

Annual Complaints Report

Children and Adults Services

1 April 2024 - 31 March 2025

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Summary of Performance and Results

Children and Families

- **128** Stage One Complaints Closed
- 23 Stage Two Investigations Completed
- 0 Stage Three Panel Completed
- 1 Ombudsman Final Decisions

Education

- 83 Stage One Complaints Closed
- 27 Stage Two Investigations Completed
- 1 Ombudsman Final Decisions

Adult Social Care

- **145** Stage One Complaints Closed
- **30** Internal Reviews Completed
- 7 Further Reviews Completed
- 3 Ombudsman Final Decisions

Public Health

- Stage One Complaints Closed
- **0** Stage Two Investigations Completed
- 0 Ombudsman Final Decisions

Preface

This report is split into the four Directorates which our team serves, and is colour-coded accordingly:

Children and Families	Education
Adult Social Care	Public Health

We also provide the same data for complaints made about Care-at-Home Providers and Care Homes, as the duties to which they are associated belong under the Care Act.

The Regulations which relate to complaints about Children and Families, and Regulations relating to Adult Social Care tell us to publish a report each year, and guidance exists to tell us what to include in this report.

This guidance directly informs the content of this report and we publish this information so that it may be scrutinised by any interested party.

We challenge ourselves each year to answer the same questions and we look at the evidence presented in the report to try to answer them. These are found from page 22 onwards.

Our activities are overseen by the Local Government and Social Care Ombudsman and in most cases their interpretation of relevant processes and principles becomes the final arbiter in resolving complaints.

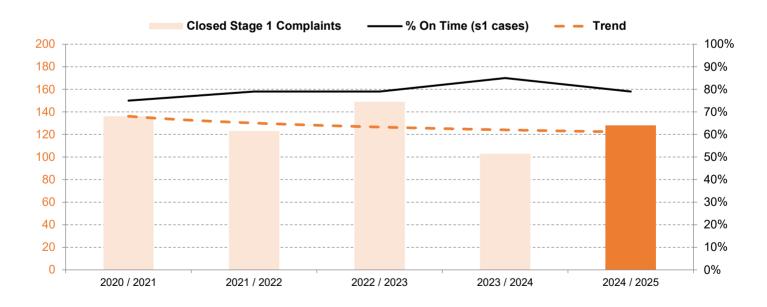
We believe we best serve our residents' needs by applying the scrutiny we would expect from the Ombudsman at the first opportunity, so that a formal complaint is satisfied without the need for the additional time of escalated complaints and the investigative actions of any external party.

Prior to publication this report was presented to leadership across all areas to provide an opportunity for dialogue and challenge and to highlight performance and opportunities.

Children & Families (C&F) Stage One Complaints

	2024/25	2023/24	2022/23	2021/22	2020/21
Care	19 (0)	9	32	23	19
Care Leavers	21 (2)	22	30	23	18
Fostering, SGO and Connected Persons	5 (0)	4	16	8	8
Placement Sufficiency and Resources	2 (0)	3	16	ö	0
Family Early Help	7 (0)	6	6	3	3
Youth Offending	1 (0)	-	-	1	1
Quality Assurance	10 (0)	5	7	6	8
Assessment & Intervention	26 (0)	30	30	26	36
Safeguarding and Family Support	36 (3)	22	26	32	43
Clinical Service	1 (0)	2	-	-	-
Finance	-	-	2	1	-
Total	128 (5)	103 (9)	149 (18)	123 (15)	136 (19)

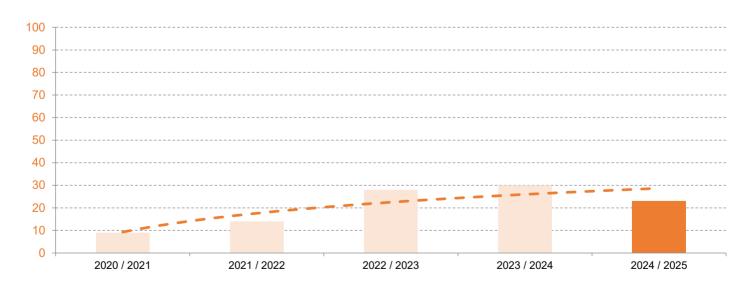
Brackets show the assistance of an Advocate. The complaints process is used to administer many appeals. The data above represents corporate complaints and statutory complaints.



C&F Stage Two Complaints Completed

	2024/25	2023/24	2022/23	2021/22	2020/21
Care	4	3	2	-	-
Care Leavers	2	11	4	-	-
Fostering, SGO and Connected Persons	1	1	4	F	4
Placement Sufficiency and Resources	-	-		5	1
Family Early Help	1	-	2	-	1
Youth Offending	-	-	-	-	-
Quality Assurance	2	4	1	1	1
Assessment & Intervention	8	5	7	2	-
Safeguarding and Family Support	5	5	2	6	4
Clinical Service	-	1	-	-	-
Finance	-	-	-	-	-
Total	23	30	28	14	9

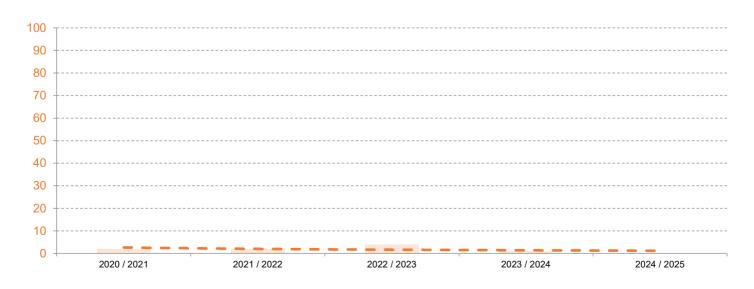
There were 2 statutory stage two complaints completed and 21 corporate stage two complaints completed. Because of the scope of statutory complaints we can gain an understanding that escalated complaints are more likely to be from adults about their own views and are more likely in relation to initial safeguarding enquiries or ongoing safeguarding planning and support.



C&F Stage Three Panels Undertaken

	2024/25	2023/24	2022/23	2021/22	2020/21
Care	-	1	-	-	-
Care Leavers	-	-	1	-	-
Fostering, SGO and Connected Persons	-	-	2		
Placement Sufficiency and Resources	-	-		-	-
Family Early Help	-	-	-	-	-
Youth Offending	-	-	-	-	-
Quality Assurance	-	-	-	-	1
Assessment & Intervention	-	-	1	-	-
Safeguarding and Family Support	-	-	-	2	-
Clinical Service	-	-	-	-	
Finance	-	-	-	-	-
Total	0	1	4	2	2

Stage three panels are required when a complainant does not agree with the independent findings of a stage two statutory complaint or does not agree with how the Council proposed to address the independent findings. These Panels are expensive and cost a great deal of time for all parties and therefore no efforts must be spared in working, with those affected, to avoid these escalations.

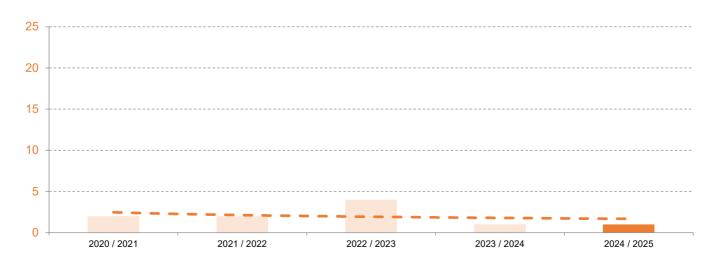


C&F Ombudsman Final Decisions

	2024/25	2023/24	2022/23	2021/22	2020/21
Care	-	1	-	-	-
Care Leavers	-	-	1	-	-
Fostering, SGO and Connected Persons	1	-	2		
Placement Sufficiency and Resources	-	-		-	-
Family Early Help	-	-	-	-	-
Youth Offending	-	-	-	-	-
Quality Assurance	-	-	-	-	1
Assessment & Intervention	-	-	1	-	-
Safeguarding and Family Support	-	-	-	2	-
Clinical Service	-	-	-	-	
Finance	-	-	-	-	-
Total	1	1	4	2	2

The Ombudsman publishes the performance of Southwark and other boroughs here : <u>https://www.lgo.org.uk/your-councils-performance/</u>

We report 'final decisions' on those cases for which the Ombudsman published a decision after undertaking a full investigation. We were made aware of 8 additional cases which they gave consideration but which led to an alternative outcome. There are several reasons including complaints being raised prematurely, being out of time, or being satisfactorily investigated already.



C&F Outcomes and Root Cause Analyses

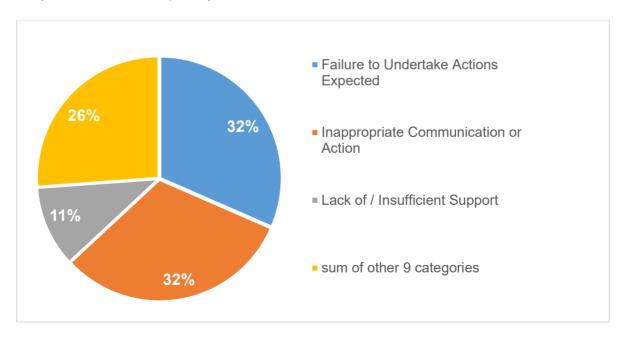
	2024/25	2023/24	2022/23	2021/22	2020/21
Partly Upheld	41 %	45%	44%	47%	30%
Upheld	13%	12%	17%	15%	13%
Not Upheld	29%	32%	28%	30%	29%
No Findings	2%	2%	2%	3%	6%
Withdrawn / Rejected	15%	9%	9%	5%	21%

Maintaining consistent figures helps to reassure us that we continue to apply investigative standards and principles consistently.

Upholding (in part, or in whole) should be considered a relatively positive outcome as it provides reassurance that issues reported are being considered with objectivity and fairness.

Any reduction in upheld complaints would unlikely equate to a measure of success except where high rates have prevailed in a service area previously, the sources of which have been corrected. An example of which could be a software limitation having been overcome through redevelopment.

The following chart shows the categorisation of cases reported across the year irrespective for whether any fault was subsequently identified.



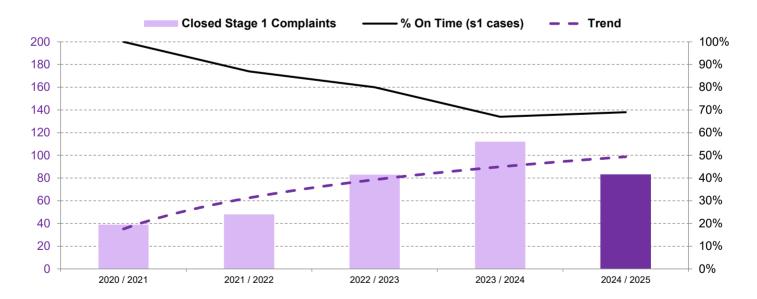
The full list of category types is shown in appendix a

Education Stage One Complaints

	2024/25	2023/24	2022/23	2021/22	2020/21
Admissions & Benefits	7 (0)	18	15	11	6
Alternative Provision	1 (0)	1	1	-	-
Virtual School	-	1	-	-	-
Travel Assistance / Transport	6 (0)	7	9	12	16
Southwark Information & Advice (SIAS)	-	-	1	-	2
Early Years	-	1	2	-	-
Special Educational Needs (SEND)	66 (8)	83	50	25	12
Learning and Achievement	3 (0)	1	5	-	3
Total	83 (8)	112 (24)	83 (0)	48 (0)	39 (0)

Brackets show the assistance of an Advocate which includes but is not limited to Southwark Information Advice and Support (SIAS). Complaints received about decisions and actions within schools and colleges are usually for those organisations to investigate and are not included.

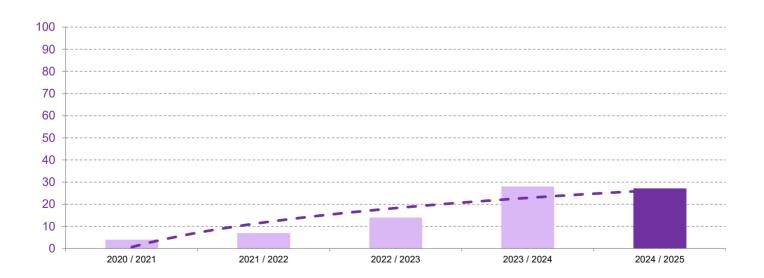
These are received frequently and are not included in reporting activities. Significant concerns raised may be shared with relevant professionals for oversight and further consideration.



Education Stage Two Complaints Completed

	2024/25	2023/24	2022/23	2021/22	2020/21
Admissions & Benefits	-	1	-	-	1
Alternative Provision	-	1	-	-	-
Virtual School	-	-	-	-	-
Travel Assistance / Transport	2	2	2	1	-
Southwark Information & Advice (SIAS)	-	-	-	-	-
Early Years	-	-	-	-	-
Special Educational Needs (SEND)	22	24	12	6	2
Learning and Achievement	3	-	-	-	1
Total	27	28	14	7	4

SEND cases are reducing at stage one although there remains a high escalation rate to stage two. The national picture may still be described as featuring a lack of specialist placements and professionals and an increase in students needing more bespoke educational arrangements. The commitment from Southwark, in terms of complaints, is to review a student's circumstances and to use the complaint process, when necessary, to identify what other additional actions can be raised, to ensure fair and equal access to education for all. Success may be judged from the proportion of SEND complaints which escalate to the Ombudsman, seen on the next page of this report.

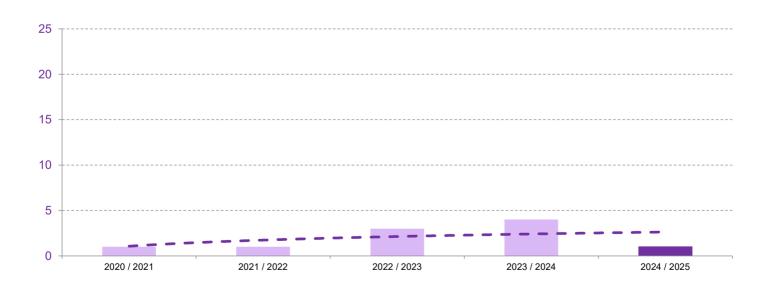


Education Ombudsman Final Decisions

	2024/25	2023/24	2022/23	2021/22	2020/21
Admissions & Benefits	-	-	-	-	-
Alternative Provision	1	-	-	-	-
Virtual School	-	-	-	-	-
Travel Assistance / Transport	-	-	-	-	-
Southwark Information & Advice (SIAS)	-	-	-	-	-
Early Years	-	-	-	-	-
Special Educational Needs (SEND)	1	4	3	1	1
Learning and Achievement	-	-	-	-	-
Total	1	4	3	1	1

The Ombudsman publishes the performance of Southwark and other boroughs here : <u>https://www.lgo.org.uk/your-councils-performance/</u>

We report *'final decisions'* on those cases for which the Ombudsman published a decision after undertaking a full investigation. We were made aware of 10 additional cases which they gave consideration but which led to an alternative outcome. There are several reasons including complaints being raised prematurely, being out of time, or being satisfactorily investigated already.



Education Outcomes and Root Cause Analyses

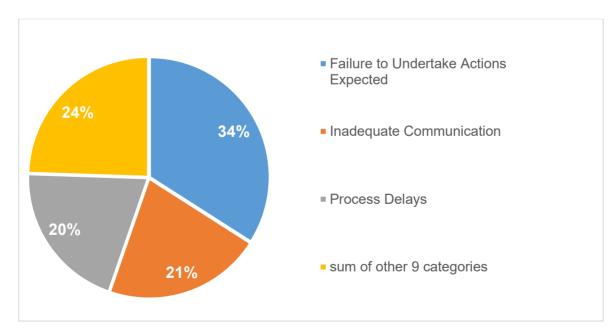
	2024/25	2023/24	2022/23	2021/22	2020/21
Partly Upheld	26%	19%	21%	23%	34%
Upheld	31%	51%	40%	29%	27%
Not Upheld	30%	23%	23%	33%	29%
No Findings	2%	2%	0%	2%	0%
Withdrawn / Rejected	11%	5%	16%	13%	10%

Maintaining consistent figures helps to reassure us that we continue to apply investigative standards and principles consistently.

Upholding (in part, or in whole) should be considered a relatively positive outcome as it provides reassurance that issues reported are being considered with objectivity and fairness.

Any reduction in upheld complaints would unlikely equate to a measure of success except where high rates have prevailed in a service area previously, the sources of which have been corrected. An example of which could be a software limitation having been overcome through redevelopment.

The following chart shows the categorisation of cases reported across the year irrespective for whether any fault was subsequently identified.



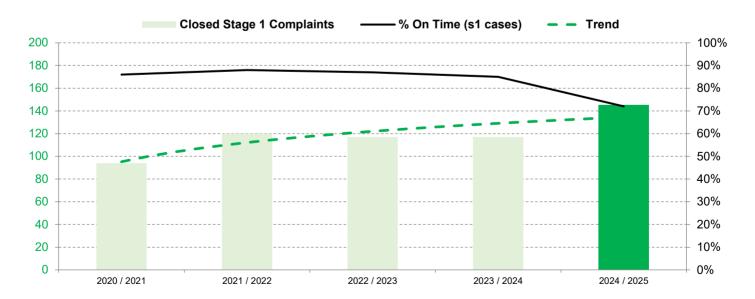
The full list of category types is shown in appendix a

Adult Social Care Stage One Complaints

	2024/25	2023/24	2022/23	2021/22	2020/21
Mental Health Long Term Services	12 (0)	5	6	3	4
Mental Health Short Term Services	9 (0)	6	6	4	4
All-Ages Disabilities 0-18 and 18-25	12 (2)	28	18	19	20
Learning Disabilities	18 (1)	6	12	15	4
Family Link and Orient Street	-	-	-	-	-
OPPD (eight services)	49 (1)	57	49	56	46
Service Development (DoLS and safegdng)	1 (0)	-	_	-	-
Client Finance Service	42 (3)	14	23	23	16
Personal Budget Service	2 (0)	1	3	-	-
Total	145 (7)	117 (8)	117 (5)	120 (5)	94 (7)

Brackets show the assistance of an Advocate. The complaints process is being used increasingly to administer appeals - reflecting greater awareness from colleagues involved. We regard this as a positive direction of travel, although administration of these appeals does impact the totals reported.

OPPD = Older Persons and Physical Disabilities Service, comprising : **Assessment & Intake, Case** Management, Occupational Therapy, Contact Team, Review Team, Intermediate Care Team, Transfer of Care Team and Telecare and Sensory Team.

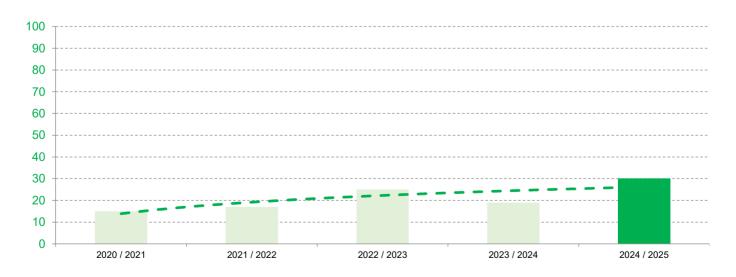


Adult Social Care Internal Reviews

	2024/25	2023/24	2022/23	2021/22	2020/21
Mental Health Long Term Services	2	-	1	-	-
Mental Health Short Term Services	3	1	-	-	-
All-Ages Disabilities 0-18 and 18-25	2	6	7	-	2
Learning Disabilities	3	2	4	3	5
Family Link and Orient Street	-	-	-	-	-
OPPD (eight services)	11	6	9	9	7
Service Development (DoLS and safegdng)	-	-	-	-	-
Client Finance Service	9	4	3	5	1
Personal Budget Service	-		1	-	-
Total	30	19	25	17	15

Where a service user, representative, or stakeholder is dissatisfied with the stage one complaint response, they may request an Internal Review. Cases for All-Ages Disabilities are not internal reviews but either corporate or statutory stage two complaints. Timescales and responsibilities differ but each of the above are escalated complaints, irrespective of the policy followed.

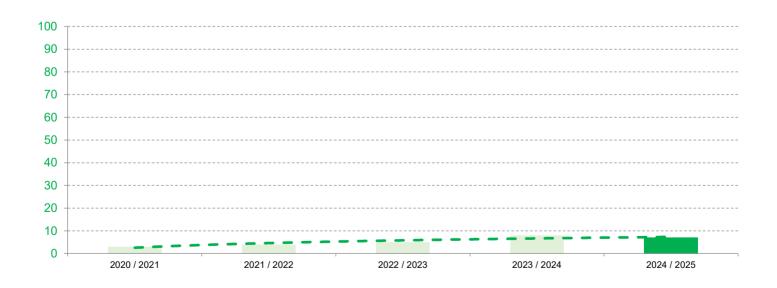
We have commissioned providers which deliver Care-at-Home services and Care Homes and we will look specifically at those cases after this Adult Social Care section, from page 19.



Adult Social Care Further Reviews

	2024/25	2023/24	2022/23	2021/22	2020/21
Mental Health Long Term Services	-	-	-	-	-
Mental Health Short Term Services	-	1	-	-	-
All-Ages Disabilities 0-18 and 18-25	2	3	1	-	3
Learning Disabilities	-	1	-	-	-
Family Link and Orient Street	-	-	-	-	-
OPPD (eight services)	3	1	2	1	-
Service Development (DoLS and safegdng)	-	-	-	-	-
Client Finance Service	1	2	2	3	-
Personal Budget Service	1	-	-	-	
Total	7	8	5	4	3

There were 145 stage one complaints closed and only 5% reached the final stage of the procedure, which we should regard as a satisfactory achievement and equals the achievement of the previous year. All cases above represent the final stage of the Council's process.

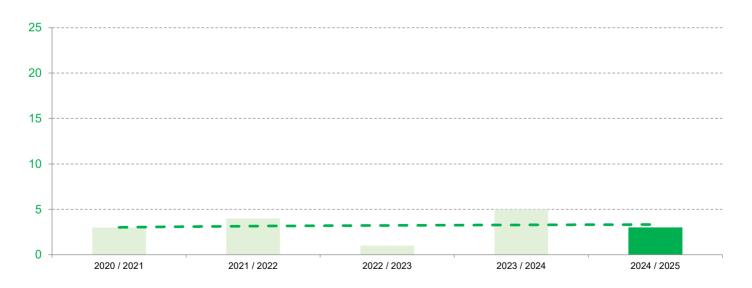


Adult Social Care Ombudsman Final Decisions

	2024/25	2023/24	2022/23	2021/22	2020/21
Mental Health Long Term Services	-	-	-	-	-
Mental Health Short Term Services	-	-	-	-	2
All-Ages Disabilities 0-18 and 18-25	-	3	-	1	-
Learning Disabilities	-	-	-	-	-
Family Link and Orient Street	-	-	-	-	-
OPPD (eight services)	2	1	1	3	-
Service Development (DoLS and safegdng)	-	-	-	-	-
Client Finance Service	-	1	-	-	1
Personal Budget Service	1	-	-	-	-
Total	3	5	1	4	3

The Ombudsman publishes the performance of Southwark and other boroughs here: <u>https://www.lgo.org.uk/your-councils-performance/</u>

We report *'final decisions'* on those cases for which the Ombudsman published a decision after undertaking a full investigation. We were made aware of 5 additional cases which they gave consideration but which led to an alternative outcome. There are several reasons including complaints being raised prematurely, being out of time, or being satisfactorily investigated already.



Adult Social Care Outcomes and Root Causes

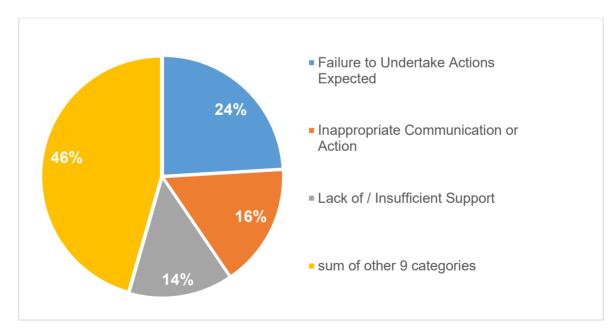
	2024/25	2023/24	2022/23	2021/22	2020/21
Partly Upheld	34%	38%	26%	34%	28%
Upheld	17%	24%	22%	20%	26%
Not Upheld	33%	19%	35%	29%	37%
No Findings	5%	5%	1%	3%	1%
Withdrawn / Rejected	11%	15%	16%	14%	8%

Maintaining consistent figures helps to reassure us that we continue to apply investigative standards and principles consistently.

Upholding (in part, or in whole) should be considered a relatively positive outcome as it provides reassurance that issues reported are being considered with objectivity and fairness.

Any reduction in upheld complaints would unlikely equate to a measure of success except where high rates have prevailed in a service area previously, the sources of which have been corrected. An example of which could be a software limitation having been overcome through redevelopment.

The following chart shows the categorisation of cases reported across the year irrespective for whether any fault was subsequently identified.



The full list of category types is shown in appendix a

Care Home and Care-at-Home Providers

Some services, such as these, may be delivered by contractors on behalf of the Council. Service users may choose to contact their Care Home or Care-at-Home provider directly and request a complaint response in accordance with the provider's own policy. Where cases are presented to the Local Authority, we investigate with the support of the provider and it is the Council who writes to the person who made the complaint, to explain our findings. The Council is responsible for the performance of those organisations and the Council works in partnership with management at the provider when a complaint is raised directly with us. Monitoring arrangements exist to understand those issues which are instead with the provider directly.

Stage One Complaints (brackets show use of advocacy)	2024/25	2023/24	2022/23	2021/22	2020/21
Care at Home Providers	14 (0)	17	18	18	15
Care Homes	4 (0)	3	7	1	2
Other	0 (0)	1	5	-	2
Total	18 (0)	21 (2)	30 (0)	19 (0)	19 (0)

Internal Reviews	2024/25	2023/24	2022/23	2021/22	2020/21
Care at Home Providers	-	2	3	1	2
Care Homes	-	2	1	-	-
Other	-	2	-	1	-
Total	0	6	4	2	2

Further (Final) Reviews	2024/25	2023/24	2022/23	2021/22	2020/21
Care at Home Providers	-	2	2	1	1
Care Homes	-	-	-	-	-
Other	-	-	-	1	-
Total	0	2	2	2	1

Ombudsman Final Decisions *and total no of referrals	2024/25	2023/24	2022/23	2021/22	2020/21
Care at Home Providers	-	-	1	-	1
Care Homes	-	-	-	1	-
Other	- / 0*	-	-	-	-
Total	0	0	1	1	1

Public Health Complaints

	2024/25	2023/24	2022/23	2021/22	2020/21
Children, Young & Health Protection	-	-	-	-	-
Healthy Adults	-	-	-	-	-
Place and Health Improvement	-	-	-	-	-
Intelligence and Partnerships	-	-	-	-	-
Total	0	0	0	0	0

The Social Care and Education Complaints Team offer services to Public Health (PH), who report in to the same leadership team as those Directorates named elsewhere in this report.

Complaints relating to services provided-for with the assistance of PH should be considered under the following :

The NHS Bodies and Local Authorities (Partnership Arrangements, Care Trusts, Public Health and Local Healthwatch) Regulations 2012

Those Regulations include provision for signposting any concerns parties as follows :

- (5) If the local authority considers that it is more appropriate for the complaint to be dealt with by the service provider, the authority must ask the complainant whether the complainant consents to the complaint being dealt with by the service provider and if the complainant consents then.. (we must tell the provider and they need to follow a formal procedure)

The Team have not dealt with any complaints in the year which were not satisfactorily attended-to either directly via the provider's own process, or outside the complaints process through direct management interventions.

There were two 'representations' where we agree with the service and complainant an alternative way to resolve the concern which arose.

Consequently, there are no complaint cases and no data to report on.

Complaints Process Review

At the conclusion of each year we challenge ourselves to review whether our investigations objective, sufficient and successful ?

Whilst this can be quite difficult to evidence, there is data to help us understand the answer.

The following data refers to all closed stage one complaints, and gives appropriate consideration to those which escalated to the next stages of the process. We can see :

	Responded on Time	Upheld + Partly Upheld Rate	Escalation Rate : Stage One to Stage Two	Second stage outcomes changed
Children & Families	79%	54%	18%	57%
Education	69%	55%	32%	63%
Adult Social Care	72%	50%	21%	50%
Care Homes / Care-at-Home	78%	78%	0%	n/a
Public Health	n/a	n/a	n/a	n/a

The *responded-on-time* rate tells us, when we look at previous years, that we are finding it more difficult to respond within the time usually allowed. However, updated Ombudsman guidance has reduced the time we have for some complaints by five working days and this has impacted our reported performance. The same guidance does allow us to take longer for complex cases and at the same time it is generally regarded that complaints are getting longer and more complex.

We are committed to respond right-first-time and it is inevitable that our *responded-on-time* rate will be impacted by the commitment. If we take longer than we initially indicated then we explain to the complainant before the original deadline expires. We are content that this is the right approach.

A high rate of upheld and partly upheld complaints does provide insight on issues being experienced by individual service areas. We do not regard a high figure as evidence of failure, rather we are reassured that our investigations are objective and open and fair and that highlight fault where we have fallen short.

We pay more reliance on the trend of *upheld+partly upheld* complaints over time. We check to see if the data creeps in any particular direction or if there is any marked change. The *upheld+partly upheld*

rates are remarkably consistent over a significant period of time across all areas and this indicates to us that appropriate and consistent principles continue to be applied.

Although we work to limit the need for escalated complaints, and although we approach dissatisfaction as a problem-solving exercise, we usually have little discretion but to advance a complaint to the next stage if a complainant wishes it. Escalations are not decided upon according to the merits of any case. Again we look at changes in escalation rates and we can see a general upturn in the proportion of complaints which escalate over time. This is something we need to keep under close consideration.

Interrogating the data further provides better intelligence. If we look and see that 'not upheld' complaints are escalating more then we need to think about whether we were objective and fair enough with our stage one investigation. Whereas if we see 'partly upheld' and 'upheld' complaints escalate more then we need to reflect on whether the outcomes and remedial actions we provided were sufficient.

Our team's desire is to preside over reduced escalations across all areas and future editions of this report will describe our progress.

When we reflect on the cases where the overall outcome has changed from stage one to stage two, what we would hope to see is a low rate. A low rate will provide some reassurance that further examination generally supported our stage one responses. However it will surely be a sign of good health within our operations, that further examination does lead to a changed overall response in some cases. We have changed the measurement this year and the figure reported is not longer based on whether an outcome changed from 'not upheld' to 'upheld' (for example) but rather the published figure now highlights if there was any additional learning derived at the escalated stage. Arbitrarily we feel that a 50% result equates to a sensible result.

We certainly should not let this reported figure affect our stage two approach but any significant deviation should cause our team to reflect on what is happening at stage one.

Each year we ask if our complaints activities are understood and if our service are being accessed equally and fairly ?

Guidance for content of annual reports suggests we look at which customer groups have made complaints. Guidance tells us to produce a summary of statistical data about some of the protected characteristics, as defined by the Equality Act.

What we hope to see, generally, is that we receive complaints across a wide range of backgrounds and that we see no significant deviation from the backgrounds of our local population.

We cannot always record this information for a complaint. We invite those who submit online complaint forms where we facilitate the capture of this data but online forms account for a minority of the complaints received. We cannot in good conscience redirect complainants towards our chosen forms as this may introduce a barrier to the more vulnerable and limited complainants.

The data which follows should be understood with the above limitations in-mind. Because the arrangements for making and recording complaints are the same across each Directorate then the data sets we have used for this purpose covers all the service areas.



Published selected demographic data for our borough can be found in *appendix b*.

We should take the time to understand if there are any areas where take-up could be improved or reviewed. We should reflect on the distinct needs for any minority groups and discuss if any additional provisions need to be made. Specifically reflecting on the data this year the Complaints Team will give additional thought, in the future, as to whether any person contacting us needs an advocate because the use of advocacy is falling, telling us one of three things:

- The process to complain is becoming easier
- Complainants are more likely to ask for help from friends of family
- The use of advocacy is not being accessed enough

We need to be confident that the truth belongs in the first two clauses and not the third and we will give this our ongoing attention.

Some of our present activities to ensure our service remains open and accessible include :

- We added a QR code to our leaflets and ensured they were replenished in public areas
- Our web pages were refurbished providing improved accessibility features
- We renewed our dialogue with commissioning and contract managers in regards the provision of advocacy services

Each year we ask ourselves if we are learning from complaints ?

In 2024-2025 the complaints team drafted and reported 254 statements of learning across all the areas we serve.

These learning statements were shared back with the service involved each time a complaint response was sent, for which learning was required. At the end of each quarter a full list of learning statements was provided by a report to around 70 teams and managers, providing a direct and easily-digested summary of service development opportunities. Where learning was considered higher risk or repetitious then these cases were given additional prominence.

This process allows leadership to consider service development needs and opportunities and we consider our process as Best Practice.

Assuming that all other factors are equal and that the complaint process is accessible to all, we would hope to see an overall reduction in new complaints, year-on-year. However we do not rely on this and we echo the sentiments of the Local Government and Social Care Ombudsman in stressing that increased complaint numbers can also shine a light on improved take-up of the complaint process. We can also add to that that increased numbers of complaints can reflect an increased trust on the part of our service users that the complaint process will work for them.

We can see there is an increase in stage one complaint cases under Childrens Services and in Adult Social Care and a reduction in Education. Management can see the Teams who have experienced an increase in complaint numbers, and they have the opportunity to use complaint data and their own judgments to understand the reasons for this.

We can see from the data that the complaints process is being used more often, within Adult Social Care, to administer appeals and we regard this as a good thing. Colleagues are becoming more aware. It is a contributing factor to the increased number of stage one complaints in that area.

Ultimately if we are not learning from complaints we may expect to see an increasing trend in Ombudsman investigations and final decisions. Data from this period provides strong reassurance that we are finding appropriate outcomes for the complaints we handle.

There is value in considering the total of financial remedies that were paid during the year as a direct consequence of a complaint having been made. We must temper this by observing that one case of significant injustice can skew the annual figures. We must also explain that many remedies are accepted much later. But each year we look at the following table, which is accurate *(only)* as of 1 April of each corresponding year :

	2024 - 2025	2023 - 2024	2022 – 2023	2021 - 2022	2020 - 2021
Children & Families	£ 13576.96	£ 15775.00	£ 18434.00	£ 9250.00	£ 7900.00
Education	£ 22820.00	£ 21995.00	£ 2950.00	£ 300.00	£ 0.00
Adult Social Care	£ 41700.47	£ 3300.00	£ 500.00	£ 1900.00	£ 2596.00
Care Homes / Care-at Home	£ 300.00	£ 0.00	£ 0.00	£ 1300.00	£ 0.00
Public Health	£ 0.00	£ 0.00	data unavailable		

Two cases in Adult Social Care this past year accounted for £38166.67 of the total and both of these cases relate to complex events in the past where the Council has extended every possible discretion to provide a satisfactory outcome to those affected.

Removing these examples from the analysis shows a remarkably consistent level of financial remedies. It should be regarded a sign of good health that the associated principles are being applied with consistency and without undue hesitancy.

Habitual Contact / Single Point of Contact

There are three individuals for whom their complaint-related contact is subject to restrictions under the Habitual Contact Policy. Given there are 307600 Southwark residents it appears that the restriction is being applied as it is intended – strictly only as a last course of action. These restrictions are formally reviewed every year with specific consideration given to each individual and their contact in the period.

Compliments

We cannot say that an increased number of compliments provides evidence of improved performance, neither a reduction suggesting the opposite. We therefore do not report on numbers of compliments. Rather what we must do is ensure a system exists to record praise received from external parties and that it is used alongside learning from our mistakes, to inform good practice. We reduce identifying information and publish compliments internally via a quarterly management report.

Arrangements for Advocacy

Guidance on the content of these reports obliges us to publish here the details about advocacy services which can be available for complaints about social care and education. The team are trained and focused on identifying where advocacy may be needed, when first engaging with a complainant.

Up to date information can always be found on our webpages, here :

www.southwark.gov.uk/childrencomplaints

www.southwark.gov.uk/asccomplaints

The rules on providing advocacy can be technical and precise and the complaints team record decision-making around advocacy on every complaint case.

Southwark Information Advice and Support (SIAS) team provides impartial, confidential advice and support about special educational needs and disabilities (SEND) to parents, carers and young people. Information is published here :

https://localoffer.southwark.gov.uk/sias/

Complaints Team Update

There have been a number of structure changes within the organisation over the last two years and the team have kept ownership for some areas which may have otherwise passed on to another team. This allows for consistency and familiarity for our colleagues in those affected areas. It allows us to maintain control of established reporting and allows us to continue to trend key information relating to complaints in those areas.

In keeping with recent years is the prevalence for changes to software and systems and whilst these changes can impact on our reporting and our administration, we continue to adjust so that our product is delivered to the highest standard we can achieve.

There were changes outside our control as a result of Ombudsman consultations and changes to guidance they provide. Notably there is a five working day reduction in the time allowed for some stage one complaints and this has impacted the timeliness key performance indicator. We used this opportunity to review precisely what we tell complainants at the time we acknowledge their complaints, so that we do not provide unreasonable expectations when, for example, we receive a complex and detailed complaint.

Our Team always benefits from consistency of team members and we benefit again this year from having had no changes in personnel. This gives us the opportunity to grow as individuals and as a team and to develop our knowledge about the Council's duties and services. This stability provides consistency to those we support and they benefit from working with the same professionals in a predictable, familiar and satisfactory way.

We continue to look for opportunities to improve what we do, incrementally and proactively. From the start of 2025 we trialled amendments to our online complaint forms, offering increased functionality and organisation to complainants, whilst retaining very straightforward options for those who write to us with lesser developed computer-skills. The initial signs are that this change has assisted the complaints team to ensure all relevant issues are more carefully captured, helping us to ensure we provide responses in keeping with the complainant's expectations and to do this with increased efficiency.

We continue to look out for new colleagues and post-holders and we continue to engage with them when they join, or change roles, to promote our principles and to establish appropriate ways of collaborating. We are always available to have these discussions with existing teams and managers, to renew our partnerships and to re-state relevant aspects of our process, and our philosophy.

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Duty Telephone	0207-525-3977

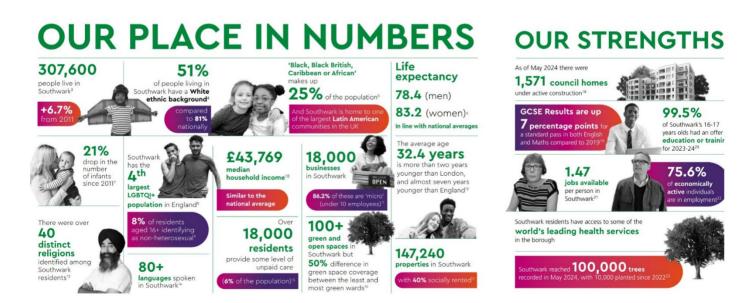
Duty eMail <u>sscomplaints@southwark.gov.uk</u>

Appendix a – all complaint categories

The full list of complaint root causes, which are referred to primarily on pages 9, 13 and 18 are :

Failure to Undertake Actions Expected Lack of / Insufficient Support Inadequate Communication Process Delays Invoicing or Account Issue Appeal a Decision or Package of Care Poor Service Delivery Payment Failure Inappropriate Communication or Action Assessment or Reports Case Handover / Ownership Multiple or Other Concerns

Appendix b – selected demographic data



More demographic data can be found here : <u>https://data.southwark.gov.uk/</u>