**Statutory Social**

**Care Annual Report**

Complaints and Customer Feedback

For the period 1 April 2021 to 31 March 2022

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**Introduction**

1. **Background**

Local authorities are legally required to establish complaints procedures to deal with complaints about their social care functions. The complaints procedure for children and young people is covered by the Children Act 1989 and the Department for Skills and Education produced guidance, 'Getting the Best from Complaints' (2006), which outlines the procedures which local authorities must have in place. For adult social care, this report is also produced in accordance with the requirements of the Local Authority Social Services and National Health Service Complaints Regulations (2009).

Lancashire County Council (LCC) is represented on the Committee of the National Complaints Managers Group (England) and the North West Complaints Managers Group, which comprises 23 local authorities. These groups aim to provide a forum where complaints staff can learn and share best practice, develop and implement local practice standards, discuss performance and problem solve. These groups are also consulted on proposed changes to legislation and learning from complaints by the Association of Directors of Adult Social Services and the Association of Directors of Children's Services.

**ii. Purpose**

The purpose of the Annual Report is to review the operation of the complaints process over a 12-month period, including statistical data, and to keep the council informed about complaint themes and how effective its current arrangements are for handling customer complaints. It offers an analysis of what the information obtained from the operation of the complaints process means for the council.

This report also includes information on compliments and comments received by the council.

**iii. Period covered and data**

The report covers the period 1 April 2021 to the 31 March 2022. The report makes extensive use throughout of data available from the Customer Feedback System which records all statutory social care complaints and feedback for the council. The statistical information presented within this report can be verified by reference to this database and is based on the date feedback is received. All percentages and costs are rounded to the nearest whole number.

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| Section One | **Summary and Overview** highlights the key messages from the report and gives the overall picture across the council |
| Section Two | Statistical data, analysis and learning in relation to **Adult Social Care Services.** |
| Section Three | Statistical data and further information and analysis and learning in relation to **all Children's Services.** |

If you require any additional information please contact Lancashire County Council Complaints Team on 01772 539414 or email your request to complaintsandfeedback@lancashire.gov,uk

**Section One: Summary and Overview all Complaints and Feedback**

**1.1 Executive Summary**

Complaints are used by the council as an opportunity to learn and improve. As a direct result of complaints in 2021/22 we have made improvements to processes and procedures. We have improved communication with customers and their families, made changes to policy and guidance and staff and managers have attended specific training sessions.

Following the disruption and a reduction in complaints caused by the pandemic during 2020, staff have been working in often challenging circumstances to provide social care to individuals. Complaints reduced by 15% across children’s services and in adult social care (ASC), complaints have increased slightly but overall totals are still less, than in pre-pandemic years. Most complaints investigated are upheld and found to be justified.

All the following narrative and graphs are based on closed complaints including some from 2020/21 which remained open on 1 April 2022.

Graph 1 below shows 484 closed complaints about ASC. Included in this figure were 11 complex joint complaints with the NHS and 32 complaints investigated by the Local Government and Social Care Ombudsman (the Ombudsman). Children's social care (CSC) complaints fell by 20% (from 226 in 2020/21 to 188 in 2021/22). Non statutory children's complaints decreased from 229 in 2020/21 to 197 in 2021/22, of which 38% were Inclusion Service complaints. This is probably as a result of the effectiveness of more direct and open work between families and social care as improved working practices are now in place.

The overall numbers of statutory complaints received by the Ombudsman has decreased by 11% from 99 in 2020/21 to 89 in 2021/22, even though more have gone on to be investigated. This reflects the Ombudsman's increased capacity to investigate complaints, as they have appointed more investigators.

Graph 2 overleaf shows social care **compliments** increased from 703 in 2020/21 to 740 in 2021/22, mainly driven by increases in ASC positive feedback.

**1.2 Statutory complaint trends and outcomes**

The number of complaints as a percentage of total customer feedback has shown an increase to 63%, compared with 53% of all feedback being complaint related in 2020/21.

Graph 3 above shows a breakdown in the number of statutory complaints by final outcome for all 672 closed complaints during 2021/22. 19% of all complaints were not upheld in 2021/22 and this is a slightly higher proportion as those not upheld in 2019/20. Over a third (35% of complaints) were justified by being upheld or partly upheld. Around half (45%) of complaints have also been resolved or withdrawn at an early stage in the complaints process. This figure has decreased from 48% in 2020/21.

In 2021/22 the total amount spent on investigations for statutory adult social care complaints was nil because all complaints in ASC were investigated internally. For children's social care it was £9308.85 which is an increase of over £2000 from the previous year due to commissioning more investigation reports at stage 2 of the complaint’s procedure during the last financial year.

**1.3 Ombudsman complaints received.**

89 Ombudsman social care / education final decisions were received during 2021/22. Although this is a 11% reduction on the 99 Ombudsman social care and education final decisions received during 2020/21, the numbers of detailed investigations have increased by 9 CYP and 12 in ASC as a result of increased investigation capacity by the Ombudsman’s Office.

The amounts paid in social care local settlements as a result of these decisions added up to a total of £9,800.40. This is about half the amount paid out in 2020/21.

**Section Two: Adult Social Care Feedback**

**2.1 Summary**

Graph 4 shows a breakdown of ASC by feedback type. A total of 484 complaints were closed in 2021/22 which is a 15% increase from the previous financial year (420). It should be noted that people are more likely to compliment adult social care rather than to complain. Compliments increased by 7% from 616 in 2020/21 to 659 in 2021/22. Comments reduced from 43 in 2020/2021 to 26 in 2021/22.

**2.2 Breakdown of complaints by stage**

The breakdown of ASC complaints is shown in Graph 5. Stage 0 is the early resolution of complaints, so a significant proportion of complaints (34%) continue to be resolved at the first point of contact with council officers. Most complaints (60%) are resolved locally after further escalation, and a further 6% are resolved by an Ombudsman investigation*.*

The outcomes of 480 closed complaints that commenced in this financial year, and had outcomes recorded against them at the year-end, are shown in Graph 6. Of all closed complaints, 205 were either withdrawn or resolved early, 165 had at least one aspect upheld and only 110 were not upheld. These are similar proportions to the figures for 2020/21.

A total of 289 internal complaint investigations were undertaken. The breakdown of these was 52% upheld/partly upheld (150), 10% withdrawn/early resolution/signposted (28) and 37% not upheld (108). So, most complaints are found to justified and just over one third of complaints have no aspect upheld.

**2.3 Timescales**

43 complaints exceeded the statutory timescales of 6 months (9%). This is a significant improvement from the previous year which was 29%. Complaints in 2020/21 were badly impacted by Covid 19.

**2.4 What do people complain about?**

Graph 7 shows complaints by service type for the last 2 financial years.

For 2020/21, the most frequent subject of complaint was Support Planning (100) which received 24% of the total number of complaints. For 2021/22, this increased slightly to 113, which is 25% of the total number of complaints.

**2.5 Learning**

Although managers address complaints received with their staff, the learning is not always widely known and there is a risk that other mistakes with similar themes, continue to occur. To remedy this and give feedback from customers the priority that it deserves, a Shared Learning Panel chaired by the Principal Social Worker considers the themes and root causes of complaints and to cascades learning across the council.

The main learning for 2021/22 is outlined on the next few pages.

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| **Area** | **Learning for Adult Social Care** |
| Social Care and support planning | In a complaint about undertaking assessments for a person in short term care, managers have worked with community teams to make sure that the social worker reviews the person's needs from the date of admission and not the date that the assessment started. This will ensure that the dates of any change in care needs are identified from the outset.  Customer service advisors now ensure that callers are offered the opportunity to speak to a duty officer for social care who can provide an overview of the whole process for entering residential care including the impact on finances rather than just the finance team so that they can make an informed decision.  In several complaints by relatives stating that they did not know about the cost of care, managers have worked with staff to ensure that they are clear in their advice and guidance regarding financial issues and funding. Staff will ensure that this is provided in a timely manner and that service users and their families are kept up to date.  In other complaints specific to social work practice, managers took the following action with the individual workers concerned:   * Reminded the social worker that when a service user is discharged home on first pathway, that they ensure the service user has had time to settle in at home before assessing. * Reminded the social worker to ensure that the relevant 'financial implications' document is always provided. * Ensure that the hospital discharge service use the Trusted Assessment Document when referring to care homes as this provides additional, in-depth information. * Social workers reminded to set up support systems in a timely manner to ensure service users are not kept in residential care for longer than they need to be. * Reminded officers to be mindful of and sympathetic to details of language that are meaningful to carers as well as service users and to ensure the correct degree of information is shared. * Reminded the social worker of the importance of prompt assessments of mental capacity and the presumption of capacity until proven otherwise in accordance with the Mental Capacity Act. * Reminded the social worker to ensure that once care is commissioned, the required actions must be completed on the LAS system in a timely manner to avoid delays and large backdated invoices to the service user. |
| Complaints about communication | In several complaints about miscommunication from our adult social care team, managers have reminded staff that when new information is received from family members or service users, a written account is provided and clarified to ensure the information taken is correct and fully understood.  In a complaint about financial implications of moving into residential care, customer service advisors have been reminded to ensure that callers are offered the opportunity to speak to a duty officer for social care and not just the finance team. This will provide an overview of the process for moving into residential care, including financial implications, so they can make an informed decision.  In a complaint about poor communication, the finance team manager has reminded staff to check the preferred communication method with our customers before contacting them.  Managers have worked with social workers to ensure that the financial implications document is provided to all service users, together with any verbal information provided and to record and relay discussions and decisions regarding the time critical nature of support to the commissioned care provider.  Managers have worked with reablement staff to ensure they understand the need for important messages to be shared with family in a timely manner.  Social workers are now provided with the link to the council's complaints procedure webpages and attend complaints training to ensure that they understand their role in complaints resolution. |
| Customer Access Team | In a complaint about staff being inflexible and not focussing on individual needs, our customer access service has made changes to call handling and the process of requesting data. Bespoke training has been provided to increase staff awareness and understanding of Autistic Spectrum Disorder and associated conditions. This has improved the call handling process for staff and service users. |
| Personal Budgets | For a complaint that was made outside of the 12-month timescale, we have accepted that in future, due consideration will be given to the reasons for the length of time taken to make the complaint and undertake an investigation if the reasons are valid. |
| Equipment and adaptions | In 3 complaints about ineffective communication, confusion and planning between the service user and care providers, we have identified areas for improvement to ensure meetings are well coordinated. In future, the purpose of meetings will be made clear to all attendees and the reason for those in attendance will be explained to the service user and their families. |
| Financial | In several complaints about poor communication and incorrect invoices, managers have worked with staff to ensure:   * the receivables team will ensure the package of care is suspended or ceased to avoid incorrectly invoicing the service user when we are notified of a hospital admission; * staff recognise the importance of inputting and correcting data in a timely manner to avoid raising invoices that cause unnecessary distress to service users and financial loss to the council when they are written off; and * processes are in place for an up-to-date direct debit mandate to in place in a timely manner. |
| LCC Day care and residential | In several complaints regarding administering medication, managers will ensure staff are fully trained before they can administer medication to residents. |

**2.6 Compliments**

The council mainly captures feedback on compliments via 'Your Views Count' leaflets. Graph 8 shows the number of compliments received by service type for 2021/22, recorded on the Customer Feedback System (CFS) which was 448 in total. Unfortunately, the further 211 compliments captured via other methods cannot be broken down into the same categories to allow an overall breakdown of the 659 compliments. This is because many compliments are sent to the council in an unstructured way in via emails, cards, and letters by service users / and their families and submitted by LCC managers.

The number of compliments has increased by 43 (7%) from 616 in 2020/21 to 659 in 2021/22. In 2020/21, 29% of all compliments were because of equipment and adaptations received and this has decreased to 16% in 2021/22. The most frequent reason for a compliment for 2021/22 was Assessment (38%). Compliments for both Homecare/Domiciliary Care Services and Carers' Assessments have both decreased for 2021/22.

**2.7 Compliment examples**

*"Mr xxx has been the lovely gentleman who has helped me. I will be forever grateful. Honestly this man has made my life a little bit better. I don’t know where I would be without the help or knowledge this man has. His whole attitude his amazing and his "Can Do" approach. Well! me and my son, P xxx think there should be more people like xxx and his first-class help. He needs an award or something. 5 stars."*

*"I rang LCC Adult Social Care Services and spoke to someone by the name of xxx. Although xxx was unable to put me through to the person I needed to speak to, she was extremely helpful giving me all the information I needed to progress my query. She was very empathic to my needs and concerns regarding my 94 mother and when the telephone call was over, I felt empowered by her information to move forward in what is quite a complex situation. Although the situation is not resolved (indeed it only just beginning) I was particularly impressed by xxx and both her knowledge and helpfulness. She is a true Ambassador for the Adult Care Services Team and Lancashire County Council as a whole. Thank you."*

**2.8 Joint Complaints**

A Joint Complaints Protocol is in place with the NHS. Complaints investigations increasingly involve many different parts of the council as well as health services and contracted service providers therefore adding much more complexity which the complaints team coordinates.

There was a slight decrease in closed joint complaints during 2021/22 to 11 compared with 14 in 2020/21. These complaints are sometimes complex and take longer to resolve as they involve ASC and the NHS, typically Hospital Trusts and/or Clinical Commissioning Groups. A further 13 joint complaints were still open at the close of 2021/22. Of the closed complaints 6 were not upheld and 5 were partly upheld or upheld. Support Planning and Financial were the biggest themes.

**2.9 Ombudsman Complaints**

The Local Government and Social Care Ombudsman provides the final stage for complaints about local authorities and some other organisations providing local public services. Their service is provided free of charge. Complainants approach the Ombudsman when all other options for pursuing their complaint are closed by the council, after it is considered that a proportionate response has already been provided. The Ombudsman will only consider complaints that have already been through the council's complaints procedures, although sometimes an early referral will be made to the Ombudsman when complainants continue to be dissatisfied and the council considers that it has not done anything wrong or it has done all it can to resolve the matter.

In 2021/22, the Ombudsman received a total of 43 separate enquiries in relation to ASC in Lancashire (in 2020/21 it was 44). A total of 46 decisions were made by the Ombudsman in 2021/22 for ASC.

Graph 9 below shows of the 46 Ombudsman ASC decisions received in 2021/22, 7% were not upheld, 54% were not investigated and 39% were upheld.

It should be noted that the Ombudsman will also uphold complaints that the council has already upheld. Of the 18 complaints that were either upheld or partly upheld, 11 were not upheld by ASC originally, **making an actual uphold rate of 24% when all 46 decisions for the year are considered.**

The final decisions resulted in a total of £6700.40 being paid out by the council.

Five of the 18 upheld complaints had late remedies which we are working to address in 2022/2023. There have not been any ASC public reports in 2021/22.

The main learning from the 18 upheld complaints is outlined on the next page.

**2.10 Ombudsman identified learning**

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| Council managers have worked with Care/Residential Home managers and staff to increase staff knowledge in a number of key areas including better recording, complaints handling and embedding learning from Safeguarding investigations. The council reviewed service user’s care records to ensure staff are appropriately storing and archiving. Managers reviewed council policies to ensure that there is a process to avoid service users going without support when someone discharges themselves. |
| Financial managers reviewed processes to ensure that we always take a copy of lasting power of attorney documents so we can be certain of the attorney’s authority to act on the donor’s behalf. We also reviewed how we manage and process debts which meet the threshold as appropriate for immediate legal action as outlined in our debt policy. We now ensure more timely action is taken against customers with debts over £1500 and prevent debts accruing to large amounts. |
| Council managers have ensured that a care provider spot checked their records, to ensure carers are electronically recording care visits for service users. Care providers also reminded staff to properly record concerns about service user’s behaviour in daily care records and clock on the electronic system all care calls. |
| The council and provider agencies have reviewed processes for considering late complaints and we share our rationale with complainants. |
| The council has reviewed a Care Home’s medication procedures and policies to ensure staff are aware of the steps they need to take when a resident’s medication is discontinued and how staff should respond to medication errors. |
| Council managers now ensure that council-funded residents have a care plan in place, which covers communication between the Care Home and relatives. Care Homes now make the Council aware at the earliest opportunity, if they experience any difficulties with communication between a resident’s relatives and staff at the home and certainly well before serving notice. |
| Council managers have reminded relevant staff of the Council’s duties under the Care Act and further training has been provided. Managers have reviewed the information we provide to families about top up fees to ensure they are fully informed of their choices. |

**Section Three: Children and Young People Feedback**

**3.1 Summary**

There is a statutory and non-statutory process for complaints about CYP services. The statutory process involves 3 stages for social care complainants, who are eligible to complain. The Stage 1 initial response is always compiled by the service manager involved. If the person complaining is still unhappy, they can request a Stage 2 independent investigation. If the complainant remains unhappy, a Stage 3 review panel, which considers the way the stage 2 was investigated, can be requested. The non-statutory process applies to non-social care complaints (for example education or Special Educational Needs and Disabilities SEND) or for people complaining about CSC who do not have parental responsibility for a child (for example grandparents). In 2021/22 the total amount spent on investigations for children's complaints was £9308.85 which is an increase in cost is due to holding more stage 2's in the last financial year.

Graph 10 shows a decrease in CSC statutory complaints, comments and compliments. Complaints specifically decreased by just over 17%, to make an overall total of 188 for 2021/22. The decrease in complaints is possibly from the effectiveness of more direct and open work between families and social care now that there aren’t as many restrictions and better working practices as a result.

Most CSC complaints are made by parents or guardians. Only 16 complaints were made directly by children in 2021/22 (just 8.5%). Complaints made by children are prioritised for immediate attention and advocates are provided to help give children a voice.

**3.2 Breakdown of complaints by stage**

The breakdown of complaints with outcomes recorded against them can be seen in Graph 11. Stage 0 is the early resolution of complaints.

The main differences between 2020/21 and 2021/22 has been a reduction in local and early resolution and an increase in people using all 3 stages of the complaints process and then approaching the Ombudsman. This is mainly because the Ombudsman now insists on all local stages being exhausted before accepting complaints for investigation. (The Ombudsman previously used to accept early referrals.)

**3.3 Breakdown of complaints by outcome**

Graph 12 shows a breakdown of the 188 closed statutory complaints which had a final outcome recorded at the time of writing this report. Of these 9% were not upheld, 38% were upheld or partly upheld and most complaints (53%) were signposted, resolved early or withdrawn (a similar proportion for the last 2 financial years). Local and early resolution of complaints is a better outcome for everyone, as escalation is time-consuming and expensive.

Of the total number of statutory CSC complaints received, 91 exceeded statutory timescales at Stages 0 to 2 (20 working days) which is a rate of 55%.  In 2020/21, this was a total of 140 and a rate of 61%. Rates in 2020/21 were significantly impacted by the 3 months pause in complaints because of the pandemic.  Breached timescales continue to reflect the problem that complaints remain open on the recording system, after earlier stages have been responded to, in case they remain unresolved and need to be escalated to higher stages.  For this reason, improvements have been proposed to the database to be able to close the record immediately after a response has been issued and then re-open it again if the complainant remains dissatisfied and wishes the complaint to be escalated to the next stage.

**3.4 What do people complain about in the statutory process?**

Graph 13 below shows a breakdown by service type for the last 2 financial years. The proportions are similar and social work practice continues to be the most frequent subject of complaint covering 70% of all statutory CYP complaints.

**3.5 Learning**

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| **Area** | **Internal learning point for children's services** |
| **Improving relationships with families** | **Eight complaints involved the standard of communication between the social worker and the families, learning from complaints identified the following:**  In one case the young person's wishes were shared with the social workers manager for consideration and further reflection.  In another case, the complainant was assured that the detail of the complaint had been formally discussed with the workers involved and a formal apology was provided.  One complaint identified that the manager of the team supporting the young person had spoken to staff regarding not dialling in/providing updates to ensure improved communication.  Managers offered support to the relevant social worker to improve future interactions with a family.  Managers reminded duty social workers of the importance to ensure any duty tasks are recorded and completed without delays.  In another case a discussion took place with workers within supervision in respect of the importance of keeping parents with parental responsibility informed and updated after visits.  Managers highlighted decision making in relation to religious beliefs for service users was as an area for improvement within the relevant department.  Discussion took place between a social worker and business support officer which resulted in better working practice in relation to ensuring the social care electronic system reflects the correct family dynamic and contact details. |
| **Reflection, training, and improvements to social care provision** | **Complaints provide services with the opportunity to reflect on outcomes from complaints and enable services to use learning to inform training and development sessions with staff, either in supervision or formal training sessions to improve service delivery to families**  **Three complaints identified further training and development needs:**  In one case guidance and training was provided to a worker following a complaint investigation.  In another case, the complaint matter was used as a reflective discussion within a team meeting for the team to learn from the comments the complainant had provided. This helped the service to engage all family members equally in the assessment process and identify the consequences of when carers and parents' views are not truly obtained.  In recent years the council has invested significant additional funds to transform the service provided to young people. Structural changes have been made to transform the delivery of support to young people. |
| **Communication** | **Communication is often at the centre of many complaints, in the last year the following action has been taken to improve better communication between services and families:**  In one case the manager supported the relevant social worker to improve their level of communication between themselves and a family in a supervision setting.  Another complaint confirmed that communication between the social worker and service user needed to improve and become more personal and direct between both parties. Within reason it was suggested that a day and time each week would be agreed for a phone call to share and gather any relevant information. This supported the young person to better express their opinions, thoughts and feelings. |
| **Reviewing and improving processes, policies, and procedures** | The Duty and Assessment Team have adopted a more formal meeting process, whereby notes are captured in a discreet document and not used simply to contribute to an assessment. |
| **Fostering Services** | A complainant's concern around foster carers was shared with the Fostering Team and addresses with the foster carers directly. Learning was shared with the team for use with future carers. |
| **Adoption Services** | A manager ensured that the relevant worker recognised the areas of development they needed and provided the correct training and support  In another case, issues regarding communication, delays and availability were discussed within the service for reflection and to prevent the same issues from happening in future. |

**3.6 Summary of non-statutory complaints**

Non-CSC statutory complaints are made by a people who are **not** entitled to complain under the Children Act procedures (for example a family friend or a relative without parental responsibility) or if the complaint is about something that cannot be complained about under the Children Act (for example adoption or fostering matters/complaints by members of the public: please see further categories below). Complaints about the Inclusion Service are also non-statutory, if CSC is not involved.

**3.7 What are non-statutory complaints about?**

Non statutory complaints have decreased from 229 in 2020/21 to 197 in 2021/22 (as shown in Graph 10). Graph14 shows that the main theme is the Inclusion Service (followed by social work practice). Complaints specifically about children with special educational needs and disabilities have decreased significantly by 47% from 139 to 74 in 2021/2022, reflecting better and more joined up working practices.

Identifying themes and learning from all complaints is essential. Senior managers are informed of the themes on a regular basis through quarterly reporting and regular attendance at team meetings or senior management meetings.

**3.8 Compliments**

81 compliments were received for CSC in 2021/22. This is broadly in line with the number of compliments received in 2020/21 (87). 17 compliments were received for the Inclusion Service, which is broadly the same as the previous year.

Compliment example for inclusion services:

*"I have recently been informed that My son's field worker from Burnley social services is leaving for another position within LCC and will no longer be supporting us. xxx has worked with my family for over 10 years and has always been very supportive. I wanted to send this feedback as I feel that my family have been very lucky to have had xxx involved with us for so long. xxx has been someone who I have found to be very approachable, very understanding and very dedicated to making a difference to our families lives. We are very sad to see xxx go and wish her all the best in her new post. Thank you so much xxx for all your support."*

Compliment example for Child Protection / Children in Need / Family Safeguarding

*"I have to say this in a text message as I would probably start crying if I said this to your face. Thank you so much for everything that you have done for me and xxxxxxxx. We both truly appreciate every last thing that you have done, sticking your neck on the line for us and for trusting and believing in us. You are an amazing social worker and am sure an amazing mother and friend. People are very lucky to have you as their social worker and to have someone like you to help them and understand. Thank you so, so much."*

**3.9 Ombudsman Complaints**

The Local Government and Social Care Ombudsman acts as the regulator and provides the final stage for complaints about local authorities and some other organisations providing local public services. Their service is provided free of charge. Complainants approach the Ombudsman when all other options for pursuing their complaint are closed, after a proportionate response has been provided. The Ombudsman will only consider complaints that have already been through the council complaints procedures. Sometimes the council will make early referrals to the Ombudsman when complainants continue to be dissatisfied and the council considers that it has not done anything wrong or it has done all it can to resolve the matter.

In 2021/22, the Ombudsman received a total of 46 separate enquiries in relation to CSC, Inclusion and Education Services (including school appeals) in Lancashire (in 2020/21 it was 55). A total of 56 decisions were made by the Ombudsman for these services.

Graph 15 below shows of the 56 Ombudsman CSC decisions received in 2021/22, 52% were either not upheld or closed after initial enquiries. The number of enquiries referred back to the council for local resolution represent 23%. Only 25% of decisions were upheld.

As the Ombudsman will also uphold complaints that the council has already upheld and of the 14 complaints, only one had already been partly upheld **this makes an actual uphold rate of 23% for the 56 decisions made.**

A total of £3,100 was paid out in final decisions for 2021/22 (which is almost double of the previous year).

Three of the 14 upheld complaints had late remedies, which we are working to address in 2022/2023. There have not been any CYP public reports in 2021/22.

**3.10 Ombudsman identified learning**

The identified learning from 14 the upheld social care and education complaints is as follows:

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| Special Educational Needs and Disabilities (SEND) Managers have reviewed processes to ensure we now consult with schools to check they can meet a child’s needs before issuing a final Education, Health and Care (EHC) plan in line with the SEND Code of Practice; and we now have created a reminder system so that we issue amended EHC plans within statutory timescales. |
| The Complaints and Appeals Manager has reviewed and amended our school transport appeal procedure to ensure it meets the requirements of the statutory guidance. There is now a new Independent Transport Appeals Panel involving county councillors and independent appeal panel members, who hear verbal representations by appellants for transport appeals. |
| Special Educational Needs and Disabilities (SEND) Managers have reviewed our policies and procedures to ensure the Council retains oversight and responsibility for children who would not receive suitable education unless the Council makes alternative arrangements. |
| Social care managers have reminded officers of the criteria for complaints to be considered under the statutory procedure and training of social work managers has been delivered. |
| Social care managers have reviewed how we prepare for Looked After Children reviews and ensure we have a process in place to consider who should be invited and how they can contribute to the reviews. Any decisions are now appropriately recorded on the child’s electronic record, with clear reasons. |