewisham Council

| Outcome of Top 3 Complaint Issues in 2019/20 - Lewisham Council | | | | | | | |
|---|-----|---|----|----|-----|--|--|
| Complaints Issue No. of Cases Resolved upon Receipt Not Upheld Upheld Upheld | | | | | | | |
| Request for new/replacement bin | 188 | 4 | 18 | 18 | 143 | | |
| Missed Collection | 152 | 2 | 15 | 30 | 104 | | |
| Disposal | 132 | 5 | 25 | 28 | 73 | | |

6.4 Environmental services have provided the following comments on the complaint issues and actions taken to improve service delivery:

Background to Environmental Service Complaint Issues

- The main areas that generated complaints for Environment were refuse and recycling related issues bin requests, missed collections and disposal;
- Since the introduction of the fortnightly collection in October 2017, Environment have seen a rise on the number of request for new bins. This has reduced compared to 2018/19 although a large number of requests are still being received;
- Issues with limited bin storage and any delays from suppliers can also have an impact on bin deliveries;
- Waste services collect from approximately 308,000 households per week. On average the Environment division receive approximately 660 reports on missed collections per month, this equates to approximately 0.05% of households reporting a missed collection;
- Complaints logged under "disposal" are a mix of non-collections, food bin requests and bag deliveries.

Actions taken by Environmental Services to improve causes of complaints

 Rather than trying to reduce the amount of waste produced, residents are requesting additional or larger bins. Resident engagement and waste reduction campaigns are in place to educate residents on waste reduction;

- A number of the requests are for new food bins residents requesting a food bin from properties that don't currently have a food waste collection service or residents request a fox-proof food bin. The number of request for food bins should reduce over time as the food collection service is rolled out to residents across the borough. The new stronger fox-proof bin that was trialled last year has now been purchased and will be provided going forward;
- Bins can be missed for a number of reasons including access problems, bins not
 out on time, bins contaminated (even though residents are informed that a
 contaminated bin should not be classed as a missed bin, residents do still tend to
 log this as a missed collection).and vehicle breakdowns. When a bin has been
 missed the crew will return and empty the missed bin usually on the same day (if
 possible).

<u>Improvement Actions – Root Causes of Complaints</u>

- 6.5 There needs to be greater management accountability at the directorate level to deal with issues highlighted by complainants and to avoid complaints being lodged against the Council in the first place. However, the root cause information on the system is incomplete and needs to be updated to support senior managers with their responsibilities.
- 6.6 In order to achieve this aim, the corporate team is taking the following steps:
 - reviewing the roots cause classification with each directorate
 - updating the root cause classifications on the iCasework system
 - setting up system reminders for officer to record root cause data when completing cases
 - developing new internal reports for directorates including quarterly root cause data for directorate management teams to address service issues
- 6.7 Once these changes have been completed and implemented the corporate team will be working with directorate management teams to review the root causes of complaints and to implement solutions to fundamental issues within the service areas.

7. Performance (Cases Due & Timeliness)

7.1 Tables 5 and 6 below show the number of complaints and enquiries dealt with in the last financial year. The tables are broken down by Council directorate and Lewisham Homes and show the percentages dealt with in the standard response times. The statistics are for cases logged onto iCasework between 1 April 2019 and 31 March 2020 compared with performance over the same period in 2018/19.

Table 5 - Timeliness of Stage 1 & Stage 2 Complaints and General Enquiries by Council Directorate & Lewisham Homes

| | Veer | Stage 1 C | omplaints | Stage 2 C | omplaints | General Enquiries | |
|-----------------------|--------------------|--------------|--------------|--------------|---------------|-------------------|--------------|
| Directorate | Year / Variance | Cases Due | % On Time | Cases Due | % On Time | Cases Due | % On Time |
| . | 2018/19 | 58 | 34% | 4 | 50% | 14 | 43% |
| Children and Young | 2019/20 | 79 | 29% | 5 | 20% | 11 | 64% |
| People | Variance | ↑ 21 | ↓ 5% | ↑ 1 | ↓ 30% | √ 3 | ↑ 21% |
| | 2018/19 | 69 | 42% | 5 | 100% | 34 | 47% |
| Community Services | 2019/20 | 157 | 55% | 1 | 0% | 15 | 67% |
| OCI VICCS | Variance | 个 88 | ↑ 13% | V 4 | ↓ 100% | ↓ 19 | 1 20% |
| | 2018/19 | 1,665 | 80% | 45 | 87% | 663 | 91% |
| Customer Services | 2019/20 | 1,488 | 82% | 39 | 54% | 561 | 95% |
| OCI VICES | Variance | ↓ 177 | ↑ 2% | √ 6 | ↓ 33% | ↓ 102 | ↑ 4% |
| Resources | 2018/19 | 235 | 51% | 12 | 83% | 1,834 | 99% |
| & Regenerati | 2019/20 | 292 | 54% | 12 | 58% | 1,991 | 99% |
| on | Variance | 个 57 | ↑ 3% | → 0 | ↓ 25% | 个 157 | → 0% |
| | 2018/19 | 400 | 86% | 57 | 98% | 223 | 87% |
| Lewisham Homes | 2019/20 | 387 | 92% | 65 | 97% | 297 | 82% |
| | Variance | ↓ 13 | ↑ 6% | ↑ 8 | ↓ 1% | ↑ 74 | ↓ 5% |
| | 2018/19 | 2,427 | 76% | 123 | 91% | 2,768 | 95% |
| Total | 2019/20 | 2,403 | 77% | 122 | 75% | 2,875 | 96% |
| | Variance | ↓ 24 | ↑ 1% | ↓ 1 | ↓ 16% | 个 107 | 1 % |

Table 6 – Timeliness of MP, Mayor, Members and CEO Enquiries by Council Directorate & Lewisham Homes

| Timeliness of Enquiries – Council Directorates & Lewisham Homes | | | | | | | | | |
|---|--------------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|
| | | М | Р | Ma | yor | Members | | CE | ≣ O |
| Directorate | Year / Variance | Cases Due | % On Time |
| | 2018/19 | 88 | 38% | 7 | 29% | 28 | 50% | 8 | 25% |
| Children and Young | 2019/20 | 97 | 26% | 9 | 22% | 19 | 37% | 1 | 0% |
| People | Variance | ↑ 9 | ↓ 12% | ↑ 2 | ↓ 7% | ↓ 9 | ↓ 13% | ↓ 7 | ↓ 25% |
| | 2018/19 | 89 | 73% | 15 | 73% | 67 | 66% | 71 | 85% |
| Community Services | 2019/20 | 91 | 54% | 13 | 54% | 59 | 69% | 8 | 75% |
| Sei vices | Variance | ↑ 2 | ↓ 19% | ↓ 2 | ↓ 19% | ↓ 8 | ↑ 3% | ↓ 63 | ↓ 10% |
| | 2018/19 | 782 | 86% | 130 | 85% | 315 | 81% | 71 | 85% |
| Customer Services | 2019/20 | 860 | 74% | 190 | 78% | 182 | 85% | 42 | 81% |
| Sel Vices | Variance | ↑ 78 | ↓ 12% | ↑ 60 | ↓ 7% | ↓ 133 | 1 4% | ↓ 29 | ↓ 4% |
| Resources | 2018/19 | 140 | 81% | 24 | 79% | 122 | 88% | 27 | 81% |
| & Regeneratio | 2019/20 | 135 | 70% | 58 | 69% | 101 | 80% | 13 | 69% |
| n | Variance | ↓ 5 | ↓ 11% | ↑ 34 | ↓ 10% | ↓ 21 | ↓ 8% | ↓ 14 | ↓ 12% |
| | 2018/19 | 305 | 88% | 38 | 87% | 126 | 95% | 1 | 100% |
| Lewisham Homes | 2019/20 | 455 | 95% | 36 | 72% | 224 | 93% | 3 | 67% |
| | Variance | ↑ 150 | ↑ 7% | ↓ 2 | ↓ 15% | ↑ 98 | ↓ 2% | 1 2 | ↓ 33% |
| | 2018/19 | 1,404 | 81% | 214 | 82% | 658 | 82% | 120 | 78% |
| Total | 2019/20 | 1,638 | 76% | 306 | 73% | 585 | 84% | 67 | 76% |
| | Variance | ↑ 234 | ↓ 5% | ↑ 92 | ↓ 9% | ↓ 73 | ↑ 2% | ↑ 53 | ↓ 2 % |

Improvement Actions - Performance

- 7.2 The Council's performance against service timescales clearly falls short of current targets and as previously stated there does need to be greater accountability by officers across all services to improve this.
- 7.3 Service managers deal with general enquiries and Stage 1 complaints. There was strong performance with 96% of general enquiries dealt with on time, however Stage 1 complaints handling needs to significantly improve as only 77% of cases were completed on time in 2019/20.

- 7.4 The timeliness of Stage 2 complaints and enquiries (MP, Mayor, Members and CEO) was significantly below target for 2019/20. These cases are managed by a central (corporate) team for all service areas across the Council. A variety of issues affected performance during the year including delays in draft responses from services area and capacity issues in the central team. Changes are being put in place to increase accountability for all service areas to improve our courtesy and responsiveness to residents and services users.
- 7.5 In addition to this, the complaints system is being updated to provide notifications and reminder to officers and improved dashboards and reporting for service managers and directors to improve management accountability and performance across services.
- 7.6 The Corporate target for Stage 1, Stage 2 and all enquiries is currently set at 100%. It is imperative that we keep a strong focus on improving the customer experience and service delivery however it is recommended that the current targets are reviewed. Achieving 100% of complaints and casework completed on time is unachievable given the volume and complexity of cases received each year. Furthermore Lewisham Council and Lewisham Homes are currently facing significant operational pressures during this unprecedented time with the coronavirus pandemic outbreak and services may have reduced capacity to deal with complaints and casework during busy periods.

8. Complaint Outcomes

8.1 The high level breakdown of complaints by decision in 2019/20 for Lewisham Council and Lewisham Homes is as follows:

| | Complaint Outcomes – Lewisham Council & Lewisham Homes | | | | | | |
|--------------------|--|-----------|---------------|------------------|--------|-------|--|
| Complaint Stage | Resolved at initial contact | Withdrawn | Not Upheld | Partly Upheld | Upheld | Total | |
| Stage 1 | 143 | 0 | 722 | 525 | 775 | 2,165 | |
| Stage 2 | 0 | 2 | 57 | 38 | 12 | 109 | |
| Stage 3 | 0 | 37 | 24 | 20 | 4 | 85 | |
| Total | 143 | 39 | 803 | 583 | 791 | 2,359 | |
| % of Total | 6% | 1% | 34% | 24% | 34% | - | |

- 8.2 58% of all complaint cases handled in Lewisham were upheld or partly upheld. The breakdown by complaint stage was as follows:
 - Stage 1 58% partly upheld/upheld;
 - Stage 2 46% partly upheld/upheld;
 - Stage 3 28% partly upheld/upheld.

- 8.3 The escalation of rate of cases from Stage 1 to Stage 2 is relatively low with approximately 1 in every 20 complaint being escalated from the first to the second stage. The main reasons why complaints were escalated by complainants to the next stage in 2019/20 were:
 - Disagree with decision 50%;
 - Promised action not taken or delayed 18%;
 - Failed to address all issues 10%.
- 8.4 Annual reports from the Independent Adjudicator and Local Government Social Care Ombudsman (LGSCO) are attached in Appendices 1 and 2 respectively. Their reports providing further commentary on cases escalated to them and investigated.

Improvement Actions - Promised Action

8.5 Delays or failures to implement our promised actions to residents and services users is an aspect of complaints handling that needs to improve. This issue has been highlighted in a few cases by the Independent Adjudicator and Ombudsman (LGSCO). We are implementing a corrective actions tracker as part of our Improvement Action Plan. In the meantime, any issues with delayed actions are escalated to service managers or senior managers to resolve.

9. Lewisham Homes

9.1 Lewisham Homes have provided the following commentary on complaints and casework performance for 2019/20.

Lewisham Homes - Performance

- Of the formal complaints received in 2019/20, 22.8% were escalated to a higher stage. This is less than the previous year, where 24.2% were escalated, suggesting there has been a slight improvement in resolving complaints earlier in the process. Just under half (49%) of all complaints were resolved at the informal Stage 0.
- Lewisham Homes responded to 91.1% of complaints in time, slightly under the 95% target. There was an increase of almost one third in the number of complaints and enquiries received during 2019/20. The percentage of Stage 1 complaints closed on time increased by 6%, while there was a 1% decrease in Stage 2 complaints closed on time.
- The top five complaint issues in Lewisham Homes accounted for 42% of all complaints in 2019/20. These were:
 - Plumbing 16%
 - Appointments 8%
 - Roof repair/renewal 6%
 - o Damp 6%
 - Major Works 6%

Actions Taken by Lewisham Homes to Improve Causes

The weather impacts complaints related to damp, roofs, and major works. England
had its fifth wettest autumn on record in 2019, and February 2020 was the UK's
wettest February on record. Lewisham Homes introduced a new leaks policy this
year in order to speed up the resolution process of issues pertaining to leaks.

Is this report easy to understand?

- To help combat complaints arising from aging housing stock, £39m was spent on improving properties for our residents and this year began building 67 new homes.
 191 more homes are in planning.
- In November, Lewisham Homes introduced an internal tracker for teams to allow greater visibility of approaching deadlines, and to allow managers to keep easy track of caseloads in their area. This led to a notable and sustained improvement in response times in the final quarter of the year where responses in time were 97%, 98%, and 100% for January, February and March respectively. This has continued into the first two quarters of 2020/21 with over 95% of all complaints being responded to on time.
- Through the year we heard from nearly 800 residents— tenants and homeowners on our new approach to working together.
- The long-term trend of improvement in tenant and leaseholder satisfaction was continued this year. Satisfaction with both grounds maintenance and internal caretaking and cleaning also improved, exceeding targets.

10. Independent Adjudicator

- 10.1 The Independent Adjudicator (IA) deals with Stage 3 complaints on behalf of the Council, Regenter and Lewisham Homes.
- 10.2 The IA report for the Council is attached at **Appendix 1** and the key headlines are: do we need the full report?
 - 84 cases were received and 40% of these cases were regarding Lewisham Homes;
 - 37 cases were withdrawn or outside the IA's jurisdiction;
 - The IA determined 48 cases. The top two themes for the Council were Planning enforcement and Special Educational Needs. And the top three themes for Lewisham Homes were repairs, leaseholders and estate management;
 - Compensation was awarded in 20 cases totalling £13,300;
 - The average compensation awarded was £665 in 2019/20, which was a 50% increase from the previous year (see Table 8 below):

Table 8 – Independent Adjudicator Case Outcomes and Average Compensation Payment

| Independent Adjudicator Cases | | | | | | |
|-------------------------------|-------------------------------|---|---|----------------------------------|------------------------------------|--|
| Year | No. of Cases Determined | No. of Cases Upheld / Partly Upheld | No. of Cases Awarded Compensation | Total Compensation Awarded | Average Compensation Awarded | |
| 2018/19 | 77 | 20 | 14 | £6,191 | £442 | |
| 2019/20 | 48 | 24 | 20 | £13,300 | £665 | |

- 10.3 Although the IA did not have any particular concerns this year, the case studies in her letter to the Mayor identified service improvements and learning points including:
 - identifying and offering early remedies to prevent complaints from escalating;
 - identifying practical rather than financial remedies;
 - the need of good record keeping;
 - reviewing how we communicate with clients (homelessness);
 - procedural reviews and training.

Improvement Actions - Remedies

- 10.4 Implementing remedies (non-financial and financial) in a timely way was highlighted by the IA and LGSCO. Failure or delays in putting things right can cause further undue stress and upset for the complainant and lead to additional compensation being awarded by the LGSCO. There is a need to have improved monitoring and service management of remedies to ensure they are processed on time.
- 10.5 The corporate team is working with the system developers to improve the functionality and reporting of remedies through the iCasework system. Once this is in place, regular notifications and outstanding remedy reports will be sent to the relevant officers and service managers / directors who will be expected to ensure that remedies are processed. The management information on remedies could also provide useful insight to service managers / directors on issues that need to be addressed within their areas.
- 10.6 The IA also provides direct feedback and learning points to service areas on their particular cases. Service managers / directors should also consider this feedback and opportunities to improve service delivery in their directorates.

11. Local Government and Social Care Ombudsman Annual Letter 2019/20

- 11.1 The Local Government and Social Care Ombudsman (LGSCO) produces an annual review letter for each local authority and data is also provided on Ombudsman cases.
- 11.2 Table 9 below provides key statistics for the past two years. There has been a slight decrease in the number of referrals made to the LGSCO, however there has been a small increase in the number of cases upheld from 18 cases in 2018/19 to **21 cases upheld in 2019/20**.

Table 9 – LGSCO Complaint Statistics

| LGSCO Casework | 2018/19 | 2019/20 |
|----------------------------|---|--|
| Referrals Received | 127 cases | 122 cases |
| Top 3 Referrals | Housing – 33 Benefits and Tax – 29 Education & Children's Services – 28 | Education & Children's Services – 25 Adult Care Services – 25 Housing - 20 |
| Detailed Investigations | 31 cases | 30 cases |

| LGSCO Casework | 2018/19 | 2019/20 |
|---------------------------------|--|--|
| Cases Upheld | 18 cases | 21 cases |
| % of Decided Cases Upheld | 58% | 70% |
| Upheld Cases – service category | Adult Care Services – 7 Education & Children's Services – 6 Benefits & Tax – 2 Housing – 2 Environmental Services & Public Protection & Regulation - 1 | Housing – 6 Adult Care Services – 5 Benefits & Tax - 4 Education & Children's Services – 4 Environmental Services & Public Protection & Regulation – 1 Planning & Development - 1 |
| Compensation | 6 cases awarded compensation Total - £6,935 Average per case - £1,154 | 8 cases awarded compensation Total - £10,006 Average per case - £1,250 |

11.3 The Ombudsman defines upheld cases as follows:

"we uphold complaints when we find some form of fault in an authority's actions, including where the authority accepted fault before we investigated"

- 11.4 The Ombudsman upheld 21 cases against the Council in 2019/20:
 - The Ombudsman was satisfied in four cases with the remedies the Council has already put in place;
 - Although the Ombudsman was satisfied that the Council has successfully implemented all recommendations, it was highlighted that the Council failed to do this in a timely manner in five Ombudsman cases;
 - The number of cases awarded compensation increased from 6 in the previous year to 8 cases in 2019/20. Total compensation also increased by just over £3k, with total compensation of £10,006 awarded in 2019/20.
- 11.5 The LGSCO was critical of our failure to complete remedies within agreed timescales in five cases and cited two examples involving vulnerable service users. They rightly highlighted the fact that the Council's delays in implementing remedies can lead to further injustice and suffering. This is a key aspect of complaints performance that needs ongoing attention and improvement.
- 11.6 Charts 3 and 4 below provide some benchmarking data on LGSCO cases in 2019/20. The LGSCO received 122 cases about Lewisham Council (16th highest out of 33 London local authorities). The LGSCO upheld 21 cases against Lewisham Council and again this was 16th highest out of 33 London local authorities.

Chart 3 – LGSCO Cases Received in 2019/20 (London Local Authorities)

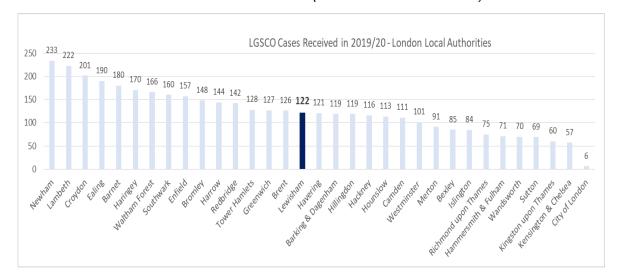


Chart 4 – LGSCO Cases Upheld in 2019/20 (London Local Authorities)

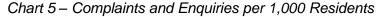


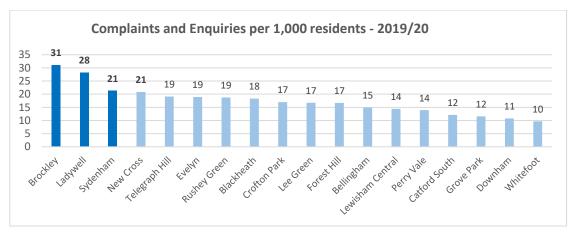
Improvement Actions - Remedies

- 11.7 The Ombudsman's criticism of the Council's failure to implement remedies in five cases during the year reinforces the same issue raised by the Independent Adjudicator. As stated in paragraph 10.5, the corporate team will put in place improved tracking of remedies and delays will be escalated to senior directors for prompt action to resolve them.
- 11.8 The Ombudsman's final decision on cases also provides specific recommendations and improvement actions for services. Improved internal reporting is being developed by the corporate team to help directorate management teams to understand the key issues arising from LGSCO cases and to tackle these issues.

12. Complaints & Enquiries by Ward

- 12.1 High level analysis of complaints and enquiries by ward in 2019/0 has been provided below based on postcode data where provided by residents and service users.
- 12.2 The distribution of complaints received by ward per 1,000 of the population is shown Chart 5 below.





- 12.3 The three wards that received the highest level of complaints and enquires were Brockley, Ladywell and Sydenham.
- 12.4 Brockley received the highest number of complaints and enquiries per resident.

 Regenter B3 was the service which received the highest number of complaints or enquiries followed by Lewisham Homes responsive repairs and refuse & recycling.
- 12.5 Ladywell was the ward which received the second highest number of complaints and enquiries. Regenter B3 was the service which received the highest number of complaints or enquiries followed by refuse & recycling and the housing options centre.
- 12.6 Sydenham was the ward which received the third highest number of complaints and enquiries. The services which received the most complaints or enquiries were Lewisham Homes responsive repairs, Housing Options Centre and Lewisham Homes housing.
- 12.7 Whitefoot received the lowest number of complaints per 1000 of the population.
- 12.8 The services generating the largest numbers of complaints in the wards with the highest numbers of complaints were Regenter B3 and Lewisham Homes. Commentary of Lewisham Homes performance is in paragraph 9.1 and details of actions with Regenter B3 are below.

Improvement Actions – Regenter B3

12.9 The corporate team liaise with Regenter B3 on open cases however there is very little joint management working between the corporate team and Regenter B3. The corporate team will arrange to work with Regenter B3 to review complaints performance and identify opportunities to improve service delivery to prevent complaints but to also improve handing of any complaints received.

13. Compliments

- 13.1 There were over 300 compliments recorded on the iCasework system for Lewisham Council and Lewisham Homes during 2019/20. It is likely that we under-record the compliments that we receive across the organisation. In some instances compliments and thank you emails are sent directly to staff and managers and but these are not always recorded on the system. We welcome both positive and negative feedback from our residents and services users and we need to continue learning from complaints and celebrating the positive achievements of our staff and teams.
- 13.2 A copy of a compliment received for each Council directorate and Lewisham Homes in 2019/20 is shown below. The names of residents and staff members have been anonymised.

Children and Young People - compliment

"I would like to compliment and applaud my children's social worker D. She goes above and beyond to make myself, my partner and my children feel at ease, and after a very disastrous experience with previous social workers from 2010 to now that was no mean fate! Her down to earth approach is exactly what is needed in social care and she had a level of empathy and compassion I've never come across in social workers before it is what all social workers should have. She actually listened to people and tries to work with them. Previously I've felt worked against and not in control.

She is so highly rated that my children call her the best social worker ever and are very sad that eventually they will not see her anymore. She helped me gain my confidence back and made me believe in myself again, realise that I was actually a very strong person and I did have a voice and she advocated to get mine and my children's voice heard. Please give her the recognition she deserves as she is a credit to lewisham social care".

Community Services - compliment

"I wanted to pass on a compliment paid to Social Worker A over the phone. The Compliment was made by Mrs B's Daughter. A facilitated the hospital discharge for Mrs B.

Feedback was

"Just calling to let you know the ambulance crew have just bought mum home. Thank you so much for getting mum home, She had her slippers on and she is now getting into bed. I can't stop smiling and neither can mum. She is so happy to be home and so am I. Thank you, thank you.

Thank you so much A.

Please record this a staff compliment

Thank you"

Customer Services - compliment

"Lewisham council you guys are amazing in replying within time to a request from but what's more impressive is the informative calm manner the staff handle the call back. I've ended up in a very uncomfortable circumstances with my council tax and needed advice. At first I thought oh no no counter sirvce, being old school and can express myself beter face to face as in an email/form.

Please give us feedback so we can improve.

I was contacted via phone by B. B listen, emphasized and then suggested an action plan. He took the time to ask questions from all angles, making sure nothing is missed out from both parties. We got my email address incorrectly the first time and when he didn't receive my email with in an half hour he called to make sure we got my email right. After the needed documents was emailed he got back with in an hour and had an action plan. B's knowledge and manner of how to deal with a tricky problem is amazing! Thank you so much. B should have an extra tea break this week.

You guys offering great customer care, thank you!"

Resources & Regeneration- compliment

"I called the Street Lighting team at 12pm to let you know that a lorry had just reversed into a lamp post and driven off, the lamp post was wonky and needed inspecting, the receptionist was efficient and polite and took down all the relevant details. About an hour later (it's only 13.35 now) when I looked outside you had already sent an engineer and he was checking it. That is a pretty fantastic service I am very impressed."

Lewisham Homes

"I am sending this email to you at Lewisham Homes regarding our new caretaker M. In the 15 years that I have been a resident in E Court we have never had such a hardworking caretaker. The man is a marvel. The stairs and landings are always swept and washed and always smell fresh likewise the lifts and outside areas around the bins. This man deserves to be recognised for his hard work and very friendly demeanour."

14. Equalities Analysis

- 14.1 The Council has the ability to collect equalities monitoring information on the iCasework system. This information is not mandatory but it can help the Council to review the complaints process and to ensure that it remains accessible and to everyone.
- 14.2 Lewisham Council and Lewisham Homes received over 8,500 complaints and casework in 2019/20. This includes corporate and statutory complaints at all stages including the Ombudsman, all enquiry types and complements.
- 14.3 Of the 8,500+ complaints and casework items received there are **11,497 contact detail records** captured on the system. This figure includes the primary resident or service user, other family members and their representative/advocates if applicable.
- 14.4 The equalities data presented below is based on 11,497 contact records. In most of these contact records the equalities information was not disclosed. Therefore the equalities breakdown provided in the tables below gives us an indication of the diverse characteristics of complainants or service users in 2019/20. However, we cannot assume that this is an equalized profile of all complainants and service users during this period of time.

14.5 Almost 65% of contacts did not provide gender information. Of those who did respond, there were nearly 3 times as many female persons compared to male persons. This may be disproportionately higher because of the way case contacts are recorded on the system.

Table 10 – Equalities Data – Gender

| Equality Category | Equality Characteristics | No. of Contacts | As % of Total Contacts |
|----------------------|--------------------------|-----------------|---------------------------|
| | Did not disclose | 7,331 | 64% |
| | Female | 3,008 | 26% |
| Gender | Male | 1,069 | 9% |
| | Prefer not to say | 87 | 1% |
| | Transgender | 2 | 0% |
| | Total | 11,497 | 100% |

14.6 98% of contacts did not disclose whether they had a disability or not. The remaining 2% of contacts disclosed details of the type of disability or impairment affecting them.

Table 11 – Equalities Data - Disability

| Equality Category | Equality Characteristics | No. of Contacts | As % of Total Contacts |
|----------------------|--|--------------------|---------------------------|
| | Did not disclose Disability / Any Other Disability or Impairment | 11,208 | 98% |
| | Physical Impairment | 12 | 0% |
| Disability | Mobility Issues | 11 | 0% |
| | Mental Health Condition Social or Communication | 8 | 0% |
| | Impairment | 6 | 0% |
| | Long Standing Illness | 4 | 0% |
| | Total | 11,497 | 100% |

14.7 Although 80% of contacts did not disclose their sexual orientation, of the remaining 20% of contact, half the respondents preferred not to say (10%) and almost half disclosed a heterosexual orientation (9%).

Table 12 – Equalities Data – Sexual Orientation

| Equality Category | Equality Characteristics | No. of Contacts | As % of Total Contacts |
|----------------------|--------------------------|--------------------|---------------------------|
| Sexual | Did not Disclose | 9,148 | 80% |
| Orientation | Prefer not to say | 1,202 | 10% |

| Equality Category | Equality Characteristics | No. of Contacts | As % of Total Contacts |
|----------------------|--------------------------|-----------------|---------------------------|
| | Heterosexual | 1,039 | 9% |
| | Gay / Lesbian | 63 | 1% |
| | Bisexual | 45 | 0% |
| | Total | 11,497 | 100% |

14.8 On ethnicity 86% of those contacting us did not provide ethnicity details, of the remaining 14%, just over half were from the Bangladeshi community (8%). This may be disproportionately higher because of the way case contacts are recorded on the system.

Table 13 – Equalities Data – Ethnicity

| Equality Category | Equality Characteristics | No. of Contacts | As % of Total Contacts |
|----------------------|------------------------------|--------------------|---------------------------|
| | Did not disclose | 9,829 | 86% |
| | Bangladeshi | 904 | 8% |
| | White Other | 174 | 2% |
| | Prefer not to say | 162 | 1% |
| | Caribbean | 102 | 1% |
| | African | 65 | 1% |
| | Other | 61 | 1% |
| | Black or Black British Other | 41 | 0% |
| | Asian or Asian British Other | 29 | 0% |
| | Any other mixed background | 22 | 0% |
| Ethnicity | Indian | 22 | 0% |
| Lumony | White and Black Caribbean | 18 | 0% |
| | Any other groups | 11 | 0% |
| | Chinese | 11 | 0% |
| | White and Asian | 11 | 0% |
| | White and Black African | 11 | 0% |
| | Pakistani | 10 | 0% |
| | Turkish | 4 | 0% |
| | Eastern European | 3 | 0% |
| | Somali | 3 | 0% |
| | Afghan | 2 | 0% |
| | Gypsy or Roma | 2 | 0% |

| Equality | Equality Characteristics | No. of | As % of Total |
|----------|--------------------------|----------|---------------|
| Category | | Contacts | Contacts |
| | Total | 11,497 | 100% |

Table 14 - Equalities Data - Age Band

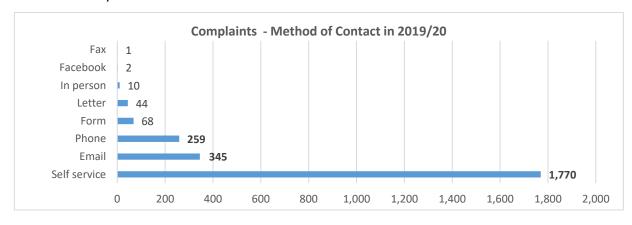
14.9 85% of contacts did not provide their age data. Of the remaining 15%, more than half of the contacts were from people aged 25 – 54 years (9%).

| Equality Category | Equality Characteristics | No. of Contacts | As % of Total Contacts |
|----------------------|--------------------------|--------------------|---------------------------|
| | Did not Disclose | 9,740 | 85% |
| | 25 – 54 years old | 1,030 | 9% |
| | 55 – 64 years old | 315 | 3% |
| Age Band | 65+ years old | 246 | 2% |
| | 0 – 14 years old | 85 | <1% |
| | 15 – 24 years old | 81 | <1% |
| | Total | 11,497 | 100% |

15. Contact Methods

- 15.1 The top 3 methods of contact for Complaints in 2019/20 as shown in Chart 6 below were:
 - Self Service 71%
 - Email 14%
 - Phone 10%

Chart 6 - Complaints - Method of Contact in 2019/20

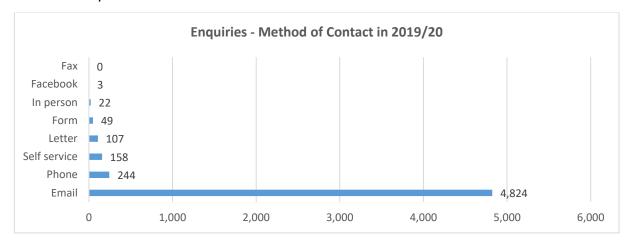


- 15.2 The top 3 methods of contact for Enquiries in 2019/20 as shown in Chart 7 below were:
 - Email 89%

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- Phone 5%
- Self Service 3%

Chart 7 - Enquiries - Method of Contact in 2019/20



15.3 Self-service is the most efficient way of handling complaints and enquiries. Service users or complainants use the online form and cases are automatically routed by the complaints system. However, not all customers are comfortable with using self-service and the charts above show the other contact methods being used, in particular e-mail. Complainants will be channel shifted to the on-line form – and away from e-mail – so that we can create efficiencies from the automated workflow in the I-Casework system whilst ensuring that this is not a barrier to some parts of the community in raising complaints and enquiries with Lewisham.

16. Improvement Action Plan

- 16.1 This report has highlighted the need for improved management oversight and accountability at the directorate level to drive improved complaints and casework handling across the Council. The corporate team is also key to driving this improvement agenda across the Council. During the year there have also been a number of operational challenges within the corporate team and the Director of Public Services has identified the need put a plan in place to improve performance in the central team and across the Council.
- 16.2 A Complaints & Casework Improvement Action plan has been initiated and Table 13 below summarises the key activities and progress:

Table 15 - Complaints & Casework Improvement Action Plan

| Improvement Area | Key Activities & Dates | Progress |
|---|--|---|
| Corporate Complaints & Casework Team | Recruit new Independent Adjudicator Recruit to permanent Manager and vacant casework posts Skills development and cross-skilling | New IA started in mid- September 2020 Team realignment planned for 01/04/21 Knowledge sharing sessions held |

| Improvement Area | Key Activities & Dates | Progress |
|--------------------------|--|---|
| | Administrative process improvements | |
| iCasework system | Improved functionality and updated organisational hierarchy Improved management reports Data quality and data cleaning Remedies tracker | iCasework hierarchy updated on 01/02/21 Classifications and management dashboards to be updated by 31/03/21 |
| Performance Reporting | Improved internal monthly and quarterly performance reports Open cases/backlog reminders to service areas | Updated internal performance reports developed Monthly open cases report circulated to EMT |
| Policies & Procedures | Policies reviewed and updatedHow to guides | Policies updated in November 2020 Various guides developed for staff |
| Training | Complaints & Casework Team training Corporate, CYP and ASC system administrator training Service area super users trained | Administrator and Reporting training sessions completed |
| Website | Review of website and web forms | Main complaints and information requests web pages updated including update on possible delays because of Covid-19 related operational pressures Revised policies available on website |

17. Conclusion

- 17.1 Complaints and casework performance over 2019/20 has been mixed with volumes remaining similar to the previous year but without significant improvement in timeliness of responses.
- 17.2 There is a fairly low rate of escalation of corporate complaints considering the high

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- volume of services delivered and customer contact each year in Lewisham Council and Lewisham Homes. A relatively small proportion of cases are escalated to Stage 2, Stage 3 or the Ombudsman and then upheld or partly upheld.
- 17.3 However, the Ombudsman and Independent Adjudicator have identified particular weaknesses with remedies in our complaints handling in Lewisham that need to be addressed including:
 - Timeliness of Remedies the Council complied with the LGSCO's
 recommendations however in five cases we failed to do so within the agreed
 timescales. Some of these cases involved vulnerable customers and our delays
 caused them further injustice. We need to put in robust mechanisms for tracking
 remedies and prioritising corrective actions so that put things right for the customer
 in in a timely way;
 - Offering remedies the IA has highlighted the need to consider offering early remedies at the first stage of complaints to prevent cases escalating. The remedies may be practical remedies rather than financial compensation and should be considered from the first stage of a complaint. Feedback has been provided to specific service areas and they will need to review their complaint handling practices at the first stage.
- 17.4 The weight of the feedback from the LGSCO and IA gives us the opportunity to learn from complaints. However, this tends to happen on a case by case basis or service area level based on the feedback. Improved internal reporting and management information will give us an opportunity to also improve our learning across the organisation and will be dependent on reconfiguration of the complaints system as well as a shift towards increased directorate management oversight and accountability.
- 17.5 The **organisational challenges within the corporate team** and across the Council during the year has also impacted our ability to handle complaints and casework effectively. An Improvement Action Plan has been put in place to address these issues and a key focus will be recruiting to and strengthening the corporate team as well as development work on the iCasework system. These changes will enable the corporate team to work more closely with staff across the organisation to drive improved performance and outcomes for the customer in the year ahead.
- 17.6 **Corporate targets** have been set for complaints and casework handling in Lewisham i.e. 100% on time for all cases with the exception of Stage 3 complaints which have a 90% target. It is important to have ambitious targets and an expectation of continuous improvement, however a 100% target is unrealistic and unsustainable. Lewisham's corporate targets should be reduced to 90% so that all performance targets at consistent and set at the same level.
- 17.7 The Executive Management Team (EMT) reviewed and approved this report on 24 February 2021. EMT's discussion highlighted key areas for improvement and growth across the organisation including:
 - Continuing to be an open organisation that welcomes complaints and feedback to help improve service delivery
 - Celebrating compliments and positive feedback
 - Improving our responsiveness to complaints with improved use of the complaints system and greater accountability within directorates
 - Improving our website in line with our Customer Services Strategy to make it clearer and easier for complaints and compliments to be submitted online.
- 17.8 EMT's recommendations have been incorporated into the ongoing Improvement Action

Plan.

18. Financial implications

18.1 There are no direct financial implications arising from this report. The Council has no specific budgets for compensation payments so the costs are absorbed by the relevant service as awarded.

19. Legal implications

- 19.1 There are no specific legal implications directly arising from this report aside from noting that it is recommended good practice from the Local Government's Ombudsman's Office to make full and specific reference to handling complaints within a management agreement entered into under section 27 of the Housing Act 1985.
- 19.2 Given the subject and nature of this report, it is relevant here to note that the Equality Act 2010 (the Act) introduced a new public sector equality duty (the equality duty or the duty). It covers the following nine protected characteristics: age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation.
- 19.3 In summary, the Council must, in the exercise of its functions, have due regard to the need to:
 - eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Act;
 - advance equality of opportunity between people who share a protected characteristic and those who do not;
 - foster good relations between people who share a protected characteristic and those who do not.
- 19.4 The duty continues to be a "have regard duty", and the weight to be attached to it is a matter for the Mayor, bearing in mind the issues of relevance and proportionality. It is not an absolute requirement to eliminate unlawful discrimination, advance equality of opportunity or foster good relations.
- 19.5 The Equality and Human Rights Commission has recently issued Technical Guidance on the Public Sector Equality Duty and statutory guidance entitled "Equality Act 2010 Services, Public Functions & Associations Statutory Code of Practice". The Council must have regard to the statutory code in so far as it relates to the duty and attention is drawn to Chapter 11 which deals particularly with the equality duty. The Technical Guidance also covers what public authorities should do to meet the duty. This includes steps that are legally required, as well as recommended actions. The guidance does not have statutory force but nonetheless regard should be had to it, as failure to do so without compelling reason would be of evidential value. The statutory code and the technical guidance can be found at: http://www.equalityhumanrights.com/legal-and-policy/equality-act/equality-act-codes-of-practice-and-technical-guidance/
- 19.6 The Equality and Human Rights Commission (EHRC) has previously issued five guides
 - The essential guide to the public sector equality duty
 - Meeting the equality duty in policy and decision-making
 - Engagement and the equality duty
 - Equality objectives and the equality duty
 - Equality information and the equality duty

19.7 The essential guide provides an overview of the equality duty requirements including the general equality duty, the specific duties and whom they apply to. It covers what public authorities should do to meet the duty including steps that are legally required, as well as recommended actions. The other four documents provide more detailed guidance on key areas and advice on good practice. Further information/resources are available at: http://www.equalityhumanrights.com/advice-and-guidance/public-sector-equality-duty/guidance-on-the-equality-duty/

20. Equalities implications

20.1 Equalities data for 2019/20 is provided in Section 13 of this report. The iCasework system enables the Council to collect equalities monitoring information and it is used to help ensure the complaints process remains accessible and that no particular parts of the community suffer inequity in service delivery.

21. Climate change and environmental implications

21.1 There are no climate change and environmental implications arising from this report

22. Crime and disorder implications

22.1 There are no crime and disorder implications arising from this report

23. Health and wellbeing implications

23.1 There are no health and wellbeing implications arising from this report

24. Background papers

24.1 There are no background documents to this report.

25. Glossary

| Term | Definition |
|-------|--|
| IA | Independent Adjudicator |
| LGSCO | Local Government & Social Care Ombudsman |
| но | Housing Ombudsman |

26. Report author and contact

26.1 If you would like more information on this report please contact:

Mick Lear

Acting. Director, Public Services

Mick.lear@lewisham.gov.uk

Irene Bremang

Interim Complaints Service Manager

Irene.bremang@lewisham.gov.uk

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- 27. Comments for and on behalf of the Executive Director for Corporate Resources
- 27.1 Not applicable
- 28. Comments for and on behalf of the Director of Law, Governance and HR
- 28.1 Not applicable

Appendix 1 - Independent Adjudicator Report

Review of Stage Three Complaints 2019 – 2020 Lewisham Council and Regenter

Total cases received/open and determined: 1/4/19 - 31/3/20

| TOTAL CASES RECEIVED 1/4/19 – 31/3/20 | NO. OF CASES CARRIED OVER FROM 2018/19 | NO. OF CASES DETERMINED | NO. OF CASES WITHDRAWN/ OUTSIDE JURISDICTION | NO. OF CASES OPEN AS OF 31/3/20 |
|---|--|----------------------------|---|---------------------------------------|
| *84 | 3 | 48 | 37 | 2 |

^{*}Includes Lewisham Homes

Number of cases determined

| TOTAL CASES DETERMINED | UPHELD IN FULL | UPHELD IN PART | NOT UPHELD |
|---------------------------|----------------|----------------|------------|
| *48 | 4 (8%) | 20 (42%) | 24 (50%) |

^{*}Includes Lewisham Homes

Time taken by the IA to resolve: target 90% of cases to be resolved within 30 working days

| 30 days and below | 31 - 50 days | More than 50 days |
|-------------------|--------------|-------------------|
| *40 (83%) | ** 8 (17%) | 0 |

^{*}Includes Lewisham Homes

Number of cases received: a comparison

| The Council and Regenter | Lewisham Homes | Total cases received |
|--------------------------|----------------|----------------------|
| 50 (60%) | 34 (40%) | *84 |

^{*}Includes 37 complaints that were withdrawn or considered to be outside my jurisdiction

^{**}These complaints were particularly complex and required significant investigation.

Cases received by Council directorate/partner

Total number of stage three complaints received against each directorate and each partner, noting that some directorates changed part way through the year

| Customer Services | Resources and Regeneration | Community Services | Children and Young People | Regenter | Lewisham Homes | Corporate Services | Housing, Environment and Regeneration | TOTAL |
|----------------------|----------------------------------|-----------------------|------------------------------------|----------|-------------------|-----------------------|--|-------|
| 9 (11%) | 1 (1%) | 3 (4%) | 11 (13%) | 1 (1%) | 34 (40%) | 5 (6%) | 20 (24%) | *84 |

^{*}Includes 37 complaints that were withdrawn or considered to be outside my jurisdiction

Cases determined by subject

Number of complaints determined by subject – does not include those that were withdrawn/considered to be out of jurisdiction: number upheld in full or in part in brackets

| | All Council/Partners* | Council and Regenter | Lewisham Homes |
|------------------------------|-----------------------|----------------------|----------------|
| Repairs | 6 (6) | | 6 (6) |
| Leaseholders | 5 (4) | 2 (2) | 3 (2) |
| Planning enforcement | 5 | 5 | |
| Special Educational Needs | 3 (2) | 3 (2) | |
| Estate management | 3 (2) | | 3 (2) |
| ASB | 2 (1) | | 2 (1) |
| Pest control | 2 (1) | 1 | 1 (1) |
| Building Control | 2 (1) | 2 (1) | |

| | All Council/Partners* | Council and Regenter | Lewisham Homes |
|-----------------------------------|-----------------------|----------------------|----------------|
| Housing management | 2 (1) | | 2 (1) |
| Crime, Enforcement and Regulation | 2 | 2 | |
| Re-housing | 2 | 2 | |
| Council Tax | 2 | 2 | |
| Major works | 1 (1) | | 1 (1) |
| Car park management | 1 (1) | | 1 (1) |
| Garages | 1 (1) | | 1 (1) |
| Trees | 1 (1) | 1 (1) | |
| HMO Licensing | 1 (1) | 1 (1) | |
| нос | 1 (1) | 1 (1) | |
| School management | 1 | 1 | |
| Hospital Outreach Programme | 1 | 1 | |
| Housing Benefit | 1 | 1 | |
| Flytipping | 1 | 1 | |
| Highways | 1 | 1 | |
| Noise nuisance | 1 | 1 | |
| Total | 48 (24) | 28 (8) | 20 (16) |

^{*}Some complaints raised more than one issue but were categorised according to the main issue

Compensation awarded in 20 cases including those against Lewisham Homes*

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| Up to and including £100 | £101 - £500 | £501 and above | TOTAL – COUNCIL/RB3 | TOTAL INC LH |
|--------------------------|-------------|----------------|------------------------|--------------|
| £650 | £2650 | £10 000 | £10 550** | £13 300 |

^{*}Lewisham Homes – 15 cases - £2750 – two of these were settled, and, not subject to formal enquiries.

^{**}Includes two SEN cases where £3000 and £1500 were awarded; and, a homelessness case where £5500 was considered fair and reasonable.

Appendix 2 – Local Government & Social Care Ombudsman (LGSCO) Annual Letter



22 July 2020

By email

Ms Wright

Chief Executive

London Borough of Lewisham

Dear Ms Wright

Annual Review letter 2020

I write to you with our annual summary of statistics on the decisions made by the Local Government and Social Care Ombudsman about your authority for the year ending 31 March 2020. Given the exceptional pressures under which local authorities have been working over recent months, I thought carefully about whether it was still appropriate to send you this annual update. However, now, more than ever, I believe that it is essential that the public experience of local services is at the heart of our thinking. So, I hope that this feedback, which provides unique insight into the lived experience of your Council's services, will be useful as you continue to deal with the current situation and plan for the future.

Complaint statistics

This year, we continue to place our focus on the outcomes of complaints and what can be learned from them. We want to provide you with the most insightful information we can and have made several changes over recent years to improve the data we capture and report. We focus our statistics on these three key areas:

Complaints upheld - We uphold complaints when we find some form of fault in an authority's actions, including where the authority accepted fault before we investigated. A focus on how often things go wrong, rather than simple volumes of complaints provides a clearer indicator of performance.

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Please give us feedback so we can improve.

Compliance with recommendations - We recommend ways for authorities to put things right when faults have caused injustice. Our recommendations try to put people back in the position they were before the fault and we monitor authorities to ensure they comply with our recommendations. Failure to comply with our recommendations is rare. An authority with a compliance rate below 100% should scrutinise those complaints where it failed to comply and identify any learning.

Satisfactory remedies provided by the authority - We want to encourage the early resolution of complaints and to credit authorities that have a positive and open approach to resolving complaints. We recognise cases where an authority has taken steps to put things right before the complaint came to us. The authority upheld the complaint and we agreed with how it offered to put things right.

Finally, we compare the three key annual statistics for your authority with similar types of authorities to work out an average level of performance. We do this for County Councils, District Councils, Metropolitan Boroughs, Unitary Councils, and London Boroughs.

This data will be uploaded to our interactive map, <u>Your council's performance</u>, along with a copy of this letter on 29 July 2020, and our Review of Local Government Complaints. For further information on how to interpret our statistics, please visit our <u>website</u>.

It is pleasing that we recorded our satisfaction with your Council's compliance in the cases where we recommended a remedy. However, it is disappointing that in five cases remedies were not completed within the agreed timescales. Once case related to a public interest report I issued in 2018, about a child with special education needs. It took the Council almost seven months to provide my office with full evidence of its compliance with the recommendations made in that report. In a second case, involving a friends and family carer, the Council failed to backdate payments as the recommendations indicated it should. This required further intervention on our part and subsequently an additional substantial payment was made.

While I acknowledge the pressures councils are under, such delays can add to the injustice already suffered by complainants. Additionally, the actions you agree to take, and your performance in implementing them, are reported publicly on our website, so are likely to generate increased public and media scrutiny in future. I would ask the Council to consider the way it implements remedies with a view to reducing delay in future.

Resources to help you get it right

There are a range of resources available that can support you to place the learning from complaints, about your authority and others, at the heart of your system of corporate governance. Your council's performance launched last year and puts our data and information about councils in one place. Again, the emphasis is on learning, not numbers. You can find the decisions we have made, public reports we have issued, and the service improvements your Council has agreed to make as a result of our investigations, as well as previous annual review letters.

I would encourage you to share the tool with colleagues and elected members; the information can provide valuable insights into service areas, early warning signs of problems and is a key source of information for governance, audit, risk and scrutiny functions.

Earlier this year, we held our link officer seminars in London, Bristol, Leeds and Birmingham. Attended by 178 delegates from 143 local authorities, we focused on maximising the impact of complaints, making sure the right person is involved with complaints at the right time, and how to overcome common challenges.

Please give us feedback so we can improve.

We have a well-established and successful training programme supporting local authorities and independent care providers to help improve local complaint handling. During the year, we delivered 118 courses, training more than 1,400 people. This is 47 more courses than we delivered last year and included more training to adult social care providers than ever before. To find out more visit www.lgo.org.uk/training.

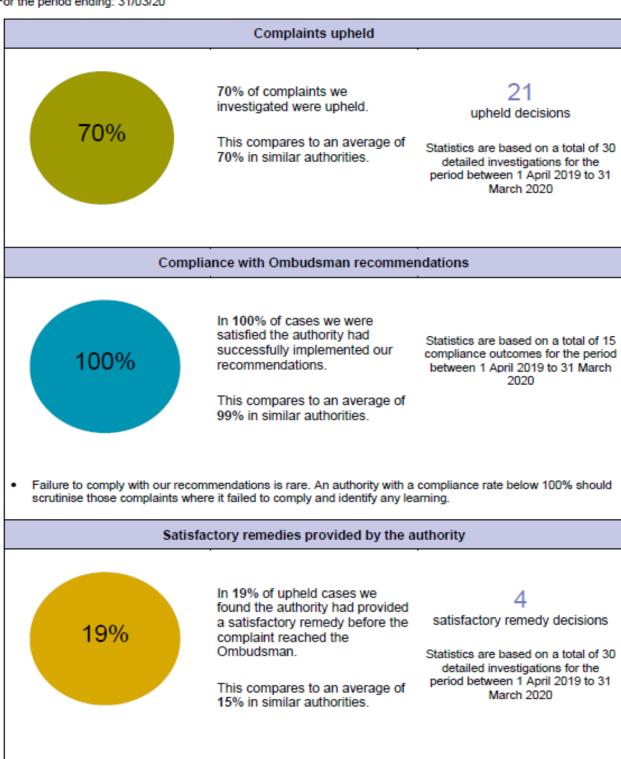
Yours sincerely,

Michael King

Local Government and Social Care Ombudsman

Chair, Commission for Local Administration in England

London Borough of Lewisham For the period ending: 31/03/20



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Appendix 3 – Adult Social Care Annual Complaints Report (2019/20)

Performance of the statutory complaints procedure used by the Adult Social Care division

1. Purpose of the report

This report provides an overview of the operation and effectiveness of the statutory complaints procedure for adult social care, as followed by the Adult Social Care division of the London Borough of Lewisham's Community Services directorate, between 1 April 2019 and 31 March 2020. Information is provided on the complaints that were made, the lessons learnt from those complaints and how the Division performed in its responses.

The production of this report fulfils a statutory requirement and complements performance reports and trend analysis presented to the Division's management team.

2. Policy context

Since 1991, the National Health Service and Community Care Act 1990 has charged each local authority with maintaining a statutory complaints process for adult social care services. The current regulations, The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009, came into force on 1 April 2009.

Statutorily, local provision of the regulations is the responsibility of each council's Chief Executive Officer. In Lewisham, that responsibility has been delegated to the Director of Operations for Adult Social Care.

The focus of the regulations is on early resolution rather than process, with an emphasis on learning from complaints. Local responsibility for administration and ensuring that lessons learnt from complaints are recorded and fed back to the Division's service providers, is delegated to the Quality Assurance and Business Support Manager for Adult Social Care.

3. The Local Government and Social Care Ombudsman

The Local Government and Social Care Ombudsman (LGSCO) provides an external, independent service that oversees complaints about a range of local authority services, including social services. The Ombudsman is concerned with maladministration by local authorities and social care providers leading to injustice.

The LGSCO also has the power to investigate complaints from adults who pay for their own care and who are in receipt of services from Care Quality Commission registered providers of social care.

The Ombudsman normally requires complaints to have been considered locally, using the most appropriate complaints procedure, before accepting a complaint for his own investigation.

Since the introduction of the current regulations on 1 April 2009, the Council has informed every complainant of their right to escalate concerns to the LGSCO at any time during the progress of their complaint.

According to his annual review of complaints, the Ombudsman administered 17 complaints and enquiries about Lewisham's adult social care service during the reporting period. Of that number the Ombudsman upheld 5 complaints, closed 4 complaints after the initial enquiry was made and referred 7 complaints back to the Local Authority for local consideration. One complaint was not upheld.

The Ombudsman's annual review of the Council's performance is published and can be found on his website at: https://www.lgo.org.uk/information-centre/reports/annual-review-reports

The Ombudsman's review of complaints about adult social care (latest 2018/19) is also available on his website at: https://www.lgo.org.uk/information-centre/reports/annual-review-reports/adult-social-care-reviews. Table 1, below, shows the number of complaints the Ombudsman received about Lewisham during that reporting period, and those received about Lewisham's comparator London boroughs.

Table 1

| London borough | No. complaints received by LGSCO 2018/19 |
|--------------------|--|
| Brent | 26 |
| Croydon | 25 |
| Waltham Forest | 22 |
| Lambeth | 21 |
| Wandsworth | 18 |
| Enfield | 17 |
| Hounslow | 17 |
| Haringey | 17 |
| Merton | 15 |
| Newham | 15 |
| Barking & Dagenham | 14 |
| Southwark | 13 |
| Lewisham | 12 |
| Tower Hamlets | 12 |
| Hackney | 11 |
| Ealing | 10 |
| Greenwich | 8 |

4. Analysis of complaints 2019/20

The Council received 87 complaints about adult social care during the reporting period. Table 2 shows that number in comparison to previous reporting periods.

Table 2

| 2019/20 | 2018/19 | 2017/18 | 2016/17 | 2015/16 | 2014/15 | 2013/14 |
|---------|---------|---------|---------|---------|---------|---------|
| | | | | | | |
| 87 | 78 | 69 | 76 | 70 | 90 | 87 |

The increase in complaints received recorded over the last two reporting periods has again been sustained and an analysis of those complaints is included later in this report.

The sustained increase though gives the Management team confidence that its decision to devolve the practical work of complaints to Service and Lead Operational Managers imbedded in the adult social care division has continued to support people in raising concerns with the Council.

The Council accepts that moving forward the effects of the Corona Virus Pandemic may have an impact on people's time and other resources needed to make complaints. The Service Development & Improvement team will continue to monitor the level of incoming complaints on a monthly basis to ensure that the Council continues to offer an accessible complaints process to those accessing adult social care services.

4.1 Complaints received

The Council's Adult Social Care division is divided into the following sections:

- A dedicated Adults with Learning Disabilities Social Work team;
- In partnership with the South London & Maudsley NHS foundation trust, a dedicated Community Mental Health team;
- The provision of Social Work, Occupational Therapy and Support Planning across four Integrated Neighbourhoods;
- Internal Provider Services help people to stay safe and well at home through the use of Enablement Services and telecare. A Shared Lives Scheme and Day Opportunities Service help adults with learning difficulties to have better life experiences living as part of their local communities.
- A Joint Commissioning service resourced by the Council and NHS Lewisham's Clinical Commissioning Group (CCG) to maintain the contracts for the provision of homecare support and brokerage of short & long term residential & nursing placements; and the management of support funded by NHS Continuing Healthcare;

- A Joint Health & Social Care service funded by the Council and Lewisham & Greenwich NHS Trust focussed on the avoidance of admission to hospital, and the safe and sustainable discharge of patients back into the community;
- A Safeguarding Quality Assurance service providing strategic support of the Council's safeguarding responsibilities, including the provision of a multi-agency safeguarding hub, a Deprivation of Liberty Safeguards (DoLS) service, and an out of borough placement review team.
- An Arranging Care team that is responsible for administration of care including Direct Payments.

Although support for financial assessments, income and payments is provided by the Council's Housing, Environment & Regeneration directorate, complaints about them are covered by the statutory regulations and so are included as part of this report.

Table 3 shows the number of complaints received during the reporting period by service, and the length of time taken (in working days) to provide a response.

Table 3

| Service menu (level 3) | 0 - 10 working days | 11 - 25 working days | 26-60 working days | 61+ working days | Total |
|---------------------------------|---------------------------|----------------------------|--------------------------|------------------------|-------|
| AWLD Social work | 0 | 8 | 1 | 6 | 15 |
| Integrated neighbourhoods | 4 | 8 | 12 | 4 | 28 |
| Internal provider services | 0 | 0 | 3 | 0 | 3 |
| Joint Commissioning | 1 | 3 | 4 | 2 | 10 |
| Joint health & social care | 5 | 1 | 3 | 3 | 12 |
| Safeguarding, quality assurance | 3 | 3 | 1 | 5 | 12 |
| Financial Services | 1 | 2 | 2 | 1 | 6 |
| Arranging care | 1 | 0 | 0 | 0 | 1 |

| Total | 15 | 25 | 26 | 21 | 87 |
|-------|----|----|----|----|----|
|-------|----|----|----|----|----|

4.2 **Performance**

The Council's performance measure is to consider and respond to complaints about adult social care within 25 working days. There is provision in the statutory regulations to extend that time-period up to 60 working days, with the customer's consent, if complaints are of a more complex nature.

The regulations allow for work to be done and actions to be taken in order to resolve a person's concerns 'on the spot' without making them go through a process unnecessarily, particularly where satisfactory local resolution can be achieved quickly and easily. The Council resolved 17% of the complaints it received in this way.

The Council responded to a further 59% of the complaints it received without needing to extend the initial deadline of 25 working days.

Complaints about adult social care are often complex, frequently involving partner agencies and safeguarding concerns that take precedence. The Service Development & Improvement team will be working to reduce the number of complaints that take longer than 25 working days to resolve.

4.3 Category analysis

The Council uses iCasework (an electronic work-flow system) to assist in the administration of the correspondence it receives. The system supports a 'root cause analysis' of complaints which helps officers to record multiple issues for investigation.

Any analysis of the complaints received shows that:

- 30% of complaints were about a perceived failure to provide a service or take action. Of those complaints 8 were not upheld and 7 were either partly or fully upheld. A further 4 were resolved 'on the spot'.
- 16% of complaints were about disputed costs or charges for services. Of those complaints 4 were not upheld, 4 were either partly upheld or upheld and 1 was resolved 'on the spot'.
- 11% of complaints were reporting inadequate services on behalf of a third party provider contracted by the Council. Of those complaints 1 was not upheld, 4 were resolved 'on the spot' and 2 were upheld.
- 11% of complaints were about communication. Of those complaints 3 were not upheld and 6 were partly upheld or upheld.
- 9% of complaints were about staff conduct. Of those complaints 3 were not upheld and 2 were resolved 'on the spot'.

The remaining complaints received recorded issues or unhappiness with a decision, a cancellation of a service a delay or a request for service. Of those complaints 10 were not upheld, 3 were partly upheld, 3 were resolved 'on the spot' and 1 was upheld.

5. Learning from complaints

The Service Development and Improvement team supports customers and the Adult Social Care division to quickly and satisfactorily resolve concerns and complaints. One of the key ways we achieve that is by helping people to focus on those things they would like to see improved as a result of their complaint and what outcomes they are seeking.

Three key learning points were identified during the reporting period that are linked to the complaint trends identified as part of this reports analysis.

5.1 Perceived failure of service

The Service Development and Improvement team will work in partnership with the Principal Social Worker and Advanced Practitioners to improve the way we communicate our strengths based approach to the provision of adult social care, which helps people to focus on maintaining or regaining independence through the use of their own resources where possible.

5.2 Costs & charges

Work has begun on improving the information we make available to help us identify as early as possible whether charging is likely. The Service Development and Principal Social Work teams will work together to embed that work into every day practise.

5.3 Provider concerns

The Joint Commissioning team has started work on a new Provider Concerns Policy and accompanying process, and the intention is to link that process with the Quality Assurance Framework being devised by members of the Multi Agency Quality Assurance & Improvement Group (MAQAIG). The framework will allow the group to pre-emptively act on possible issues of quality arising and the Policy (and process) will support the use of programmed actions in order to bring about improvement.

6. Our priorities and proposed areas for improvement

The overall aim of the Service Development and improvement team is to make available a high quality, effective representations service for the Council's customers to use, thus enhancing the learning opportunities available to the Council from the representations it receives.

The Team has identified the following priorities and areas for improvement.

6.1 Priorities

 Support the Adult Social Care division in completing the implementation of its 'end to end' pathway redesign, simplifying and streamlining services, helping to imbed good practice at the heart of both policy and process, and promoting learning from complaints;

- Support the further digitisation of systems used by the Adult Social Care division helping to ensure data quality at all times through consistent and accurate recording; and
- Make available good quality data that will help services to appropriately plan resources and provide better services.

6.2 Areas for improvement

- Increase and enhance the virtual resource available to officers within the division in regard to receiving, administering and responding to complaints, empowering them to resolve more people's concerns 'on the spot' where it is appropriate to do so;
- Improve the digital recording of personal information across the division with a view to improving the quality and timeliness of the division's response to enquiries and complaints; and
- Provide a continuous review of publically available information about the Council's adult social care service ensuring its appropriateness, accuracy and availability

Mark Watson Gray

Quality Assurance & Business Support Manager February 2021

Appendix 4 – Children' Social Care Annual Complaints Report (2019/20)

Children and Young People Directorate - Annual report on compliments, complaints and enquiries 2019-2020

1. Executive Summary

- 1.1 This report provides information on complaints and enquiries handled by the Children and Young People Directorate (CYP) between 1 April 2019 and 31 March 2020 and includes the annual report required by statutory guidance, in 'Getting the Best from Complaints' (Social Care Complaints and Representations for Children, Young People and others)*.
- 1.2 The report includes information on complaints falling within the Council's corporate complaints procedure which were eligible for consideration by CYP, for the same period
- 1.3 Enquiries from MPs, Councillors, the Mayor and general enquiries are also included, for the same period.
- 1.4 The report provides information on all stages of the complaints procedures, as well as complaints to The Local Government and Social Care Ombudsman (LGSCO).

2. Purpose of Report

To provide:

- 2.1 Numbers of complaints and representations received by CYP;
- 2.2 Information about compliance with timescales;
- 2.3 Key themes of complaints;
- 2.4 Outcomes of complaints;
- 2.5 Learning and service improvements;
- 2.6 Information about monitoring and quality assurance.
- 2.7 Details about independent advocacy services.

3. Stage 1 complaints and enquiries

- 3.1 Response times:
 - Statutory complaints: 10 working days, with option to extend to 20 working days for complex complaints
 - Corporate complaints: 10 working days
 - MP/Mayor/Councillor 10 working days.

3.2 Table 1 – Total of new cases received over past three years

| 2017/2018 | 2018/2019 | 2019/2020 | | |
|-----------|-----------|-----------|--|--|
| 257 | 351 | 325 | | |

3.3 Table 2 – Breakdown of new cases received 2019/2020

| Period | Stage 1 | Children Act Stage 1 | Comment | General enquiry | Mayor enquiry | Member enquiry | MP enquiry | Compliment | Chief Executive enquiry | Total |
|--------|------------|----------------------------|---------|--------------------|------------------|-------------------|---------------|------------|-------------------------------|-------|
| Q1 | 23 | 24 | 1 | 3 | 1 | 5 | 38 | 0 | 0 | 95 |
| Q2 | 26 | 22 | 0 | 0 | 2 | 6 | 32 | 5 | 0 | 93 |
| Q3 | 14 | 20 | 0 | 1 | 3 | 4 | 14 | 2 | 1 | 59 |
| Q4 | 15 | 29 | 0 | 6 | 3 | 5 | 20 | 0 | 0 | 78 |
| Total | 78 | 95 | 1 | 10 | 9 | 20 | 104 | 7 | 1 | 325 |

3.4 Table 3 – Stage 1 Complaints and enquiries with % responded on time

| Period | Stage 1 | Children Act Stage 1 | General enquiry | Mayor enquiry | Member enquiry | MP enquiry | Comment | Chief Executive enquiry |
|--------|---------------|-------------------------|--------------------|------------------|-------------------|---------------|---------------|-------------------------------|
| Q1 | 33% (7/21) | 37% (7/19) | 25% (1/4) | 0% (0/3) | 33% (2/6) | 26% (8/31) | 0% (0/0) | 0% (0/0) |
| Q2 | 28% (8/29) | 56% (10/18) | 0% (0/0) | 0% (0/1) | 29% (2/7) | 32% (9/28) | 100% (1/1) | 0% (0/0) |
| Q3 | 20% (3/15) | 20% (4/20) | 0% (0/0) | 33% (1/3) | 50% (2/4) | 10% (2/20) | 0% (0/0) | 0% (0/1) |

| Period | Stage 1 | Children Act Stage 1 | General enquiry | Mayor enquiry | Member enquiry | MP enquiry | Comment | Chief Executive enquiry |
|--------|---------------|-------------------------|--------------------|------------------|-------------------|---------------|----------|-------------------------------|
| Q4 | 36% (5/14) | 37% (10/27) | 86% (6/7) | 50% (1/2) | 50% (1/2) | 33% (6/18) | 0% (0/0) | 0% (0/0) |

3.5 Compliments

There was a sharp drop in the number of compliments recorded during the year. Only seven were submitted to the Complaints team, compared to 40 in 2018-19. Four of the compliments were for Children's Social Care and three for Children with Disabilities. These all reflect the high quality of service provided by individual workers. Comments made talk of experienced support, prompt and helpful guidance, reassuring, positive, caring and outstanding service.

4. Stage 2 complaints

- 4.1. Response times:
 - Statutory complaints: 25 working days, with maximum extension to 65 working days
 - Corporate complaints: 20 working days.
- 4.2. The majority of complaints were resolved satisfactorily at Stage 1, as evidenced in the data in this report. The rest of this section deals with numbers, outcomes and trends of Stage 2 complaints for the year.

4.3. Table 4: Stage 2 requests received

| Total number received during the year | 25 | | | |
|---|-----------|-----------|--|--|
| Comprised of: | Corporate | Statutory | | |
| | 7 | 18 | | |
| Accepted for Stage 2 investigation | 10 | | | |
| | Corporate | Statutory | | |
| | 5 | 5 | | |
| Successful alternative dispute resolution | 4 | ı | | |
| Rejected | g |) | | |
| Withdrawn | 4 | ļ | | |
| % of total number of complaints received that were accepted for investigation | 14% | | | |

- 4.4. There was a reduction in the number of Stage 2 requests received as compared with 2018-19, when 36 requests were received, with 19 being accepted for investigation.
- 4.5. The data shows that the majority of complaints were successfully answered at Stage 1, reflecting the focus on early resolution and de-escalation of issues.
- 4.6. None of the complaints accepted for investigation were completed within timescale. The reasons for this were mainly owing to delay in finalising the responses at the end of the investigation. This is an on-going issue.

5. Stage 3 complaints

- 5.1. Response times:
 - Corporate complaints 30 working days. The Independent Adjudicator (IA) deals with Stage 3 complaints on behalf of the Council.
 - Statutory complaints (review panel) 30 working days to convene and hold the Review Panel, 5 working days for the Review Panel to issues its findings and 15 working days for the Executive Director to respond to the findings.
- 5.2. Table 5: Stage 3 requests received.

| Total number of requests | 11 |
|--------------------------|----|
| Corporate | 5 |
| Statutory | 7 |
| Accepted | |
| Corporate | 3 |
| Statutory | 3 |

- 5.3. There was an increase in the number of Stage 3 requests in comparison to 2018-9, when six requests were received, although only one more complaint accepted (six, three corporate and three statutory).
- 5.4. Timescales were met in all of the cases accepted.

6. Ombudsman complaints

6.1 Table 6: complaints received

| Number of complaints | 15 |
|----------------------------------|------------------------|
| Of which: | |
| Premature | 3 |
| Outside jurisdiction | 5 |
| Investigation resulting in fault | 5 |
| Historic complaint | 1 (remedy had not been |
| Not completed in-year | 1 |

7. **Outcomes: Table 7**

| Outcome | Stage 1 | Children Act | Stage 2 | Children Act | Stage 3 | Children Act | Ombud sman | Total |
|---|------------|-----------------|---------|-----------------|------------|-----------------|---------------|-------|
| Not upheld | 38 | 41 | 4 | 2 | 1 | 1 | 0 | 86 |
| Partly upheld | 18 | 17 | 1 | 2 | 0 | 1 | 0 | 37 |
| Upheld | 17 | 19 | 1 | 1 | 2 | 1 | 0 | 40 |
| Premature | | | | | | | 3 | |
| Outside jurisdiction | | | | | | | 5 | |
| Not upheld: No further action | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 |
| Upheld: Maladministration and Injustice | 0 | 0 | 0 | 0 | 0 | 0 | 5 | 3 |
| Carried forward to 2020-21 | | | | | | | 1 | |
| Total | 74 | 79 | 5 | 5 | 3 | 3 | 15 | 184 |

Recurring themes of complaints 8.

8.1 Table 8: Top 6 themes of Stage 1 complaints

| Theme | Number of complaints | Upheld | Not Upheld | Partially Upheld | Escalation request |
|--------------------------|----------------------|--------|---------------|---------------------|--------------------|
| Policy/procedure: | | | | | |
| Children Act | 6 | 3 | 2 | 1 | 3 |
| Corporate | 27 | 12 | 6 | 9 | 6 |
| Lack of support: | | | | | |
| Children Act | 20 | 3 | 12 | 5 | 1 |
| Corporate | 4 | 1 | 3 | 0 | 0 |
| Unhappy about decisions: | | | | | |
| Children Act | 16 | 1 | 12 | 3 | 3 |
| Corporate | 5 | 0 | 4 | 1 | 1 |
| Conduct/Attitude: | | | | | |
| Children Act | 13 | 0 | 11 | 2 | 2 |
| Corporate | 2 | 0 | 1 | 1 | 0 |
| Financial: | | | | | |
| Children Act | 12 | 2 | 8 | 2 | 2 |
| Corporate | 1 | 1 | 0 | 0 | 1 |
| Communication: | | | | | |
| Children Act | 7 | 1 | 5 | 1 | 1 |
| Corporate | 1 | 0 | 0 | 1 | 0 |

8.2 Themes explained

- 8.2.1 Policy/procedure: complaint that policy was not followed correctly, including delays in completing statutory assessments, (e.g. Children and Family assessments, EHCP related
- 8.2.2 Lack of support: complaints about lack of contact and help for families, children and young people, for example to move into independent accommodation, with Special Guardianship assessments, during times of crisis.
- 8.2.3 Unhappy about decisions: e.g. unhappy that children are on Child Protection plans and resulting actions of social workers, disagreement with decisions about initiating care proceedings, unhappy about Care Package Panel decisions, unhappy about outcome of school transfer applications.
- 8.2.4 Conduct/attitude: e.g. inappropriate comments and behaviour from social workers, perception of bias towards particular member(s) of family.
- 8.2.5 Financial: e.g. care leavers complaining they had not received all the savings they were entitled to, non-payment of allowances for care leavers and Special Guardians.
- 8.2.6. Communication: e.g. not keeping people informed/updated about developments, plans.
- 8.3 Examples of remedies for upheld/partially upheld complaints
- 8.3.1 Apologies for delays; missed appointments.
- 8.3.2 Funds/allowances backdated; reimbursements arranged; payments to recognise delay, time and trouble.
- 8.3.3 Immediate action taken to restore person to where they should have been, e.g. appliances delivered, education arranged,
- 8.3.4 Review of support package resulting in improved offer; review of panel decision.
- 8.3.5 New social worker; arrangements set out for improved communication between family/individual and allocated worker (particularly relating to complaints from fathers living apart from their children).

8.4 Main themes of escalated complaints (requests for Stage 2 and Stage 3 complaints)

- Delays in Education, Health, Care Needs Assessment
- Delays in issuing EHCP
- Failure to deliver provision set out in EHCP
- No pathway plan
- Lack of support from Personal Adviser (with accommodation/education)
- Information wrongly shared at Child Protection conference
- Poor standard of care for young person in residential placement
- Unsafe accommodation for family at risk
- Disagreement with information in assessments
- Payments not received or delays in receiving payments
- Failure to properly investigate allegations against carers

- Failure to safeguard and protect children/young people
- Lack of support for Special Guardian

8.5 Examples of remedies and service improvements for Stage 2 and Stage 3 complaints

- Backdated Special Guardian allowance
- Review of communication with prospective Special Guardians
- Confirmation of creation of new service for care leavers being implemented.
- Confirmation of creation of new transitions team, with improved pathways for young people aged 18-25.
- Apologies for oversights, lack of communication, support, delays in making payment, failing to adhere to statutory duty
- Payments for missed educational support, delay in reaching conclusions about the complaint, for loss of service and support to Child Looked After.
- New assessment of family's needs.

9. Monitoring and Quality Assurance

- 9.1 Weekly trackers are circulated throughout CYP to assist with meeting Stage 1 timescales.
- 9.2 Reminders to staff completing responses are sent 3 days before response is due.
- 9.3 To ensure the learning from complaints forms part of the Quality Assurance Framework, monthly reports are prepared which inform the quarterly quality assurance cycle. This ensures there is a reflective and regular process to capture the learning from recent complaints and ensure the 'loop' is closed, helping to prevent repeat complaints, and ensure improved customer satisfaction.

10. Independent Advocacy

- 10.1. Advocacy services for young people have been delivered by National Youth Advocacy Service (NYAS) since 1st January 2020.
- 10.2. Prior to this, young people's advocacy services in Lewisham had been delivered by Coram Voice from May 2017.
- 10.3. The contract requires NYAS to deliver a minimum of 1,000 advocacy hours per year, with an option for the Council to spot-purchase up to 500 additional hours on top of this, as needed.
- 10.4. The Advocacy Service works with children and young people in the above eligible groups who are:
 - Children Looked After who want or need to be supported to attend formal meetings, such as CLA Reviews, in order to get their wishes and feelings heard
 - Children Looked After who have a concern about their care that they don't feel
 has been sufficiently addressed by the Council, and so wish to raise a complaint
 - Children and young people that are subject to Child Protection Plans where the child or Social Worker feels support of an advocate would be beneficial at conferences

- Care Leavers that have a concern about the support they have received from the Council, that they wish to be addressed
- 10.5. Referrals for the advocacy service can either be a self-referrals or a referral from a young person's social worker, personal advisor, participation manager, independent reviewing officer or CP conference chair.
- 10.6. The service provides time-limited support, information and representation from independent advocates. This will support Children Looked After (CLA), care leavers and children subject to Child Protection Plans when decisions are made about their lives, or when they wish to raise a concern about a service they have received from

Liz Whitby

Complaints & Information Manager Children's Social Care