

Meeting: Audit Committee
Date: 23 October 2024
Classification: Part 1
Key Decision: No
Title of Report: Annual Report – Comments, Complaints and Compliments
– 2023/24

Executive Director: Claire Shuter, Executive Director Strategy and Change
Report Author: Val Smith, Customer Service Manager, Information
Governance, Complaints and Resolution
Executive Councillor: Councillor Daniel Cowan

1. Executive Summary

1.1. This report is to:

- Provide performance information about general comments, complaints and compliments received across the Council for 2023/24.
- Provide an annual report concerning compliments, concerns and complaints received about the Council's Children and Adults' social care functions.
- Report to councillors on the findings of certain Local Government and Social Care Ombudsman investigations.
- Provide assurance that the above complaints systems are effective.

2. Recommendations

2.1 It is recommended that the Committee:

- a. Note that the Council has the necessary structures in place to manage complaints received through the General and Children's and Adult Social Care statutory complaint processes.
- b. Note that the Council has the necessary structures in place to manage comments, compliments and concerns received.
- c. Note the contents of the annual letter of the Local Government and Social Care Ombudsman.
- d. Note the summary of complaints upheld by the Ombudsman following their investigation.
- e. Note the change to a two stage General complaints process from 1 September 2024 and the associated timescales for response.
- f. Note the preparations which are being made for full compliance by April 2026 with the Ombudsman's Complaint Handling Code.

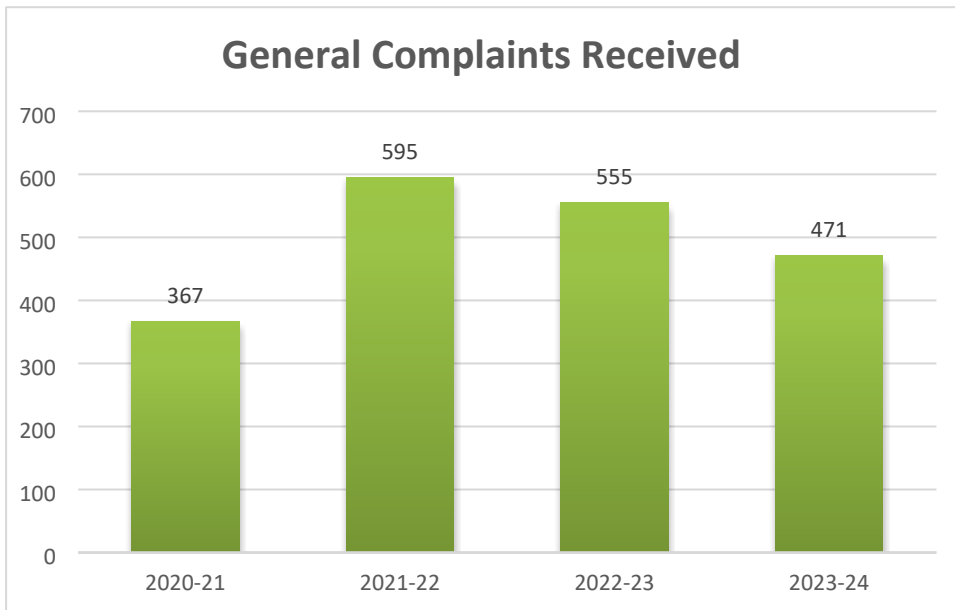
3. Background

- 3.1 Southend-on-Sea City Council is responsible for over 500 services and has a population of over 180,000 residents in around 85,000 households. There is rising demand for social care services for adults, children and the most vulnerable and many residents face cost-of-living issues.
- 3.2 When things go wrong, it is important that the Council has effective procedures for considering complaints and a positive complaints culture which:
- Promotes a positive relationship between the Council and service users,
 - Allows an issue to be resolved before it becomes worse,
 - Learns from complaints, resolving individual complaints and using data from complaints to drive improvement.
- 3.3 It is also important to understand where things are going well and the Council records compliments concerning its services, relating both to individual officers and services.
- 3.4 This report provides assurance in relation to four separate but associated processes:
- General Comments, Complaints and Compliments
 - Children’s Statutory Complaints
 - Adult Statutory Complaints
 - Local Government and Social Care Ombudsman (LGSCO) complaints.

4. General Complaints Process

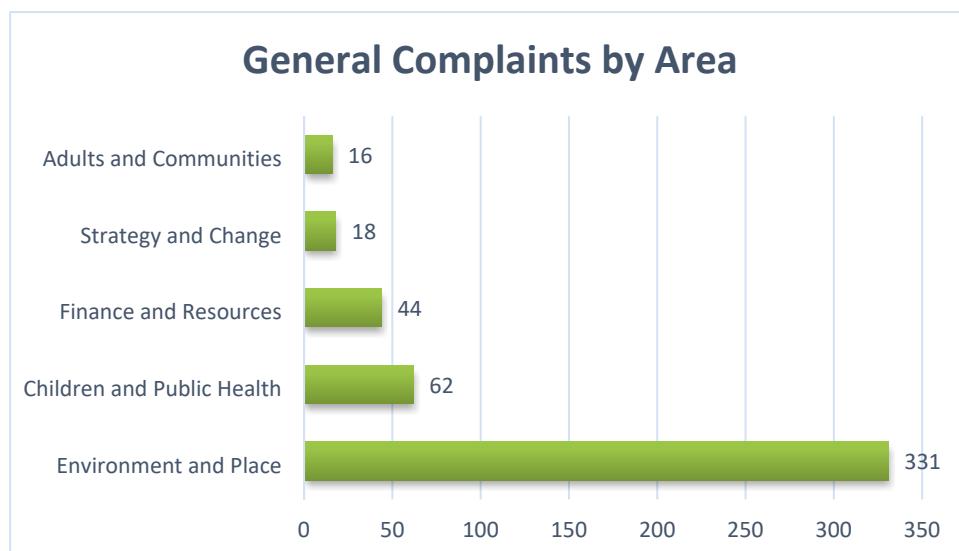
- 4.1 Complaints which do not have a specialist process are considered under the General Comments, Complaints and Compliments procedures (sometimes referred to as corporate complaints). For the period covered by this report there were three stages to the process.
- 4.2 471 complaints were received through the General complaint process in 2023/24 continuing the trend in reduction of complaints towards the levels received before the pandemic.

This Graph shows the number of complaints received and a comparison with the previous three years.



- 4.3 492 complaints were resolved in 2023/24. Of these 61% were responded to in time. In the final quarter of the year there was a concerted effort to resolve overdue complaints. This meant that complaints were resolved which had been received earlier than 2023/24. Although this had to be done it also had a short term impact as it suppressed in year performance. Performance in 2024/25 is improving, and current in-month performance (August 2024) is 88%.
- 4.4 Of those complaints resolved, 47% were upheld. Where a complaint was upheld, the most common response was a meaningful apology (47%) or an offer of a service or solution to put things right (37%).
- 4.5 The most common reason for making a complaint (80%) was that a poor level of service had been provided or a procedure had not been followed correctly. 56% of such complaints were upheld. In 11% of complaints, staff were said by the person complaining to have been rude or unhelpful, 67% of these complaints were upheld.
- 4.6 These figures indicate that the Council has the correct policies, procedures, and standards in place, but they are not always followed. When this happens the Council has a culture where mistakes are openly acknowledged, and action is taken to put things right.
- 4.7 Of the complaints received and responded to in 2023-24 through the General complaint process, 78% were resolved at stage 1, 16% at stage 2 and 6% at stage 3.
- 4.8 The complaints received through the General complaint process in 2023-24 related to the service areas shown in the table below. The number for Environment and Place, while a reduction from 350 in the previous year, is noticeably higher than that of other services. This is usual because of the

universal services they provide (for example waste collections) which regularly involve large numbers of residents. Another factor is that other services have statutory complaint, appeal and review processes which take areas of their work outside of the general complaints arena.



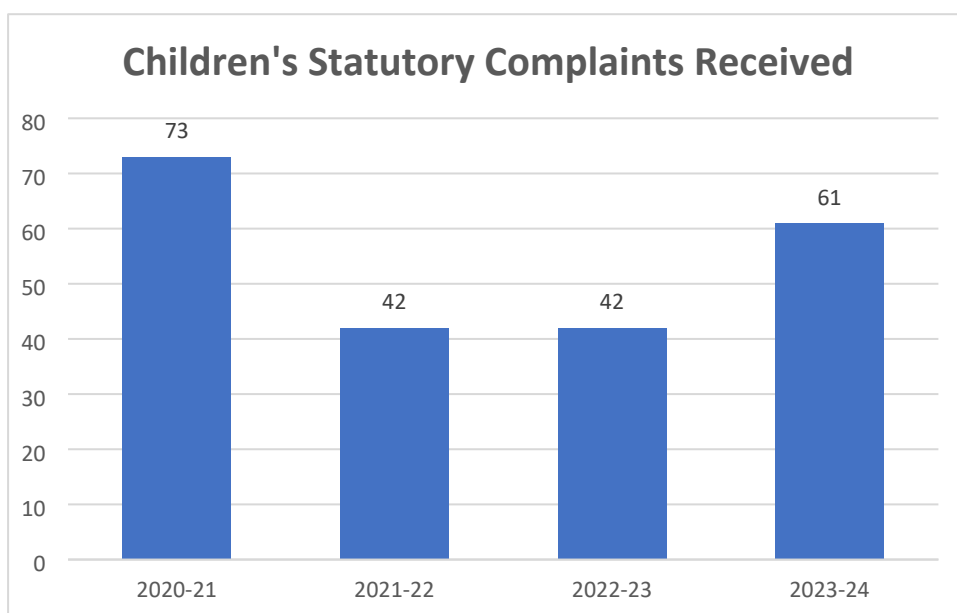
- 4.9 The Local Government and Social Care Ombudsman has issued a Complaint Handling Code with which all Local Authorities must comply by April 2026.
- 4.10 To allow Councils time to adapt to the requirements of the new Code, the Ombudsman will not use it as an enforceable standard in their investigations before April 2026. Councils are however encouraged to align their processes with the Code as soon as can practicably be achieved, and no later than 31 March 2026.
- 4.11 The new Code requires a two stage complaints process. As an interim measure and a first step towards Code compliance, the third stage of the Council's General Complaint process has been abolished, effective from 1 September 2024.
- 4.12 The revised two stage process has kept the previous response time standards (15 working days for Stage 1 complaints and 20 for Stage 2) but now includes an option for extension to response times in complex cases. This more closely aligns with the requirements of the new Code. Further adjustments will be made prior to April 2026 to ensure processes and timescales fully comply with the new Code.
- 4.13 At stage 1 of the revised process the complaint will usually be investigated by a team or service manager. If the complainant remains dissatisfied, at stage 2 of the process the complaint will usually be investigated by a Head of Service or Director. At both stages, the response should be agreed with the responding officer's manager prior to despatch.

- 4.14 The stage 2 response will be the final position of the Council and must be a reconsideration of the Stage 1 response, not simply a repetition. The person considering the complaint at stage 2 should not be the same person that considered the complaint at stage 1.
- 4.15 A programme of work is underway to prepare for further alignment with all aspects of the Code. These include:
- Training for staff who regularly respond to complaints, delivered by the Ombudsman’s service (delivery September and October 2024).
 - The formation of a representative group of staff to work as a Community of Practice, exploring how the Code is best implemented in practice.
 - The identification and allocation of roles and responsibilities prescribed by the Code.
- 4.16 The Ombudsman is working with a group of twenty councils to trial the implementation of the Code. Further guidance and best practice will be developed through this pilot and the Council’s complaint process will need to flex to take these into account.
- 4.17 The Code will require an annual report concerning complaint performance to be published. The format, once prescribed, is likely to alter the nature of this report going forward.

5. Children’s Statutory Social Care Complaints Process

- 5.1 The Children’s Act 1989 provides the statutory basis for a three stage complaint process. Complaints about children’s services which do not fall under the Act, follow the General complaints process instead.
- 5.2 61 complaints were received through the Children’s Social Care complaint process in 2023/24. The number of complaints received is returning to the levels seen before the pandemic.

This Graph shows the number of complaints received and a comparison with the previous three years.



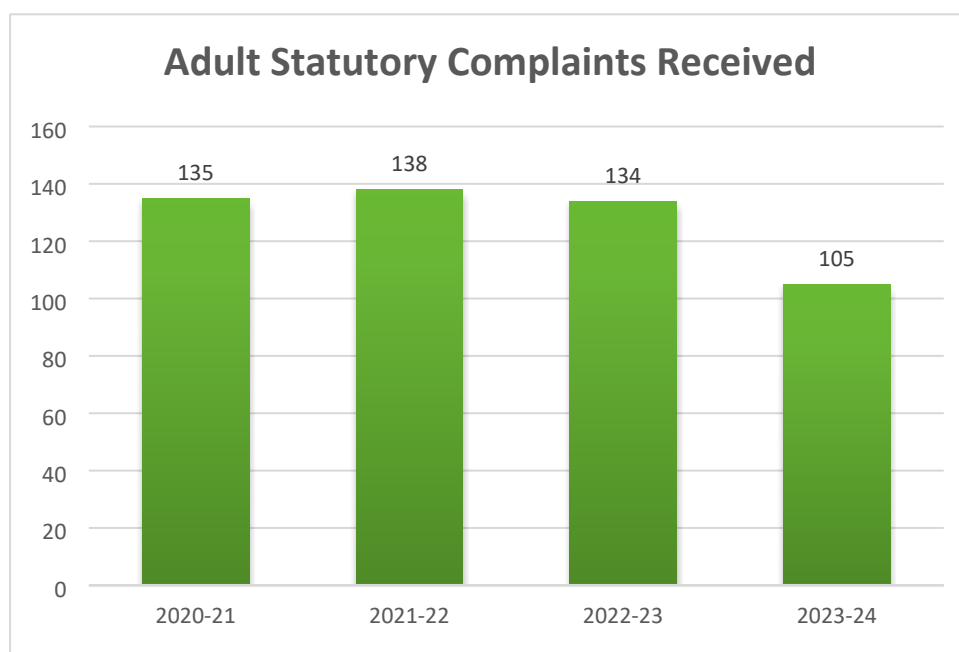
- 5.3 61 complaints were resolved through stage 1 of the process. These should be responded to within ten days, or twenty days for more complex complaints. 34% were responded to in ten days and 56% within 20 days. Throughout the year services have reported that they have found it difficult to prioritise the handling of complaints against the other demands on their time.
- 5.4 Five complaints went to Stage 2 of the process. 60% were completed within timescale. No complaints received in 2023/24 were escalated to Stage 3 (although one from the previous year was heard).
- 5.5 Of the complaints resolved, 33% were fully or partially upheld. The top three issues raised, making up 46% of complaints, were:
- Conduct or behaviour of an officer.
 - Lack of professionalism.
 - Insufficient support.
- 5.6 The root cause of a complaint is often a perception that the support provided is not sufficient or timely and officers are slow at decision making. Some complainants feel our staff can be unprofessional and do not follow our own processes and procedures and the decisions made can be confusing, biased, or arbitrary.
- 5.7 The majority of complaints are made by a parent or parental figure. A total of eleven complaints were received directly from children or young people. Two of these were received directly from a child (defined as those under 18 years of age) and nine were received from care-leavers in the 18 to 24 age range. Two of these young people were assisted by an advocate.
- 5.8 During 2024 the level of performance reporting to Children's Services concerning complaints in their area has increased with weekly reporting to senior managers and those handling complaints now taking place. The manager of the Complaints Support service regularly attends Children's Services management meetings to discuss complaints performance. Although

the Ombudsman’s new Complaint Handling Code does not apply to statutory complaints, the principles it advocates are universal. Learning from the proposed Community of Practice (see paragraph 4.13 above) will therefore also be applied to this type of complaint, as will the complaint handling training being delivered by the Ombudsman service.

6. Adult Statutory Social Care Complaints Process

- 6.1 The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 provides the statutory basis for a single stage complaint process for Adult Social Care. Where complaints about adult social services do not fall under the Act, the General complaints process is followed instead.
- 6.2 Complaints concerning external providers of social care for adults (such as residential care homes or care provided at home) which are raised directly with them are not recorded by the Council.
- 6.3 105 complaints were received through the statutory Adult Social Care complaint process in 2023/24. Two complaints were then instead investigated through the Safeguarding process. The number of complaints received has reduced when compared to previous years.

This Graph shows the number of complaints received and a comparison with the previous three years.



- 6.4 Adherence to response times is measured by compliance with the agreed dates set out in the individual complaint plans. The agreed date is generally set at 15 working days to align with the General complaints process. Out of the 103 complaints responded to, 48 complaints (47%) were responded to within 15 days.

6.5 Of the complaints resolved:

- 50% of complaints regarding services provided by Domiciliary Care providers were fully or partially upheld.
- 100 % of complaints regarding services provided by Residential Care providers were upheld (1 complaint).

Internal Council Services

6.6 There were 70 complaints regarding internal Council services, three of which were withdrawn. Of the remaining 67 complaints, 54% received a response within 15 working days.

6.7 The top three issues raised were:

- Care charges not properly explained.
- The quality of service provided.
- Insufficient level of support being provided.

6.8 55% of complaints regarding internal Council services were fully or partially upheld.

Domiciliary Care Services

6.9 There were 33 complaints regarding Domiciliary Care services. 39% received a response within 15 working days.

6.10 The top three issues raised were:

- The timing of calls
- Financial loss.
- The quality of service.

6.11 64% of complaints regarding Domiciliary Care services were fully or partially upheld.

Residential Care Services

6.12 There were two complaints regarding Residential Care homes. One concerned the attitude of staff and was not upheld; the other concerned the quality of service and was upheld in part. Neither complaint was responded to within 15 working days.

6.13 The Council's Contracts, Quality and Complaints Teams continue to work with residential and domiciliary care providers to address issues and effect improvements in complaints handling.

6.14 During 2024 the level of performance reporting to Adult Services concerning complaints in their area has increased with weekly reporting to senior managers and those handling complaints now taking place. The manager of the Complaints Support service has been working with the Head of Practice

Governance in Adult Services to better extract learning from adult social care complaints.

- 6.15 Although the Ombudsman's new Complaint Handling Code does not apply to statutory complaints, the principles it advocates are universal. Learning from the proposed Community of Practice (see paragraph 4.13 above) will therefore also be applied to this type of complaint, as will the complaint handling training being delivered by the Ombudsman service.

7. Compliments, Concerns and Comments

- 7.1 In 2023-24, there were 257 compliments recorded (112 through the general process, 31 through the Adult and 114 through the Children's social care process).
- 7.2 Unlike complaints, compliments do not need a specific response, and so there is a possibility that compliments are under-recorded as they may have been made verbally or in an email and not then passed on to be formally recorded and reported.
- 7.3 In 2023/2024 compliments have been recorded from diverse sources, such as directly from social care users or their families, from residents using universal services, from staff of partner organisations and from visitors to the city.
- 7.4 The attributes frequently mentioned when complimenting individual officers are professional; taking time to listen; caring; helpful; friendly, compassionate, and cheerful.
- 7.5 There is appreciation of the beauty of the city's open spaces and the Council's upkeep of them. Some feedback, particularly in the field of social care, is heartfelt and describes life changing positive interventions by officers.
- 7.6 Compliments such as these are direct feedback from the people we serve. They are both inspiring for individual staff and provide an insight from an independent perspective into what good customer service looks like.
- 7.7 Regulations require the local authority to record Adult social care 'concerns' however Adult and Community Services received no feedback to be logged as a 'comment' or 'concern' about its social care services in 2023/2024.
- 7.8 Some people wish to provide feedback to help improve services, but they do not wish to make a formal complaint, and the Council's Comments process facilitates that.

8. Monitoring and reporting

- 8.1 Performance monitoring concerning complaints has been substantially increased in 2024. Performance and overdue complaint data is reported monthly to Corporate Leadership Team. Performance is reported as a key indicator quarterly in the Corporate Performance Report to Cabinet.

Outstanding complaints are monitored by the Complaint Support service and reports are provided weekly to Executive Directors and complaint handlers. Complaints are monitored by the Complaints Manager for any trends/emerging themes.

9. Local Government and Social Care Ombudsman

9.1 This section constitutes the report of the Monitoring Officer concerning complaints to the Local Government and Social Care Ombudsman (the Ombudsman) throughout the year and fulfils the Monitoring Officer's reporting duty under section 5(2) of the Local Government and Housing Act 1989 and the Local Government Act 1974.

9.2 The Monitoring Officer must provide councillors with a summary of the findings on all complaints relating to the Council where in 2023/24 the Ombudsman has investigated and upheld a complaint.

9.3 The Ombudsman investigates complaints about 'maladministration' and 'service failure', generally referred to as 'fault'. They consider whether any fault has had an adverse impact on the person making the complaint, referred to as an 'injustice'. Where there has been a fault which has caused an injustice, the Ombudsman may suggest a remedy.

9.4 The Council works with the Ombudsman to resolve complaints made to them. Most complaints are resolved without detailed investigation.

9.5 The Ombudsman writes a letter to the Council each year providing commentary and statistics concerning the matters raised with them over the previous year. The statistics are focused on three key areas:

Complaints upheld – The Ombudsman upholds complaints when they find some form of fault in an authority's actions, including where the authority accepted fault before they investigated. This year, the Ombudsman has also provided the number of upheld complaints per 100,000 population.

Compliance with recommendations – The Ombudsman recommends ways for authorities to put things right when faults have caused injustice and monitor their compliance with the recommendations. Failure to comply is rare and a compliance rate below 100% is a cause for concern.

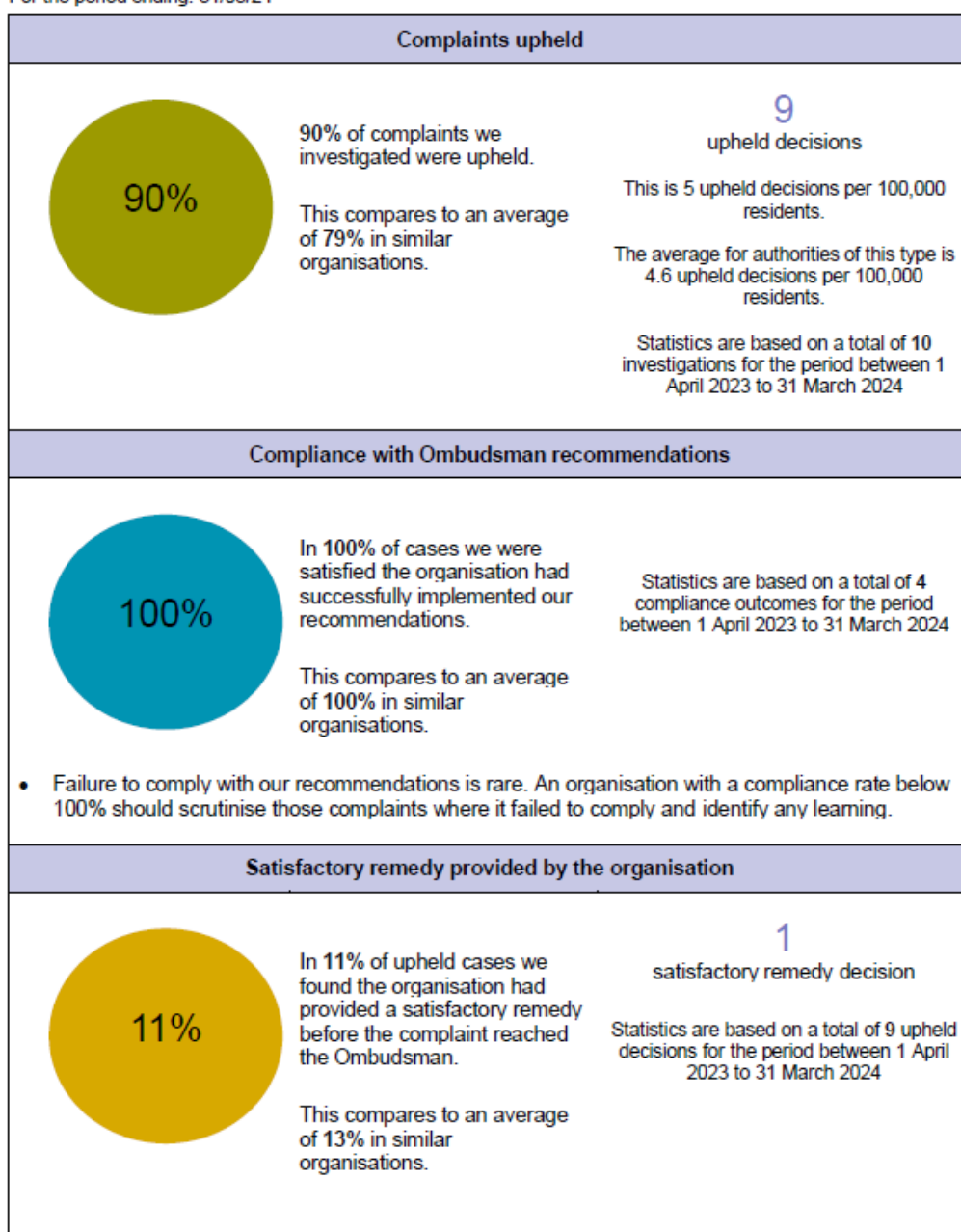
Satisfactory remedy provided by the authority - In these cases, the authority upheld the complaint, and the Ombudsman agreed with how it offered to put things right.

9.6 In their letter, the Ombudsman has expressed concern that in two instances in the reporting period, agreed recommendations were not complied within the agreed timescales. The Ombudsman reminds us that they should be kept

informed when there are delays and the Council should identify at the draft decision stage whether the timescales proposed are feasible. The Ombudsman also notes that during the year they had cause to raise concerns about failures to respond on time to investigation enquiries and draft decisions. The Ombudsman is pleased to note in their letter that in response, the Council took immediate action, and a significant improvement has been seen.

9.7 Statistics from the annual review letter of the Ombudsman are as follows (full details and the Ombudsman’s annual letter are available on the [LGSCO website](#)).

Southend-on-Sea City Council
For the period ending: 31/03/24



9.8 In 2023/24, 61 approaches were made to the Ombudsman in respect of Southend-on-Sea City Council.

9.9 56 decisions were made by the Ombudsman, as follows:

Advice given	2
Closed after initial enquiries	23
Incomplete/invalid complaint	3
Referred back for local resolution	18
Not upheld	1
Upheld	9
Number of decisions made	56

9.10 The Ombudsman concluded 10 detailed investigations in respect of Southend-on-Sea City Council in the period between 1 April 2023 and 31 March 2024 with 9 complaints being upheld. The percentage rate upheld is high because only cases where there is a higher likelihood of fault are referred for investigation. The number of complaints requiring investigation by the Ombudsman is comparable with previous years.

Year	21/22	22/23	23/24
Number of detailed investigations	8	7	10
Number of detailed investigations upheld	7	6	9
Upheld rate	88%	86%	90%

9.11 The following is a summary of the 9 upheld Ombudsman Investigations:

9.11.1 Benefits and Tax (1 investigation):

The complainant was liable for business rates from June 2019 to March 2021, but the Council delayed and did not send a bill until November 2021. There was fault by the Council in failing to contact the complainant directly after receiving his contact details but there was no evidence the complainant ever

contacted the Council himself and so the injustice claimed was not as a direct result of the Council's fault. No remedial action was required.

9.11.2 Education and Children's Services (4 Investigations):

The Council did not issue a final Education, Health and Care Plan within the timescales required by a Tribunal's order. This caused avoidable frustration and uncertainty. To remedy the fault found, the Council agreed to apologise, make symbolic payments, fund a specialist advocate, arrange, and take part in mediation and issue an amended final plan.

The Council was at fault for delaying consideration of a complaint at stage two of the children's statutory complaints procedure. To remedy the fault the Council agreed to start a stage two investigation by allocating the complaint to an Independent Investigator within a month of the date of the Ombudsman's decision.

A complaint was made about how the Council safeguarded the complainant's great-grandchild and about its role in their care. He also complained about how the Council responded to his children's statutory complaint. The Council was at fault for delay at stage two and three of the statutory complaint procedure. The delay caused the complainant avoidable frustration, for which the Council agreed to make a symbolic payment. The Council also agreed to complete stage three of the statutory complaint procedure.

A complaint was made to the Ombudsman concerning failure to complete Stage 2 of the statutory children's complaint procedure within the prescribed timescale. The Ombudsman upheld the complaint and to remedy the fault the Council agreed to complete a Children Act statutory complaints procedure stage 2 investigation with 65 working days of the Ombudsman's final decision.

9.11.3 Housing (4 Investigations):

A complaint was made that the Council failed to assist the complainant when she reported domestic abuse. The Council was at fault for not considering if the complainant should be considered as homeless in February 2019, March 2022, and August 2022. As a result, she remained in a property where she was at risk of domestic abuse until early July 2023. To remedy the fault the Council agreed to apologise and make a symbolic payment to remedy the injustice caused. The Ombudsman noted that the Council had already made changes to its processes to prevent such a fault reoccurring.

A complaint was made about the way the Council dealt with the complainant's homelessness application, eviction from a hostel and allocated banding priority to his housing application. The Ombudsman did not investigate the complainant's concerns about his eviction from the hostel and decision he was intentionally homeless because he could have appealed to the courts

about the decision. The Ombudsman found no evidence of fault in the way the Council considered and allocated the complainant's banding priority. Fault was however found because the Council delayed carrying out a review of the complainant's housing banding causing uncertainty. However, the injustice caused to the complainant had already been remedied as he had been able to bid at a higher priority for 20 months (while the review was delayed).

A complaint was made about the Council's actions when the complainant became homeless. The Council failed to properly consider whether it owed the complainant a relief duty sooner and placed the complainant and her child in unsuitable emergency accommodation. The Council did not consider the complainant's request to review its decision of temporary accommodation. It also offered her two properties which were unsuitable for her health needs and too far from her child's school. These faults caused the complainant distress, frustration, uncertainty, and financial loss. To remedy the fault, the Council agreed to apologise to the complainant, offer her a symbolic payment, reimburse her with costs resulting from the Council's faults and review the suitability of her temporary accommodation. The Council also agreed to make service improvements to prevent a recurrence of fault.

A complaint was made that the Council had unreasonably refused to provide interim accommodation to relieve the complainant's homelessness. The Ombudsman found there was some fault in the process the Council followed on receiving a referral from another local authority. This did not cause the complainant an injustice as the Council has since followed the correct process and the outcome remained the same. No remedial action was required.

9.12 The following is a summary of the 1 Ombudsman Investigation which was not upheld:

9.12.1 Planning and Development:

A complaint was made that the Council had failed to properly investigate or take appropriate action in relation to breaches of planning control at a site next to his home. Activity at the site was disturbing the complainant's sleep and affecting his health and wellbeing. The Ombudsman decided there was no evidence of fault in the way the Council had investigated the complainant's reports of breaches of planning control or in its decision not to take formal enforcement action.

10. Conclusion

10.1 The processes continue to deliver a professional response to individual complaints and robust complaint monitoring. However, compliance with timescales in all types and stages of complaints requires improvement.

10.2 The Council is co-operating fully with the Ombudsman and successfully collaborating with them to identify the appropriate resolution for complaints made. Compliance with the Ombudsman's timescales declined during 2023/24 but has since recovered.

10.3 The Council has plans in place to meet the requirements of the Ombudsman's Complaint Handling Code in time for its enforcement from April 2026.

11. Reasons for Decisions

To ensure the Council continues to have transparent, effective, and compliant procedures for complaints.

12. Other Options

None. Reporting of general complaint performance is required by the Local Government and Social Care Ombudsman as demonstration of good practice. Reporting concerning social care complaints and Ombudsman decisions is required by law.

13. Financial Implications

A robust complaint process with thorough investigation and a positive approach reduces the likelihood of financial remedies being recommended by the Ombudsman.

14. Legal Implications

These reports ensure compliance with legislation requires that statutory processes be in place to deal with complaints relating to child and adult social care and to produce annual reports concerning them. These reports also need to be shared with the Care Quality Commission and the Department of Health.

The report of the Monitoring Officer ensures section 5/5A of the Local Government and Housing Act 1989 (which requires the Monitoring Officer is required to prepare a formal report on all upheld Ombudsman complaint decisions) is met.

The Advocacy Services and Representations Procedure (Children) (Amendment) Regulations 2004 confer a duty on local authorities to provide information about advocacy services and offer help to obtain an advocate to a child or young person wishing to make a complaint. This requirement is met by the process.

15. Policy Context

None

16. Carbon Impact

None

17. Equalities

The complaints processes are open to all and have multiple methods of access for customers. Adjustments to the processes are made for those who require it because of a protected characteristic.

Although most commonly the processes are accessed through e-mail and on-line forms, traditional methods such as post are available and where necessary a complaint can be transcribed over the telephone or be made in person.

This supports those who might otherwise be inhibited from using the process, perhaps through vulnerability.

18. Consultation

None recently.

19. Appendices

None

20. Report Authorisation

This report has been approved for publication by:		
	Name:	Date:
S151 Officer	Joe Chesterton	10.10.24
Monitoring Officer	Susan Zeiss	10.10.24
Executive Director(s)	Claire Shuter	10.10.24
Relevant Cabinet Member(s)	Cllr Cowan	11.10.24