

Meeting of:	Healthy Living and Social Care Scrutiny Committee
Date of Meeting:	Tuesday, 15 October 2019
Relevant Scrutiny Committee:	Healthy Living and Social Care
Report Title:	Annual Social Services Representations and Complaints Report 2018/2019
Purpose of Report:	To ensure that Scrutiny Committee are provided with an overview of the activity, performance and achievements within this area of work
Report Owner:	Director of Social Services
Responsible Officer:	Head of Resource Management and Safeguarding
Elected Member and Officer Consultation:	Social Services Senior Management Team
Policy Framework:	This is a matter for Executive decision
<p>Executive Summary:</p> <ul style="list-style-type: none"> This report seeks to ensure effective scrutiny of performance in relation to complaints about social services and to provide evidence about the impact upon the lives of individuals and their families. 	

Recommendations

1. That Scrutiny considers the content of this report and the Annual Complaints Report for 2018/19 attached at appendix 1.
2. That Scrutiny continues to receive an annual report in relation to complaints and compliments received by the Social Services Directorate.

Reasons for Recommendations

1. To ensure effective scrutiny of performance in Social Services and to provide evidence about the effect upon the lives of individual service users and their families/carers.
2. To ensure Scrutiny Committee have oversight of the activity in relation to Complaints and Compliments in the Social Services Directorate.

1. Background

1.1. Handling complaints properly is a crucial part of the responsibilities undertaken by Social Services. An effective and correctly managed complaints and compliments system plays a key role in ensuring that users receive the right services for them. It enables the Directorate to:

- Acknowledge quickly when mistakes have been made;
- Put them right effectively and apologise, where appropriate;
- Ensure that we learn lessons from complaints and apply these lessons to improve services and performance.

1.2. The Directorate has sought to ensure that its systems for managing complaints are robust. Effective monitoring of complaints acts as a valuable source of feedback, highlighting aspects of service delivery which fall below the standard the Council aims to achieve. Handling complaints promptly, efficiently and responsively enhances the Directorate's reputation with all its stakeholders.

1.3. This is the fifth year since the revised complaints guidance from the Welsh Government – *A guide to handling complaints and representations by local authority social services* – came into effect. The guidance supports implementation of the Social Services Complaints Procedure (Wales) Regulations 2014 and the Representations Procedure (Wales) Regulations 2014.

1.4. The complaints procedure is a two stage procedure as summarised below.

Stage 1 – Local Resolution

- The local authority must offer to discuss (either face to face or over the telephone) the complaint or representation with the complainant in an attempt to resolve the matter. This discussion must take place within 10 working days of the date when the complaint was acknowledged. Where this

approach leads to a mutually acceptable resolution of the matter, the local authority must write to the complainant within a further 5 working days.

Stage 2 – Formal Investigation

- A complaint or representation subject to a Formal Investigation must now be investigated by an Independent Investigator from outside the local authority. An Independent Person must also be involved where a representation is considered at the Formal Stage. The Investigating Officer will be required to produce an investigation report, which may include recommendations for the local authority to consider. This stage must be completed within 25 working days of the date the complaint is agreed with the complainant. If the local authority is not able to send a written response to the investigation report within 25 working days due to exceptional circumstances, it must write to the complainant explaining the reasons for the delay and when a response will be provided. The local authority's response must advise complainants that they have the right to complain to the Public Services Ombudsman for Wales if they remain dissatisfied following this stage of the procedure.

1.5. This two stage process is in line with the *Model Concerns and Complaints Policy and Guidance* issued by Welsh Government and the NHS Complaints Procedure: *Putting Things Right*.

2. Key Issues for Consideration

- 2.1** The Annual Social Services Representations and Complaints Annual Report 2018/2019 is attached at Appendix 1. It contains a detailed account and some of the most significant aspects are set out below.
- 2.2** The Complaints Officer takes a proactive approach to preventing and mediating issues that have the potential to escalate into a complaint. The Complaints Officer regularly contributes to the quality assurance processes especially where there is an emerging provider issue and the Escalating Concerns process is engaged. This enables the Complaints Officer to have an involvement at an early stage and to have a good grasp/knowledge of the issues affecting the service/individuals and how this could relate to potential complaints. For some people who contact Social Services, they may be unsure whether or not their concern equates to a formal complaint. In these cases, the Complaints Officer offers to meet with them to try and help clarify the issues and listen to their concerns. This approach has proved to be invaluable in an effective way of reaching an early resolution to many concerns. The Complaints Officer has found a number of ways of engaging with service users by visiting residential and day care settings, schools and advocacy providers. This approach also assists in disseminating information about the Complaints Procedure.
- 2.3** As at 31st March 2019, 63 complaints were received, which is slightly higher than the previous year where there were 53 complaints. Of these 63 complaints, 28 were for Adult Services, 31 were for Children and Young People Services and 4 related to our Resource Management and Safeguarding Division. During this period, no complaints were referred onto the Ombudsman for investigation.

- 2.4** As at 31st March 2019, 38% were resolved within the designated timescales. Meeting the designated timescales for complaints is increasingly more challenging because the complexity and multi-faceted nature of the complaint which can impact on our timeliness of response, particularly where legal advice is required. Although just over a third of the complaints were resolved within designated timescales, it should be noted that in all instances the complainants were made aware of the reason for the extension to the timescales and mutually agreed to an extension. Although this is not taken into account as part of the statutory guidance, we pursue robust monitoring of our complaints, as on a weekly basis the Complaints Officer circulates a report to all Senior Management to flag up any potential complaints that require follow up.
- 2.5** Complaints from service users provide the Directorate with valuable information that can help us to further shape and improve how we deliver our services. We have developed clear processes for embedding these lessons learnt into practice. Stage 1 complaints often highlight any shortfalls in service delivery and formal action plans are developed from recommendations arising from Stage 2 complaints or complaints investigated by the Ombudsman. By looking at these issues collectively we are able to identify the key areas of focus going forward.
- 2.6** During 2018/19 a summary of these key lessons learnt include:
- The importance of confirming who you are speaking to when you return a call.
 - Ensuring that data held on our system is up-to-date and accurate.
 - Explaining to family members the rationale behind decisions.
 - Clearly explaining to family members the implications of court proceedings, so that they understand the process.
 - Checking that service users understand charging policies.
 - Explaining our quality monitoring and duty processes.
 - Effectively communicating with service users any changes to appointments.
 - Ensuring confidential information is not sent to wrong address.
 - The importance of effective and timely communication with service users and families.
 - Remaining professional at all times when dealing with families.
 - Returning phone calls in a timely manner.
 - Observing confidentiality with service users.
 - The need to be mindful of any care proceedings.
 - Providing written responses following verbal messages/information.
- 2.7** Compliments and praise provides a vital means through which we identify what we are doing well and to share this wider learning/experience with others. It is also central to recognising the efforts of our staff who are often delivering services at the front line under increasingly more challenging circumstances. We

have put in place appropriate mechanisms to collate compliments that enable us to see areas where we are performing particularly well as well as helping us to further reinforce the positive attitudes and behaviours of our staff to further motivate and engage our workforce.

- 2.8** During 2018/19, 25 compliments were received providing a good spread across Adult, Children and Young People Services and Resource Management and Safeguarding Divisions. These compliments related to the services and support service users received/experienced and they often named specific staff where they felt the individual had done over and above what was expected of them.
- 2.9** In terms of our priorities for improvement during 2019/20, we will focus on:
- Continuing to work with independent investigators to make an improvement in the time taken to complete Stage 2 investigations by reviewing support offered to investigators;
 - Continuing to work with managers and staff to make an improvement in the time taken to complete Stage 1 complaints. This will involve further developing the weekly complaints monitoring to red flat complaints to Heads of Service that have or are unlikely to not meet the designated timescales for response. The Complaints Officer will also set up a process for contacting investigating officers to ensure they are on track with and are following the complaints process guidance.

3. How do proposals evidence the Five Ways of Working and contribute to our Well-being Objectives?

- 3.1** The Complaints Officer takes a proactive role in helping prevent the escalation of concerns raised becoming formal complaints by meeting with service users and their families to try and resolve matters by mediating at the earliest opportunity. The Complaints Officer works collaboratively with service users and their families at this point to ensure any information needed is provided and that individuals are signposted and/or referred for the correct support. This effective approach continues after Stage 1 has been completed to try and prevent escalation to Stage 2 of the process.
- 3.2** Complaints provide an opportunity for the Directorate to learn from the experiences of service users and their families and are a valuable source of information on how to improve/shape services for the future. We have developed processes for embedding the lessons learned into practice. The outcomes from complaints often highlight shortfalls in service delivery and formal action plans are developed from recommendations made following Stage 2 complaints investigation or complaints investigated by the Ombudsman. By looking at these issues collectively we are able to identify key areas of focus going forward. Key lessons learned are summarised in the annual Report (Appendix 1) and will be shared with staff via a newsletter. Compliments are also a vital means through which we can identify what we are doing well and to share this wider learning / experience with others. We have put in place mechanisms

to collate compliments that enable us to see areas where we are performing well.

- 3.3** The Complaints Officer also intends to consult with complainants to help evaluate the effectiveness of the service provided. This is in addition to the information already being gathered by the Policy and Quality Assurance Officer.

4. Resources and Legal Considerations

Financial

- 4.1** Operating the Complaints Policy and Procedure is a statutory responsibility and the work has to comply with the regulations. These are costs which accrue to the Directorate and officers often devote a considerable amount of time to resolving an individual complaint. However, the costs have been managed within the budget set for this area of work.

Employment

- 4.2** There are no employment issues as a result of this report.

Legal (Including Equalities)

- 4.3** This report supports implementation of the Social Services Complaints Procedure (Wales) Regulations 2014 and Representations Procedure (Wales) Regulations 2014.

5. Background Papers

Social Services Representations and Complaints Annual Report 2018/19 – Appendix 1

Complaints Audit Action Plan – Appendix 2

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Social Services Representations and Complaints

ANNUAL REPORT

2018/2019

DATE:	
AUTHOR:	Amanda Green
HEAD OF SERVICE	Amanda Phillips
APPROVAL DATE	
VERSION:	Final

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1. Introduction

The purpose of this report is to provide a review and statistical analysis of the complaints, comments and compliments received by Social Services during the period 1st April 2018 to 31st March 2019.

It covers all three divisions within the Social Services Directorate: Adult Services, Children and Young People Services, and Resources Management and Safeguarding. This is the 8th combined report to be produced since a unified complaints service for the Directorate was introduced in early 2009 and the fourth to be produced following new complaints guidance (A guide to handling complaints and representations by local authority social services) which came into effect on August 1st 2014. The guidance supports the implementation of the *Social Services Complaints Procedure (Wales) Regulations 2014* and the *Representations Procedure (Wales) Regulations 2014*.

The NHS and Community Care Act (1990), Children Act (1989 Part III) and the National Minimum Standards and Regulations (2002) for Fostering Services require local authorities to maintain a representations and complaints procedure for social services functions. The Welsh Government (WG) expects each local authority to report annually on its operation of the procedure.

The Social Services Directorate believes strongly that handling complaints well is a crucial part of its responsibilities. A good complaints handling system is a vital part of ensuring that our service users receive the service to which they are entitled. It enables the Directorate to:

- Acknowledge quickly when mistakes have been made;
- Put them right effectively and to apologise where appropriate;
- Ensure that we learn lessons from complaints.

2. Why Do People complain?

The most common reasons reported for making a complaint include:

- Wanting to be heard;
- Ensuring that concerns are recognised, acknowledged and taken seriously;
- Ensuring that appropriate action is taken to remedy problems and avoid similar incidents in the future; and
- To receive an apology.

3. The Complaints Procedure.

The current complaints procedure came into effect on August 1st 2014. All complaints registered with the complaints officer after this date have been handled in line with the new statutory regulations and guidance. Further information on the Complaints Procedure is attached to this report and included at point 7.3.

4. The Public Services Ombudsman for Wales

The Public Services Ombudsman for Wales provides an external independent service for the purpose of considering complaints made by members of the public in relation to all local authority services, including Social Services. The Public Services Ombudsman also has jurisdiction to examine and determine complaints of injustice as a result of maladministration on the part of the local authority. During 2018/19 the

Ombudsman received 2 cases involving Social Services in the Vale of Glamorgan. The Ombudsman determined that neither case would be investigated. In addition, 1 request for information was received from the Ombudsman in relation to a Health complaint, the information requested was supplied within the required timescale.

From August 1st 2014 if a complaint or representation is not resolved at the Formal Investigation Stage (Stage 2) the complainant must be advised that they have the right to complain to the Public Services Ombudsman. The Ombudsman's office will aim to complete all investigations within 12 months but most are concluded sooner.

5. Member referrals

The Representations and Complaints Procedure does not preclude the right of an individual to approach their Local Councillor, Assembly Member or Member of Parliament. On behalf of their constituents, they undertake an important role in handling concerns and queries that individuals may have. These referrals can range from comments and queries, to complaints. If an Elected Member does not consider it to be appropriate for them to deal with a concern, the matter can be dealt with under the Complaints Procedure.

During 2018-2019, Social Services received a total of 26 referrals from MPs and AMs relating to social care services. All the referrals received a response from the Cabinet Member for Social and Care Services.

6. Mediation

Some people who contact Social Services are not sure if they want to make a formal complaint. In these cases, the Complaints Officer offers to meet with them to try and help clarify the issues and listen to their concerns. Whilst time consuming, this approach has proved to be valuable and effective in terms of reaching an early resolution of concerns. This initiative is in keeping with the spirit of 'Listening and Learning' and acknowledges the extended duty placed on local authorities by the guidance to safeguard and promote the welfare of service users.

It involves the Complaints Officer using a variety of approaches, including discussion, supplying information and, in many cases, listening to the concerns raised and ensuring the relevant service area is notified. The Complaints Officer has also found ways of engaging with service users who have not made complaints, for example by visiting residential and day care settings, schools and advocacy providers. This approach assists in disseminating information about the Complaints Procedure.

The Complaints Officer made 149 visits to service users/families of service users during the reporting period. In the majority of cases, the Complaints Officer was able to alleviate the anxieties of individuals and signpost them onto other services where appropriate. As a consequence of these efforts, fewer issues escalate into enquiries and complaints. During 2018/19 of the 149 issues raised, only 42 went on to become enquiries requiring a more formal response and 4 went on to become a complaint. Of these 42 enquiries, 23 related to Adult Services and 13 related to Children and Young People Services and 6 were in relation to the Resource Management and Safeguarding Division.

Complainants are entitled to request a Stage 2 investigation if they are not happy with the response at Stage 1. As a positive means of resolution, Senior Managers in the

Vale of Glamorgan offer to meet with the complainant for further discussion before progressing to Stage 2. This practice has continued in 2018/19.

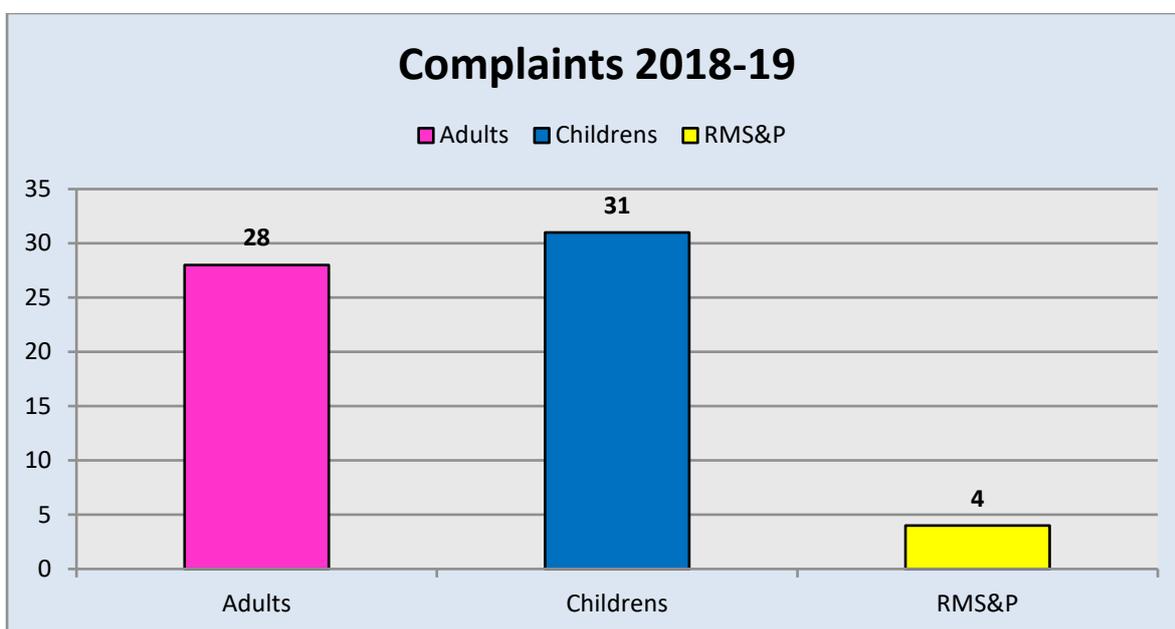
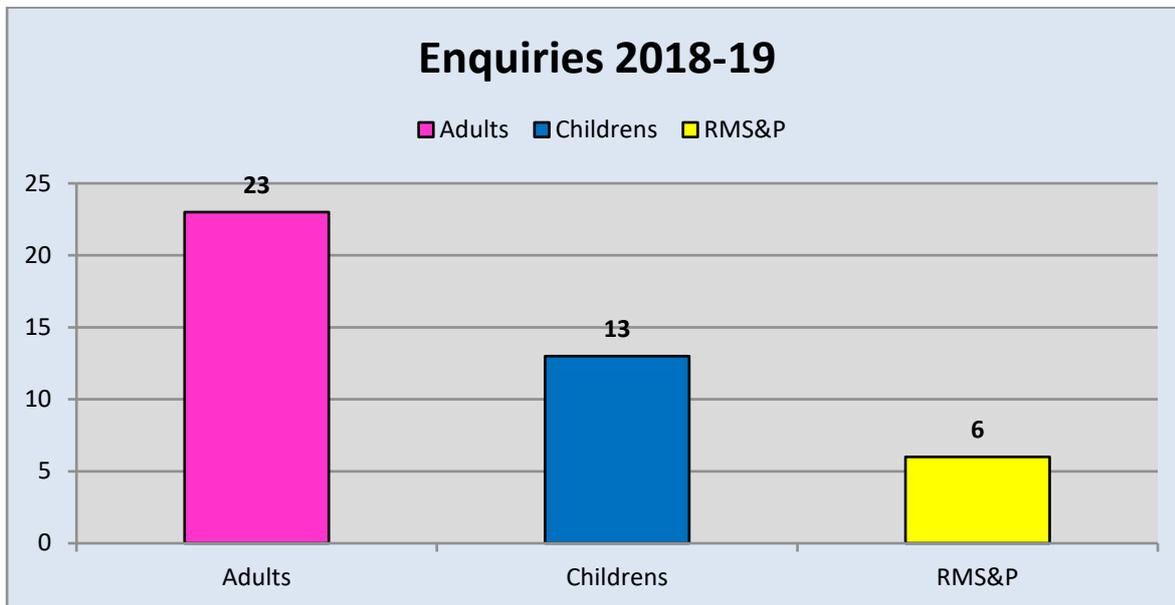
7. Statistical Information

7.1 Number of representations received by the Directorate

Table 1

	Enquiries*	Complaints
Adult Services	23	28
Children and Young People Services	13	31
Resources Management, Safeguarding & Performance	6	4
Totals	42	63
Total	105	

*Enquiries are issues of concern to the service user, dealt with by the team, without escalation to a complaint.



Information collated shows a decrease in the number of enquiries recorded from 49 in 2017/18 to 42 and an increase in the number of complaints from 53 in 2017/18 to 63 during the reporting period.

As mentioned above, discussions are undertaken with the complainant in many cases before escalating to a complaint. These are recorded as enquiries.

7.2 Stages at which complaints were resolved

The table and charts below provide details regarding the stage at which complaints were resolved.

Table 2

Stage at which complaints were resolved	Adult Services	Children and Young People Services	Resources Management, Safeguarding & Performance
Stage 1 Local Resolution	27	31	4
Stage 2 Formal Consideration	1	3	0
Total	28	31	4

*The Children and Young People Services Stage 2 complaints were previously considered at Stage 1.

The number of complaints resolved at Stage 1 is due, in the main, to the commitment of team managers to resolve issues in respect of their service and the positive involvement of senior managers before escalation to Stage 2.

Complainants who remain dissatisfied following stage 2 of the complaints procedure can ask the Public Service Ombudsman for Wales to consider their complaint.

7.3 Timescales for completion of complaints

The timescale for completion of Stage 1 complaints is 10 working days (from the date of acknowledgement) for the authority to contact the complainant to discuss the complaint and a further 5 working days to confirm the outcome of the discussion in writing. It should be noted that often there are genuine reasons for not being able to meet the prescribed timescales. For example, some cases can take longer due to the complexity of the issues raised and the need to ensure that cases are thoroughly investigated.

In these cases, an extension to the timescale (of a further 10 working days) is normally agreed with the complainant, however this still takes the complaint out of the prescribed timeframe for the purposes of reporting.

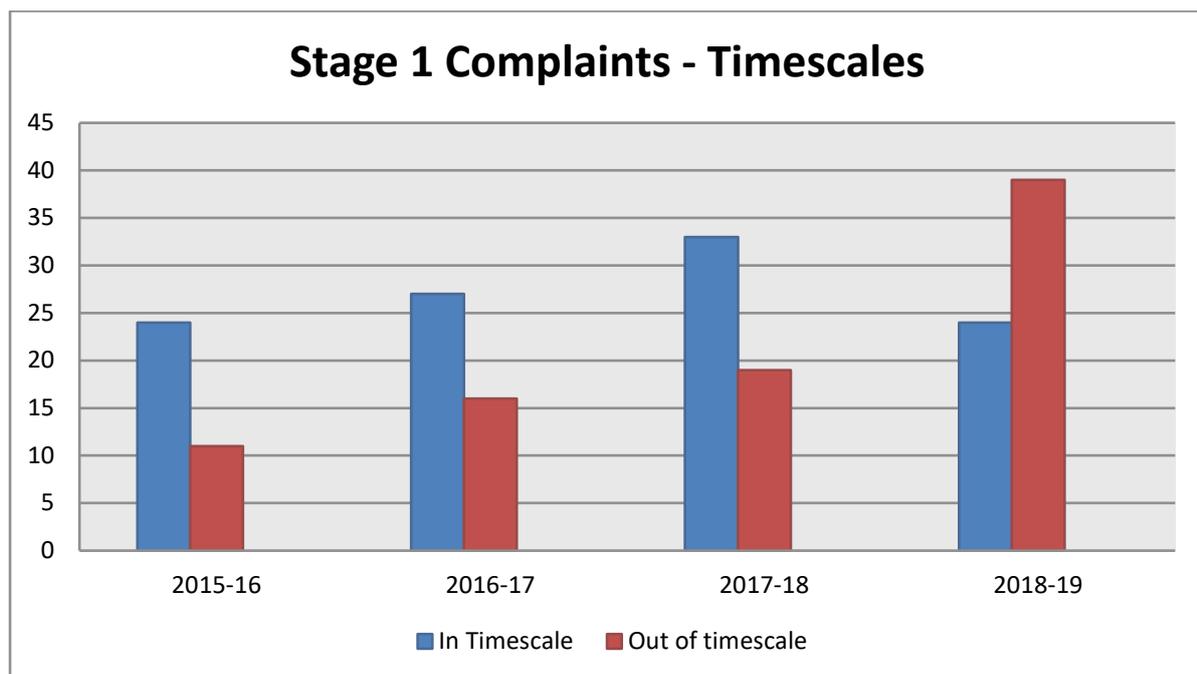
The full range of timescales associated with Stage 1 complaints are:

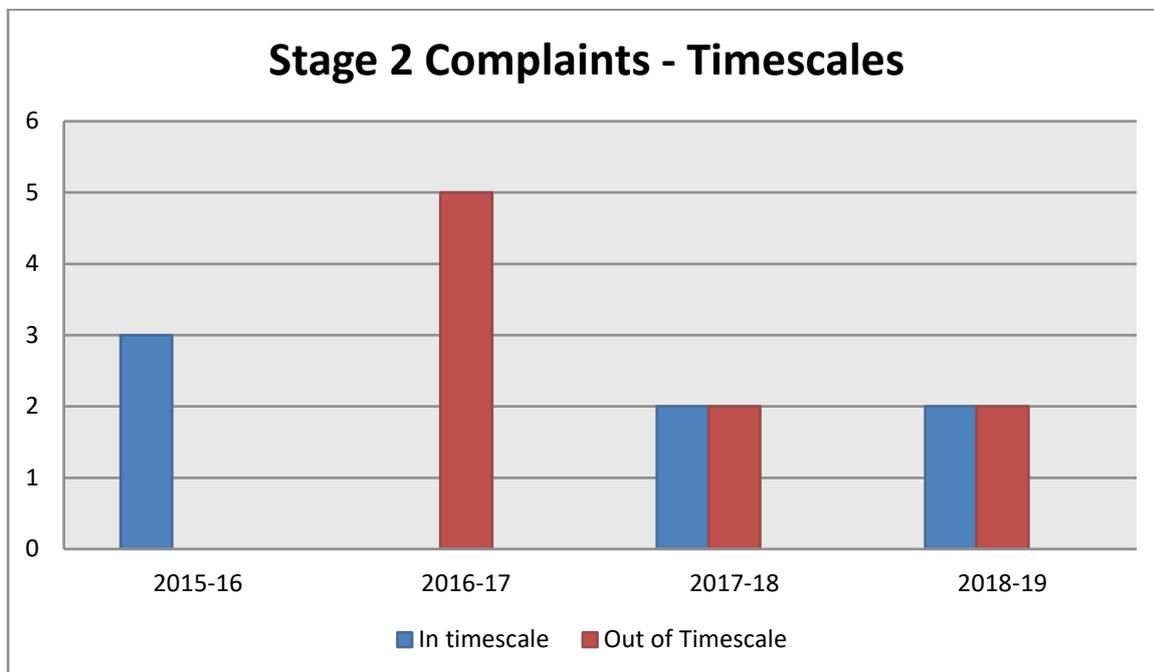
- Acknowledgement of complaint within 2 working days of receipt.
- Complainant contacted and offered a meeting or discussion within 10 working days of acknowledgement date.

- Written outcome of discussion provided to complainant within 5 working days of meeting/ discussion.

The nature of complaints is increasingly becoming more complex but we will continue to focus our efforts on improving the timeliness of our response which decreased during the reporting period. As at 31st March 2019, 38% were resolved within the designated timescales compared to 54.76% in 2017/18.

Meeting the designated timescales for complaints is increasingly more challenging because the complexity and multi-faceted nature complaints which can impact on our timeliness of response, particularly where legal advice is required. Although just over a third of the complaints were resolved within designated timescales, it should be noted that in all instances the complainants were made aware of the reason for the extension to the timescales and mutually agreed to an extension. Although this is not taken into account as part of the statutory guidance, we pursue robust monitoring of our complaints, as on a weekly basis the Complaints Officer circulates a report to all Senior Management to flag any potential complaints that require follow up.





7.4 How complaints were resolved

A variety of methods were used to resolve complaints. Each complaint was considered separately and the most appropriate method of resolution applied.

Methods included:

- provision of explanation (written) as to reasons for decisions;
- provision of an apology (written), where appropriate;
- mediation;
- senior managers meeting with complainants to discuss their concerns;
- independent investigation;
- action taken to change a decision.

All complainants received a written response offering an explanation, outlining recommendations and/or identifying corrective action.

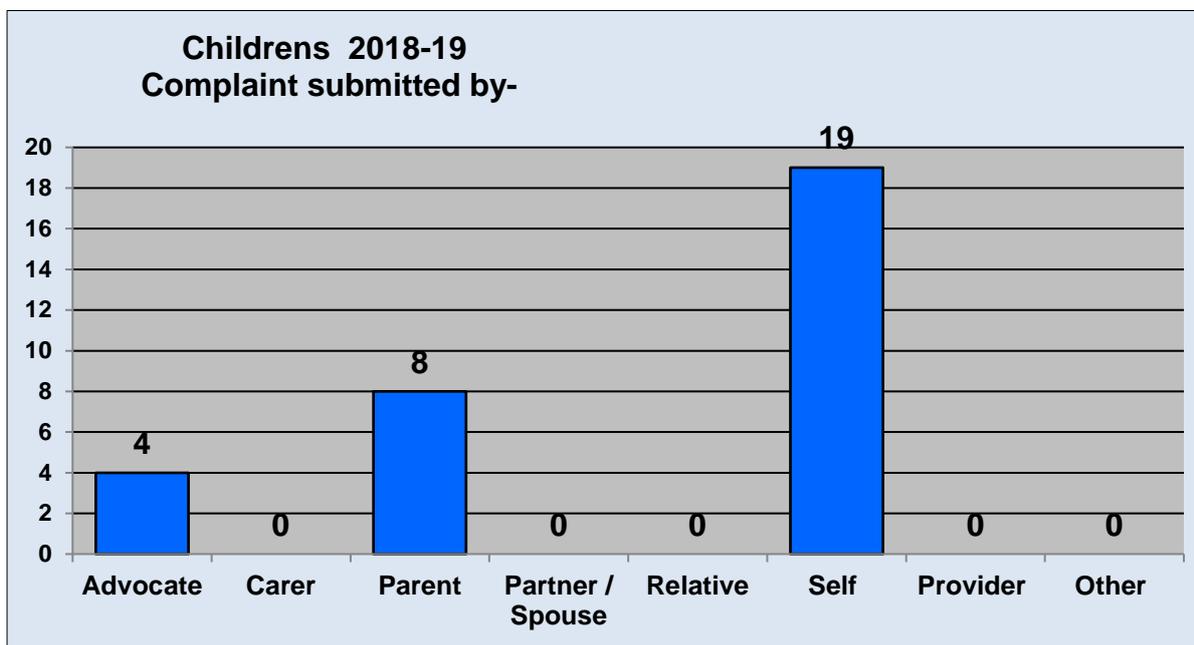
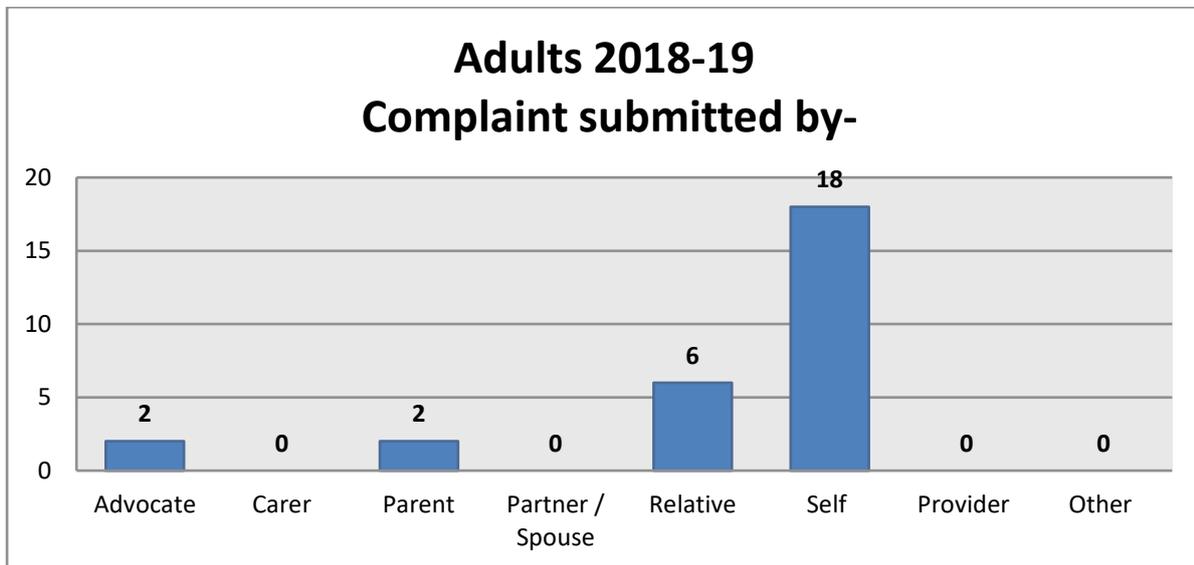
7.5 Who made complaints?

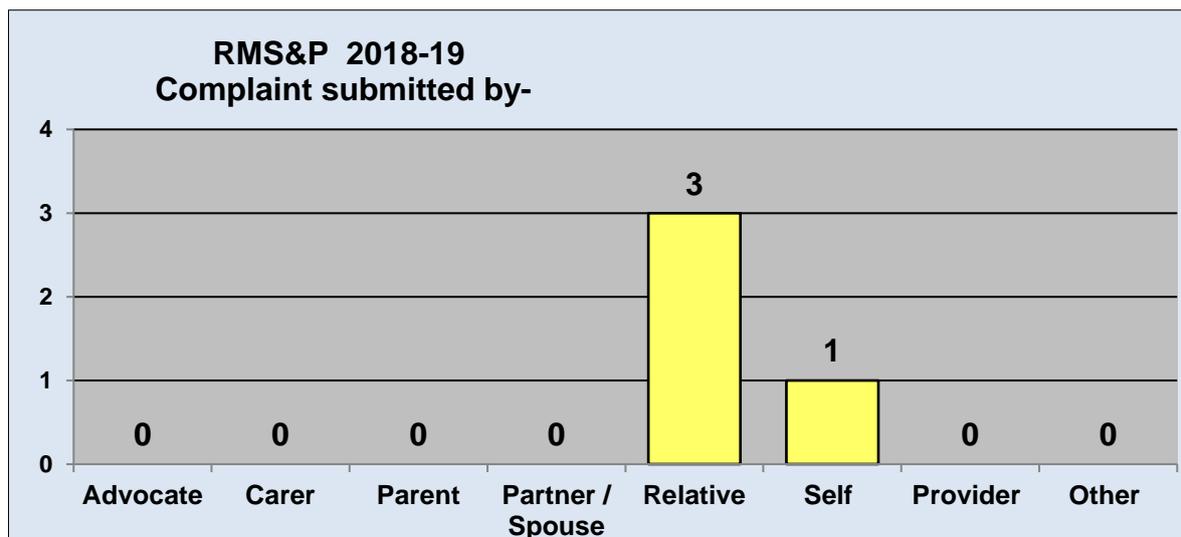
Legislation requires the authority to establish a procedure for considering representations, including complaints, made to it by a range of people.

Complaints were received from the following groups of people during 2018/19.

Table 3

Complaint submitted by:	Adult Services	Children & Young People Services	Resources Management, Safeguarding & Performance
Advocate	2	4	
Carer			
Parent			
Partner / Spouse	2		
Relative	6	8	3
Self	18	19	1
Provider			
Other			
Total	28	31	4



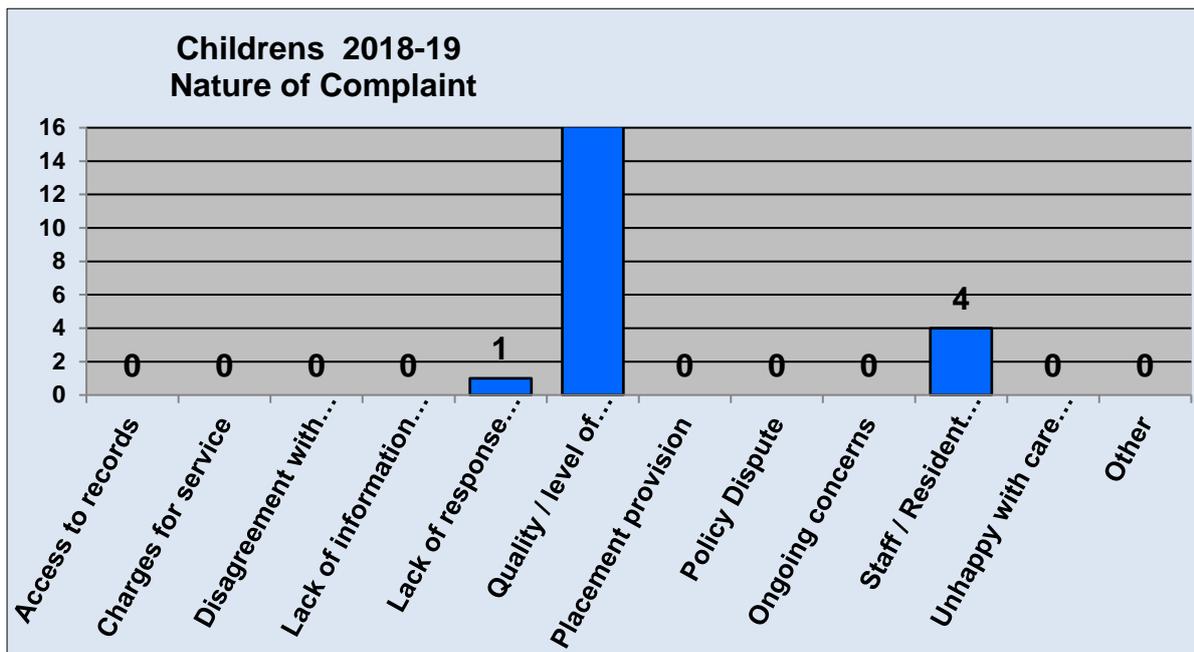
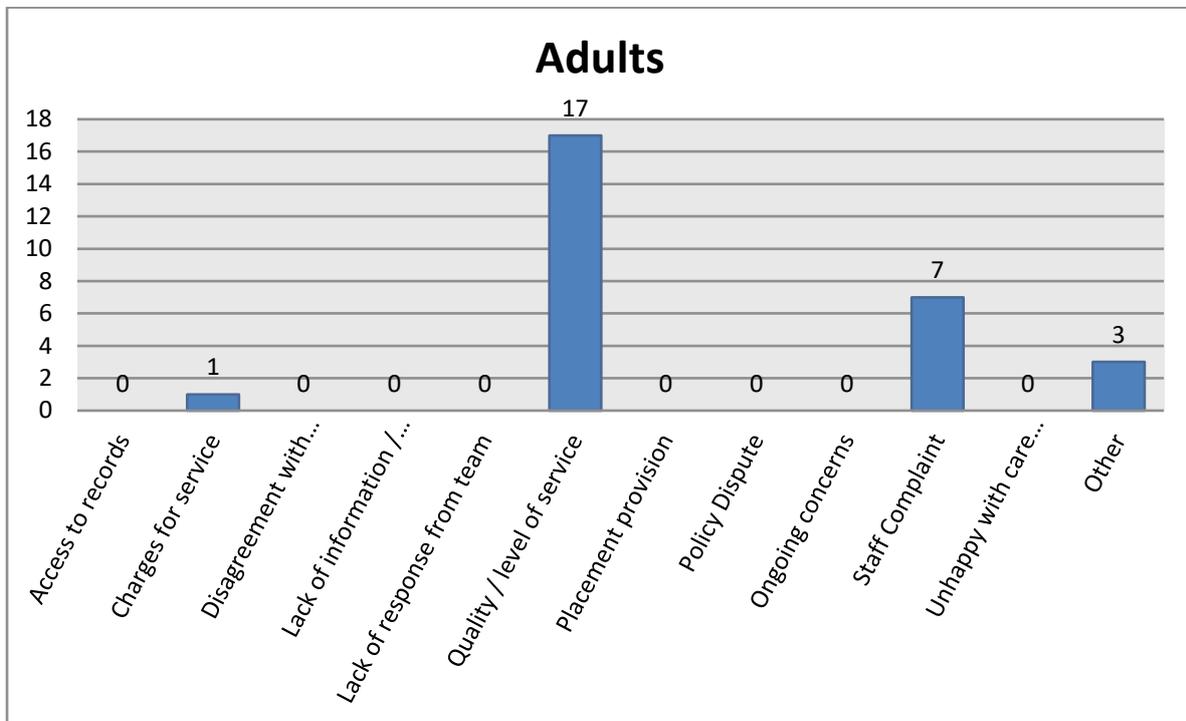


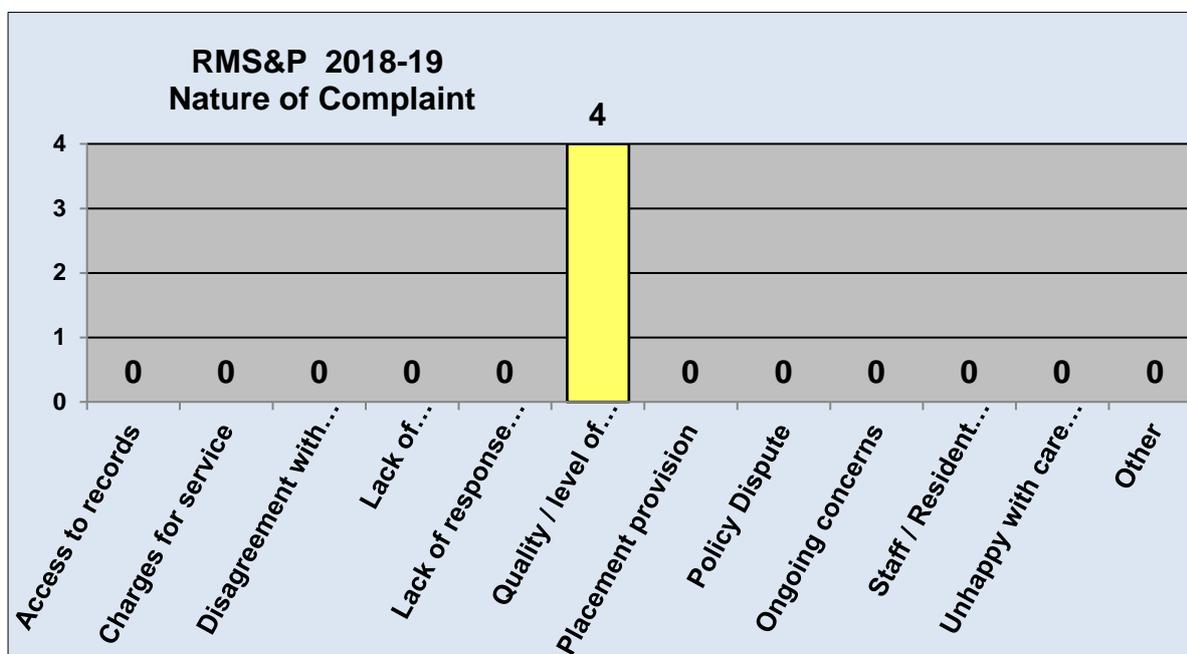
7.6 Nature/range of complaints

The most common reasons for complaints received during 2018/19 were as follows:

Table 5

Most common complaints received	Adult Services	Children & Young People Services	Resources Management, Safeguarding & Performance
Charges for service	1		
Lack of response from team		1	
Quality/level of service	17	26	4
Staff Complaint	7	4	0
Unhappy with care provided	0	0	0
Other	3		
Total	28	31	4





Complaints regarding the quality or level of service* were the most common during this reporting period in Adult Services and Resource Management and Safeguarding. In Children's Services complaints regarding the quality or level of service were the most common along with a small number of complaints in relation to staff. This is typical of previous years, partly because of the sensitive and sometimes contested nature of the work which staff undertakes but also because the statutory basis for Social Services is very complex. A number of complaints arise in circumstances where staff have acted appropriately in delivering the Council's policies and priorities but this is not acceptable to families.

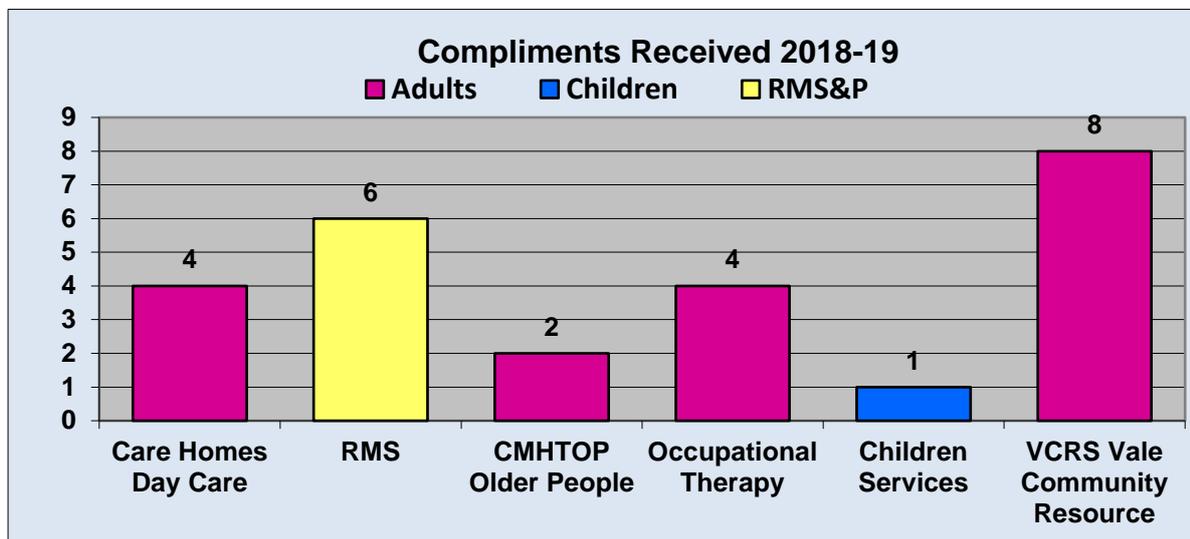
*Complaints recorded under this category are in relation to more than one issue and include complaints regarding communication with teams, responsiveness of staff, interaction with staff, disagreement with the way a case is being dealt with and general dissatisfaction with the service.

It is often possible to demonstrate that staff have made reasonable decisions, based on all relevant considerations, and acted fairly. Where staff have acted inappropriately or without sufficient sensitivity, managers remain committed to taking effective action in response and to insist on the highest standards of practice in all cases, especially in treating people with respect for their dignity. Similarly, where the Directorate has not kept to its commitments or failed to meet service standards, we are quick to apologise and to rectify matters. In seeking continuous improvement, complaints are used to ascertain the need for reviewing policies and procedures.

7.7 Compliments

Compliments are also regarded as important information that can be used to identify good practice. Compliments are recorded and reported monthly to managers.

During 2018/19, 25 compliments were received across Adult, Children and Young People Services and Resource Management and Safeguarding Divisions.



All of the compliments were about the excellent service or support the service user had received and often named specific staff that the individual felt had provided over and above the expected service. It is acknowledged that certain service areas may be better placed than others to receive compliments and some teams are more effective at recording/reporting compliments than others.

Outlined below is a snapshot of some of the compliments received from service users.

'X recently visited my grandparents and was fantastic in her approach. Her warmth and professionalism has been gratefully received by my family.'

'Care received was excellent, nothing but praise for staff.'

'You are a superstar! , family stated they didn't know what they would do without you.'

'I would like to express how much of an asset X is to your organisation, her support has been endless, truly amazing.'

8. Customer Feedback Their Experience Of The Complaints Procedure

Historically customer feedback has been collated and reported corporately. Following discussions with the Corporate Complaints Officer regarding customer feedback it was decided that Social Services would no longer be part of the survey as it has been found that complaints feedback is subjective and influenced by the outcome of the complaint, i.e. if the complainant was happy with the outcome of their complaint they were happy with the way their complaint had been dealt with and vice versa. For this reason some local authorities do not specifically survey complainants. Current departmental questionnaires contain a section specifically on complaints and compliments and the Policy and Assurance Officer reports on this feedback in her annual report.

As recommended by an internal audit review carried out in 2018-2019, (further details in section 12) consideration is being given to developing a structured mechanism to encourage complainants to provide feedback on the complaints process. The policy and the factsheet will be reviewed with a view to actively encouraging complainants to

provide feedback on the process and the complaints officer could call complainants back to ensure they are satisfied with the response after 30 days.

9. Lessons Learned

Complaints from service users provide the Directorate with valuable information on how to improve its services. Formal action plans are usually only developed from recommendations at Stage 2 or by the Ombudsman. The outcomes from a Stage 1 investigation often highlight shortfalls in service delivery which can be dealt with at team, departmental or corporate level. By looking at these issues collectively we are able to identify key areas of focus going forward. A quarterly newsletter to staff is being developed and will include a section on Lessons Learned.

During 2018/19 a summary of these key lessons learnt include:

- The importance of confirming who you are speaking to when you return a call.
- Explaining clearly to family members our rationale for making decisions.
- Clearly explaining the implications of the court process to families so that they understand the process.
- Ensure service users understand the charging policy.
- Effectively communicating with service users any changes to appointments.
- Ensure the correct address is used when sending information.
- The importance of effective communication with service users and families.
- Remaining professional at all times when dealing with service users.
- Ensure commitment given to return calls is followed up.

10. Achievements In 2018-2019

Support provided to service users and their families has continued to prevent many issues of concern escalating to formal complaints.

Mediation with service users and their families has continued to prevent complaints from escalating to Stage 2 of the process.

Effective liaison with the FOI unit providing all information requested within timescales. Briefings provided to staff, internal process for Children and Young People Services reviewed.

The number of Independent investigators and Independent Persons has been increased so that when a stage 2 investigation is agreed we have a growing pool of suitably qualified and experienced investigators to call upon. This can reduce delays and provides greater choice.

Continued sharing of information with the Quality Assurance Provider Performance Group provides an opportunity to increase awareness of the standard of service provided and gives different perspectives on the provider from officers across the division.

Continued contribution to Corporate Complaints Reports.

A newsletter has been developed for circulation to staff to raise awareness of complaints/compliments received and to provide feedback on Lessons Learned.

11. Objectives For 2019/2020

Continue working with independent investigators to make an improvement in the time taken to complete Stage 2 investigations by reviewing the support offered and the management of the investigation.

Continue working with managers and staff to make an improvement in the time taken to complete Stage 1 complaints. The weekly complaints monitoring reports will continue to red flag complaints to the Heads of Service that have or are unlikely to meet the designated timescale for response. The Complaints Officer will contact investigating officers to ensure they are on track and are clear regarding the process.

To complete the implementation of the recommendations of an audit review carried during the reporting period.

To develop and circulate a quarterly newsletter to staff to raise awareness of the complaints role, highlighting good practice and lessons learned.

12. Audit Review

During 2018-2019 SWAP Internal Audit Services carried out a review to assess the adequacy of the controls and procedures in place for Social Services complaints and Representations. A 'Partial' audit opinion was provided, which reflected eight recommendations being made. Recommendations were made in relation to timescales being exceeded; the Complaints Policy requiring updating following the General Data Protection Act; Complaints Training not being made formally available; the spreadsheet (used for recording complaints) needing revising, management information reports to be reinstated and a revision of the structure of the complaints Department to ensure adequate administrative support for the Complaints Officer.

The review also identified many positive controls, including the engrained person centred approach taken in resolving complaints; the quality of responses provided to complainants; and the noted accessibility of the Complaints Officer.

The audit report and action plan are appended to this report (Appendix 2)

Action Plan for Complaints and Representations Audit Recommendations 2018-2019								
Recommendation	Action	Success Criteria & Outcomes	Priority	Officer Responsible	Start Date	Finish Date	Resources & Budget Bids	Progress
1. Social Service staff undertake complaints/refresher training and complete the Corporate GDPR modules.	Arrange training dates. Update training to reference GDPR.	Staff receive appropriate training	2	Complaints Officer/Training Department	September 2019	Ongoing	None	Training has been arranged for Autumn 2019
2. Review the complaints policy and factsheet to ensure they reflect legislation, internal procedures and contain a document control table.	Update the complaints policy and factsheet with GDPR information internal procedures (CYPs) and add a document control table.	Policy and factsheet updated to reflect GDPR principles and contain a document control table.	2	Complaints Officer / Policy and Assurance Officer	June 2019	To be confirmed	None	Amendments have been discussed and will be inserted into the revised document as part of the work being undertaken by Policy and Assurance Officer.
3. Review complaints spreadsheet, consider a database	Review complaints spreadsheet with Performance Management. Arrange to view Oracle.	Spreadsheet improved or data base utilised	2	Complaints Officer and Operational Manager (OM)	September 2019	September 2019	None	The Complaints Officer and Operational Manager are meeting to discuss this on 9/9/19. Meeting to be arranged with Performance Management Assistant to review spreadsheet.
4. Assign complaint to another manager if relevant manager	Discuss with managers.	Improve the number of complaints dealt with in timescale.	2	OM	Ongoing	Ongoing	Availability/capacity of managers	This has been discussed with managers in

is unavailable								Children's Services. The Complaints Officer will attend Adult Services manager's meeting in the autumn.
5. Revise weekly report format and disseminate lessons learned	Seek feedback on weekly report format and disseminate lessons learned via a newsletter	Weekly report improved, Lessons Learned shared via newsletter.	2	Complaints Officer	Sept/Oct 2019	Ongoing	None	Newsletter template set up August 2019, drafting of newsletter in progress, September 2019. Feedback will be sought from managers regarding report content.
6. Reinstate management information reports.	Discuss reinstating reports with Performance Management Team.	Reports reinstated.	2	Management Information Team	April 2019	Ongoing	None	The management information team reinstated these as a monthly report in April 2019.
7. Review staff guidance documents	Review staff guidance documents	Documents updated to reflect recommendations.	3	Complaints Officer/ Information Officer	June 2019	October 2019	None	The complaints officer has met with the Information Officer and some documents have been updated. This work is ongoing.
8. Review structure of complaints department; ensure administrative support for the Complaints Officer	For the OM to consider.	Structure reviewed.	3	Operational Manager				