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BlackpoolCouncil

23 August 2016

To: Councillors Benson, Critchley, Mrs Henderson MBE, Humphreys, O'Hara, Scott, Singleton, Stansfield and L Taylor

The above members are requested to attend the:

RESILIENT COMMUNITIES SCRUTINY COMMITTEE

Thursday, 1 September 2016 at 6.00 pm in Committee Room A, Town Hall, Blackpool

AGENDA

1 DECLARATIONS OF INTEREST

Members are asked to declare any interests in the items under consideration and in doing so state:

- (1) the type of interest concerned; and
- (2) the nature of the interest concerned

If any member requires advice on declarations of interests, they are advised to contact the Head of Democratic Governance in advance of the meeting.

2 MINUTES OF THE LAST MEETING HELD ON 14 JULY 2016 (Pages 1 - 8)

To agree the minutes of the last meeting held on 14 July 2016 as a true and correct record.

3 PUBLIC SPEAKING

To consider any applications from members of the public to speak at the meeting.

4 EXECUTIVE AND CABINET MEMBER DECISIONS

The Committee to note that no Executive and Cabinet Member decisions within the remit of the Resilient Communities Scrutiny Committee have been taken since the last meeting.

5 FORWARD PLAN

The Committee to consider the content of the Council's Forward Plan, September 2016 - December 2016, relating to the portfolio of the Cabinet Secretary.

6 SCRUTINY WORKPLAN

The Committee to consider the Workplan, together with any suggestions that Members may wish to make for scrutiny review.

7 CHILDREN'S SERVICES REPORT

To inform the Committee of the work undertaken by Children's Services on a day to day basis and to update on the progress and implementation of developments within the areas in order to allow effective scrutiny of services.

8 SCHOOL LED SYSTEM AND BLACKPOOL CHALLENGE UPDATE (Pages 41 - 46)

To inform Scrutiny Committee of the work undertaken with regard to School Improvement and to update on the progress and implementation of developments within the Blackpool Challenge.

9 CUSTOMER RELATIONS TEAM ANNUAL REPORTS ON ADULT SERVICES AND CHILDREN'S SERVICES 2015/2016 (Pages 47 - 96)

To review the Annual Customer Relations Reports relating to Adult Services and Children's Services.

10 ADULT SERVICES REPORT

To inform the Committee of the work undertaken by Adult Services on a day to day basis in order to allow effective scrutiny of services.

11 DATE AND TIME OF NEXT MEETING

To note the date and time of the next meeting of the Committee as Thursday 13 October 2016, commencing at 6pm.

Venue information:

First floor meeting room (lift available), accessible toilets (ground floor), no-smoking building.

Other information:

For queries regarding this agenda please contact Sharon Davis, Scrutiny Manager, Tel: 01253 477213, e-mail sharon.davis@blackpool.gov.uk

Copies of agendas and minutes of Council and committee meetings are available on the Council's website at www.blackpool.gov.uk.

(Pages 9 - 18)

(Pages 33 - 40)

(Pages 19 - 32)

(Pages 97 - 112)

Public Document Pack Agenda Item 2 MINUTES OF RESILIENT COMMUNITIES SCRUTINY COMMITTEE MEETING - THURSDAY, 14 JULY 2016

Present:

Councillor Benson (in the Chair)

Councillors

Critchley O'Hara Humphreys Scott

Mrs Frances McErlane, Co-opted Member

In Attendance:

Mrs Delyth Curtis, Director of People Ms Amanda Hatton, Deputy Director of People (Early Help and Social Care) Ms Karen Smith, Deputy Director of People (Adult Services) Mrs Moya Foster, Senior Service Manager, Early Help for Children and Families Mrs Ruth Henshaw, Engagement and Intelligence Officer Mrs Sharon Davis, Scrutiny Manager

Councillor Graham Cain, Cabinet Secretary for Resilient Communities Councillor Maria Kirkland, Cabinet Member for Third Sector Engagement and Development

1 DECLARATIONS OF INTEREST

There were no declarations of interest on this occasion.

2 MINUTES OF THE LAST MEETING HELD ON 9 JUNE 2016

The minutes of the previous meeting held on 9 June 2016 were signed by the Chairman as a true and correct record.

3 PUBLIC SPEAKING

The Committee noted that there were no applications for public speaking on this occasion.

4 EXECUTIVE AND CABINET MEMBER DECISIONS

The Committee considered the Executive and Cabinet Member decisions taken since the previous meeting of the Committee.

The Committee agreed to note the decisions.

5 FORWARD PLAN

The Committee considered the items contained within the Forward Plan, July 2016 – October 2016 within the portfolio of the Cabinet Secretary and requested an update on the 'Head Start Round Three Funding Bid Result and Future Action'. Mrs Curtis, Director of People advised that the outcome of the bid would be announced by the Big Lottery on 20 July 2016.

Members also discussed 'School Place Planning Next Steps' and queried the impact the increase in academies had had on school place planning. In response, Mrs Curtis advised that the responsibility to ensure there were enough school places for children remained with the local authority. She added that the relationship with academies and multi academy trusts was improving. In response to further questioning, it was reported that the Fylde Coast Academy Trust bid for a new free school in Blackpool had successfully reached the second stage of application. It was noted that the final decision would be taken by the Department for Education.

6 SCRUTINY WORKPLAN

The Chairman highlighted the 'Implementation of Recommendations' table and noted that the request for a briefing paper on the regulation of Adult Social Care Services was outstanding. Ms Karen Smith, Deputy Director of People (Adult Services) reported that a paper was being prepared and would be circulated as soon as possible.

The Committee agreed:

- 1. To approve the Scrutiny Workplan.
- 2. To note the 'Implementation of Recommendations' table.

7 COUNCIL PLAN PERFORMANCE REPORT

Mrs Ruth Henshaw, Corporate Development Officer presented the performance against the Council Plan 2015/2020 for the period 1 April 2015 to 31 March 2016 and highlighted the key exceptions.

Members raised a number of questions regarding the performance indicator relating to the death to service time for cremation. In response, Councillor Graham Cain, Cabinet Secretary for Resilient Communities advised that the crematorium did have sufficient capacity and availability for cremations to occur within the target time, however, service users had a choice regarding when to hold the cremation. He added that the number of times on offer during the day had been increased and services were also being offered on Saturdays. However, delays would still occur if friends and families were very specific regarding the time and day of the service. In response to further questioning, Councillor Cain reported that there was a choice of service length of 30 or 45 minutes and that both service lengths were available at the same cost.

The Committee noted that in relation to the death to service time for cremations there were three clear factors contributing to delays, the third of which was highlighted as the length of time the West Lancashire Coroner took to process paperwork if the death occurred outside of Blackpool and Members queried why that was the case. It was agreed that a full written response would be sought following the meeting.

Assurance was sought by the Committee that Adult Social Care service users who had not received a completed review were safe. Ms Karen Smith, Deputy Director of People (Adult Services) advised that reviews were completed in priority order due to the difficulties in undertaking annual reviews caused by the significant increase in volume. She added that priority was given to new service users and those with variable conditions, with lower priority given to stable service users identified as a lower risk. In response to further questions, Ms Smith advised that further investment would be made to appoint new social workers based on the evidence of increased volume and some elements of the system had been streamlined.

Members discussed the indicator relating to the number of permanent admissions to residential care per 100,000 of population and noted that numbers in Blackpool were significantly higher than the national average. Councillor Cain reported that Blackpool had been an outlier for the indicator for 15 years. He added that a robust system was in place to ensure that permanent admissions to care were only made when necessary and that Blackpool had a greater supply of residential care allowing the decision to be taken when required.

The Committee queried whether the introduction of the NHS's Vanguard New Models of Care approach would have an impact on the number of permanent admissions to residential care. In response, Ms Smith advised that in her opinion, it was unlikely to have any immediate impact.

Following a discussion regarding the increasing number of Looked After Children, Members queried progress made in developing an in house therapeutic unit. Councillor Cain advised that investigations were ongoing into the best way in which to offer therapeutic services. Responding to further questions, Ms Amanda Hatton, Deputy Director of People (Early Help and Social Care) reported that an audit was currently being undertaken on the 49 children taken into care between 1 April 2016 and 15 June 2016 in order to ascertain key data including where the children were from, the school attended, age and previous contact with social services. The Committee requested that a future thematic discussion be held regarding the increasing number of looked after children and the response to the increase.

It was noted that the target had not been met for the percentage of children subject to a child protection plan for a second time and Members questioned why the target had not been met. Ms Hatton advised that a child becoming subject to a plan for a second time was not always poor performance, however, if the child had been subject to a plan within the previous two years for similar issues that suggested that the issues had not been resolved before the child had been removed from a plan the first time. She added that an audit had

been undertaken and had demonstrated that children had been removed from a plan too early on three occasions.

The Committee agreed:

- 1. To receive a written response following the meeting regarding the length of time the West Lancashire Coroner took to process paperwork if the death occurred outside of Blackpool and the impact on time from death to cremation.
- 2. To hold a thematic discussion on the number of looked after children and the response to the increasing number at a future meeting.

8 ADULT SERVICES REPORT

Ms Karen Smith, Deputy Director of People (Adult Services) presented the Adult Services Report to the Committee and the Chairman invited questions.

Members commended the Care Quality Commission (CQC) inspection report of the in house Shared Lives Service and queried what more the service could do in order to achieve an 'outstanding' rating. In response, Ms Smith advised that she had posed the same question to the CQC and advised that it was very difficult to achieve an outstanding judgement.

It was noted that the number of direct payments remained low and Ms Smith advised that the take up was improving and that the Direct Payments Team offered support to service users who wanted to utilise direct payments, but that many still preferred that the Council purchase care on their behalf.

The Committee discussed the safeguarding of adults and requested a more detailed report and further analysis of the safeguarding figures be provided in the next Adult Services Report to Committee. Members also queried the number of safeguarding alerts at The Harbour. In response, Ms Smith advised that Lancashire Care Foundation Trust (LCFT) was responsible for managing the safeguarding alerts at The Harbour and had clear lines of responsibility to the Blackpool Safeguarding Adults Board. It was noted that the Health Scrutiny Committee was holding a special meeting with LCFT regarding The Harbour in October 2016 and Members agreed to request that safeguarding at The Harbour be considered as part of that meeting.

The recent cessation of contract with a residential care home was considered and Members sought confirmation that residents had been moved to alternative accommodation in a safe and sympathetic manner. Ms Smith reported that a number of previous experiences had indicated best practice in moving residents and that sufficient support had been provided to all residents throughout the process. In response to further questions, Ms Smith advised that should any Member have concerns regarding a care home these could be indicated by email. It was requested that the relevant email address be circulated following the meeting.

Members noted that work was being undertaken to give flexibility to care at home providers including potentially banding time and taking a zoned approach to provision. In response to questions, Ms Smith advised that best practice would be sought from other Councils and

Councillor Cain added that it was not the policy of Blackpool Council to commission 15 minute visits. The Committee also noted the ongoing discussions regarding the administration of medication.

It was noted that a large amount of work was ongoing with regards to dementia services and Members queried how the work carried out in house linked to schemes being provided externally and it was agreed that a written response would be provided following the meeting detailing the Dementia Friends work.

The Committee considered the results of the annual service user survey and noted that 70% of service users reported feeling safe and queried the reasons why the remaining 30% did not feel safe. In response, Ms Smith advised that there were a number of reasons why service users did not feel safe and that all service users who had indicated they did not feel safe had been asked following the survey with work undertaken to resolve the issues.

The Committee agreed:

- 1. To receive a more detailed report and further analysis of the safeguarding figures in the next Adult Services Report to Committee.
- 2. To request that safeguarding at The Harbour be considered as part of the special meeting to be held by the Health Scrutiny Committee in October 2016.
- 3. That the relevant email address for reporting concerns regarding care homes be circulated following the meeting.
- 4. That a written response be provided following the meeting regarding the work of Dementia Friends and how it linked to the work undertaken on dementia by the Council.

9 CHILDREN'S SERVICES REPORT

Mrs Del Curtis, Director of People presented the Children's Services Report to the Committee and the Chairman invited questions.

The Committee discussed the preventative work being undertaken to prevent young people from leaving college prior to the completion of courses. Mrs Curtis advised that approximately 90 young people at risk of not going to college or leaving prematurely once in college had been identified and targeted through a specific scheme. She advised that the scheme entitled Summer Ventures Programme had had a high success rate and that the scheme would be repeated with a new intake in August 2016.

Members discussed the challenge provided to early years' settings as part of the Ofsted inspection process and queried whether the physical environment was also inspected. It was agreed that information regarding building and physical environment inspections of providers would be circulated following the meeting.

The Committee discussed serious high profile cases from the last few years noting the cases of 'Baby P' and Victoria Climbie and highlighted that key concerns raised from the cases included partnership working between local organisations such as the Council and NHS. In

response to questions following the discussion, Mrs Curtis reported that Blackpool had a strong Blackpool Safeguarding Children's Board (BSCB) in place with a number of Sub Groups that encouraged collaboration between organisations. She added that the BSCB oversaw a shared vision and shared datasets and that it was recognised by organisations in Blackpool that the safeguarding of children was every agency's responsibility. In response to further questioning, Mrs Curtis advised that improvements could always be made and that innovative solutions were always being sought such as the co-location of operational multiagency teams such as the Families in Need team based at the police station. She added that similarly police officers were based at South King Street with Social Care Teams.

The Committee went on to consider The Alternative School (TAS) which had recently opened in Blackpool offering an alternative to mainstream education for a small number of pupils. Mrs Curtis advised that mainstream schools could commission places in The Alternative School for pupils finding it difficult to attend mainstream education. In response to questioning, she added that the provision would follow the national curriculum but teaching would be based across small groups of pupils. She also reported that feedback on the school had been positive.

The Committee agreed:

That information regarding building and physical environment inspections of providers be circulated following the meeting.

10 THEMATIC DISCUSSION: EARLY HELP

Ms Amanda Hatton, Deputy Director of People (Early Help and Social Care) provided an overview of Early Help advising Members that it was a very wide area of work focussing on intervening early and taking a partnership approach to activity. She highlighted that the Blackpool Safeguarding Children's Board had introduced an Early Help Steering Group to identify what was working well and what required improvement.

The key challenges of Early Help provision in Blackpool had been identified and included the impact of early help on the number of open cases to social care not being clear, the inconsistent approach taken to children identified as vulnerable, the lack of data on activity undertaken by agencies providing universal services and the pressures on partners regarding competing priorities. Ms Hatton also highlighted the key strengths and opportunities of Early Help in Blackpool such as successful Troubled Families projects.

Ms Hatton reported that the Early Help Steering Group was considering best practice in other areas and had identified potential future ways of working including increased emphasis and use of children's centres as a hub and to identify a shared vision such as the Resilient Therapy Approach to all activity. The importance of successfully 'stepping down' cases was also highlighted.

The Committee discussed a recent initiative targeting domestic abuse offenders whereby six of eight men had completed a programme to prevent future offending. In response to questions, Mrs Moya Foster Senior Service Manager, Early Help for Children and Families

reported that the success of the programme would be monitored regularly and that a support group had been established for participants to maintain progress.

In response to further questions, Ms Hatton advised that it was often difficult to measure the impact of Early Help activity. The aim of activity was to reduce the number of future complex cases, however, research suggested that successful Early Help activity actually identified more complex cases.

The Committee went on to discuss the development of the Early Help Strategy and noted that a partnership approach would be a common theme in the strategy. Ms Hatton advised that work was required to identify potential outcomes for the strategy, how impact would be measured and the needs of the community. She added that research of other authorities that had successfully reduced the number of looked after children was being undertaken to identify learning points.

Members noted the increased need in pastoral care provision in schools and queried how that could be addressed. Ms Hatton advised that good pastoral care was a key part of the Head Start bid and that should the bid prove successful the improving resilience programme would be delivered in every school in Blackpool.

The Chairman asked how the Resilient Communities Scrutiny Committee might positively impact upon the Early Help work. In response, Mrs Curtis advised that partners were working together to develop relationships and build on current Early Help provision. She added that providing a challenge to all partners was important and that the Blackpool Safeguarding Children's Board also had a key role in providing that challenge.

11 DATE AND TIME OF NEXT MEETING

The Committee noted the date and time of the next meeting as Thursday, 1 September 2016 commencing at 6pm in Committee Room A, Town Hall, Blackpool.

Chairman

(The meeting ended at 7.51 pm)

Any queries regarding these minutes, please contact: Sharon Davis, Scrutiny Manager Tel: 01253 477213 E-mail: sharon.davis@blackpool.gov.uk This page is intentionally left blank

Report to:	RESILIENT COMMUNITIES SCRUTINY COMMITTEE
Relevant Officer:	Sharon Davis, Scrutiny Manager.
Date of Meeting	1 September 2016

FORWARD PLAN

1.0 Purpose of the report:

1.1 The Committee to consider the content of the Council's Forward Plan, September 2016 – December 2016, relating to the portfolio of the Cabinet Secretary.

2.0 Recommendations:

- 2.1 Members will have the opportunity to question the relevant Cabinet Member in relation to items contained within the Forward Plan within the portfolio of the Cabinet Secretary.
- 2.2 Members will have the opportunity to consider whether any of the items should be subjected to pre-decision scrutiny. In so doing, account should be taken of any requests or observations made by the relevant Cabinet Member.

3.0 Reasons for recommendations:

- 3.1 To enable the opportunity for pre-decision scrutiny of the Forward Plan items.
- 3.2a Is the recommendation contrary to a plan or strategy adopted or No approved by the Council?
- 3.2b Is the recommendation in accordance with the Council's approved N/A budget?
- 3.3 Other alternative options to be considered:

None.

4.0 Council Priority:

4.1 The relevant Council Priority is 'Communities: Creating stronger communities and increasing resilience'.

5.0 Background Information

- 5.1 The Forward Plan is prepared by the Leader of the Council to cover a period of four months and has effect from the first working day of any month. It is updated on a monthly basis and subsequent plans cover a period beginning with the first working day of the second month covered in the preceding plan.
- 5.2 The Forward Plan contains matters which the Leader has reason to believe will be subject of a key decision to be taken either by the Executive, a Committee of the Executive, individual Cabinet Members, or Officers.
- 5.3 Attached at Appendix 5(a) is a list of items contained in the current Forward Plan. Further details appertaining to each item contained in the Forward Plan has previously been forwarded to all members separately.

5.6 Witnesses/representatives

- 5.6.1 The following Cabinet Members are responsible for the Forward Plan items in this report and have been invited to attend the meeting:
 - Councillor Cain, Cabinet Secretary (Resilient Communities)

Does the information submitted include any exempt information?

No

List of Appendices:

Appendix 5(a) – Summary of items contained within Forward Plan September 2016 – December 2016.

- 6.0 Legal considerations:
- 6.1 None.
- 7.0 Human Resources considerations:
- 7.1 None.
- 8.0 Equalities considerations:
- 8.1 None.

- 9.0 Financial considerations:
- 9.1 None.
- 10.0 Risk management considerations:
- 10.1 None.
- **11.0** Ethical considerations:
- 11.1 None.
- **12.0** Internal/ External Consultation undertaken:
- 12.1 None.
- **13.0** Background papers:
- 13.1 None.

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EXECUTIVE FORWARD PLAN - SUMMARY OF KEY DECISIONS

(SEPTEMBER 2016 to DECEMBER 2016)

* Denotes New Item

Page Nº	Anticipated Date of Decision	Matter for Decision	Decision Reference	Decision Taker	Relevant Cabinet Member
2	November 2016	Adult Social Care Charging 12/2015 Exec Policy		Executive	Cllr Cain
4	September 2016	Headstart Round Three Funding Bid Result and Future Action	7/2016	Executive	Cllr Cain
5	September 2016	School Place Planning Next Steps	11/2016	Executive	Cllr Cain
7	September 2016	Youth Justice Plan	13/2016	Executive	Cllr Cain

Matter for Decision Ref Nº 12/2015	To consider and approve the revised charging policy for Adult Social Care services. Blackpool's Fairer Contributions Policy has been revised and updated to reflect the requirements of the Care Act 2014. The new Adult Social Care Charging Policy will cover the charging arrangements		
	for both residential and non-residential services.		
Decision making Individual or Body	Executive		
Relevant Portfolio Holder	Councillor Graham Cain, Cabinet Secretary (Resilient Communities)		
Date on which or period within which decision is to be made	November 2016		
Who is to be consulted and how	 Service users directly affected by the changes resulting from the implementation of the revised Policy. 		
	 Local third sector organisations with a specific interest in adult social care. 		
	Consultation will be conducted by post, through the website and through stakeholder events.		
How representations are to be made and by what date	Representations must be made in writing (either by letter, e-mail or the on-line survey) to the responsible officer. The dates of the consultation are subject to confirmation.		
Documents to be	Report		
submitted to the	The Adult Social Care Charging Policy		
decision maker for consideration	The Equality Analysis		
	A Report on the outcome of the Consultation Exercise		
Name and address of	Karen Smith		
responsible officer	Deputy Director of People (Adult Services)		
	e-mail: karen.smith@blackpool.gov.uk		
	Tel: (01253) 476803		

Matter for Decision Ref Nº 7/2016	Headstart Round Three Funding Bid Result and Future Action
Decision making Individual or Body	Executive
Relevant Portfolio Holder	Councillor Graham Cain, Cabinet Secretary (Resilient Communities)
Date on which or period within which decision is to be made	September 2016
Who is to be consulted and how	N/A
How representations are to be made and by what date	In writing to the responsible officer, at the address shown below, by 1 June 2016.
Documents to be submitted to the decision maker for consideration	Report
Name and address of responsible officer	Neil Jack, Chief Executive e-mail: neil.jack@blackpool.gov.uk Tel: (01253) 47 7006

Matter for Decision Ref № 11/2016	School Place Planning Next Steps. Following the publication of the School Organisation Pupil Place Plan 2015-2020 to agree what actions need to be taken to ensure delivery of sufficient school places over the next decade.
Decision making Individual or Body	Executive
Relevant Portfolio Holder	Councillor Graham Cain, Cabinet Secretary (Resilient Communities)
Date on which or period within which decision is to be made	September 2016
Who is to be consulted and how	Once the preferred option is selected a full consultation exercise will be undertaken.
How representations are to be made and by what date	Not applicable
Documents to be submitted to the decision maker for consideration	Report to be submitted
Name and address of responsible officer	Delyth Curtis, Director of People e-mail: Delyth.curtis@blackpool.gov.uk Tel: (01253) 47 65 58

Matter for Decision	To approve the annual Youth Justice Plan
Ref № 13/2016	
Decision making	Executive
Individual or Body	
Relevant Portfolio	Councillor Graham Cain, Cabinet Secretary (Resilient
Holder	Communities)
Date on which or	September 2016
period within which	
decision is to be made	
Who is to be	Members of the Youth Offending Team Partnership
consulted and how	Management Board, through the established cycle of
	meetings and/or activity specifically for the purpose of producing the plan
How representations	producing the plan. Not Applicable
are to be made and by	
what date	
Documents to be	Covering Report
submitted to the	Plan
decision maker for	
consideration	
Name and address of	Delyth Curtis, Director of People
responsible officer	e-mail: Delyth.curtis@blackpool.gov.uk
	Tel: (01253) 47 65 58

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Report to:	RESILENT COMMUNITIES SCRUTINY COMMITTEE
Relevant Officer:	Sharon Davis, Scrutiny Manager.
Date of Meeting	1 September 2016

SCRUTINY WORKPLAN

1.0 Purpose of the report:

1.1 The Committee to consider the Workplan, together with any suggestions that Members may wish to make for scrutiny review.

2.0 Recommendations:

- 2.1 To approve the Committee Workplan, taking into account any suggestions for amendment or addition.
- 2.2 To monitor the implementation of the Committee's recommendations/actions.

3.0 Reasons for recommendations:

- 3.1 To ensure the Workplan is up to date and is an accurate representation of the Committee's work.
- 3.2a Is the recommendation contrary to a plan or strategy adopted or No approved by the Council?
- 3.2b Is the recommendation in accordance with the Council's approved N/A budget?
- 3.3 Other alternative options to be considered:

None.

4.0 Council Priority:

4.1 The relevant Council Priority is 'Communities: Creating stronger communities and increasing resilience.'

5.0 Background Information

5.1 Scrutiny Workplan

- 5.1.1 The Scrutiny Committee Workplan is attached at Appendix 6(a). The Workplan is a flexible document that sets out the work that the Committee will undertake over the course of the year.
- 5.1.2 Committee Members are invited, either now or in the future, to suggest topics that might be suitable for scrutiny in order that they be added to the Workplan.

5.2 Scrutiny Review Checklist

5.2.1 The Scrutiny Review Checklist is attached at Appendix 6(b). The checklist forms part of the mandatory scrutiny procedure for establishing review panels and must therefore be completed and submitted for consideration by the Committee, prior to a topic being approved for scrutiny.

5.3 Implementation of Recommendations/Actions

- 5.3.1 The table attached to Appendix 6(c) has been developed to assist the Committee to effectively ensure that the recommendations made by the Committee are acted upon. The table will be regularly updated and submitted to each Committee meeting.
- 5.3.2 Members are requested to consider the updates provided in the table and ask questions as appropriate.

Does the information submitted include any exempt information?

No

List of Appendices:

Appendix 6(a), Resilient Communities Scrutiny Committee Workplan Appendix 6(b), Scrutiny Review Checklist Appendix 6(c), Implementation of Recommendations/Actions

6.0 Legal considerations:

- 6.1 None.
- 7.0 Human Resources considerations:
- 7.1 None.

- 8.0 Equalities considerations:
- 8.1 None.
- 9.0 Financial considerations:
- 9.1 None.
- 10.0 Risk management considerations:
- 10.1 None.
- **11.0** Ethical considerations:
- 11.1 None.
- **12.0** Internal/ External Consultation undertaken:
- 12.1 None.
- **13.0** Background papers:
- 13.1 None.

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	ITIES SCRUTINY COMMITTEE WORKPLAN 2015/2016
9 June 2016	Children's and Adults Overview Report
	PRU Scrutiny update
	Introducing Infusion
14 July 2016	Council Plan – End of Year Performance Monitoring - Communities
	Children's Overview Report
	Adults Overview Report
	Thematic Discussion: Early Help
1 September 2016	Children's Overview Report
	Adults Overview Report
	Blackpool Challenge Board Report
	Children's and Adult's Customer Feedback Reports
13 October 2016	Council Plan – Q1 Performance Monitoring - Communities
	Children's Overview Report
	Adults Overview Report
	Thematic Discussion: Care at Home
	Thematic Discussion: Youth Justice System
8 December 2016	Children's Overview Report
	Adults Overview Report
	Update on Volunteer Strategy/Action
	Thematic Discussion: Intermediate Care
	Council Plan – Q2 Performance Monitoring - Communities
26 January 2017	Children's Overview Report
	Adults Overview Report
9 March 2017	Children's Overview Report
	Adults Overview Report
	Thematic Discussion: Community Engagement and the Infusion Service
	Council Plan – Q3 Performance Monitoring - Communities
27 April 2017	Children's Overview Report
	Adults Overview Report

Joint item with Health Scrutiny Committee

Thematic Discussion: Transforming Care for Adults with Learning Disabilities (Winterbourne View)

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SCRUTINY SELECTION CHECKLIST

Title of proposed Scrutiny:

The list is intended to assist the relevant scrutiny committee in deciding whether or not to approve a topic that has been suggested for scrutiny.

Whilst no minimum or maximum number of 'yes' answers are formally required, the relevant scrutiny committee is recommended to place higher priority on topics related to the performance and priorities of the Council.

Please expand on how the proposal will meet each criteria you have answered 'yes' to.

	Yes/No
The review will add value to the Council and/or its partners overall performance:	
The review is in relation to one or more of the Council's priorities:	
The review is in relation to one of more of the Council's priorities.	
The Council or its partners are not performing well in this area:	
It is an area where a number of complaints (or bad press) have been received:	
The issue is strategic and significant:	
There is a defined of weblic interaction to the text.	-
There is evidence of public interest in the topic:	
The issue has potential impact for one or more sections of the community:	
Service or policy changes are planned and scrutiny could have a positive input:	
Adequate resources (both members and officers) are available to carry out the scrutiny:	

Please give any further details on the proposed review:
Completed by: Date:

MONITORING THE IMPLEMENTATION OF SCRUTINY RECOMMENDATIONS

DATE OF REC	RECOMMENDATION	TARGET DATE	RESPONSIBLE OFFICER	UPDATE	RAG RATING
02.07.15	Summary of all Ofsted inspection reports within the Children's Services Improvement Report and to receive full Ofsted inspection reports outside of the Committee meeting as and when they are published.	Ongoing	Del Curtis/Sharon Davis	A summary of Ofsted Inspection reports is included in every Children's Improvement report. Full inspection report links to be circulated via the Chairman.	Green
10.09.15	To request that the potential use of a similar test to the NHS friends and family test for appropriate services be investigated.	17 March 2016	Hilary Wood	Update provided 29 July 2016: Following review, changes have been made so that all care plans will now incorporate text to point people to the NHS Choices website. A page has also been added to Blackpool4me to do the same. This will tell us how likely the person is to recommend the care provider to friends and family if they needed similar care or treatment on a scale of one to five and will give us a free text review of up to 300 words. Posted reviews will be looked at in advance of each contract review we undertake and discussed with providers.	Green
10.09.15	More detail be provided in the commentary regarding incident type in future Complaints Annual Reports.	September 2016	Hilary Wood	2016 Annual Reports are attached to the Agenda. For Members to determine if enough commentary has been provided.	Green
05.11.15	To monitor the developments made in relation to a central database for volunteers, a policy	November 2016	Councillor Kirkland	To be received 12 months after date of meeting.	Not yet due

	for recruitment and a potential corporate celebration event.				
05.11.15	All Councillors be requested to attend dementia awareness training.	31 May 2016	Sharon Davis	Update on attendance: 27 Nov 2015 – ClIrs Maycock, Cain, Mitchell 13 Jan 2016 – ClIrs Cross, Ryan, O'Hara, G Coleman, Benson, L Taylor, Galley 28 Jan 2016 – ClIrs Adrian, D Coleman, Campbell 2 Feb 2016 – ClIrs Kirkland, Smith	Amber
10.12.15	That the overview of complaints and compliments as provided to the Corporate Parent Panel be circulated to Members of the Committee outside of meetings.	Ongoing	Sharon Davis	First paper circulated. At the previous Corporate Parent meeting, the annual customer feedback reports were presented. The reports are attached to the 1 September agenda.	Green
04.02.16	To receive any action plans developed from the Serious Case Reviews and the details of lessons learnt for detailed consideration.	December 2016	Del Curtis	To be received at a future meeting. Members to determine if the item should form the basis of a thematic discussion.	Not yet due
04.02.16	To receive an update in approximately six months regarding the review of social care placements.	October 2016	Del Curtis	Update to be included in October Overview Report.	Not yet due
04.02.16	To receive regular updates regarding the Pilot Scheme for Respite Provision including occupancy rates and how the results of the pilot would inform future respite provision.	May 2016	Karen Smith	To receive regular updates, first one received for May 2016 and included in report.	Green
17.03.16	The Committee agreed to receive a CSE update report once the Ofsted inspection had been undertaken.	Following inspection	Philippa Holmes	Date for update to be received once inspection has been undertaken.	Not yet due

17.03.16	The Committee agreed to receive the Annual Blackpool Safeguarding Board Report at a future meeting.	October 2016	David Sanders	To be added to workplan.	Not yet due
17.03.16	The Committee agreed to receive the analysis of contacts received from the Multi-Agency Safeguarding Hub.	31 October 2016	Amanda Hatton	Date to be confirmed once timescale for analysis is identified.	Not yet due
06.04.16	The draft domestic abuse strategy be considered at a future meeting of the Resilient Communities Scrutiny Committee, once it was available.	Tbc	Amanda Hatton	To be added to workplan when date for completion is known.	Not yet due
06.04.16	That the strategy and action plan for preventing and dealing with homelessness be presented to the Resilient Communities Scrutiny Committee, once it had been drafted.	Tbc	Andy Foot	To be added to workplan when date for completion is known.	Not yet due
06.04.16	To receive a report containing further information regarding heath issues for homeless people, with a particular focus on their access to healthcare.	Tbc	Andy Foot/Arif Rajpura	Further report to be requested.	Not yet due
12.05.16	To request a briefing paper rather than a training session on regulation of Adult Social Care Service.	30 June 2016	Karen Smith	Circulated 27 July 2016.	Green
12.05.16	The Committee agreed to receive a detailed update in approximately six months on Intermediate Care.	November 2016	Karen Smith	To be added to workplan.	Not yet due.
12.05.16	To receive further details of the consultation event to be held	31 October 2016	Val Raynor	Information to be circulated.	Not yet due

	regarding the review of Speech, Language and Communication across Blackpool and the strategic group established to implement the transformational plan for Autism Spectrum Disorder following the meeting.				
12.05.16	To receive a comparison of the uptake of Pupil Premium by early years settings attached to Children's Centres and settings unattached.	30 September 2016	Del Curtis	Information to be circulated.	Not yet due
12.05.16	To hold a thematic discussion on Youth Offending including Restorative Justice at a future meeting of the Committee.	October 2016	Andrew Lowe	Included in workplan.	Not yet due
09.06.16	To receive a thematic discussion paper on Care at Home to a future meeting of the Committee.	13 October 2016	Karen Smith	Added to workplan.	Not yet due
09.06.16	To receive a report in approximately nine months on developments in community engagement, including an update on the work carried out by the Infusion Service.	9 March 2017	Andy Divall	Added to workplan.	Not yet due
09.06.16	To receive a final report on Recommendations One, Two and Three of the PRU Scrutiny Panel from the Blackpool Challenge Board at a future meeting.	1 September 2016	Del Curtis	Included in the Blackpool Challenge Report attached to the Agenda. Members to determine if the response is sufficient and they are able to sign off the recommendations as completed.	Green

09.06.16	To receive an update on Recommendation Four of the PRU Scrutiny Panel following the outcome of the funding bid.	Тbс	Del Curtis/Sonia Blandford	Date to be included when the outcome of the funding bid is known.	Not yet due
14.07.16	To receive a written response following the meeting regarding the length of time the West Lancashire Coroner took to process paperwork if the death occurred outside of Blackpool and the impact on time from death to cremation.	31 August 2016	Mark Towers	Response requested 2 August 2016. Response awaited.	Amber
14.07.16	To hold a thematic discussion on the number of looked after children and the response to the increasing number at a future meeting.	31 January 2016	Sharon Davis/Amanda Hatton	Added to the workplan for January 2017 meeting.	Not yet due
14.07.16	To receive a more detailed report and further analysis of the safeguarding figures in the next Adult Services Report to Committee.	1 September 2016	Karen Smith	Included in Adult Services Overview Report on agenda.	Green
14.07.16	To request that safeguarding at The Harbour be considered as part of the special meeting to be held by the Health Scrutiny Committee in October 2016.	31 October 2016	Sharon Davis	Request has been submitted to Health Scrutiny Committee and LCFT have been asked to address safeguarding within the report provided.	Green
14.07.16	That the relevant email address for reporting concerns regarding care homes be circulated following the meeting.	30 September 2016	Sharon Davis	To be circulated.	Not yet due

14.07.16	That a written response be provided following the meeting regarding the work of Dementia Friends and how it linked to the work undertaken on dementia by the Council.	30 September 2016	Karen Smith	To be circulated.	Not yet due
14.07.16	That information regarding building and physical environment inspections of providers be circulated following the meeting.	30 September 2016	Del Curtis	To be circulated.	Not yet due

Report to:

RESILENT COMMUNITIES SCRUTINY COMMITTEE

Relevant Officer: Date of Meeting Delyth Curtis, Director of People

1 September 2016

CHILDREN'S SERVICES REPORT

1.0 Purpose of the report:

1.1 To inform Scrutiny Committee of the work undertaken by Children's Services on a day to day basis and to update on the progress and implementation of developments within the areas in order to allow effective scrutiny of services.

2.0 Recommendation(s):

- 2.1 To note the contents of the report and to ensure that current work continues to meet statutory obligations and that work to prepare for external inspections continues.
- 2.2 To continue to meet statutory monitoring, challenge and support obligations.
- 2.3 To identify any further information and actions required.

3.0 Reasons for recommendation(s):

3.1 For Members of the Scrutiny Committee to be fully informed as to the day to day work of the Children's Services Directorate and have assurance that Blackpool is continuing to meet its statutory obligations for future inspection requirements. The Local Authority retains a statutory responsibility to monitor all schools in order to support improvement and raise the attainment and progress for all children in the area.

3.2a	Is the recommendation contrary to a plan or strategy adopted or approved by the Council?	No
3.2b	Is the recommendation in accordance with the Council's approved budget?	Yes
3.3	Other alternative options considered:	

None.

4.0 Council Priority:

4.1 The relevant Council Priority is 'Communities: Creating stronger communities and increasing resilience'.

5.0 Reports

5.1 School funding reforms

- 5.1.1 The Secretary of State for Education has announced a delay to the planned implementation of a national funding formula for schools. The first stage of a consultation which began in March this year incorporated proposals for a new formula to be introduced from April 2017. The intention was that there would be two years of a "soft" national formula, with some retained local discretion to re-distribute funding between a local authority's schools. The "hard" formula would then commence in April 2019, with each school's funding determined at a national level.
- 5.1.2 The statement by the Secretary of State confirmed that the soft national formula will now not be implemented until April 2018, although it is anticipated that there will only be one year of local discretion, with the hard formula coming into effect in April 2019 as originally planned. There will be a second stage to the consultation following summer recess, and this will set out the detailed proposals, with illustrations of the financial effect at school and local authority level.
- 5.1.3 The Council is also awaiting the second stage of the High Needs consultation (which covers funding for aspects such as special schools, special educational needs, and the Pupil Referral Unit), as well as proposals for a national formula for Early Years education, and reforms to the funding of Alternative Provision. Further information will be reported to Scrutiny Committee when available.

5.2 School Inspection Outcomes

5.2.1 Since the last report there have not been any full inspections. There has been one HMI Monitoring visit which was held at South Shore Academy. The outcome stated sufficient progress was being made.

5.3 School Structural Changes

5.3.1 Mereside will convert to an Academy on 1 September 2016 as part of FCAT (Fylde Coast Academy Trust).

5.4 White Paper

5.4.1 Following the meeting outlined in the last report on the 13 June 2016 between system leaders and the Regional School Commissioner, a further event on 14 July 2016 was scheduled. This date incorporated opportunities for Headteachers and Chairs of Governors to meet with the Regional Schools Commissioner (Vicky Beer) and National School Commissioner (Sir David Carter), to discuss the changing landscape in the light of the White Paper. The event took place at the Winter Gardens and was attended by over 90 representatives. This date is the first of a series of dates, to be determined, which will address the changing landscape for school accountability.

5.5 Safeguarding

- 5.5.1 The School Safeguarding Advisor and a number of other staff from the Local Safeguarding Children's Board (LSCB) and partner agencies have been trained by the NSPCC to deliver the "Graded Care Profile 2" assessment tool for considering whether Neglect is evident within a family or home environment. LSCB will now roll out training to partner agencies so that they can complete the assessment tool and will better understand and / or identify neglect when it is occurring. The first round of training will occur in September.
- 5.5.2 The LSCB has also developed a new training package for school Designated Safeguarding Leads at schools and colleges in Blackpool, which will be delivered in October 2016 and February 2017 initially. This will significantly increase the depth and breadth of training available to schools and is initially free of charge. Additionally, Blackpool Organisation and Workforce Development and the LSCB have developed a training offer to schools and colleges which incorporates both online and face to face training at a price which provides significant cost savings when compared to training that is procured through external agencies. This is comprehensive and covers national and local safeguarding and child protection agendas and will allow schools and colleges to meet the requirement of annual updates to training and an ongoing cycle of learning.

5.6 **SEND**

- 5.6.1 Blackpool recently received a congratulatory letter from the Department for Education (DfE) for completing all Education, Health and Care (EHC) Plans within the statutory time limits, something achieved by only a few other local authorities nationally. The Local Authority is also on target to convert all Statements into EHC Plans within the time scales, also something that not all authorities are on target to do.
- 5.6.2 Much work has gone into preparation for the new local area inspections of SEN and disability (for 0-25 year olds resident in Blackpool classified as such, and their families). A process for the visit of the inspectors, including the setting up of a SharePoint site to log information they request to see has occurred. A self-evaluation framework, written by all relevant agencies, has been developed and is updated regularly. 20 storyboards, outlining the work that has occurred are updated every 6 months. These will be available for both inspectors and interviewees when the inspection takes place.
- 5.6.3 A summary of the first three published inspections has been provided, with implications for Blackpool highlighted. Learning also occurred from a peer challenge

event with other North West local authorities. These will be further explored in terms of any new actions required in the next few weeks. One highlighted weakness from self-evaluation was coproduction with young people and work has occurred here, with the help of community engagement, to set up a young person group(s) to capture the views of those with SEN and/ or disabilities. Work has also been undertaken to gather a central data set, with central government for the first time publishing in such a way to compare local authorities. This information has been fed into next actions. These will be reported to the next scrutiny committee

5.7 Education – Connexions

- 5.7.1 Supporting the transition of school leavers into Post 16 education and training:
- 5.7.2 The "Summer Ventures" courses have been delivered in partnership with Blackpool and the Fylde College. The courses were designed to engage young people in a variety of courses over the summer to help their transition into further education and training in September. Of the 70 young people who participated in the courses, 68 completed and all of whom finished with progression plans to continue their further education or training.
- 5.7.3 Blackpool Council is working in partnership with the Calico Group to promote apprenticeship opportunities in the Construction industry in Blackpool. Calico's award-winning shared apprenticeship scheme Constructing the Future (CTF) is working with contractors Morgan Sindall, Lovell, Bardsley Construction and Willmott Dixon on major development works for a new Energy HQ, housing at Queens Park, the new Lancashire Constabulary West Division HQ, Blackpool, and a number of schools in the Blackpool area. As a result of these developments and the long standing partnership between Blackpool Council and the Calico Group, CTF is now looking to recruit a number of full time apprentices to work on site with the contractors, whilst working towards a construction qualification. A Jobs Fair will take place in August and anyone who is aged 16-24 and lives in the Blackpool area would be eligible to apply.
- 5.7.4 A wide range of Blackpool Council departments along with other businesses have pledged to provide employment support for "Our Children" either through work experience or jobs/apprenticeships. Whilst this is still in its early days, there have been some successes. The Sandcastle Waterpark has recruited four young people over the summer and two young people have applied for the High Ropes Instructor Apprenticeships in Leisure Services. Young people are being supported to apply for the construction apprenticeships outlined above and there will be opportunities to apply for a Princes Trust "Get Into Retail Programme" which gives the opportunity to apply for jobs with Marks and Spencers.

5.8 Adult Learning Service

- 5.8.1 The Family Learning team has worked with 234 families on projects to directly support adults and children to improve their English, Maths and Language skills. Of those, 38 adults achieved qualifications in Maths and/or English. Accredited courses in Physical Care of Babies and Children and Awareness of Safeguarding have also been delivered with 28 learners achieving qualifications. Courses were delivered in 30 venues in Blackpool, including children's centres, schools and libraries. The Family Learning service continues to work closely with schools and children's centre staff as well as with partners in Better Start, where we have delivered Sharing REAL (Raising Early Achievement in Literacy) with Parents and contributed to family literacy events, with colleagues in libraries, supporting Summer Reading Challenge and National Bookstart Week and with the Arts Service to support Save our Stories and Wordpool.
- 5.8.2 A new course is being piloted over the Summer called "Learn the Tablet, Keep the Tablet" which involves providing new Tablet computers and including the cost in the Tablet course. The learner gets the Tablet in session 1, learns to use this device throughout the three weeks, taking it home in-between and keeps the Tablet at the end of the course. It is designed for the digitally illiterate and the computer phobic who would struggle to transfer their newly learnt skills to another device when they get home. The first class is full with one of the learners asking if the Tablet was second hand and commented that he couldn't believe the opportunity. If successful the course will be rolled out in September and will hopefully encourage those remaining residents who are too afraid to reach out to technology.

5.9 Social Care

- 5.9.1 There is some very positive news in relation to the recruitment and retention of staff. The service is for the first time fully staffed at first line manager and service manager level with permanent as opposed to agency staff. The service has also been successful in appointing a Senior Service Manager for Social Care. The staff that have been appointed wanted to come to Blackpool having heard positive messages about it as a place to work and two of those appointed have previously worked in the town. Having a stable and permanent team will support improved consistency of practice and service quality. The message of Blackpool being a good place to work is also reflected in the organisational health check which was a survey sent to all social work staff. Nearly three in four (73%) agree completely or in the main that "Blackpool Council is a learning organisation and has a positive learning culture". Employees were also asked what makes them feel positive about Blackpool Council as an employer and the main responses were:-
 - Positive spirit and values, both within their team and the Council as a whole
 - Feeling supported in their roles
 - Good working relationships, including with partners
 - Learning and development opportunities which help them to improve

5.9.2 The Social Work Reform Programme for Children and Families Social Workers.

The knowledge and skills statement is an integral part of the governments social work reform programme and will form the basis of the new national accreditation system for social work practice within child and family social work which will require all of those who work as social workers and use the title to become accredited. Whilst the process of the new accreditation system is currently still in its infancy, Organisational Workforce Development and Senior Managers in Blackpool Council have commenced planning to meet the requirements and begun by circulating the knowledge and skills statement on which the accreditation will be based to all relevant staff.

- 5.9.3 So far the social work reform programme has focused on a child and family social worker's career pathway; alongside this the government is keen to promote depth of practice in key areas of child and family social work. The first of these is focussed on achieving permanence and further detail is set out within the government consultation paper **'Knowledge and skills statement for achieving permanence'** that was published on the 4 July 2016.
- 5.9.4 **Demand and demand management;** Nationally there has been a 21% increase in care applications and in Blackpool the Council is consistent with this but not higher than the immediate neighbours. Demand for early help and social care services remains high with numbers of open cases the highest since 2012. The complexity of the work is also increasing. However, despite these very real pressures there is some creative and innovative practice being seen across all of early help and social care services with teams working together and "thinking outside of the box". This has been picked up by outside agencies such as the Courts and the Council continues to receive a significant number of compliments.
- 5.9.5 **Placement costs:** Placement numbers continue to rise significantly. An audit has now been completed on all the cases of children that started to be looked after from 1 April to mid-June 2016. The audit found that all but one of the 49 children had previously been known to Children's Services and 33 had been subject to child protection plans previously but unfortunately, despite significant input the families had not been able to make or sustain sufficient change to enable the children to be appropriately cared for at home without the need for the Local Authority to share parental responsibility or offer substitute care. Only one child had recently moved to the area.
- 5.9.6 Costs have significantly increased as the needs of the children are highly complex and therefore they require specialist resources. Hence the number in external residential and independent foster placements has risen.

Does the information submitted include any exempt information? No Yes/No Yes/No

List of Appendices: None

6.0	Legal considerations:
6.1	None.
7.0	Human Resources considerations:
7.1	None.
8.0	Equalities considerations:
8.1	None.
9.0	Financial considerations:
9.1	None.
10.0	Risk management considerations:
10.1	None.
11.0	Ethical considerations:
11.1	None.
12.0	Internal/ External Consultation undertaken:
12.1	None.
13.0	Background papers:

13.1 None.

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Report to:

COMMITTEE

RESILENT COMMUNITIES SCRUTINY

Date of Meeting

Relevant Officer:

Delyth Curtis, Director of People

1 September 2016

SCHOOL LED SYSTEM AND BLACKPOOL CHALLENGE UPDATE

1.0 Purpose of the report:

1.1 To inform Scrutiny Committee of the work undertaken with regard to School Improvement and to update on the progress and implementation of developments within the Blackpool Challenge.

2.0 Recommendation(s):

- 2.1 To determine if the content of the report is sufficient to allow the Committee to sign off Recommendations One, Two and Three of the Pupil Referral Unit Scrutiny Review Final Report.
- 2.2 To scrutinise the development of the school led system.

3.0 Reasons for recommendation(s):

3.1 For Members of the Scrutiny Committee to be fully informed as to the work of the Blackpool Challenge Board and have assurance that Blackpool is continuing to meet its statutory obligations for future inspection requirements. The Local Authority retains a statutory responsibility to monitor all schools in order to support improvement and raise the attainment and progress for all children in the area.

3.2a	Is the recommendation contrary to a plan or strategy adopted or approved by the Council?	No
3.2b	Is the recommendation in accordance with the Council's approved budget?	Yes
3.3	Other alternative options considered:	
	None.	

4.0 Council Priority:

4.1 The relevant Council Priority is 'Communities: Creating stronger communities and increasing resilience'.

5.0 Report

5.1 Guiding Principles

- 5.1.1 The Governance framework around schools needs to support the achievement of improved outcomes for Blackpool Children through the raising of standards and attainment and improving the performance of schools at all key stages. In the changing landscape of education and the role of the Local Authority it is important that the development of a school led system underpins the work required and progresses the work of the Blackpool Challenge Board.
- 5.1.2 The school led system needs to be transparent, challenging and collaborative; driven by data openly shared. System leaders will share best practice; provide peer to peer support and scrutiny; partner and support the strategic direction of the Blackpool Challenge Board and take collective action around improving outcomes.
- 5.1.3 The model will build on the current clusters and shape itself whilst considering cross phase working. A Blackpool School Improvement Partnership led by schools and Cluster Leads will be established to support the work at school level and address brokerage and commissioning across a wider footprint. This arrangement will support the delivery of the White Paper, Educational Excellence Everywhere; building capacity and sustainability into the self- improving system.

5.2 Blackpool Challenge Board

- 5.2.1 Established in 2015 by the Regional Schools Commissioner and Local Authority to address key concerns around the rapidly changing landscape with regard to academisation and sponsors, coupled with poor Key Stage 4 results, the Board has been chaired by Professor Sonia Blandford since May 2015. The Board has grown in strength and now incorporates Early Years, Primary, Secondary, Special and Post 16. The purpose of the Board is as follows:
 - Improve pupil outcomes in reading, writing, mathematics, science and technology
 - Improve behaviour and attendance
 - Improve parent and carer engagement
 - Improve employability
- 5.2.2 Supported by an ambitious set of agreed metrics and data around Key Stage 2 and Key Stage 4 along with transition and inclusivity and number of good and outstanding schools, the Board has a clear vision – 100% of children progress 100% of the time. The membership of the Board is inclusive and covers all areas of the education sector including representation from the Regional Sector Improvement Team and the Regional Schools Commissioners office. Providing a very clear focus on engagement the forum has acted as a conduit across the Borough to a range of improvement initiatives in a relatively short space of time.

A set of priority subgroups underpin the work of the Board namely:

- Governance and Leadership
- Data and Evidence
- Teaching and Learning
- Inclusion and Transition

The Board has secured 2015/2016 funding to support specific pieces of work including;

- £461,000 School Forum/Local Authority Secondary funding
- Philanthropic funding
- National Monies pilot(s)

Schools have accordingly produced action plans for activity and monies have been released and overseen by the Board.

There have been a number of outcomes overseen by the Independent Chair and Board members. Examples include;

- Oversight of successful joint bids
- Oversight of improvement money allocation across schools
- Development of new Inclusion Board and protocol
- Roll out of Mental Toughness Questionnaires
- Significant engagement with Business Leaders
- Influence over Teach First allocation
- Arm of governance within Ofsted Improvement Plan
- Data and assessment methodology improvements
- Year 10 curriculum audit
- Commissioned programmes of work
- Collaborative approach to CPD
- Implementation of transition pilot(s)
- National and regional link and profile raising
- 5.2.3 The commissioning arrangement for the Challenge and funding is now ending and it is vital that whilst reflecting on achievement(s) to date we look to the next phase and longevity of the Challenge and national changes ahead and the drive to co-create a school led improvement system. A small co-design group of system leaders has been established to transition these arrangements and formalise the governance. In line with the ambitions of the White Paper, these arrangements will be school led, and will address underperformance in this likely Achieving Excellent Area. Working with partners there will be a new structure from September 2016.

5.3 School Led System

5.3.1 The school led system and framework will need to work in partnership with the strategic Challenge Board and a proposed diagrammatical representation is attached

at Appendix 8(a).

The school led system should:

- Hold each other to account
- Work collectively on best practise and underperformance
- Commission and broker flexibility in a targeted way
- Make most efficient use of resources
- Develop leadership potential and succession panning
- Provide challenge and peer to peer support
- Be data driven
- 5.3.2 Consideration will need to be given to links with the Challenge Board, BBCL (Blackpool, Blackburn with Darwen, Cumbria and Lancashire), North West Improvement Board and the Teaching School and Academy Chains and MATs (Multi Academy Trusts). Furthermore combined authority discussions across Lancashire, Blackburn with Darwen and Blackpool may create a different conversation in going forward regarding role and remit and footprint(s).

5.4 Next Steps

- 5.4.1 In light of a substantially and rapidly changing and diverse landscape at local authority, regional and national level the Blackpool Challenge Board and Chair to be commissioned for a further 12 months in the first instance by the Local Authority to drive a town wide approach to educational attainment, skills and employability. This will secure the continuation of a track record of success. This will be subject to appropriate contractual/funding and approval processes via the Local Authority. Strategic priorities already identified include:
 - Recruitment and retention
 - Engagement, behaviour and attendance
 - Inclusion and transition
 - Employability
 - Continuous Professional Development
- 5.4.2 The school led system and Improvement Board continues to be co-designed in conjunction with Headteachers/Local Authority/Regional Lead/Regional Schools Commissioner's office to be implemented by September 2016 subject to agreement.
- 5.4.3 There is a managed transition, supported by the Chair of the Challenge Board, which puts children first and ensures underperformance is addressed and improvements are accelerated.

Does the information submitted include any exempt information? No

List of Appendices:

Appendix 8(a) Strategic Challenge Board diagram

- 6.0 Legal considerations:
- 6.1 None.
- 7.0 Human Resources considerations:
- 7.1 None.
- 8.0 Equalities considerations:
- 8.1 None.
- 9.0 Financial considerations:
- 9.1 None.
- 10.0 Risk management considerations:
- 10.1 None.
- 11.0 Ethical considerations:
- 12.1 None.
- **12.0** Internal/ External Consultation undertaken:
- 12.1 None.
- **13.0** Background papers:
- 13.1 None.

Appendix 8(a)



Report to:	RESILENT COMMUNITIES SCRUTINY COMMITTEE
Relevant Officer:	Delyth Curtis, Director of People
	Karen Smith, Deputy Director of People (Adult Services)
Date of Meeting	1 September 2016

CUSTOMER RELATIONS TEAM ANNUAL REPORTS ON ADULT SERVICES AND CHILDREN'S SERVICES 2015/2016

1.0 Purpose of the report:

1.1 To review the Annual Customer Relations Reports relating to Adult Services and Children's Services.

The reports attached as appendices include details of complaints, comments and compliments received during 2015/16, as well as Member of Parliament and Councillor enquiries, Local Government Ombudsman contacts, and Freedom of Information Requests.

2.0 Recommendation(s):

2.1 To scrutinise the content of the Annual Reports.

3.0 Reasons for recommendation(s):

- 3.1 It is a requirement for local authorities to make publically available details of social care complaints received each year.
- 3.2a Is the recommendation contrary to a plan or strategy adopted or No approved by the Council?
- 3.2b Is the recommendation in accordance with the Council's approved Yes budget?
- 3.3 Other alternative options to be considered:

None.

4.0 Council Priority:

4.1 The relevant Council Priority is 'Communities: Creating stronger communities and increasing resilience'.

5.0 Background Information

- 5.1 Included as appendices to this report are the annual Customer Relations reports for 2015/2016 relating to Adult Services and Children's Services. These documents contain details of complaints, comments and compliments received during 2015/2016, as well as Member of Parliament and Councillor enquiries, Local Government Ombudsman contacts, and Freedom of Information Requests.
- 5.2 The number of contacts dealt with during the course of 2015/2016 by each Department, together with comparatives from the previous year, can be summarised as follows:

	Adult	Services	Children's	Services
	2015/16	2014/15	2015/16	2014/15
Complaints	80	91	91	125
- of which upheld	19	19	6	9
- of which partially upheld	28	26	25	19
 responded within timescales 	48%	53%	68%	65%
Compliments	556	367	58	39
Comments	12	24	9	13
MP enquiries	42	52	44	57
Councillor enquiries	17	14	15	8

- 5.3 For Adult Services, the number of complaints has fallen since the previous year, although there were a similar number of those which were upheld or partially upheld, and the level of responses within timescales has decreased slightly. The number of compliments has again increased, with a total of 556 recorded; a number of these were collected from positive feedback from surveys and training evaluation forms.
- 5.4 For Children's Services, the number of complaints has decreased significantly to 91 in the year, although the number of those upheld either in whole or partially has increased slightly. Response times to complaints have improved again to 68%.
- 5.5 The main themes of complaints across both Departments continue to be "quality of service" and "staff attitude/treatment of customer". There have been continued

efforts to strengthen the lessons learnt processes in order to avoid repeated complaints about the same issues. Timescales for responding to complaints are set at the outset depending on the complexity of the subject matter, with a focus on setting realistic response times in order that expectations can be met.

- 5.6 Learning from lessons is given high importance in both Departments. A large sample of lessons learnt can be found in the appendices to both of the annual reports. A selection of these are reproduced below, which demonstrate how some of the themes with high incidence of complaints are dealt with:
 - The Social Worker was able to reflect on the case and agreed with the outcome of the investigation. Communication skills will be discussed in supervision. A Reflective Practice session regarding the outcome of complaint will be arranged.
 - Information given at the initial assessment did not provide adequate information regarding the process of direct payment. All staff should take with them a range of information on an initial visit including Fact Sheets regarding financial implications and direct payments to leave with the service user. All staff will be informed of this decision at team meetings and they will need to demonstrate this has been done by recording on the assessment or in a case note they have given appropriate written information.
 - Provider Manager has given reassurances that timing of visits will be adhered to, consistency will be improved and the importance of reading the care plan and completing the required tasks has been reiterated to the staff. In addition, one member of staff, has taken over the co-ordination of service user's care and she will be monitoring it closely.
 - The agency has followed appropriate procedures regarding the two staff members concerned and have put steps in place to re-educate and train them in relation to patient confidentiality.
 - Addressing of confidential information being sent out via the postal system. Lesson Learnt: All relevant administration staff spoken and relevant Managers reminded of confidentiality requirements and the need to provide full courtesy titles, names/initials with contact address details. Formal instructions implemented for addressing mail correctly.
 - Contacts made to Social Worker with no response received. Lessons Learnt: Respond to calls and contacts each day wherever possible or as soon as practicable. Message taking to improve to allow Social Workers to be aware of all daily contacts.

- Case management and communication. Lessons Learnt: Staff have been spoken to and practice across the relevant teams has been improved after training delivered to whole areas of teams. Emphasis on communication and quality of service.
- Young people making complaints. Lessons Learnt: ensure timescales are met. All young people's matters to take priority and moved forward as swiftly as possible.
- 5.7 Last year, the Scrutiny Committee enquired whether something similar to the NHS's Friends and Families Test could be used in respect of services accessed by Council service users. After further exploration, it transpires that the ability to rate and comment on residential homes and care at home providers is already available through the NHS Choices website. Members of the public can search CQC registered providers in a given area, see ratings given by other people, and leave their own comments. The questions asked are: "Recommend to Friends and Family?", "Your review", and "When did you visit this care provider". The results are shown by way of an overall user rating out of 5 stars. The care homes information also indicates which providers have a registered manager in post, levels of staff turnover, food hygiene rating, and size of the home. For homecare, shared lives and supported living, the public can see whether the provider is accepting new clients alongside the star rating.
- 5.8 In order to increase the number of reviews being recorded for social care services, changes have been made so that all care plans now incorporate text to point people to the NHS Choices website. A page has also been added to Blackpool4me to do the same. Posted reviews will be looked at in advance of each contract review undertaken and discussed with providers.
- 5.9 A further focus over the last year has been a closer examination of how feedback from children and young people is handled. Feedback forms on the Council's website are reproduced in more straightforward styles for adolescents and also for the younger child. The significant majority of complaints are received into the team via e-mail or the online form, either directly from complainants or by referral from social care staff.
- 5.10 As well as publicly available information on how to complain, children are given feedback forms in the pack they receive when they first become looked after, and social care staff signpost people to the Customer Relations Team if they wish to give feedback. Anyone under the age of 18 who makes a complaint is asked if they want to access a Children's Advocate to help them to put their views across. Furthermore, the Looked After Children Engagement Officer actively supports and encourages young people to feed their concerns through to the Council, by any

means that they feel comfortable with, whether this is by e-mail, using the standard forms, or by phone.

- 5.11 Regular reports are now taken to the Corporate Parent Panel, which detail the complaints and compliments received relating to Children's Social Care, with a focus on complaints from young people, how these have been handled, and lessons that have been learned.
- 5.12 In order to further improve the customer experience, the Departments have committed to the following next steps:
 - Continue to identify lessons to be learnt from complaints by sharing good practice across services, and by using governance structures to monitor that actions have been taken.
 - Further improve the setting of realistic expectations of timescales for responding to complaints in order that complainants receive our response when we tell them they will.
 - Heads of Service are continuing to review trends in complaints, recognising and implementing lessons learnt as and when necessary in order to reduce similar complaints.
- 5.13 Does the information submitted include any exempt information?

No

5.14 List of Appendices:

Appendix 9(a) Customer Relations Feedback Report 2015/2016 – Adult Services Appendix 9(b) Customer Relations Feedback Report 2015/2016 – Children's Services

6.0 Legal considerations:

6.1 Local authorities are required to make publically available an annual report containing details of complaints received relating to social care.

7.0 Human Resources considerations:

7.1 None.

8.0 Equalities considerations:

8.1 None.

- 9.0 Financial considerations:
- 9.1 None.
- 10.0 Risk management considerations:
- 10.1 None.
- **11.0** Ethical considerations:
- 11.1 None.

12.0 Internal/ External Consultation undertaken:

12.1 The reports have been considered at the Adult Services Governance Committee and the Children's Services Senior Management Teams, and discussed with the Cabinet Secretary and relevant Cabinet Members.

13.0 Background papers:

13.1 None.

Appendix 9(a)

Customer Feedback Annual Report

Adult Services

April 2015 – March 2016

Blackpool Council



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Customer Feedback Annual Report – Adult Services

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1. Annual Overview

Adult Services received 80 complaints over the year – a decrease of 11 on last year's annual figures. However, the complexity of complaint elements has increased. Of the 80 complaints received 19 were upheld in their entirety with a further 28 partially upheld. Therefore, overall 47 complaints were upheld in some element (59 %). To put this into perspective 4629 individuals were in receipt of adult social care services at some point in the year, 2015/16; the population of over 18s in Blackpool (taken from Mid-Year Estimates (Office of National Statistics)) is 112,673.

Thirty-eight of the 80 complaints were dealt with inside the allocated timescale (48%), which is defined as 15 working days or within the allocated timescale dependent on complexity. This is a slight decrease in performance but still comparative with the two previous years reporting of timescales being achieved: 52.75% for 2014/15 and 51% for 2013/14 respectively. The complexity emerging from complaints has compounded the slight drop in achievement. All Adult Social Care complaints were responded to within the statutory timescale of six months.

This year 556 compliments were received, a major increase to the two previous year's figures: 367 during 2014/15 and 360 in 2013/14. It must be acknowledged that specific criteria for accepting compliments has been applied and therefore these are genuine statements of thanks for duties carried out, above and beyond the expected level of service.

Over the year, Adult Services has received 42 MP enquiries (a reduction of 10 from 2014/15) and 17 Councillor Enquiries (a minimal increase of 3 on the previous year) and these were spread evenly over the year.

This report will provide further breakdowns of these highlights with potential explanations for some of the statistics.



2. Adult Services Customer Feedback

The following table shows the total numbers of Complaints, Compliments, Comments, MP/Councillor Enquiries and Local Government Ombudsman (LGO) cases for the year.

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Year End Totals
Adult Social Care	56	55	53	43	207
Care & Support	94	93	88	45	320
Business Support & Resources	5	11	5	4	25
Commissioning	35	88	17	15	155
Total	190	247	163	107	707
Comparison for 2013/2014	143	182	121	140	586
Comparison for 2014/2015	166	135	137	139	577

The table highlights that front line services are in receipt of the highest level of enquiries and compliments, which is to be expected due to the nature of their business. Feedback can be extremely valuable, as it enables the department to monitor services and to seek to improve services where necessary.

The breakdown of this feedback can be seen in the following sections of the report.

3. Complaints

Statutory legislation dictates that all Adult Social Care complaints should be addressed and concluded within a 6 month timeframe. Adult Services feel all complaints should be addressed quickly and efficiently. Therefore, in the first instance, 15 workings days has been allocated for a response to be completed. Where complex cases are concerned it is sometimes more appropriate to allocate a longer timeframe for a thorough response to be achieved. Each case is individual and is viewed on its own merits. The allocated timescale is always communicated to the complainant so they know when to expect a response.

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Year End Totals
Adult Social Care	9	9	10	6	34
	[2PU]	[1U 2PU]	[1U 3PU]	[1U 2PU]	[3U 9PU]
Care & Support	1 [1PU]	NIL	2 [1PU]	NIL	3 [2PU]
Business Support & Resources	2 [1U]	2 [1U]	NIL	NIL	4 [2U]
Commissioning	8	11	9	11	39
	[5U 3PU]	[3U 5PU]	[2U 6PU]	[4U 3PU]	[14U 17PU]
Total	20	22	21	17	80
	[6U 6PU]	[5U 7PU]	[3U 10PU]	[5U 5PU]	[19U 28PU]
Comparison for 2013/2014	21	31	23	33	108
	2U & 4PU	7U & 11PU	6U & 8PU	8U & 9PU	23U & 32PU
Comparison for 2014/2015	19	18	26	28	91
	5U & 4 PU	1U & 11PU	6U & 4PU	7U & 7PU	19U & 26PU

The breakdown of the complaints by service area for the year is shown in the following table:

*U – Upheld; PU – Partially Upheld

This year's figures are broadly in line with 2014/15 in Adult Social Care and Commissioning; both front line services, are carrying the most complaints. This is to be expected due to the role and amount of customer contact. Both services are representing the face of the Council and must deliver quality services at all times.

Adult Services has been under considerable economic, financial and resource pressure, whilst still dealing with vulnerable and needy service users. Thirty four complaints, in the context of the number of service users receiving a service from Adult Social Care is 0.73%, but they must still be addressed with care and diligence to ensure the service continues to improve and reduce similar complaints.

Commissioning is robust in its efforts to both work together with its internal and external providers (care at home and residential care) but also to challenge and improve services. Where care or provision has broken down or expectations are not met, it is only to be expected that complaints will be raised. Training to all Providers including forums for discussion and sharing of best practice is embedded into the commissioning systems. Learning from each other is essential for quality service across the board to flourish. Again, in the context of contracts and care provision, complaints equate to 0.84%. This must still be monitored and improved upon to ensure dignity and respect and emotional well-being is in place at all times.



Over the year, it has been obvious that complaints in general are becoming more involved and complex with multiple aspects being listed as issues rather than in previous years where the tendency was one main issue. This has had an impact on timescales, investigation work, staff resources and outcomes. Any item being partially upheld must be accounted for. This is evidenced by the above figures.

A few of the general reasons for complaints being upheld over the year are shown below:-

- Response timescales being missed which further impedes the successful outcome being achieved and on
 occasion, has resulted in further complaints arising which would normally have been addressed as on-going
 service case management.
- Expectations of service users are high and if clear communication is not made and understanding of actual delivery of service not checked, disappointment has resulted with complaints being made about lack of action.
- Missed visits by Care Agencies, non-compliance with care plan or multiple carers rota'd to attend can result in poor service delivery and disappointing experiences for families.
- Residential Homes can also experience issues with medication, health and safety, adherence to care plans and safeguarding which can result together in intervention from CQC or the Council.
- Assessments, reviews and care plans need to be questioned and can often highlight areas of need not previously known or communicated.
- Staff attitude and perceived treatment of customer is typically higher than other Themes, which is to be expected when dealing with emotive issues such as care for self or family members.
- Communication can be misunderstood and clarity of issues must be confirmed, followed by agreed actions and support implemented efficiently and in a timely fashion.
- In all cases, poor experiences are undesirable and action must be taken to eradicate poor service delivery or non-compliance with policy and procedures.

4. Timescales

It is good practice to keep the complainant informed of progress at all times. Therefore, if for any reason, Adult Services is unable to meet the allocated timescale for response, contact should be made advising of the delay together with a new expected date of response and apology for inconvenience caused. It is usual to contact the complainant via their original form of contact to the Council or via their indicated preferred method for reply.

It must be noted, that wherever possible, every effort is made to achieve the realistic timescale originally provided to the complainant. However, this is not always possible. It is recognised that not meeting an anticipated timescale does not assist in complaint resolution and further frustrates the complainant. However, transparency on behalf of the Council is essential so the complainant can understand the difficulties being faced and why the delay is necessary.

It is recommended within the Customer Feedback Procedures, that the following timescales are met:-

- Complaints and Comments– 15 Working Days
- Councillor/MP Enquiries 5 Days
- LGO 5 Working Days as indicated by LGO



The table below shows the percentage breakdown of timescales successfully met for complaints by service areas over the year:-

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Year End % Totals
Adult Social Care	56%	67%	30%	100%	59%
	[5/9]	[6/9]	[3/10]	[6/6]	[20/34]
Care & Support	100% [1/1]	NIL	50% [1/2]	NIL	67% [2/3]
Business Support & Resources	100% [2/2]	100% [2/2]	NIL	NIL	100% [4/4]
Commissioning	38%	27%	34%	27%	31%
	[3/8]	[3/11]	[3/9]	[3/11]	[12/39]
Total	55%	50%	33%	53%	48%
	[11/20]	[11/22]	[7/21]	[9/17]	[38/80]
Comparison for 2013/2014	38%	45%	39%	73%	51%
	8/21	14/31	9/23	24/33	55/108
Comparison for 2014/2015	58%	50%	54%	50%	53%
	11/19	9/18	14/26	14/28	48/91

General reasons for timescales not being met can be as follows:-

- Many issues being raised by complainant throughout the time of the complaint which impedes clear investigation and can result in partial responses rather than complete clarity being provided.
- Similar or duplicate complaints being raised constantly by many family members regarding the same subject matter hinders a clear investigation and can result in extended timescales.
- Emergencies arising such as safeguarding and Court for responding Managers or investigators which impedes the response plan.
- Key members of staff to be interviewed as part of the investigation, on jury service, on long term sick, leave or having left the employment of the Council.
- Complex multi-agency work required sometimes across more than one area can result in timescale issues and often double checking of information provided.
- Government cuts affecting the Council's ability to provide resource for prioritising complaint investigation in certain areas.
- Unannounced checks by Ofsted, CQC and DfE and Peer work affecting resources of key Managers and signatories.
- Investigators/Senior Managers not allowing enough time for the Director to review, question, and approve a
 response especially if further work is necessary.
- Director or covering Senior Officers not available to sign off final response.
- Safeguarding of vulnerable adults will always take precedence over a complaint response.



 Police investigations will in the main, place a complaint on hold with or without the complainants being aware of the Police investigation.

5. Complaint Themes

There are a set off 11 standard themes used by Adult Services to record complaints against, which were thoroughly interrogated and reviewed by the Council's Scrutiny Committee during 2012/2013.

These themes help Adult Services to identify trends and patterns quickly and aid in the recognition of action required. To aid unity in recording and balancing the number of complaints, the main overarching or most appropriate theme is used for recording purposes.

Themes	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Year End Totals	Upheld [U] or Partially Upheld [PU]
Assessment Undertaken	0	0	3	0	3	1U 1PU
Bully/Racist Incident	0	0	0	0	0	N/A
Safeguarding	0	0	0	0	0	N/A
Confidentiality	0	0	0	0	0	N/A
Financial/Funding	4	1	2	2	9	4PU
Lack of Communication	2	4	3	0	9	1U 4PU
Policies & Procedures	0	0	1	0	1	N/A
Quality of Service	9	9	9	9	36	12U 13PU
Staff Conduct/Treatment of Customer	5	4	1	3	13	4U 3PU
Request for Service	0	1	0	0	1	N/A
Lack of Action	0	3	2	3	8	1U 3PU
Total	20	22	21	17	80	19U 28PU
Comparison for 2013/2014	21	31	23	33	108	23U 32 PU
Comparison for 2014/2015	19	18	26	28	91	19U 26PU

The following table shows the breakdown of the annual complaints by theme.

[Above figures include 24 Not Upheld and 9 Withdrawn Complaints] *U – Upheld; PU – Partially Upheld

As previously mentioned, the complexity and amount of issues being raised within a single complaint is on the increase and this supports why Quality of Service and Staff Conduct are the overall 'leaders' of the above themes.

Quality of Service – is the umbrella where many items are recorded and has been consistent at 9 over each quarter. There has been a small increase in numbers (5) compared to last reporting year. This can cover overall poor service/experience, lack of completed work carried out in timescale, service user perceptions of service delivery, carers not turning up on time or at all, or many combinations of issues, all equally important. Whilst this is the highest theme and equates to 45% of the complaints lodged, only a third were upheld outright. Supervision and team meetings explore the issues and are used to improve outcomes for service users. This will continue.

Staff Conduct/Treatment of Customer – has reduced significantly from 2014/15 reporting year, from 25 to 13. This is due to the continuing hard work by staff to be clearer in their communication and to check understanding of information provided. Staff supervision has provided a forum for discussion and complaints about staff

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behaviour have also decreased as the understanding of service users has improved. Put into perspective, of the 13 complaints made over the year, this equates to 16.25% of the complaints raised, and 7 were upheld in some form.

Financial/Funding and Lack of Communication total nine each over the year.

Financial/Funding can cover care at home fees or residential fees and is a complex subject for many service users to understand, especially when care changes or is required at short notice. The Social Care Benefits Team works hard to ensure its information is clear and up to date and social workers endeavour to provide information to all parties, internal and external, in a timely manner. Training for social care staff has been delivered during the course of the year in order to improve workers' understanding of financial matters, and thereby enhance the quality of the information given to service users and their families.

Lack of Communication is underlying in many complaints and is broadly similar to last year's position within the themes table. Constant checking of understanding together with active listening must be re-emphasized to all Managers and teams to continue the positive work already being undertaken.

6. Lessons Learnt

As part of statutory regulations, the Council must identify lessons learnt and learn from its complaints, thereby improving service delivery. Equally recognised are the complaint themes mentioned above which will feed into the lessons learnt. It is recognised that the key areas for improvement are Quality of Service and Staff Attitude. In order to move forward, we must continue to improve in these areas and implement positive changes that will be of benefit to all service users and the Council. Where there are areas of repeat and similar complaint issues, these must be reviewed and avenues found to move forward and improve thereby achieving better service delivery. Where possible, lessons learnt are shared with complainants via the response letter in order to evidence that their concerns have been taken seriously and appropriate improvements have been implemented. These improvements could continue to take the form of a number of actions:

- Further training for individual staff
- Periods of close monitoring or supervision
- Team training
- Amendments to policies and procedures
- Cultural changes led by Senior Managers
- Monitoring of contracts with third parties

Lessons learnt can be positive as well as negative and are just as important. Good practice needs to be shared and encouraged across the Directorate as a whole.

The Customer Relations Team is responsible for recording the lessons learnt as supplied by the relevant Service Managers who are at the heart of the investigation work and can ensure meaningful changes are understood and implemented. As a minimum for all upheld or partially upheld complaints, investigators are required to provide details of actions to be taken and lessons to be learnt as a result of the complaints. Examples of lessons learnt can be found in Appendix A.



7. Local Government Ombudsman (LGO)

The LGO is the Governing Body that reviews and investigates complaints against Councils where appropriate, usually where cases have followed procedures and the complainant feels their issues have not been addressed or resolved to their satisfaction. Under the Adult complaints process, the LGO can be contacted after a response to a complaint has been received from the Council.

However, some complainants prefer to contact the LGO in the first instance. The LGO will determine whether this is a premature complaint which must be directed back to the Council to respond to in the first instance or if they will commence an investigation based on the information provided by the complainant.

Over the year, 24 contacts have been made by the LGO which relate to 9 new named cases for this reporting year.

It must be noted that LGO complaints can be lengthy and complex in as much as service users are not satisfied with the efforts made by the Council in the first instance. Therefore, review of work already undertaken must be made along with further questions being asked by the LGO which can include and are not limited to requests for copy documents and chronologies.

Eight enquiries have originated from Adult Social Care complaints with the remaining one from Commissioning. Some of these cases covered both areas but were allocated using the majority of elements as appropriate. It is to be expected that the LGO cases develop from the front line service areas which receive the highest levels of complaints.

Nine Final Decisions have been received this year; this figure includes outcomes relating to some cases originating in the previous year of 2014/2015. Outcomes are as follows:

- 5 Upheld: Maladministration and Injustice (2 of the upheld cases recommended a monetary payment as compensation for injustice caused – the amounts were £400 and £500)
- 3 Not Upheld: No Maladministration
- 1 Premature Complaint
- 1 Closed due to lack of contact from the complainant



8. Compliments

Compliments are extremely important and help to highlight the areas we are improving in or maintaining levels of high quality service. They act as a morale booster for staff and are evidence that every detail within service delivery matters. Good practice is commended and discussed at senior level to ensure it is implemented across the board where possible.

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Year End Totals
Adult Social Care	35	35	30	21	121
Care & Support	90	93	86	40	309
Business Support & Resources	2	6	5	2	15
Commissioning	27	77	6	1	111
Total	154	211	127	64	556
Comparison for 2013/2014	87	116	73	74	350
Comparison for 2014/2015	107	90	81	89	367

The table below demonstrates the levels of compliments received by Adult Services split by Service.

[The figures in the table include 29 internal compliments & 527 external compliments]

This reporting year, stringent protocols have been applied and adhered to for compliments. Compliments are recorded internally and externally. Simple thank yous without the service user's identification or signature are not accepted. Each compliment is uniquely logged to ensure it is not duplicated.

Course questionnaires and feedback sheets have been closely scrutinised to see if compliments can be used and if accompanied by some form of identification to make them legitimate for counting.

The annual statutory Adult Social Care survey is also used to follow up comments and complaints and to record compliments provided without solicitation.

The spike in compliments in Q2 is down to the Annual Carer Awards additional compliments recorded. The dip in Q4 is due to not receiving any additional compliments for Dementia training or from the MH Recovery Service questionnaires; we also received fewer general compliments from Care and Support in the 4th Quarter.

In October 2016/17 the biennial carers survey will be issued and scrutinised for information in the same manner.

Examples of compliments received can be found in Appendix B.



9. Comments

Comments are equally important as complaints and help to shape and improve the quality of service. If necessary, Adult Services will respond to comments based upon the same timescale as complaints. However, each comment will be judged individually as to whether a detailed response is necessary or not. Work on the comment will continue whether the customer is aware of this work or when it is inappropriate to share the outcome of the comment with the customer. This year the number of comments has halved compared to 24 in 2014/15 and reduced significantly from 43 in 2013/14.

It is believed that service users are being more direct in conversation with council representatives and action is being taken early to try and prevent a complaint being lodged.

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Year End Totals
Adult Social Care	1	NIL	4	2	7
Care & Support	2	NIL	NIL	1	3
Business Support & Resources	NIL	NIL	NIL	1	1
Commissioning	NIL	NIL	NIL	1	1
Total	3	0	4	5	12
Comparison for 2013/2014	16	12	5	10	43
Comparison for 2014/2015	12	6	4	2	24

The following table shows the levels of comments received by service area:-

10. Members of Parliament (MP) & Councillor Enquiries

Blackpool Council's Chief Executive maintains that all MP and Councillor Enquiries must be actioned and responded to within 5 working days. MP and Councillor Enquiries can be categorised as:

- requests for background information,
- reasons for decisions,
- requests for service or
- requests for review of outcomes

The following table shows the annual breakdown of MP Enquiries received by Adult Services and the percentage which met the 5 day response timescale:-



Customer Feedback Annual Report – Adult Services

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Totals
Adult Social Care	5 [0%]	9 [56%]	7 [71%]	10 [20%]	31 [29%]
Care & Support	NIL	NIL	NIL	4 [75%]	4 [75%]
Business Support & Resources	NIL	2 [100%]	NIL	1 [100%]	3 [100%]
Commissioning	NIL	NIL	2 [0%]	2 [0%]	4 [0%]
Total	5 [0%]	11 NIL	9 [56%]	17 [35%]	42 [43%]
Comparison for 2013/2014	9	13	6	9	37
Comparison for 2014/2015	15	11	13	13	52

The number of MP Enquiries, this reporting year, reduced by 10 in comparison to the previous year. An influx of enquiries was made in the 4th quarter with no apparent reason or trend in evidence. The tight 5 day timescale still remains an issue for responding Managers but MPs are aware of the effort and level of information being attained for them together with reasons for delays. Adult Social Care receives the majority of enquiries which is to be expected as a front line service.

The following table shows the annual breakdown of Councillor Enquires received by Adult Services:-

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Totals
Adult Social Care	6 [67%]	2 [100%]	2 [50%]	4 [75%]	14 [71%]
Care & Support	1 [0%]	NIL	NIL	NIL	1 [0%]
Business Support & Resources	1 [0%]	1 [100%]	NIL	NIL	2 [50%]
Commissioning	NIL	NIL	NIL	NIL	NIL
Total	8 [50%]	3 [100%]	2 [50%]	4 [75%]	17 [65%]
Comparison for 2013/2014	7	7	4	9	27
Comparison for 2014/2015	2	4	5	3	14

Over the 3 recorded years, this year's Councillor Enquiries are almost an average. Adult Social Care receives the majority of Enquiries and these tend to relate to family issues, care delivery and care plans or pertinent changes within care provision.

11. Freedom of Information Requests

The timescale for responding to FOI requests is 20 working days as set out by the Information Commissioner's Office and in accordance with the Data Protection Act.

There are a number of circumstances where the request may be exempted in part or as a whole: included in the list are:

- Time taken to collate the response would be in excess of 18 hours (needs to be evidenced)
- Individuals could potentially be identified
- Information not held in a retrievable format or not collected at all
- Future publication is intended date to be provided
- On-going investigations may be affected by the divulging of the requested information

The table below sets out the annual breakdown of FOI requests received by Adult Services and the percentage which met the 20 day timescale:-

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Totals
Adult Social Care	9/20	9/12	13/18	16/18	47/68
	[45%]	[75%]	[72.22%]	[88.88%]	[69.11%]
Care & Support	Nil	Nil	0/1	1/1	1/2
			[0%]	[100%]	[50%]
Business Support & Resources	Nil	1/1	1/1	Nil	2/2
		[100%]	[100%]		[100%]
Commissioning	1/8	9/14	15/21	6/8	31/51
	[12.5%]	[64.28%]	[71.42%]	[75%]	[60.78%]
Total	10/28	19/27	29/41	23/27	81/123
	[35.74%] 2 exemptions	[70.37%] 3 exemptions	[70.73%] 4 exemptions	[85.18%] 7 exemptions	[65.85%] 16 Exemptions
Comparison for 2014/2015	22	43	22	31	118
	59% met timescale	52% met timescale 1 exemption	77% met timescale no exemptions	87% met timescale no exemptions	69% met timescale 1 exemption

Overall there has been a slight decrease in timescales being achieved, at 65% in 2015/16 compared to 69% in the 2014/15, and the number of FOIs received compared to last reporting year has increased marginally from 118 to 123. The majority of requests were received in Quarter 3.

Again, it is to be expected that the front line services are carrying the most requests: Adult Social Care and Commissioning. Timescales improved from Quarter 2 onwards and Quarter 3 saw the appointment of a dedicated FOI officer within the Customer Relations Team, being fully trained by Quarter 4 – again showing in improved timescales.

This reporting year has seen 16 Exemptions and evidences the complexity, cross departmental working and random requests being made.



12. Staff Training

The Customer Relations Team is available to provide staff training on complaint handling to each department and will tailor the training to meet the needs of the service. Useful and practical staff guidance is currently being updated.

13. Conclusion

Although the number of Adult Social Care complaints has decreased over the last three years it is clear that the emphasis of complaints has become extremely complex and requires more time, resource and consideration. This has impacted on complaint handling by responding Managers and has compounded the timescale issues.

Whilst not every target is being met, the effort and emphasis is on resolving complaints thoroughly and with positive outcomes and better relationships with complainants. Open communication with complainants is imperative to ensure understanding and perspectives of all parties. Lessons learnt are being recognised and best practice continues to be embedded across the Directorate.

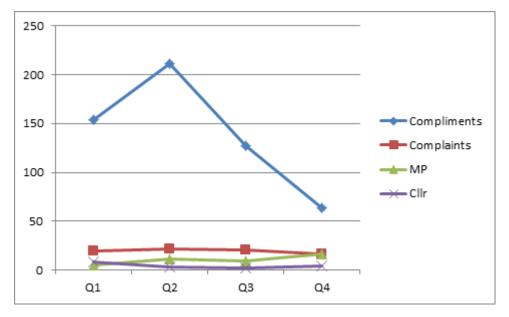
MPs and Councillors remain consistent in their enquiries and work closely to help and assist their constituents and our service users, both challenging the Council and offering support where appropriate.

All service areas need to continue to liaise with the Customer Relations Team and work towards realistic timescales being set at the outset, ensuing early communication of difficulties are made so complainants may be notified quickly and with courtesy.

Heads of Service are continuing to review trends in complaints, recognising and implementing lessons learnt as and when necessary in order to reduce similar complaints.

Staff supervisions are used to re-affirm the Council's expectations of its employees alongside conduct and adherence to policies and procedures.

It must be recognised that not every outcome will be accepted by complainants and whilst the Council must act within statutory processes and is sometimes limited within those boundaries, every effort is made to ensure the dignity, respect and wellbeing of its service users.



The above graph puts into context the number of compliments, complaints, MP and Cllr Enquiries received this reporting year.

Appendix A - A Sample of Lessons Learnt for Adult Services

Adult Social Care/Care and Support

- The Social Worker was able to reflect on the case and agreed with the outcome of the investigation.
 Communication skills will be discussed in supervision. A Reflective Practice session regarding the outcome of complaint will be arranged.
- Delay in contact: Service Manager to remind all staff of the importance of replying to emails and telephone messages in a timely manner. However in this case, there was an IT and telephone issue. Action: Social Worker to monitor placement.
- Service Manager reminded all staff that clear communication between professionals is essential and that
 agreeing and recording a clear understanding of meeting purposes is paramount, so that necessary actions
 can be agreed & implemented without confusion to service user's, their family or carers.
- Outcome of the complaint meeting with the family included the following actions: A review of the recent
 assessments to identify if these adequately meet identified needs and/or if there are short term changes. The
 Service Manager will explain how the respite allocation works in practice and provide family with relevant
 factsheets. The Service Manager will liaise with respite provider to ensure support plan is in place to reflect
 communication and behavioural needs; to review the respite allocation and discuss financial contribution to
 any additional support.
- Misleading information provided to service users and their family with regards to standard rate Council contribution. Staff to be reminded to be clear with information provided and not to quote figures that are irrelevant to service user. To be distributed to relevant staff 'reflective learning' "The relevant information is the client contribution, not what the Council pays and this should have been the only figure quoted"
- If the pharmacist had been contacted at strategy discussion time or shortly thereafter and her comments documented, it may have stopped the complaint from proceeding this far. As a matter of good practice Adult Social Care's internal Pharmacist should be contacted and her opinion sought in any issues relating to medication in all safeguarding cases. Lessons learnt document to be emailed by Adult Safeguarding Manager to all safeguarding leads for their information.
- The service user and family received insufficient information on financial contribution. Better communication and explanation of contributions required. Since the implementation of the Care Act in April 2015, Social Worker and Social Care Benefit Team staff now record when they send out information and factsheets to service user.
- Additional Direct Payment hours used; the increase in hours has been backdated. When Social Workers are aware of changes in circumstances they should arrange a timely review to ensure that the client's needs are still being met by the current commissioned provision. Social Workers to be reminded of this by Team Managers.
- Information given at the initial assessment did not provide adequate information regarding the process of direct payment. All staff should take with them a range of information on an initial visit including Fact Sheets regarding financial implications and direct payments to leave with the service user. All staff will be informed of this decision at team meetings and they will need to demonstrate this has been done by recording on the assessment or in a case note they have given appropriate written information.

Commissioning

 Quality Assurance & Monitoring including auditing of Care Homes' complaints processes and responses over the course of the next year, including at least one unannounced spot visit to the home. The Adult Social Care Contract Team's Quality Monitoring Officer will explore further Care Homes' emergency admission protocols



and the need to either sign off various aspects of the admission or subsequently note and explain in as contemporaneous way as possible the lack of any signatories. The Adult Social Care Contract Team will enter into discussions with the provider regarding this matter, and view on site documentation when the unannounced spot visit is undertaken.

- Provider Manager has given reassurances that timing of visits will be adhered to, consistency will be improved and the importance of reading the care plan and completing the required tasks has been reiterated to the staff. In addition, one member of staff, has taken over the co-ordination of service user's care and she will be monitoring it closely.
- The Contracts Team Quality Monitoring Officer will be discussing this matter further with this provider in particular during the next monitoring visit; copies of logs will also be requested to ensure that appropriate recording is now taking place. The Contracts Team has also raised the matter of communication with provider and requested that they reiterate to all carers the importance of following matters through when it relates to service users' health and wellbeing.
- Provider Management to reiterate to all carers the importance of raising health and wellbeing issues with the
 office immediately; to reiterate the importance of providing appropriate care to all service user; carers have
 been reminded to ensure that used pads are disposed of correctly and to ensure they use clean towels
 regularly.
- All providers to review electronic call monitoring in more detail.
- All care staff attending service user have been made aware of the necessity to encourage, as far as reasonably possible, service user to have water whilst taking his medication. All care staff have been reminded of the importance of seeking medical advice immediately should they believe service user is choking, or for any other medical attention deemed necessary to maximize service user's safety. All of service user's team of carers have attended Mental Capacity Training, and have been offered the opportunity to attend again before their refresher training is due. All of service user's team of carers have attended First Aid Training, and have been offered the opportunity to attend again before their refresher training is due. All of service user's team of carers have attended First Aid Training, and have been offered the opportunity to attend again before their refresher training is due. The office staff involved in the management of service user's care package have met and discussed all issues that have arisen, and re continuously monitoring and reporting concerns. Provider management will keep Adult Social Care updated on all issues/ concerns raised immediately.
- Provider has amended rotas to stop the carers running late and has stressed to carers the importance of contacting families/service users if they are running late. The Contracts Team Quality Monitoring Officer has spoken to care provider and asked that they review service user's care package to ensure the visits are maintained at the agreed time, and if, for any reason, the carers are running late, that families are notified immediately. At the next monitoring visit, Contracts Team will request copies of logs to ensure that appropriate recording is now taking place.
- The provider has reiterated to staff the importance of keeping to the agreed times, especially when medication is required at specific times. The care staff have been spoken to and have confirmed that they will be more vigilant in the future.
- Provider to ensure carers and office staff notify service users as soon as possible if a carer is running late or off sick. To be discussed at the next Contract Review with all providers. Providers to remind all staff of the importance of communication with service users and their families
- Care/Respite Home will ensure all items of clothing are labelled appropriately and this will be monitored during contract review visits.
- Provider to double check training for all staff and retrain where necessary or offer support



- All carers receive training in administering medication, including completion of the medication forms. Having
 reviewed the medication forms, the supervisor has noticed some gaps and this will be addressed with the
 appropriate carers and some retraining arranged. Medication in Care at Home setting is very complex and
 whilst carers all receive training, it has been highlighted that further assistance from the Council's contracted
 Pharmacist would give all providers some information, advice and guidance on medication.
- Provider to undertake spot checks and carers to be made aware of the seriousness of ensuring that the Keysafe is closed
- Provider has been reminded to notify service users in advance, where possible, if timings of visits need to be changed for any reason and if appropriate to also inform service user Next of Kin.
- In order to ensure that carers don't startle service user, who is blind, by letting themselves into his home and appearing behind him, the provider has reminded all staff to buzz first before letting themselves in.
- Care Home's procedures for identifying and labelling resident's possessions, and ensuring they are kept in the right place was not adequate. Care Home has purchased a new machine to tag belongings. Quality Monitoring Officer to follow up at next contract review.
- Care Home's complaints procedure was not sufficient to deal with informal complaints. Staff did not follow their procedures and failed to record actions. Care Home to amend their complaints procedure and ensure that staff are aware of it. Quality Monitoring Officer to follow up at next contract review.

Customer Feedback Annual Report – Adult Services

Appendix B - A Sample of Compliments for Adult Services

Care & Support

- I have received excellent service & fantastic care from devoted carers. I would like to thank you for all your help and kindness in the 6 weeks since leaving hospital. [Care at Home/Reablement]
- thank you letter Hope you know how much you're appreciated I want to thank you one and all for taking such good care of me during my recent 5 week stay at the ARC. God Bless one and all. [Assessment and Rehabilitation Centre]
- Words cannot display the gratitude I have for the help I have been given over the past 6 weeks. Every
 member of the team has been kind in helping me in all the ways needed. I could not have managed without
 them. [Care at Home/Reablement]
- Thank you so very, very much, I don't know how I would have got through the last 6 days without you; you gave me hope where there was only darkness. 'A' keeps making everyone laugh, you are a star. [Phoenix Centre MH]
- Thank you to all the staff at Coppers Way for your smiling faces you all gave me piece of mind when it came to looking after my brother. Thank you all. You are all very special people. [Coopers Way]
- "N was what I can only describe as an ambassador for what we as a Council are working towards, the volunteers young and old, were so committed and happy in their work it was lovely to see, I also met teachers and some pupils who are now working alongside N and the volunteers, the work that they are doing together is fantastic and the community has really come together. It was amazing to see the difference that N and his team have made to this small area of the town, and its residents. N is an absolute credit to the team". [Volunteers Service]
- From a service users daughter she is delighted with the service provided at Keats. She said that she can see a
 positive difference in her father and she is enjoying the break it provides as she is not worrying about him.
 She said that all of the staff team are great. [Keats Day Service]
- I am the main carer for my mum and I cannot express in enough terms how fantastic the carers are that helped my mum (and me). They not only looked after my mum with all the daily needs, they treated her with great affection. They were brilliant - and I thanks God for their help when we needed it most. I miss them greatly. Thank you to everyone [Care at Home/Reablement]
- I would like to compliment Blackpool Council for providing essential respite services for the elderly and their carers at a very reasonable cost. We are always given a warm friendly welcome by staff at Hoyle House. Without your wonderful services I would be forced to give up my business and become a full time carer. The alternative would be to place my mother in a care home which would be cost-prohibitive as well as distressing. This is a situation that every family finds themselves in at some time of other having to cope with elderly relatives and maintain an income. I am in no doubt that, more caring facilities such as Hoyle House, would be of great benefit to the community as a whole. [Hoyle House]
- Thank you card: a small token with a big thank you for the care and encouragement that you have given to 'T' during his stay at the ARC. Best wishes to you all [Assessment and Rehabilitation Centre]
- The voicemail stated that she has recently had Rapid Response round and they have extended care she is
 pleased with that, and said that they were all marvellous [Vitaline]
- I just wanted to say thank you for caring for my Dad. It was not easy seeing him so frail, but it meant a lot that people were kind and supportive of him during a difficult time. God Bless. [Care at Home/Reablement]

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 Thank you to all the staff at the ARC for helping me to get independent and confident; you have given me a reason to live and eat [Assessment and Rehabilitation Centre]

Adult Social Care

- 'No words can express my gratitude for all the help and support given to me NEVER FORGET YOU. May God bless you always; you will be every day in my heart and prayers' [Mental Health Recovery]
- I would like to thank the "Adult Social Care Team", for all their help after my application for help. I can't thank them enough, nothing was too much trouble for them and they were all very pleasant to deal with, thanks again.
- "H showed compassion, understanding and was very supportive. I felt completely at ease with her throughout the assessment".
- Feedback form received from service user which stated that L had been extremely knowledgeable and supportive during her visit. [Direct Payments]
- I needed to put my mother into respite for a week. The home was one I had not used before so they needed a contract. I rang M and she had everything sorted for me the next day. I could not thank her enough. [Social Care Purchasing Unit]
- I also wanted to take the opportunity to thank you for everything you have done for my mum over the years. I know I haven't been the easiest person to deal with but I hope you understand it was always about my mum getting the best possible care. You have been highly professional and supportive social worker and I have nothing but positive things to say about my interaction with you and your team over the last few years. [Mental Health Recovery]
- Thank you. You all saved my life. No words can express my gratitude. Wishing you all the very best. [Mental Health Recovery]
- I trust my worker and believe what he says to me, he is always at the end of the phone. [Mental Health Recovery]

Commissioning

- Many thanks for the wonderful event last Friday everybody thoroughly enjoyed themselves and had only
 very positive things to say about the day. No doubt our service users will be asking when the next Dancing
 with Dementia day is please let us know!! Please can you pass on thanks to all your team they were all
 incredibly helpful throughout the day. [Dementia Training]
- I visited the Dancing with Dementia event last week at Tower Ballroom and can I say what great event it was. As a professional it was great to see the effort that went into the event, the organisation was great, the cake stands full of goodies the whole look of the event even the Wurlizer coming up through the floor added to the event. Meeting colleagues from other disciplines was also beneficial to me. [Dementia Training]
- I am working with a service user who is living in a care home, I happened to be visiting him today, and he
 really enjoyed the Dancing with Dementia event. The staff who went to the event from the Care Home, went
 in their own time by the way, thought the event was great. [Dementia Training]
- What a great and joyous event. [Dementia Training]
- Excellent session that encouraged participants to engage in interactive group work to re-enforce aims and objectives [Dementia Training]
- It has refreshed my understanding to enable me to ensure that individuals with dementia are being cared for in a dementia friendly environment [Dementia Training]



- Tutor meticulously worked through each learning point; Thought provoking at a friendly fun level [Dementia Training]
- The course was delivered in a diverse and easily understood way that could be applied to day to day situations [Dementia Training]
- Thank you for a very interesting and enlightening session, well injected with humour [Dementia Training]
- My carer looks after me so well. I have always been embarrassed with personal care but X makes me feel comfortable and is always respectful to my wishes. All her work is very thorough down to the smallest detail and she always listens to any worries and troubles that I have. As well as my carer she feels like a friend and I look forward to her visits. [Commissioning - Carer Awards]
- She is punctual, helpful and hard working. She has a great sense of humour and always leaves me smiling. [Commissioning - Carer Awards]
- My carer is very caring and cheers me up as I suffer with depression and it rules my life. I need to have a laugh now and again and she does this for me. [Commissioning - Carer Awards]
- She puts all her work and care into looking after me. She makes sure I am safe getting in and out of the bath, helps me dress, makes sure all my needs are attended to and makes me a nice cup of tea before leaving.
 [Commissioning - Carer Awards]
- The first day she introduced herself I felt safe, reassured and felt I could trust her. She has listened to me and treats me like a person, not just a service user. [Commissioning Carer Awards]
- She is an angel; she has a smile for everyone and a big heart. She has a magic way to make you feel safe.
 [Commissioning Carer Awards]
- My husband has had a stroke and is blind. His carer is kind and looks after him. She tells him what she is doing so that he understands. [Commissioning - Carer Awards]
- He is very considerate and caring. He looks after me making sure I get lots of drinks and the food I like. He is interesting and talks to me, reminding me of the old days. [Commissioning Carer Awards]
- She is such a lovely lady and nothing is too much trouble for her. When I fell and injured my arm she came in her own time to make sure that I had been to the hospital and that I had everything I needed. She is there physically and emotionally – an absolute star! [Commissioning - Carer Awards]
- She is not only an excellent carer, but she is also aware of my needs. Her qualities make my life so much more comfortable and it is a joy to be in her company. I miss the days when she is not with me. Life would be so much better if all carers were like her. [Commissioning - Carer Awards]
- She is a very pleasant lady who enters the house with a cheerful 'hello' and a smile. My little dog adores her. She makes me a cup of tea and sits down for a little chat. As I am housebound I really value those few minutes. I couldn't have a better carer. [Commissioning - Carer Awards]

Business Support

- My family and I want to express our sincere thanks to those members of your social services team who have helped us to locate my mother's friends. It was a great relief when they made contact by telephone today. We are so grateful that you could help us and thank you for "going the extra mile!" [Access to Records]
- Thank you so much for all your hard work in developing the portfolios. Your hard work and efforts are very much appreciated. [Business Intelligence & Systems]

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- "I just wanted to express my gratitude for all the hard work and dedication given by yourselves, your Officers and Staff. All your support, assistance and guidance over recent weeks has been really invaluable and is very much appreciated. Well done to everyone in your teams and beyond". [Resources]
- I just wanted to say a big thank you to D for all the help and support (and patience) he has provided in getting our report requirements sorted and we are very nearly there. This report will really assist us to understand our business and trend analysis and it is fantastic! You should have a look at this report and I am sure you will be equally impressed! R is also very helpful and responds quickly to our queries and I wouldn't want to miss her out in my 'thank you'. [Business Intelligence & Systems]

Customer Feedback Annual Report – Adult Services

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Appendix 9(b)

Customer Feedback Annual Report

Children's Services

April 2015 – March 2016

Blackpool Council



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Customer Feedback Annual Report – Children's Services

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1. Annual Overview

This report covers the period 1 April 2015 to 31 March 2016 inclusive and provides information on customer feedback recorded by the Customer Relations Team, both from direct customer contact and/or via a third party.

Children's Services received 91 complaints over the year, seeing quarter 4 with the highest amount received. Of the 91 complaints received: 7% were upheld and 27% partially upheld – 34% in total.

To add context to this information it is key to recognise that over the same period, 3781 children had an allocated worker during 2015/2016. Blackpool has a population of 28810 children aged 0-17 years.

Over the year Children's Services has received 44 MP Enquiries with only Quarter 3 showing single figures received (5). Councillor Enquiries numbered 15 with the most enquiries being received in Quarter 2.

Sixty-eight percent of the annual complaints have been dealt with within the allocated timescale, which shows a slight increase on achievement for 2014/15 (65%), and continues the trend of improvement from 2013/14. This is significant considering that complexity levels have risen together with more elements being listed within each complaint. However, the statistic confirms how the numbers of complaints across the year impact on resources, staffing and timescales.

It is encouraging to see that young people are aware of the complaint process and are using the mechanism to raise their complaints without any detrimental effect on the services they are receiving. Use of an Advocate is strongly encouraged to help young people ensure their voice is heard. There have been 13 complaints lodged from young people over the year; of these 1 was upheld and 6 were partially upheld – 54% in total. These figures are included within the overall totals and account for 14% of the total complaints received.

In terms of theme categories for young people; 5 were requests for service; 2 policies and procedures; 2 Lack of Action; 1 Finance /Funding; 1 Lack of Communication; 1 Quality of Service and 1 staff conduct/treatment of customer.

Compliments have been reviewed and only those which describe 'above and beyond' service delivery are now accepted. It is pleasing to see with this new criteria in place, figures have increased from 39 in 2014/15 to 58 this reporting year, and is an accurate measure of staff 'going the extra mile' to make a real difference. However, it must be noted that levels of compliments received are lower than other areas due to the very difficult and emotive arena of work undertaken.

This report will provide further breakdowns of these highlights with potential explanations for some of the statistics.

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2. Children's Services Customer Feedback

The following table shows the total numbers of Complaints, Compliments, Comments, MP/Councillor Enquiries and LGO cases for the year 2015/16.

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Year End Totals
Children's Social Care	31	32	32	40	135
Early Help for Children	3	14	1	4	22
Education	12	17	12	19	60
TOTALS	46	63	45	63	217
Comparison Totals 2013/2014	105	100	70	80	355
Comparison Totals 2014/2015	63	69	61	59	252

The number of items received has reduced over the last 2 years for compliments, complaints and Councillor Enquiries. This is in part due to transparent working with Members and Councillors in conjunction with stringent new recording of compliments. Complaints, whilst they have reduced in number are now far more complex and have more substantial elements to them. Customers' expectations are still high even though the Council's resources have been reduced within the current economic climate.

3. Complaints

Statutory legislation dictates that all complaints should be addressed and concluded within a 6 month timeframe. Children's Services feel all complaints should be addressed quickly and efficiently with each case being individual and viewed on its own merits.

Children's Services endeavour to make the complaints process accessible so that complainants feel comfortable when feeding back their concerns.

The following table shows the breakdown of the complaints by service area for the year and how many complaints where "Upheld" or "Partially Upheld":

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Year End Totals
Children's Social Care	17	13	19	23	72
	[3U 4PU]	[2U 4PU]	[1U 6PU]	[5PU]	[6U 19PU]
Early Help for Children	1 [1PU]	6 [2PU]	nil	1	8 [3PU]
Education	4	1	3 [1PU]	3 [2PU]	11 [3PU]
TOTALS	22	20	22	27	91
	[3U 5PU]	[2U 6PU]	[1U 7PU]	[7PU]	[6U 25PU]
Comparison Totals 2013/2014	35	35	29	35	134
	[6U 3 PU]	[OU 8 PU]	[4U 5 PU]	[3U 8 PU]	[13U 24PU]
Comparison Totals 2014/2015	31	36	32	26	125
	[3U 4PU]	[2U 6PU]	[2U 8PU]	[2U 1PU]	[9U 19PU]

Key: U = Upheld; PU = Partially Upheld

The above figures also include 37 complaints Not Upheld and 23 complaints Withdrawn

Withdrawn reasons: Court [4], out of timescale [2], dealt with informally/complainant withdrew [3], lack of contact/info from complainant [7], duplicate matter/already dealt with [2], school [3], social care allegation, passed to duty [2]

Children's Social Care, as could be expected, has received the highest number of complaints. As a front line service they are often delivering difficult news, emotional messages and endeavouring to support families in crisis. This service has to take decisions with and for families for the benefit of children, which some families find difficult to accept.

Children's Social Care dealt with 79.12% of the overall complaints lodged.

Early Help for Children and Education remain comparable to the previous year. It must be noted, that School complaints fall directly under the School or Academy Sponsor to deal with and do not fall under the remit of the Statutory Children Social Care procedures.

Customer Feedback Annual Report – Children's Services

The main reasons for complaints being upheld over the year are shown below:-

- Communication
- Conflicting information re Looked After Children reviews, invites and minutes
- Perceived actions/lack of actions of social workers and attitudes
- Legal issues including Court parameters
- Delivery of support, action plans and safeguarding
- Confidentiality
- Perceptions of support, roles and responsibilities
- Forward planning/Lack of action in general
- Financial queries and requests for support
- Impact of service delivery in times of change
- Delays in assessments and clarity around understanding of difficult decisions and processes

4. Timescales

It is good practice to keep the complainant informed of progress at all times. Timescales are important and if for any reason Children's Services is unable to meet the allocated timescale for response and resolution, the complainant should be advised as soon as possible. This may be by way of email, telephone or written letter (dependent on how contact was first made and subsequent requests for updates being specified). Responding Managers should advise the Customer Relations Team why they are unable to meet the deadlines. A further date of anticipated response should then be provided by the Customer Relations Team to the complainant together with an apology for the delay. Missing the timescale in this way counts against the Council for reporting purposes and can diminish the trust with the service users and complainants.

The table below shows the percentage breakdown of timescales **successfully met** for complaints by service areas over the year:-

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Year End % Totals
Children's Social Care	13/17	3/13	15/19	15/23	46/72 64%
Early Help for Children	1/1	5/6	Nil	1/1	7/8 88%
Education	4/4	1/1	2/3	2/3	9/11 82%
TOTALS	18/22 82%	9/20 45%	17/22 77%	18/27 67%	62/91 68%
Comparison Totals 2013/2014	11/35 31%	16/35 46%	16/29 55%	22/35 63%	65/134 49%
Comparison Totals 2014/2015	21/31 68%	25/36 69%	1 7/32 53%	18/26 69%	81/125 65%

There has been a marked improvement in achieving allocated timescales over the last 3 years: 49%, 64.8% and 68% respectively. Overall each Division has substantially improved and this is attributed to the efforts made to ensure complaints are fully acknowledged and resolved efficiently, effectively and in a timely manner.

However, complaint responses will always be superseded by sudden unexpected priorities arising, such as Court Summons and safeguarding of vulnerable children. But all staff and managers are mindful of their responsibilities under the statutory Children's Social Care Complaint process and every effort is made to provide a thorough and quality response to complainants within anticipated timescales. On occasion, during investigation it becomes apparent that further work needs to be undertaken and the response date will then be extended to ensure a full enquiry is made and appropriate response supplied.



5. Complaint Theme

These themes help Children's Services to identify trends and patterns quickly and aids in the recognition of action required. For unity in recording and balancing the number of complaints, the main overarching or most appropriate theme is used for recording purposes. The following table shows the breakdown of the annual complaints by theme.

Themes	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Year End Totals	Upheld [U] or Partially Upheld [PU]
Assessment Undertaken	1	0	1	5	7	1PU
Bully/Racist Incident	0	0	0	0	0	N/A
Safeguarding	0	0	0	0	0	N/A
Confidentiality	2	1	0	1	4	1U
Custody of Child	0	0	0	0	0	N/A
Financial/Funding	0	2	0	1	3	10
Lack of Action	6	2	2	6	16	2U 5PU
Lack of Communication	2	3	0	1	6	1U 1PU
Policies & Procedures	1	0	5	1	7	1U 2PU
Quality of Service	7	7	4	3	21	9PU
Staff Conduct/	2	5	5	8	20	4PU
Treatment of Customer	2	Э	Э	ð	20	420
Request for Service	1	0	5	1	7	3PU
TOTALS	22	20	22	27	91	6U 25PU
Comparison 2013/2014	35	35	29	35	134	15U&25PU
Comparison 2014/2015	31	36	32	26	125	9U 19PU

Key: U = Upheld; PU = Partially Upheld

The top theme is Quality of Service with 21 complaints under this theme for the year. When complaints are received, the overarching element is used to assign a theme. However, with the complexity increasing together with the amount of elements making up a complaint, the overall perception of the complainant naturally becomes quality of service. If many themes are evident and overall service perception is poor, then quality of service is allocated.

This theme received the most complaints and had the most upheld: 9 of 21 upheld – 42% of this theme's complaints and 9.89% upheld of the overall complaints received.

This is closely followed by Staff conduct/treatment of customer with 20 items received and 4 being upheld. Expectations and perceptions are rightly high and complainants can feel very aggrieved if these are not met by Council staff. Communication is paramount to help open up discussions, explain the Council's limitations and actually find a way forward in a positive and respectful manner. Staff found to be at fault can be subject to a number of ways of redress including disciplinary procedures, re-training provided o close monitoring under one to one supervision meetings.

Lack of action is the 3rd most significant theme and again is subject to perception and expectation. Sixteen complaints were received over the year accounting for 17.58% of the overall complaints received. Of these 16, 2

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were up held in their entirety and a further 5 partially. Therefore, overall 7 complaints were upheld in some form – amounting to 43.75% of the complaints within this theme and 7.69% of the overall complaints received in the year.

Underlying each theme is communication and staff are fully aware of the need to be open, transparent and clear at all times. Checking of understanding must continue to ensure all parties are fully aware of resulting action being taken and by whom.

6. Lessons Learnt

The Council feels it must identify lessons learnt and learn from its complaints, thereby improving service delivery. Improvements this year have taken the form of a number of actions:

- Further training for staff
- Periods of close monitoring or supervision
- Cultural changes led by Senior Managers
- Review of contracts with third parties

Lessons learnt can be positive as well as negative and are just as important.

The Customer Relations Team has been working hard with all service areas to ensure lessons learnt are recorded and follow-up action is then taken to make improvements where necessary. It is hoped this will improve performance and reduce duplicate complaints in future.

As a further positive action, lessons learnt will be monitored and discussed at the Children's Services Management Team meetings in order that practice can be improved across the Departments as appropriate with Senior Managers setting a clear and consistent example of ownership and expectations.

All areas of the Departments have accepted the need to improve dialogue with service users and their families and to be available to stop escalation of issues. Good practice of other departments has been shared and adopted. Appendix 1 includes a sample of lessons learnt recorded during the course of the year.

7. Compliments

Compliments are extremely important and help to highlight the areas we are improving in or maintaining levels of high quality service. They act as a morale booster for staff and are evidence that every detail within service delivery matters. Good practice needs to be shared across the Directorate as and when appropriate.

New recording is now in place, which clearly justifies each compliment as being, 'above and beyond the norm and going the extra mile'. Appendix 2 shows a sample of compliments received during the year.



	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Year End Totals
Children's Social Care	4	5	6	7	22
Early Help for Children	2	3	1	2	8
Education	4	10	3	11	28
TOTALS	10	18	10	20	58
Comparison Totals 2013/2014	50	46	23	27	146
Comparison Totals 2014/2015	9	15	6	9	39

The table below demonstrates the levels of compliments received by Children's Services split by Service.

48 EXTERNAL + 10 INTERNAL

Quarters 2 and 4 show the most compliments being received this reporting year; Education continues to be the area receiving the highest amount of compliments as was the case in the last year.

8. Comments

Comments are equally important as complaints and help to shape and improve the quality of service. If necessary, Children's Services will respond to comments and compliments based upon the same timescale as complaints. However, each comment will be judged individually as to whether a detailed response is necessary or not. The service user will not always be aware of the work being carried out behind the scenes regarding the comments made.

The following table shows the levels of comments received by service area:-

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Year End Totals
Children's Social Care	0	2	2	2	6
Early Help for Children	0	1	0	0	1
Education	0	1	1	0	2
TOTALS	0	4	3	2	9
Comparison Totals 2013/2014	3	2	2	3	10
Comparison Totals 2014/2015	5	5	0	3	13

There are no major changes in the amount of comments received this reporting year.



9. Local Government Ombudsman (LGO)

The LGO is the Governing Body that reviews and investigates complaints against Councils where appropriate; usually where cases have followed procedures and the complainant feels their issues have not been addressed or resolved to their satisfaction. Under the Children's statutory complaints process, the LGO can be contacted after stage 2 and stage 3 processes have been carried out.

However, some complainants prefer to contact the LGO in the first instance. The LGO will determine whether this is a premature complaint which must be directed back to the Council to respond to in the first instance or if they will commence an investigation based on the information provided by the complainant.

Over the year, 15 contacts have been made by the LGO which relate to 6 new named cases for this reporting year; all enquiries have originated from Social Care complaints.

Six Final Decisions have been received this year; this figure includes outcomes relating to some cases originating in the previous year of 2014/2015. Outcomes are as follows:

- 1 Upheld: Maladministration and Injustice (the LGO recommended a monetary payment as compensation for injustice caused – the amount was £750)
- 1 Not upheld: no maladministration
- 1- Closed after initial enquiry out of jurisdiction
- 1 Closed after initial enquiries no further action.
- 2 -Premature complaint to be dealt with via the Council's procedures.

10. Members of Parliament (MP) & Councillor Enquiries

Blackpool Council's policy is that all MP and Councillor Enquiries must be actioned and resolved within 5 working days. MP and Councillor Enquiries are not complaints – but can be categorised as:

- requests for background information,
- reasons for decisions,
- requests for service or
- requests for review of outcomes

Page 87 Page 11 of 19 The following table shows the annual breakdown of MP Enquiries received by Children's Services and the percentage which met the 5 day response timescale:-

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Totals
Children's Social Care	9 [56%]	6 [33%]	4 [50%]	7 [43%]	26 [46%]
Early Help for Children	NIL	3 [67%]	NIL	NIL	3 [67%]
Education	4 [75%]	5 [20%]	1 [100%]	5 [60%]	15 [53%]
TOTALS	13 [62%]	14 [36%]	5 [60%]	12 [50%]	44 [50%]
Comparison Totals 2013/2014	10	14	15	10	49 [43%]
Comparison Totals 2014/2015	12	10	19	16	57 [44%]

The number of MP Enquiries received this report year is the lowest for 3 years. However, service- users are very aware of the MP process and utilise this facility with many complex cases. The 5 day turnaround for response is extremely tight especially in light of complex cases and again if the timescale is extended it is counted as missing the timeframe. Children's Social Care accounts for the majority of MP Enquiries again this year – (59%). Some complainants turn to their MPs for support after completing the complaint process and hope their MP will raise the same issue with the Council but achieve a better outcome for them.

The following table shows the annual breakdown of Councillor Enquires received by Children's Services:-

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Totals
Children's Social Care	1 [100%]	6 [67%]	1 [0%]	1 [100%]	9 [67%]
Early Help for Children	NIL	1 [100%]	NIL	1 [100%]	2 [100%]
Education	NIL	NIL	4 [75%]	NIL	4 [75%]
Total	1 [100%]	7 [71%]	5 [60%]	2 [100%]	15 [73%]
Comparison Totals 2013/2014	7	4	1	3	15 [67%]
Comparison Totals 2014/2015	NIL	2	3	3	8 [13%]

Double the amount of Councillor Enquires has been received this reporting year compared to 2014/15. Again, Councillors are often contacted after a service user has completed the complaint process. The 5 day timescale relates to Councillor enquires also and the same difficulties are faced as MP Enquiries. Last year Children's Social Care received all 8 enquiries whilst this year shows a slightly broader base.

11. Freedom of Information (FOI) Requests

The timescale for responding to an FOI request is 20 working days as set out by the Information Commissioner 's Office and in accordance with the Data Protection Act.

There are a number of circumstances where the request may be exempted in part or as a whole: included in the list are:

- Time taken to collate the response would be in excess of 18 hours (needs to be evidenced)
- Individuals could potentially be identified
- Information not held in a retrievable format or not collected at all
- Future publication is intended date to be provided
- On-going investigations may be affected by the divulging of the requested information

The table below shows the amount of FOI enquiries received per division together with how many achieved the statutory timescale:

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Totals
Children's Social Care	17/34	24/29	15/24	28/31	84/118
	50%	83%	63%	90%	71%
	1/1	1/2	0/1	1/1	3/5
Early Help for Children	100%	50%	0%	100%	60%
Education	1/2	12/14	6/23	22/22	41/61
	50%	86%	26%	100%	67%
	19/37	37/45	21/48	51/54	128/184
Total	51.%	82%	44%	94.%	70%
		3 exemptions	5 exemptions	6 exemptions	14 exemptions
Comparison for 2014/2015	27/42 64%	18/29 62%	12/31 39%	32/34 94%	89/136 65%

There has been an increase in FOIs received this reporting year from 136 in 2014/15 to 184 in 2015/16. The timescale achievement percentage has also increased particularly in the last quarter. This reflects a new colleague who has worked diligently on ensuring departments respond quickly and accurately. So far in the reporting year 2016/17, this is a continuing trend and timescales are improving.

Like complaints, FOI requests are becoming more complex, covering a wide array of issues and cross departmental working. This has had a knock on effect with exemptions and from the table it can be seen that exemptions are now more common place. Sensitivity, time limitations and cost implications are the most common reasons for exemptions but also, we simply do not hold some of the information requested.



It is also interesting to note that 19 FOIs were received by Childrens Services which were not for the Council or Children's Services. However, they still need to be logged in line with procedures and responded to or transferred to correct areas.

12. Staff Training

Due to the current economic climate and the many Government changes, there have been council cuts in funding and services and therefore resources have been limited across the Council as a whole. This in turn brings about staff changes and additional duties. Therefore, the Customer Relations team has offered relevant complaint training to Heads of Service and Service Managers across the Children's Services Department to reflect changes and staff turnover.

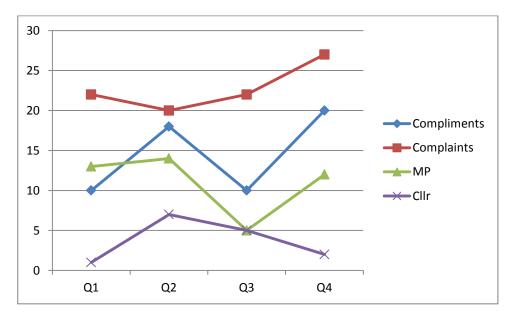
Training can be tailored to meet the needs of the specific service. Regular meetings and open discussion with relevant Managers has aided in the understanding of the statutory complaints process.

13. Conclusion

Complexity with complaints, MP and Councillor Enquiries and FOIs continues to increase across all areas. The timescale for responses to such matters is restrictive and every effort is made to provide full and thorough responses within the timescales. Credit must be given to all Social Care staff who receive the majority of these items and endeavour to respond on time and with appropriate information.

Attention to detail and team working is vital to ensure departments work coherently together to resolve issues. Communication with Service Users and their families is paramount to ensure all parties are aware of their actions and responsibilities. Expectations must be addressed immediately to allow the relationships to flourish with trust and transparency.

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Recommendations, based on the information available:

- Continued efforts re communication should alleviate initial issues and be used to improve dialogue
- Timescales should help focus upon issues and resolving of same for the benefit of our Service Users and families thereby negating the use of holding letters and dissatisfaction of complainants
- Lessons learnt need to be recognised, discussed and implemented with direction and monitoring from Senior Management. Ownership of these needs to be addressed and embedded.
- All of these actions should reduce the perception of poor quality service which is the main complaint theme surfacing throughout the year.

Appendix 1 - Sample of Compliments

Children Social Care

- The social worker from other local authority for the prospective adopters complimented Blackpool Children's Services on its practice of IROs visiting children on a separate day to their Review meeting. This had been this social worker's experience with a number of Blackpool cases, and she felt that this was a valuable and good practice.
- Staff Member, I would like to pass on my gratitude on behalf of everyone at Provider A Care. Time and time again I hear staff compare other professionals to you, as you have always been professional and dedicated. Thank you
- Mr E commented that he was impressed with the knowledge and experience that Staff Member D (YOT Worker) and Staff Member C (YOT Victim Liaison Officer) showed. He also appreciated the honesty and openness which they showed and their willingness to "say it as it is," concluding that the service received so far had been "outstanding."
- Mr K telephoned to ask for a Social Worker's details and contact telephone number. Mr K was advised that
 this was not possible until his identity was checked. Before he went off the telephone he said that he
 wanted to pay a huge compliment with regard to the way the call was handled. As well as being Head of
 Pastoral Care at a School, he was the Designated Safeguarding Lead and was very impressed.
- Email received from School Nurse, thanking staff member K, Social Worker, for all her hard work.
- Compliment received from a Judge for the work Social Worker did in preparation for a court case
- Social Worker N, has through perseverance and reassurance and slow steps, managed to engage this family in the process and allow them to see her as a professional who was not there to judge, but to act and work with them. The progress she has made to the family as a whole has been tremendous and certainly should not go unrecognised. Had she not used her skills to make such a difference, the outcome for the family could have been so very different. Parents want to thank Social Worker N personally and to express their appreciation for her respect for them, and for the help she had given them all as a family unit.
- I just wanted to send an email to let you know how much we enjoy working with Social Worker S. We find her to be incredibly child-focused and hardworking with some of our most complex and challenging young people.
- Judge described Social Worker K's assessment as impressive, fair and full.
- We want to convey our gratitude for the work carried out by Social Worker V who is clearly dedicated to her job; we feel that we have been exceptionally supported by V who makes herself available all hours of the day and late into the evening. Her professionalism has been highlighted further recently by her assistance in getting our children accepted into their new school when there were continuous delays. We have sought V's advice throughout this process and always found her guidance to be sound. She has provided us with advice regarding the transition of schooling for our boys which will greatly assist us. We know we were very lucky to have V take us on our adoption journey because she is clearly a dedicated professional who cares about her adopters and the children being adopted.
- I visited the young Person yesterday and he told me he is very happy with the outcome of his complaint, and feels that this issue has now been resolved to his satisfaction. Many thanks for all your help in obtaining a successful outcome.
- I assisted counsel today at court Social Worker S was given outstanding praise by all of the advocates and indeed a number of times by the Judge in his judgment as to her professionalism, her commitment and the outstanding relationship she has achieved with the parents in this case which has resulted in the children

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remaining in the care of their parents. I did not want the extremely lovely comments made by all at court today to go unnoticed. She did an excellent job.

Education

- You and your team helped this happen we thank you.
- Thanks for all of your support in every way this year. You have been fantastic!
- The National Deaf Children's Society stated in their email that they believed Blackpool to be one of the flagship Local Authorities. Mr C appreciated all that Blackpool Council had done and wanted to thank all those involved with the family.
- Positive feedback received from Learning and Autism Service, regarding Blackpool being a good example of a council that has got to grips and embraced the EHCP process.
- It was really nice to meet you. We feel so much better now after your involvement. We feel as if we've been banging our heads all this time and now it's like a weight has been lifted.
- Email sent to Staff member P to thank her for all the help, advice and support offered over a difficult time.
- Email received from a Community Academy: Thanks for all the great work your team did for Child A last year. You all helped her get through a particularly difficult time and she got exam results that ensure she has good future choices available to her.
- Thanks for our training earlier this week. It was very informative and very well delivered and gave the teachers all the knowledge that they need in order to continue to safeguard our pupils.
- Praise for the SEND Service Manager for training done in the West Midlands on producing quality EHC Plans, based on the Blackpool approach. The feedback was all positive and the authorities involved have commenced their own cross authority working parties.

Community Early Help for Children and Families

- Whilst preparing for adulthood lead (for information a national organisation working with the DFE) said how knowledgeable you were and how lucky Blackpool was to have such knowledge/ skills.
- In conversation with Andre (the DFE lead advisor on SEN) he had said how well we were doing in Blackpool in the area of implementing the SEND reforms overall.
- Really enjoyed the course yesterday and feel more confident to chair my next meeting so thank you!
- I just wanted to let you know that staff member J was incredible in the meeting at SSA yesterday (as she always is)! She challenges in a really constructive and professional way and fights so hard for the best outcomes for the young people
- I just wanted to say thanks again for sorting child E out, he seems to have settled in well and the family are a lot happier, you are a superstar
- As you know I asked staff member P to come into school yesterday to speak with some of the staff re Elective Home Education. The feedback today from the school was extremely positive. P was able to use examples of cases from our school which I felt was very useful as it then personalised the issue for the staff. She was also able to be very clear on her remit within the authority, many of the staff before the talk presumed that P provides packages of work and also visits regularly. At the end of the talk the staff were left with a very clear view of what Elective Home Education actually looks like, particularly for the more vulnerable students. So just wanted to say a big thank you to P, I know how busy her days are, so to fit in yet another meeting wouldn't have been easy!



Appendix 2 - Sample of Lessons Learnt

- Aftermath of adoption order being granted with or without subsequent support from the Council. Lessons
 Learnt: better communication, further explanation of withdrawal by LAC Team at the time of adoption order
 being granted and repeat offer to be made of 'after adoption support', if refused initially. Delay in response
 and complaint investigation must not occur and all Managers have been reminded of this.
- Extended family wanting contact with adopted children. Lessons Learnt: sensitivity to situation required with clear information on how information can or cannot be shared in the future – dependent of individual circumstances.
- Delays in Court paperwork being provided. Lessons Learnt: Follow action plan, adhere to all timescales and pass to Legal Department in plenty of time for them to deal with matters too.
- Movement of Young People in care. Lessons Learnt: review if needs are being addressed and communicate regularly and clearly with young person to alleviate any worries. Invoke extra support where necessary e.g. Personal Advisor being appointed early due to individual circumstances or needs.
- Inaccuracies within child protection paperwork may set a bias by professionals involved. Lessons Learnt: accuracy to be checked and maintained at all times. Transparency when putting things right, across the board with families and professionals to ensure trust and only accurate information is discussed and reviewed. Further meeting with families if required to ensure satisfaction with corrections. Outstanding actions and resulting requests to be addressed quickly and with clarity.
- Addressing of confidential information being sent out via the postal system. Lesson Learnt: All relevant administration staff spoken and relevant Managers reminded of confidentiality requirements and the need to provide full courtesy titles, names/initials with contact address details. Formal instructions implemented for addressing mail correctly.
- Contacts made to Social Worker with no response received. Lessons Learnt: Respond to calls and contacts each day wherever possible or as soon as practicable. Message taking to improve to allow Social Workers to be aware of all daily contacts.
- Breakdown in communication and relationship between family and Family Support Worker despite many
 efforts to work together. Lessons Learnt: Early clear communication often alleviates the need to change
 Family Support Worker and keeps continuity for family. However, when relationships do breakdown,
 acceptance of time to change by all parties is required quickly and with clear guidelines to all to help rebuild
 relationships.
- Case management and communication. Lessons Learnt: Staff have been spoken to and practice across the relevant teams has been improved after training delivered to whole areas of teams. Emphasis on communication and quality of service.
- Observations of members of public regarding perceived behaviours of alleged LAC and carers parenting skills.
 Lessons Learnt: Data Protection must be explained clearly to avoid perception of being unhelpful. Carers to be communicated with and supported further where necessary with parenting skills. LAC encouraged with boundaries and self-awareness.
- Out of date information on the website. Lessons Learnt: Service apologised that the policy in questions had been 'missed' when out of date polices were being deleted. However, signposted to new information on website which meets all legal guidelines. Care to be taken to ensure all up to date information is posted and previous versions are deleted and removed from all public areas.
- Young people making complaints. Lessons Learnt: ensure timescales are met. All young people's matters to take priority and moved forward as swiftly as possible.



Customer Feedback Annual Report – Children's Services

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Report to:	RESILENT COMMUNITIES SCRUTINY COMMITTEE
Relevant Officer:	Karen Smith, Deputy Director of People (Adult Services)
Date of Meeting	1 September 2016

ADULT SERVICES REPORT

1.0 Purpose of the report:

1.1 To inform the Committee of the work undertaken by Adult Services on a day to day basis in order to allow effective scrutiny of services.

2.0 Recommendation(s):

2.1 To consider the contents of the report and identify any further information/action required.

3.0 Reasons for recommendation(s):

- 3.1 To ensure services are effectively scrutinised.
- 3.2a Is the recommendation contrary to a plan or strategy adopted or No approved by the Council?
- 3.2b Is the recommendation in accordance with the Council's approved Yes budget?
- 3.3 Other alternative options to be considered:

None.

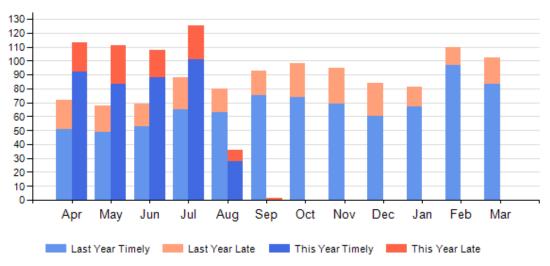
4.0 Council Priority:

4.1 The relevant Council Priority is 'Communities: Creating stronger communities and increasing resilience'.

5.0 Background Information

5.1 Adult Social Care (ASC)

5.1.1 The first four months of the new financial year have shown a steady rise in the number of requests for new assessments. The following chart from the Adult Social Care Dashboard demonstrates the significant increase in this area over this period. (The reference to timeliness is not a statutory issue, as there are no time limits set within the Care Act 2014 for completion of an assessment. ASC has set an indicative limit of 28 days for completion as a way of monitoring process and throughput. Delays are often due to a change in circumstances, for example admission to hospital early in the assessment.)



Assessments Completed

- 5.1.2 The Care Act and related statutory guidance defines the specific areas that must be considered when assessing somebody for eligibility for social care, and in so doing has stopped local authority discretion as to the level of need, in terms of the impact on a person's life, that meets eligibility. A key stated policy aims of this is to eradicate any care "post code lottery".
- 5.1.3 The impact of this on the individual is that their assessment and any decision regarding eligibility for meeting their social care needs should be the same wherever they live, and should they move to live elsewhere they can effectively transport their "needs eligibility" to their new home area.
- 5.1.4 The needs must arise from or be related to a physical or mental impairment or illness, and fall within the ten specified outcomes in the Act. An adult must be unable to achieve two or more of these outcomes, and the consequence of this there is likely to be a significant impact on the person's wellbeing. In effect this means that

every person will be assessed in the following areas: managing and maintaining nutrition; maintaining personal hygiene; managing toilet needs; being appropriately clothed; being able to make use of the home safely; maintaining a habitable home environment; developing and maintaining family or other personal relationships; accessing and engaging in work, training, education or volunteering; making use of necessary facilities or services in the local community including public transport and recreational facilities or services; carrying out any caring responsibilities the adult has for a child.

- 5.1.5 Clearly, in order to fully explore and understand the above outcomes as they relate to the adult the assessment will also cover a broader remit, for example a person's financial circumstances as they relate to how this enables the above outcomes to be either achieved, or not. One of the consequences of this very specific approach has been to lengthen the time taken to undertake assessments, not least because their statutory basis now means that potential legal challenges could arise in relation to disputes about eligibility, or the level of eligibility, in the context of the quality of the assessment and what has been considered in completing it.
- 5.1.6 The detail required might be seen by some as intrusive in terms of the level of information required to assess eligibility. Alternatively it can be seen as a significant improvement in terms of ensuring that a holistic and very thorough assessment is undertaken. Of course, even though people may be assessed as eligible for services, if they have mental capacity they retain the right to refuse services without reason. This is often a cause of frustration for families, neighbour, staff, other agencies, and councillors.
- 5.1.7 The reasons for the rise in requested assessments is unclear, which is not surprising in the complex world of health and social care, and the ever changing environment. Is demand rising, are people becoming more aware of their rights to an assessment, are there factors in other services/organisations which are impacting on referrals or are we simply better at recording what we do? These, and other related questions, we keep asking and reviewing to try to understand changes, making use of a range of sources of intelligence, including statistical information, service user and staff experience and expertise.

5.2 Adult Care and Support Division

5.2.1 Care Quality Commission (CQC) Inspection:

The Council's Domiciliary Care Services and Residential Crisis Service based at The Phoenix Centre have recently been inspected by the Care Quality Commission. The services inspected included:

• Rapid Response, Reablement and Primary Night Care Service

- The Phoenix Mental Health Crisis Service
- Gloucester Avenue Mental Health Rehabilitation Service
- Extra Support Service Learning Disability Supported Living

The service achieved a **GOOD** in all five domains:

Is the service **SAFE**

• Risks associated to people's needs has been assessed and risk plans reviewed

Is the service **EFFECTIVE**

• People were supported by carers who were sufficiently skilled and experienced to support them

Is the service CARING

• People told us staff supported them appropriately and were kind, caring and respectful

Is the service **RESPONSIVE**

• People's care plans had been developed with them to identify what support they required and how they would like this to be provided

Is the service **WELL-LED**

• The registered provider had clear lines of responsibility and accountability. Staff and members of the management team understood their role. They were committed to providing a good standard of support for people in their care

The case study below illustrates the qualitative outcomes that are achieved when people come in to contact with the Council's In House Provider Services:

<u>Case Study:</u> (information has been changed to respect confidentiality)

5.2.2 <u>History/Background information</u>

Z is in her late twenties and has lived in Blackpool all her life. She left school and went straight into hotel work, working at several of the large hotels in Blackpool as a waitress and chambermaid. She lived in her own flat and managed all areas of her life. On reflection Z and her mum have both said that she was always very introverted and socially isolated and relied on her work for social inclusion. She would also have all her meals at work so reducing her skills to cook and keep her flat in a routine.

- 5.2.3 Approximately, 12 months ago she started to struggle with feelings of paranoia and began drinking alcohol to mask the symptoms/feelings she had. This led her to become close to a group of "friends" she would not ordinarily be close to and her flat became a place to drink and "hang out".
- 5.2.4 Her thoughts became more and more intrusive and her beliefs were fuelled by her "friends" who would tell her that people on the internet were going to get her". She continued to become more unwell and her illness continued to develop until her beliefs became fixed delusions and she experienced Psychotic episodes. *Z believed that a crowd of 2,000 people were coming after her and that they were going to kill her. Z was convinced that cctv cameras were put up in her house to watch her. She was petrified for her life and as a result became a risk to herself and to others this led to her eventually being sectioned under the Mental Health Act.*
- 5.2.5 Z was admitted to the Harbour eight months ago and was acutely unwell with several attempts at suicide an act that she believed would be better than the 2,000 people getting her. Z was so anxious at this stage she needed support from staff and medication in the form of Diazepam to leave the ward just to walk along the corridor.
- 5.2.6 Z moved into the Council's in-house Mental Health Rehabilitation Service. At this time she was still heavily dependent on diazepam and her delusional beliefs were still consuming her. Z could not leave the scheme without taking Diazepam and she needed full staff support.

5.2.7 <u>Service Interventions:</u>

The service worked across all areas of rehabilitation with Z but the main highlights are;

- Attending a tribunal on her behalf to appeal a decision about the award of PIP (Personal Independence Payment).
- Occupational Therapist involvement to develop graded plans to manage anxiety through contextualised life skills development within service and the local community to build confidence
- Liaising with her care coordinator and completing the STAR (Support Time and Recovery) tool to identify goals and mile stones that supported Z to build mental health resilience and created opportunities for Z to achieve greater independence
- "Moving on Groups" which enabled Z to build a wider circle of friends with people who may be experiencing similar life changes which in turn contributed positively to Z being able to manage better her anxieties around moving on

- "Confidence Building Course"
- "Relaxation course" which enabled Z to learn new coping skills to prevent and manage some of those scenarios which would have typically caused her anxiety. Z built on this work with her Occupational Therapist and developed an Individual Anxiety Management Plan which would remain with Z after she moves on and a positive tool for both Z and any new support team to refer to when required
- Getting Z ready to be able to live independently again and able to enjoy social activities
- Supporting Z to develop a 'work plan' which included the jobs she may like to try and what steps she needs to take towards achieving this goal, building on her life experiences when she worked within the hospitality industry earlier in her life.

5.2.8 <u>Help with Moving on using Private Landlords</u>

Following Z's recovery process her self-esteem and her confidence improved dramatically. Equally so Zs own personal standards improved and she no longer wanted social housing or second hand furniture from places such as refurb /helping hands. Z had a clear view of wanting to look for a "nice" flat in Blackpool and what this looked like for her.

- 5.2.9 The staff team supported Z in regard to looking at letting agents in these areas and viewing on line and in local papers. Z was given all the information she needed about moving out of Blackpool and the affects it would have on her after care/support. Z accepted this and felt supported in making her own choices. She was supported by staff to look around these areas and familiarize herself with different pockets within them.
- 5.2.10 Z found a property she liked a small semi-detached bungalow in a lovely residential area. The property was let through an Estate Agent who was acting on behalf of the Landlord and went to view the property with staff support and she instantly fell in love with it.
- 5.2.11 Staff identified questions to help Z with viewing the property ie council tax banding, energy efficiency, security and safety issues, carbon monoxide checks, fire tests and gas safety checks. Z wanted to apply for this property and asked for full support to do so she was very nervous but at the same time very excited, it was lovely to see this change in a person. Staff worked with Z to find a reputable letting agent, who would not charge excessive amounts. Budget planning with Z to make sure she could afford the property. Using the budget plan to look at all incoming and outgoing monies.

5.2.12 <u>Outcome</u>

Z has moved into her new bungalow and is really happy, she is travelling by bus independently, she is doing volunteer work two days a week, Z has new social interests including going to the Gym at least twice a week and of course Costa Coffee for the ultimate Hot Chocolate. Z has worked with us about "moving on" and wants to support others in their journey she has been working on a BLOG which details her thoughts around moving on. She has enjoyed her journey although at times she has struggled massively with anxiety she has said that she has always felt supported. Z has agreed to work with senior support worker and Occupational Therapist on "moving on groups" in the future to come in and talk about her experiences. The next step for Z is to move on in to employment and build her confidence in this area, the courses she has accessed at Costa Coffee and her volunteering roles have introduced her back to a 'work environment' and the Occupational Therapist and Support Workers will continue to build on this and support Z to identify new opportunities as part of her 'work plan' and build on the new skills she has gained from the support she has received from the In-House Prover Service.

5.3 **Deprivation of Liberties Safeguards**

High numbers of applications for authorisations for Deprivations of Liberty (DoLS) continue to be received by the Council and each authorisation for a Deprivation will require at least one full reassessment in any 12 month period.

At the current rate the Council's DoLs team expects to receive in the region of 1,000 applications in 2016/17; some of those will be for reassessment, some will be new applications and some are referred on to the appropriate supervisory body (other Councils) where they are the funding body for that person's placement.

The purpose of an authorisation is to ensure that those who lack capacity to agree to their care and treatment and are not free to leave the placement (in that they would be brought back in their best interests should they leave) receive the care that is proportionate to their needs. The benefits of such a specific focus on the needs of such individuals are that they can be provided with care that is dignified and respectful and delivered in the least restrictive way according to each circumstance. To ensure that dignity and respect are embedded, staff at all levels in the majority of care homes and care homes with nursing across Blackpool have been encouraged to consider a particular approach to delivering safe care through taking a preventative approach. This has been supported by a wide-ranging programme of face to face training delivered free by the Council's Adult services Professional Leads team.

Feedback from staff and teams who have identified a change in their approach following the training can be seen from a selection of their comments as follows:

- I will take on board different methods of care to promote more dignity and free- will and will also learn from previous mistakes I have made unknowingly while caring for my service users.
- This training was very good and very informative and I have learnt a lot and feel more confident as a manager in our home re safeguarding and Dols.
- The training highlighted importance of a holistic approach to providing care and my responsibility to coach staff in the CQC Principles of care.
- Thank you so much for the training yesterday, the team haven't stopped saying how fantastic and enlightening it was.

5.4 Safeguarding Adults

In 2015/2016, 790 concerns were referred to Adult Social Care for safeguarding consideration; 400 of those were referred further through into the safeguarding enquiry process. Concerns that do not warrant a formal safeguarding enquiry process are dealt with in a number of other ways by (for example) Social Work intervention with the individual or their family or carer, by Social Workers and health colleagues working alongside the individual and the provider services to improve the quality of care required to an individual, or through contract monitoring processes.

In some cases, the numbers or level of concern regarding a particular care provider who appears not to be able to meet resident needs will generate a more complex multi-agency approach. This ensures that individuals are safe where those concerns or lack of care have triggered a pattern of safeguarding concerns.

There are cases however where some individuals who may have been resident in a care / nursing home for some time are often very reluctant to change even though they their care may have been inadequate to their needs thereby placing them at risk of harm. The task of a multi-disciplinary team is to assess their needs holistically, negotiate with the individual and family about a move, source information to enable to family to make informed choices and facilitate a positive change and ensure that the needs of those who remain with the provider are appropriately catered for. To achieve this, Adult Social Care staff work with their appropriate Heads of Service, the Council's contracts and commissioning team, the Director of Adult Services, the Care Quality Commission, the constabulary's Public Protection Unit, Fire and Rescue Services, North West Ambulance Services, District Nursing staff, the Clinical Commissioning group, individuals, families, the provider and others. This ensures a close partnership understanding to make sure that the lives of those people who may subject to inadequate care or harm is improved and that others are made safe. In a minority of cases the Council will cease trading with providers.

Examples of where reluctant individuals have moved successfully to meet their needs can be demonstrated by their own anonymised feedback reported by their Social Worker after the move:

- A says that she is very proud of her new room although she still presents as being a little disorientated as she finds her way around her new surroundings. Staff state she is settling well.
- B says that the food is much better than at X care home. He states that he can now have the choice of a cooked breakfast in a morning.
- C states that everything is "wonderful "and his only regret is "that we didn't move earlier ". His blood sugars are back to normal. All risk assessments and charts have been completed and are on file. (C and his wife moved homes together at the same time).
- D says that she is happy and settled. Her room is clean, bright and comfortable. D stated "I enjoy it better here than I was before. My room is lovely and I am doing well with my food." Falls risk assessment, MUST, nutrition and pressure area risk assessments all completed.
- E was very emotional about the quality of his new room.

5.5 **REGULATED SERVICES**

5.5.1 CQC Residential Care Inspection Outcomes Update

63 Residential and Nursing Providers have been inspected under the CQC's new methodology. There are 8 Providers who have yet to be inspected or who have been inspected and we are awaiting the CQC's report.

	Blackpool	Blackpool	National Total	National Total
	Residential	Residential	Residential	Residential
	Number	%	Number	%
Outstanding	3	4.76%	94	0.60%
Good	51	80.95%	8,806	56.37%
Requires			2 501	
Improvement	9	14.29%	3,501	22.41%
Inadequate	0	0.00%	3,222	20.62%
	63	100.00%	15,623	100.00%

National figures correct as at 02.08.2016 Blackpool figures correct as at 02.08.2016

Case Study – Home A – Sudden Onset Of Quality Concerns – As At 05.08.16

- Residential Home without nursing
- Registered for 24 adults
- Caring for adults over 65

5.6 <u>Extent of Concerns</u>

Home A is traditionally a service which, whilst never achieving excellence, has always provided a good level of care and has not been on the radar for either CQC or Blackpool Council. Several inspections have been carried out by CQC over the past few years with no issues being raised and very few concerns or safeguardings being raised through the Council.

- 5.7 The home was recently inspected by CQC who have raised concerns that the care was poor.
- 5.8 The home was inspected by CQC over two days. The first day was unannounced but the home was given some notice of the second visit.
- 5.9 The inspection found 8 breaches of regulations
 - Regulation 9 Person Centred Care care plans not being followed; daily records not being updated correctly.
 - Regulation 11 Consent residents rights not being protected; restrictions put in place without consent of appropriate person; Mental Capacity Act not understood or followed by manager or staff.
 - Regulation 12 Safe Care & Treatment 4 safeguardings raised following the inspection relating to possible neglect of residents. Medication is also an issue.
 - Regulation 13 Safeguarding internal systems not working to ensure residents safeguarded.
 - Regulation 17 Good Governance Care records poor; daily records didn't match care plans;
 - Regulation 18 Staffing levels & staff training sufficient staff appeared to be on duty at the time, but they were not deployed appropriately.

- Regulation 19 Recruitment references and/or DBS checks were not in place for staff.
- Notifications this is a registration regulation the home has not been notifying CQC of serious incidents.
- 5.10 CQC has confirmed that the home will be Inadequate in the areas of Safe, Effective and Well Led; Requires Improvement in Caring and Responsive and will be Inadequate overall and placed in special measures.
- 5.11 The CQC will be issuing a Notice of Proposal to cancel the registration of the manager and the provider and have advised them that, if they want to appeal, they both need to submit representation together. The provider will have 28 days to submit the representation.
- 5.12 CQC was intending to issue a Notice of Decision to suspend admissions; however they were out of their 28 day timescale between inspection and action. Following discussions with the provider, the home agreed to voluntary suspension of new admissions.
- 5.13 The CQC has met with the directors of the home and they have been made aware of the findings.
- 5.14 CQC has implemented a Schedule 3, which requires the provider to complete an up to date application and references for the directors and the manager. This covers their experience, qualifications and history.
- 5.15 CQC has also requested a renewal of the home's Statement of Purpose at present it does not say that they deal with people with dementia, although a lot of the residents do have a dementia diagnosis.
- 5.16 The CQC has advised that they will be reviewing all the homes that the directors are involved with.
- 5.17 <u>Action Taken</u> Risk Summit held and home formally suspended to new packages of care.
- 5.18 Attendees included:
 - Head of Contracts and Commissioning
 - CQC Inspection Manager
 - CQC Inspector

• Representatives from Blackpool CCG, District Nursing, Adults Social Care, Public Protection Unit

Action plan to be drawn up on receipt of draft CQC report.

Meeting arranged for Head of Adult Social Services and Head of Commissioning to meet with the Directors of the home to discuss concerns,

Fire Brigade to reinspect due to the concerns regarding lack of staff and ability of residents on the upper floors to escape in the event of an emergency.

Reviews of residents are being undertaken and those whose needs are not being met are being moved. Four residents moved to date with one more to be moved. Will leave 12 residents at the home.

5.19 <u>Risks</u>

The Home is part of a group which has had some historic cash flow issues. Reduction in income resulting from formal suspension may result in threat to viability of the group which has one other home in Blackpool. Contingency plans are being drawn up.

The Owner may decide to close home resulting in the need to move residents quickly. All residents needs have been reviewed.

5.20 CQC Care at Home Inspection Outcomes Update

The CQC has inspected 14 contracted Care at Home agencies under the new methodology. There are three Providers who have yet to be inspected or who have been inspected and we are awaiting the CQC's report.

	Blackpool	Blackpool	National Total	National Total
	Care at	Care at	Care at	Care at
	Home	Home	Home	Home
	Number	%	Number	%
Outstanding	0	0.00%	42	1.07%
Good	12	85.71%	3,013	77.10%
Requires				
Improvement	2	14.29%	792	20.27%
Inadequate	0	0.00%	61	1.56%
	14	100.00%	3,908	100.00%

National figures correct as at 02.08.2016 Blackpool figures correct as at 02.08.2016

5.21 Case Study – Provider B – Lifting Of Suspension – As At 05.08.16

- Homecare agency
- Caring for adults over 65 yrs
- Caring for children (0 18yrs)
- Dementia
- Mental health conditions
- Physical disabilities
- Sensory impairments

The latest CQC inspection report was published on 29/9/15. The service was inspected on 5 outcomes and the overall outcome was found to be 'GOOD'.

- Safe Good
- Effective Good
- Caring Good
- Responsive Good
- Well-led Good

Extent Of Concerns:

- Missed visits
- Staff arriving late
- Staff falling asleep on duty
- Lack of consistent staff
- Staff's understanding of safeguarding procedures
- Report writing
- Service users missing appointments
- Medication processes / errors
- Standards of care and support
- Staff not following guidance from CLDT
- Investigation / Disciplinary processes
- Staff training levels
- Failing organisational leadership and accountability structures
- High levels of safeguarding activity

Action:

- Suspension to new care packages
- Action Plan

- Weekly meetings with provider
- Support to develop policy and procedure
- Support to implement significant management and operational change within the organisation

Provider Response:

- The director took on board performance concerns
- The provider cooperated well with the action planning and improvements
- Provider developed a clearer understanding of the quality and standards of support that were actually being provided overall and the reality of what this looked like.
- The provider set up weekly task force meetings to target efforts at improvement work.
- The provider opened up communications within the organisation around issues / concerns / compliments / complaints, and learning from them.
- The provider invested additional resources in staff training

Outcome

- Service users are reporting fewer missed and late visits and on the occasions that there are problems service users are happier with the way that the service responds.
- Service users are reporting fewer complaints about the quality of service because provider staff are clearer about what is expected of them.
- Because the service is better it is safer for service users and less safeguarding activity is being generated.
- Service users' relationships with the provider have improved because the service to them is better.
- The providers' relationship with the Council has improved because there is better understanding about expectations.

Does the information submitted include any exempt information?

No

List of Appendices:

None.

6.0 Legal considerations:

6.1 None.

- 7.0 Human Resources considerations:
- 7.1 None.
- 8.0 Equalities considerations:
- 8.1 None.
- 9.0 Financial considerations:
- 9.1 None.
- 10.0 Risk management considerations:
- 10.1 None.
- **11.0** Ethical considerations:
- 11.1 None.
- **12.0** Internal/ External Consultation undertaken:
- 12.1 None.
- **13.0** Background papers:
- 13.1 None.

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