

# Public Document Pack

## Southend-on-Sea Borough Council

### Legal & Democratic Services

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04 October 2019

Dear Councillor

### **POLICY AND RESOURCES SCRUTINY COMMITTEE - THURSDAY, 10TH OCTOBER, 2019**

Please be advised that the following report will be considered at the Policy and Resources Scrutiny Committee on Thursday, 10th October, 2019:-

#### **Agenda No    Item**

#### **11.    Annual Comments, Compliments and Complaints (Pages 1 - 30)**

Minute 337 of Cabinet held 17<sup>th</sup> September 2019 (Cabinet Book 3 Agenda Item No. 28 refers)

Referred direct to all three Scrutiny Committees (save that appendices B and C to the report be referred only to People Scrutiny Committee)

An updated agenda will be available at the meeting.

Fiona Abbott  
Principal Democratic Services Officer



# Southend-on-Sea Borough Council

**Report of Chief Executive  
to  
Cabinet  
On  
17 September 2019**

Report prepared by:

Val Smith – Knowledge and Information Manager  
Charlotte McCulloch – Customer Service & Complaints  
Manager (Appendix B)  
Michael Barrett – Complaints Officer (Appendix C)

Cabinet Member (overarching) - Cllr Terry  
Cabinet Member Appendix B Report – Cllr Harp  
Cabinet Member Appendix C Report – Cllr Jones

Agenda  
Item No.

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## **Annual Report – Comments, Complaints and Compliments – 2018/19 All Scrutiny Committees**

A Part 1 Public Agenda Item

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### **1. Purpose of Report**

#### **1.1 This report is to:**

- Provide performance information about comments, complaints and compliments received across the Council for 2018/19
- Fulfil the Council's statutory duty to produce an annual report concerning compliments and complaints received about its Children and Adult social care functions.
- Fulfil the duty of the Monitoring Officer to report to councillors on the findings of certain Local Government and Social Care Ombudsman investigations

### **2. Recommendations**

- 2.1. To note the Council's performance in respect of comments, complaints and compliments for 2019/19. To refer the report to all Scrutiny Committees (Appendix B and C to the People Scrutiny Committee only).

- 2.2 That authority is given for necessary changes to be made to the Comments, Compliments and Complaints policy for the reasons described in paragraph 5.2.

### 3. Background

- 3.1. It is good practice for the Cabinet to receive an annual report on Corporate Comments, Complaints and Compliments; this report is attached at **Appendix A**.
- 3.2. Legislation requires that statutory processes are in place to deal with complaints relating to children and adults 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. These reports are provided as **Appendices B and C** to this report.
- 3.3. Under section 5(2) of the Local Government and Housing Act and the Local Government Act 1974, the Monitoring Officer is required to report a summary of the findings of the Local Government and Social Care Ombudsman with regard to cases considered by them which relate to the Council. This report is provided at **Appendix D**.
- 3.4. The table below sets out the total number of Comments. Compliments and Complaints (Corporate and Statutory) processed in 2018/19 in comparison with the previous three years.

Type	2015/16	2016/17	2017/18	2018/19
Complaints (including Statutory)	722	866	681	<b>603</b>
Comments and Compliments	2426	2441	2230	<b>2138</b>
<b>Grand Total</b>	<b>3148</b>	<b>3307</b>	<b>2911</b>	<b>2741</b>

There has been no substantial change in the levels of feedback received. Analysis of the data gathered is included in the reports at Appendix A to C.

### 4. Lessons Learnt and Service Improvements

- 4.1 Whilst responding to feedback in a timely manner is a priority, it is also important for Council services to reflect on lessons learnt and improving outcomes. This is recognised by the Local Government Ombudsman's principles of good complaints handling by being customer focused, putting things right and seeking continuous improvement.

Examples of service improvements are contained within the individual reports at Appendix A to D.

## **5. Future developments**

- 5.1 To support the Corporate Complaints process, there is a need to provide greater advice and training for staff in how to respond to complaints. This will start to be delivered in 2019/20, incorporating Local Government Ombudsman best practice.
- 5.2 The proposed reconfiguration of the organisational structure will require a review of the appropriate level at which responsibility for Stage 1, 2 and 3 responses within the corporate complaints process should be placed. As can be seen in the Appendix A report, meeting the current timescales for response is proving a challenge and this will be examined in the review.

## **6. Other Options**

The Council is required by legislation to report regarding social care statutory complaints and Local Government and Social Care Ombudsman complaint outcomes. Reporting on the efficacy of a complaint processes is best practice. While the content of the reports is not prescribed, reporting itself is obligatory.

## **7. Reason for Recommendation**

To ensure the Council continues to have transparent and effective complaint procedures and utilises feedback from customers to good effect.

## **7. Corporate Implications**

### **7.1 Contribution to Southend 2050 Road Map**

Feedback both positive and negative is a direct source of information about how services provided by the Council are being experienced in practice. It also provides information about the type of services the Council's customers would like to have.

This insight may relate to any of the themes and outcomes of the Southend 2050 road map.

### **7.2 Financial Implications**

Service improvements continue to result in meaningful outcomes for customers. A robust complaint process with thorough investigation and a positive approach reduces the likelihood of financial penalties from the LGSCO.

### **7.3 Legal Implications**

These reports ensure compliance with statutory complaints processes and reporting obligations.

#### 7.4 People Implications

Effective complaint handling is resource intensive but benefits the organisation by identifying and informing service improvements and managing the process for customers who are dissatisfied.

#### 7.5 Property Implications

None specific

#### 7.6 Consultation

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. All children and young people wishing to make a complaint are offered the services of an advocate.

#### 7.7 Equalities and Diversity Implications

The complaints process is open to all and has multiple methods of access for customers. Equality and diversity implications are a routine part of the process in recording customer details and are considered as part of any response.

Although most commonly the process is 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 persons who might otherwise be inhibited from using the process, perhaps through vulnerability.

Reasonable adjustments to the standard process are made where required.

#### 7.8 Risk Assessment

Personal data regarding comments, compliments and complaints are recorded in an approved centralised system which can only be accessed by nominated officers.

#### 7.9 Value for Money

Resolving a complaint as early as possible in the process reduces officer time spent dealing with concerns as well as providing the opportunity to improve service delivery.

#### 7.10 Community Safety Implications

None specific

7.11 Environmental Implications

None specific

**8. Background Papers - None**

**9. Appendices**

**Appendix A** - Corporate Comments, Complaints and Compliments

**Appendix B** - Compliments, Concerns and Complaints – Adult Social Care

**Appendix C** - Compliments and Complaints – Children’s Social Care

**Appendix D** – Monitoring Officer report of LGSO Investigations

# Corporate Comments, Complaints and Compliments

## 1. Purpose of Report

- 1.1 To report on the performance relating to the Corporate Comments, Complaints and Compliments procedure and to provide comparisons with previously reported results.

## 2.0 Recommendations

- 2.1 To note performance relating to the Corporate Comments, Complaints and Compliments process between 1<sup>st</sup> April 2018 and 31<sup>st</sup> March 2019.
- 2.2 To endorse in principle that the process be revised to:
- Allow for the proposed reconfiguration of the organisational structure of the Council
  - Deliver responses within achievable timescales, in line with LGSO best practice.

## 3. Background

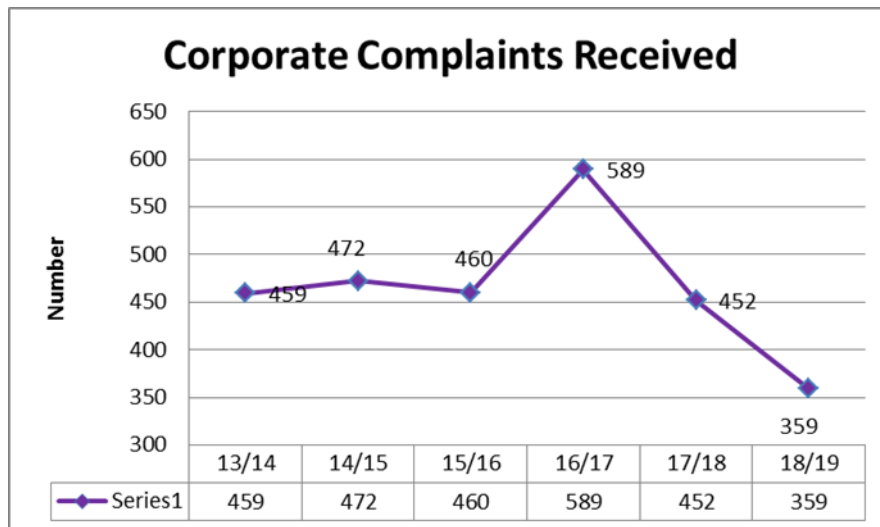
- 3.1 The Council's Corporate Comments, Complaints and Compliments procedure deals with all general feedback about the Council. It has been in place since 2009 and is well established throughout the organisation.
- 3.2 There are certain functions which are outside the corporate procedure because they have their own process. Examples include children and adult social care statutory complaints (see report at Appendix B and C), appeals against parking fines and concerns about schools.
- 3.3 An effective complaint system delivers:
- Early warning of things going wrong
  - Root cause analysis which finds out what is causing a problem and does something about it
  - Fair outcomes for individuals who complain
  - Individual outcomes which are applied to the wider customer base
  - Continuous improvement of products/processes and people skills
  - Appropriate remedies where things have gone wrong.

The following information demonstrates how the corporate complaints process is meeting these objectives.



## 4. PERFORMANCE TO DATE

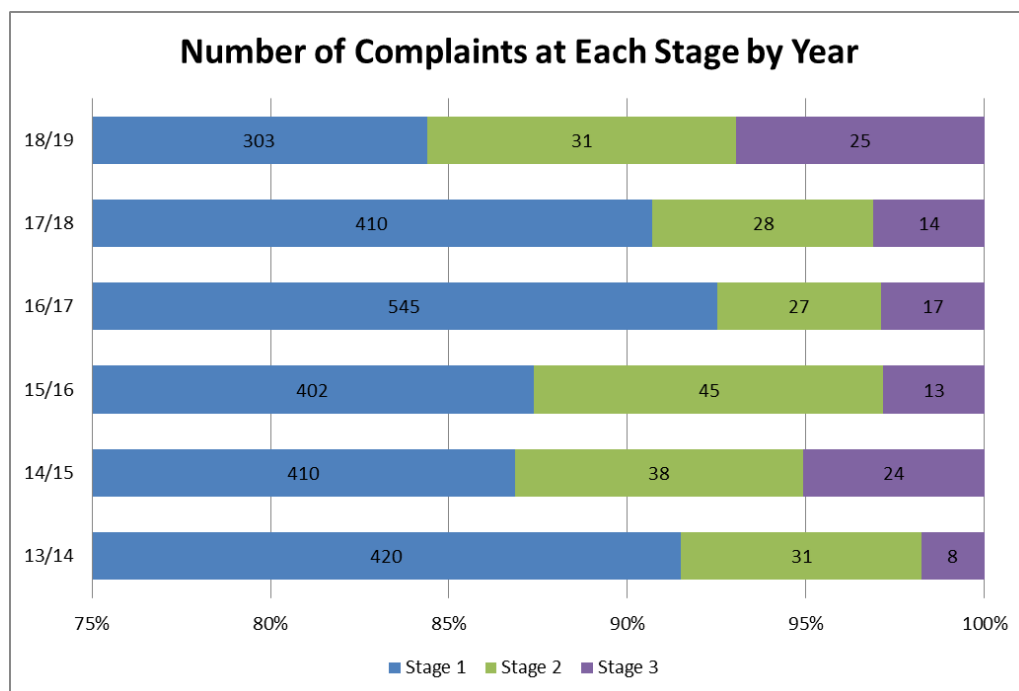
### 4.1 The number of complaints received



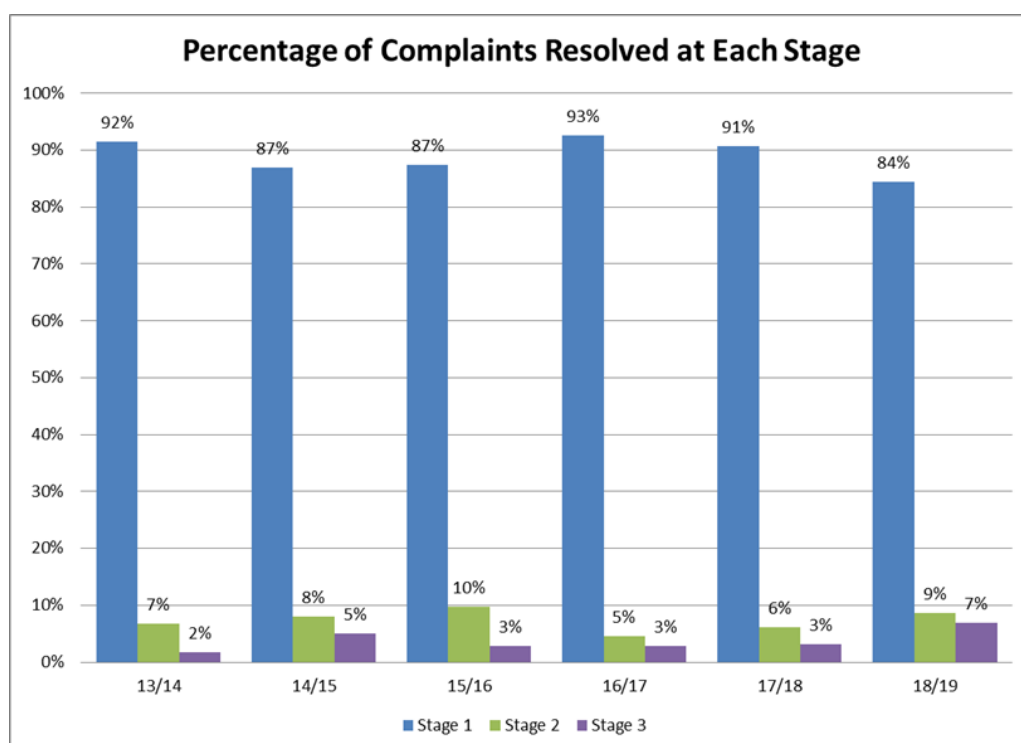
The number of complaints made under the corporate process has continued its downward trend. The complaints received have spanned 39 different council products and services.

### 4.2 Progression through the complaint stages

4.2.1 The number of complaints resolved at each Stage of the process is as follows:



4.2.2 The percentage of complaints resolved at each Stage of the process is as follows:



4.2.3 Although their total number has decreased, of the 359 complaints responded to, a lesser proportion of complainants have been satisfied with the response received at the first Stage of the complaint process (303) and 56 have progressed further. Of these, 31 were resolved at the second Stage and 25 went to the third and final Stage.

4.2.4 Of the 12 complaints which were upheld or partially upheld at Stage 3, 7 had had the same outcome at all three Stages, 2 were upheld or partially upheld at both Stage Two and Three, while 3 were upheld or partially upheld for the first time at Stage 3. This indicates that value is added by each complaint stage and outcomes varied when appropriate.

4.2.5 Of the 25 complaints considered at Stage 3 of the complaints process, 12 complainants took their complaint to the Local Government and Social Care Ombudsman. Of these, the Council was found to have fully satisfied the complaint in 9 cases, in one the complaint was upheld and one case is yet to be decided. This indicates that decisions reached by Stage 3 are robust when independently examined.

### 4.3 The time within which complaints are resolved

4.3.1 The stated aim of the corporate complaints process is to respond to Stage 1 and 2 complaints within 10 working days of their receipt. This has been achieved in 76% of cases which is a small improvement over the previous year.

2016/17		2017/18		2018/19	
No. Stage 1 & 2 Complaints	% Responded to in 10 working days	No. Stage 1 & 2 Complaints	% Responded to in 10 working days	No. Stage 1 & 2 Complaints	% Responded to in 10 working days
572	84%	438	73%	334	76%

4.3.2 Of the 25 complaints which reached Stage 3 of the complaints procedure, 14 were responded to within the 35 day timescale.

4.3.3 Timely response to complaints is a challenge at all stages of the process. The proposed reconfiguration of the organisational structure provides an opportunity to revisit the appropriate level at which responsibility for Stage 1, 2 and 3 responses should be placed, alongside options for achievable timescales can be examined.

#### 4.4 Nature of Complaints

##### 4.4.1 Category - Poor level of service/not followed a procedure correctly

The main reason for complaint in 248 instances was that the customer was of the opinion that the Council (or its contractor) had provided a poor level of service or had not followed a procedure correctly.

67% of this type of complaint was upheld. Remedial activities have included practical and procedural changes, staff training, changes to forms and website content and monitoring of future service provision.

The services most likely to attract this type of complaint are:

- Council Tax
- Highways
- Housing
- Parking
- Street cleaning
- Street furniture
- Trees
- Waste services

##### 4.4.2 Category - Staff have been rude or unhelpful

In 53 instances a complaint was made because a customer felt that a representative of the Council had been rude or unhelpful. 85% of this type of complaint was upheld.

26 of these complaints related to employees of Veolia, working on behalf of the Council, and most related to the use of inappropriate language or behaviour. Veolia have taken disciplinary action where required and have provided remedial training to their operatives.

#### *4.4.3 Category - Wrongly interpreted the law, council policy or procedure*

There were 49 complaints where the customer felt that the Council had wrongly interpreted the law, a council policy or procedure. 35% of such complaints were upheld. This type of complaint is most likely to be made regarding housing, parking and planning services. This is consistent with the heavily regulated yet subjective nature of these services.

#### *4.4.4 Category - Service required not offered*

Only three complaints were received in this category. Two related to the scope of the Council's response to anti-social behaviour and one was because Uber may not operate in the Borough.

### **4.5 How Complaints Are Received**

4.5.1 The most common way for complainants to contact the Council remains by e-mail or on-line form with 94% received in this way. This reflects the general shift to use of electronic means when interacting with the Council. In some instances customer service officers will have completed an on-line form on behalf of a telephone caller.

4.5.2 The Council remains committed to keeping all complaint channels available in order to meet its equalities obligations and to comply with LGSCO best practice. A formal complaint may be received over social media but would be moved to more conventional channels for resolution.

### **4.6 Remedial Actions**

The most frequent remedial action is the issue of a meaningful apology, made in 147 instances. In 81 cases a solution or service was offered to resolve the complaint. A review of procedures or services was initiated on 26 occasions. In a small number of cases a payment to remedy a quantifiable loss or to acknowledge stress and inconvenience was issued.

### **4.7 Comments and Compliments**

4.7.1 GovMetric, the customer satisfaction measurement tool used by the Council, specifically captures feedback concerning the provision of face to face and telephone service by the Customer Service Centre and over the Council's primary website.

4.7.2 Through this method, 401 compliments were recorded, in particular highlighting that the assistance of the customer service operatives is greatly valued as is being able to find things easily on the Council's website.

4.7.3 Of the 169 compliments recorded through the primary recording system, Pentana, the services receiving the highest volumes of praise were:

Waste and Environmental Care (52)  
Parks, Pier and Foreshore and Museums (40)  
Adults and Children's Social Care (38)

4.7.4 When comments are received they are responded to by the service concerned and the person making the comment is acknowledged where appropriate and advised if their suggestion is to be taken up.

4.7.5 Compliments are acknowledged where appropriate and shared with the appropriate line management to inform the service or member of staff. This may then inform the staff member's performance discussion.

## **4.8 MONITORING AND REPORTING**

Data collection and recording regarding complaint outcomes has been enhanced to reflect best practice. This allows complaints data to now be used in a responsive way to inform service analysis and improvements. The Complaint Officer's Group meets regularly to share best practice.

## **5. CONCLUSION**

The process continues to deliver a professional response to individual complaints, a robust system of complaint monitoring and real service improvements.

## Appendix B

### Compliments, Concerns and Complaints - Adult Social Care

#### 1. Purpose of Report

- 1.1 To discharge the local authority's statutory duty to produce an annual report on compliments concerns and complaints received about its adults' social care function throughout the year.
- 1.2 To provide statistical and performance information about compliments concerns and complaints received throughout 2018 / 2019.

#### 2. Recommendation

- 2.1 That the Department's performance during 2018 / 2019, and comparison to the previous three years be noted.
- 2.2 That the report be referred to the People Scrutiny Committee for detailed examination.

#### 3. Background

- 3.1 The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 came into force on 1 April 2009 and created a single process for health and social care services. With the increase in integrated services, the single process makes it easier for patients and service users to make complaints and allows them to make their complaint to any of the organisations involved in their care. One of the organisations will take the lead and co-ordinate a single response.
- 3.2 The new process is based on the principles of the Department of Health's *Making Experiences Count* and on the Ombudsman's principles of good complaints handling:
  - Getting it right
  - Being customer focused
  - Being open and accountable
  - Acting fairly and proportionately
  - Putting things right
  - Seeking continuous improvement.
- 3.4 There is a single local resolution stage that allows a more flexible, customer focused approach to suit each individual complainant. At the outset, a plan of action is agreed with the complainant to address their complaint. Amendments to the plan can be agreed at any stage of the process.

- 3.5 The regulations do not specify timescales for resolution and a date for response is agreed and included in each plan. Response times are measured against the agreed dates in the plans.
- 3.6 When the local authority believes that it has exhausted all efforts to achieve a local resolution, and the customer remains dissatisfied, the next step is referral to the Local Government Ombudsman.

#### 4 Overview of Compliments; Concerns and Complaints received in 2018/2019

##### a. Compliments

Compliments are a very important feedback and motivational tool and members of staff are encouraged to report all compliments they receive to the Customer Services Manager for recording. All compliments are reported to the Group Manager of the Service to pass on their thanks to the staff member and the team. This practice has been well received by staff.

Adult and Community Services received 19 compliments about its social care services in 2018/2019.

*Table to show the number of compliments received in 2018/2019 and a Comparison with previous two years*

Apr 16 – Mar 17	Apr 17 – Mar 18	Apr 18 – Mar 19
Number	Number	Number
269	94	45

The reduction in compliments in 2017/18 is due to the transfer of some front line services to Southend Care.

The use of Compliments is very tenuous benchmark for Customer Satisfaction as unlike complaints that require specific action by the recipient, compliments can easily be forgotten and not formally logged due to focusing on more urgent day to day activities.

Compliments and complaints are the extreme indicators of Customer Satisfaction; however there are still large number service users who have not recorded a complaint or compliment, which suggests they are satisfied with the service.

### 4.3 **Concerns**

The current regulations require the local authority to record concerns and comments as well as complaints. Some people wish to provide feedback to help improve services but they do not wish to make a complaint, and this process facilitates that.

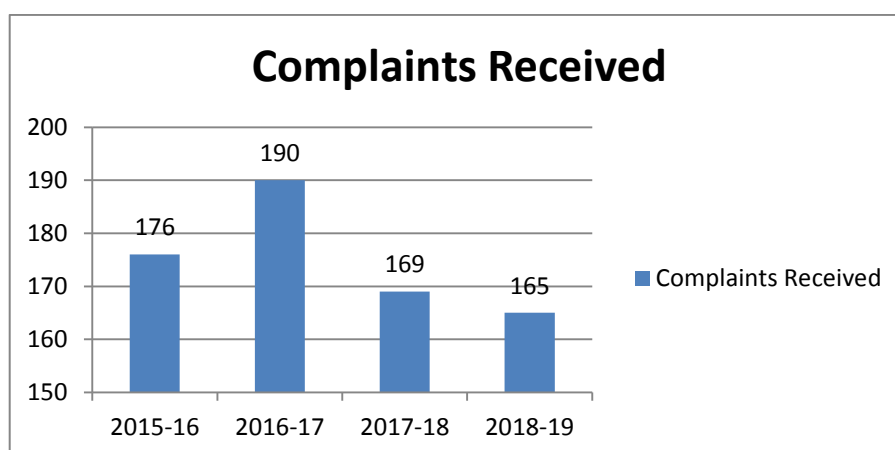
Adult and Community Services didn't received any feedback to be logged as a 'concern' about its social care services in 2018/2019.

All concerns and comments are considered to identify areas for improvement and responses are made where appropriate or requested.

### 4.4 **Complaints**

Adult Services received and processed a total 165 statutory complaints about its statutory social care services in 2018/19

*The Graph to show the total number of complaints received and processed by Southend-on-Sea Borough Council during 2018/2019 and comparison with previous three years.*



The complaints received in 2018/19 have seen a very slight reduction on the previous year.

The number of complaints is low, representing 4% of the adults that we provided a service to in 2018/19.

Complaints logged through the council's complaints process is only one way in which a complaint can be made. Many concerns or issues are resolved locally with the Social Worker and/or provider, rather than through the formal complaint process. In addition complaints about external providers can be raised directly with them and these are not recorded by the Council.

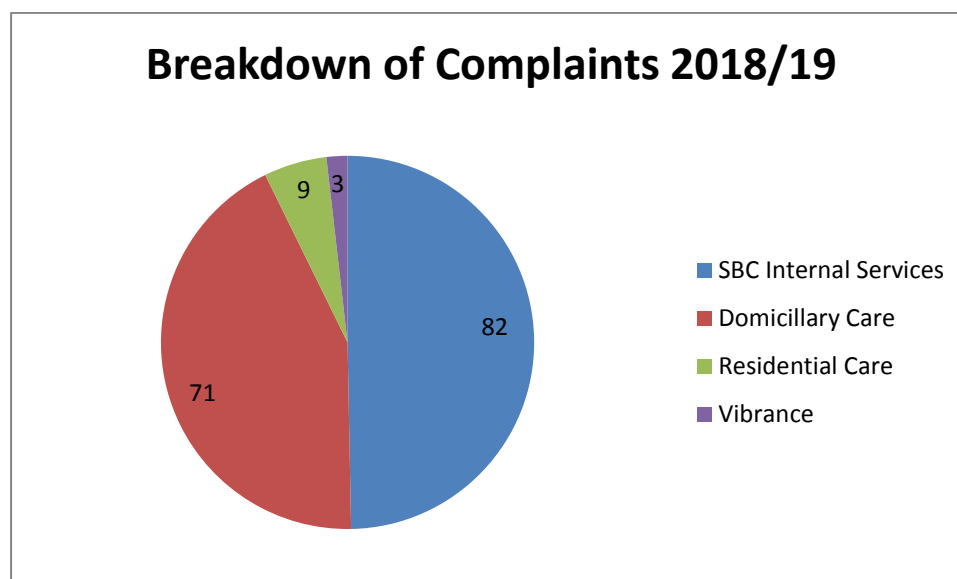


#### 4.4 **Overall Response Times**

Adherence to response times is measured by compliance with the agreed dates set out in the individual complaints plans. There is no statutory requirement with regards to response timescales, however we recognise the importance of trying to achieve a speedy resolution to complaints and generally aim to resolve complaints within 10 working days in line with the Corporate Complaints Procedure. However depending on the complexity of the complaint raised, agreement is made with complainants on an acceptable timescale for a response.

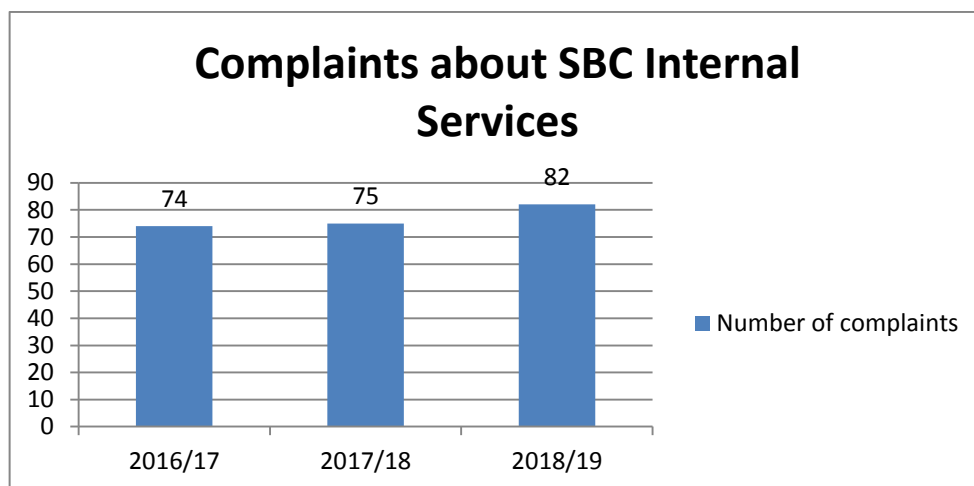
Out of the 165 complaints received, 76 complaints were responded to within the initial timescales agreed locally between the complaints service and the complainant. This represents 46% of responses made and is a decrease of 10% on the previous year. Whilst every effort is made to meet the timescales agreed, if it transpires through the course of the investigation this will not be possible, the complainant is kept informed and updated accordingly.

#### 5. **Breakdown of Complaints by Service Area**



## 5.1 Complaints about Internal Southend Council Services

Out of the total 165 complaints received 82 complaints were received regarding Internal Southend Council Services. This is a slight increase on previous years.



Of the 82 complaints responded to, 34 complaints (41.4%) were given a full response within the timescales agreed.

Some Complainants raise more than one issue therefore the 82 complaints raised related to 96 Issues.

Of these 96 Issues –

- 46 were upheld
- 11 were partially upheld
- 34 were not upheld
- 5 were unable to reach a finding

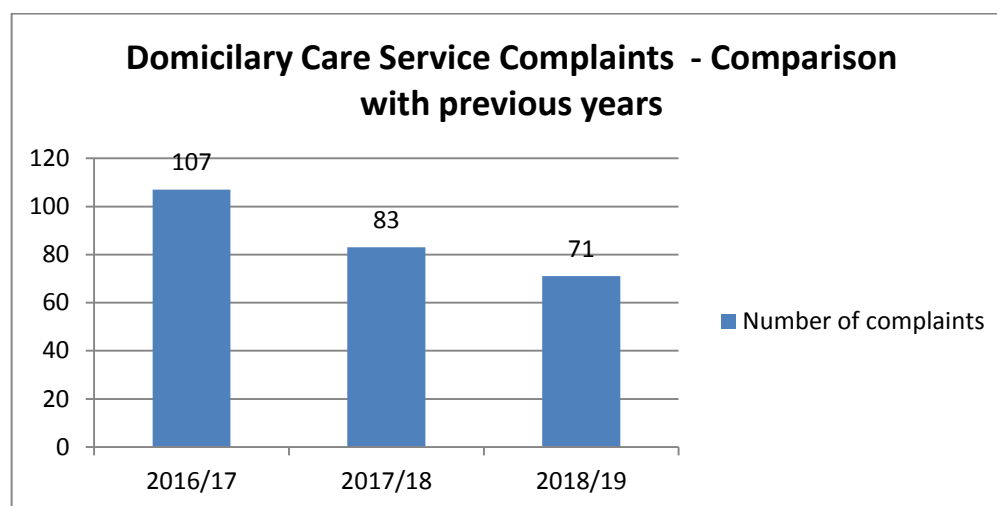
The top four issues were :-

	<i>Total</i>	<i>Outcome</i>
Care charges not explained	41	14 Not upheld
Delay/failure to keep informed	9	3 Not upheld
Outcome of decision / assessment	9	5 Not upheld
Invoice Query	7	2 Not upheld

## 5.2 Complaints about services from Commissioned Providers

### 5.2.1 Domiciliary Care

Of the 165 complaints received by Southend-on-Sea Borough Council, 71 were about Domiciliary Care Providers. This is a reduction 14.5% on 2017/18.



Of the 71 complaints that received a full response, 39 (55%) were responded to within the timescales agreed.

71 complaints related to 132 issues that were raised.

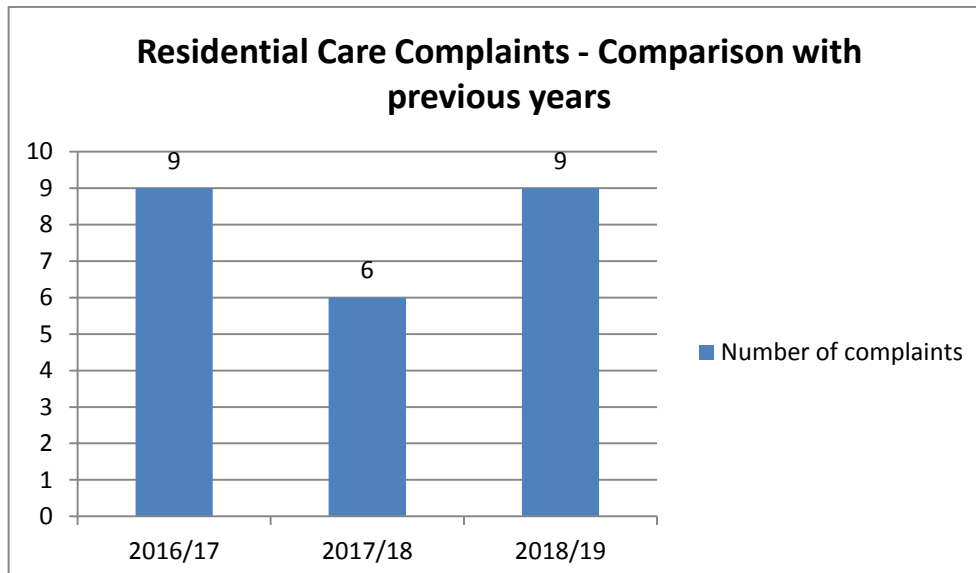
Of the 132 Issues raised – 78 were upheld  
12 were partially upheld  
19 were not upheld  
23 were unable to reach a finding

The top four issues were :-

	<i>Total</i>	<i>Outcome</i>
Timing of homecare calls	20	4 Not upheld
Late calls	16	1 Not upheld
Attitude of staff	11	2 Not upheld
Medication Issues	10	3 Not upheld

### 5.2.2 **Residential Care**

9 complaints were received about Residential Care homes. This represents 0.6% of the number of adults currently in a Residential home under a Southend-on-Sea Borough Council contract.



3 were responded to with the timescale agreed  
The main issues raised were around inadequate support and professionalism of staff.

Our Contracts Team and Complaints Team continue to work with the residential and domiciliary care providers to address issues and effect improvements around complaints handling.

## 6. **Complaints referred to the Local Government Ombudsman**

In 2018/2019 the Local Government Ombudsman received 8 enquires relating to Adult Social Care. 1 complaint was upheld, 1 was not upheld and 1 was closed after their initial enquires. The remaining 5 were deemed by the LGO as premature enquiries and were referred back to Southend Council for local resolution through the complaints process.

## **7     Monitoring & Reporting**

- 7.1     Statistical data regarding complaints about our commissioned home care providers are provided quarterly to inform the Contract Monitoring Meetings.
- 7.2     Complaints are monitored by the Complaints Manager for any trends/emerging themes and alerts the relevant service accordingly.
- 7.3     Complaints information is fed into the monthly operational meetings where issues regarding providers are shared. This is to ensure that a full picture is gathered regarding the providers service delivery and identify any concerns or trends that may be emerging.

## **8.    Learning from Complaints**

- 8.1     The Council continues to use complaints as a learning tool to improve services and to plan for the future. Local authorities are being asked to show what has changed as a result of complaints and other feedback that it receives.
- 8.2     Improvements made in 2018/19, as a result of complaints:-
  - A new digital complaints monitoring system has been introduced that enables a smarter solution to the management and resolution of complaint issues.
  - A finance Officer was based at Southend Hospital one day per week, to offer advice and support to Social Workers with queries around finance issues.
  - The finance Officer regularly bases themselves within the Locality Teams to readily provide support around finance.
  - The contracts team have worked with spot providers to move them over to the use of CM2000 to enhance the accuracy of charging for domiciliary care.
  - Complaints Team introduced quality monitoring of Domiciliary Care Provider complaint responses and feedback given.

### Compliments and Complaints - Children's Social Care

#### Purpose of Report

To fulfil the local authority's statutory duty to produce an annual report on compliments and complaints received about its children's social care function throughout the year.

To provide statistical and performance information about compliments and complaints received from April 2018 to March 2019.

#### Recommendation

That the Department's performance during 2018/2019 be noted.

#### Background

Complaints in the children's services are of 2 types, Statutory and Corporate. The law also says that children and young people (or their representative) have the right to have their complaint dealt with in a structured way.

The statutory procedure will look at complaints, about, for example, the following:

- An unwelcome or disputed decision
- Concern about the quality or appropriateness of a service;
- Delay in decision making or provision of services;
- Attitude or behaviour of staff
- Application of eligibility and assessment criteria;
- The impact on a child or young person of the application of a Council policy
- Assessment, care management and review.

The Corporate Complaint Procedure would be used when issues giving rise to the complaint fall outside the scope of the above statutory procedure.

Most of the complaints are statutory. The process for complaints regarding children's statutory services has three stages. Stage 1 affords an opportunity to try to find a local resolution usually at team manager level.

If the complainant is not satisfied with the outcome, they may request to proceed to stage 2. At stage 2, the Department appoints an Investigating Officer, and an Independent Person to investigate the complaint. The Investigating Officer is a senior service worker who has not been associated with the case, and the Independent Person is someone who is not employed by the council, but has experience of children's issues, social care or investigations. The stage 2 response is reviewed and approved by the Director of Children's Services.

If the complainant is still not satisfied, they may proceed to stage 3. At this stage, the complaint is referred to an Independent Review Panel of three independent panel

members with one member acting as Chair. They will review the stage 2 investigation and outcome, and will make recommendations. These recommendations are reviewed by the Deputy Chief Executive, who formally responds to the complainant.

The process is based on the premise that at each stage, a more senior officer responds on behalf of the Department. If complainants remain dissatisfied at the end of the three stages, they may refer their complaint to the Local Government Ombudsman.

The Complaints team encourages and supports Team Managers to resolve complaints at the earliest stage, including before they become formal complaints. We also advise a face to face meeting regarding the issues before the formal stage 2 process is started. This is thought to resolve the outstanding issues as early in the process as possible and in a way which many find less formal and adversarial for the complainant.

There are also 3 stages in the process for corporate complaints. Stage 1 is the same as in the statutory process. If this does not resolve the complaint then the Complaints Team will arrange for a further investigation to take place. The outcome will be reviewed and approved by the Director or Head of Service being complained about. If the complainant is still dissatisfied with the outcome, they have the right of appeal to the Council's Chief Executive and Leader of the Council, who will consider their appeal.

The numbers of compliments and complaints indicated in this report may not reflect the quality of the support generally provided by the social work teams, rather they are the opposite ends of our client satisfaction range, meaning that the majority of service users and their families are satisfied with the professional support provided.

### **Compliments received in 2018/19**

We received 21 compliments during this year, a slight reduction from 2017/18 when we received 24.

The numbers of compliments is relatively small proportion of our child client base. An issue with compliments is that unlike complaints they do not need a specific response, and so there is a possibility that some compliments may not be passed on to the complaints team to be formally logged.

### **Complaints received in 2018/2019**

During 2018/19 we began using a new software package which allows us to record and report in finer detail about complaints, in that as well as the actual number of complaints we receive, we can now report on the number of issues raised. This will better allow us to help identify the things which create complaints, as well as better manage our responses to the complainant.

In 2018/19 we received 79 complaints, which were made up of 128 issues. On average each complaint was made up of 1.6 issues.

No. of Issues	complaints	Ratio
1	50	63%
2	18	23%
3	6	8%
4	3	4%
5	0	0%
6	2	3%

50 complaints or 63% of all the complaints were made about a single issue, while 18 complaints (23%) consisted of 2 issues. The balance, 11 complaints (15%) were made up of between 3 and 6 issues. 2 Complaints were made of 6 issues.

### COMPLAINTS Stage 1

In 2018/19 we received 79 complaints. To put this in context in 2016/17 we received 129 complaints and in 2017/18 we had 81. The reduction is significant in both statutory and corporate complaints, with an overall reduction of 39% since 2016/17. Statutory complaints account for 65 or 82% of the 79 complaints received.

TYPE OF COMPLAINT	2016/17	2017/18	2018/19	change	% change
TOTAL COMPLAINTS	129	81	79	-50	-39%
STATUTORY COMPLAINT	91	60	65	-26	-29%
CORPORATE COMPLAINT	38	21	14	-24	-63%

A reorganisation of teams and staffing during the year has meant that the reporting of changes across the main social work functions is not an exact match but the principal is sound.

TEAM	2016/17	2017/18	2018/19	change	% change
TOTAL COMPLAINTS RECEIVED	129	81	79	-50	-39%
FIRST CONTACT	59	28	45	-14	-24%
CARE MANAGEMENT	47	30	21	-26	-55%
OTHER	23	23	13	-10	-43%

### Outcomes

During the year there were 128 different issues complained about within the 79 complaints. After investigation of each complaint at stage 1, 58 or 45% were not upheld.



21 (16%) of the issues were upheld, where the complainant was correct and there was some fault in our actions or processes.

## STAFF

Of the 128 issues raised in the complaints, there were 79 (67%) in which staff were identified. This is a reflection of the often emotionally charged environment that the social workers work in, where a disputed family breakup or chaotic situation can lead to a parent or close family member feeling isolated from or ignored by their children, and the perception is that the social worker is unhelpful in some way.

The outcomes for the complaints where particular staff are named are in line with the overall outcomes.

## ANALYSIS OF OUTCOMES

	ALL COMPLAINTS		STAFF IDENTIFIED	
Not Upheld	58	45%	37	47%
Out of Jurisdiction	7	5%	0	0%
Partially Upheld	24	19%	18	23%
Unable to reach a finding	9	7%	3	4%
<b>Upheld</b>	<b>21</b>	<b>16%</b>	14	18%
Withdrawn	9	7%	7	9%
<b>TOTAL</b>	<b>128</b>		<b>79</b>	

Each complaint which was upheld or partially upheld was responded to with an apology, and a small proportion having a reassessment, being provided with information and in one case a small amount of compensation.

## MANAGEMENT OF COMPLAINTS

The performance in the timeliness of response to the complaints has improved consistently in both years since 2016/17. The information below demonstrates the greater efficiency in responding to complaints.

RESPONSE TIMESCALES	2016/17		2017/18		2018/19	
WITHIN 10 DAYS	38	29%	28	35%	40	51%
10-20 DAYS	22	17%	23	28%	17	22%
OVER 20 DAYS	69	53%	30	37%	22	28%
<b>TOTAL COMPLAINTS</b>	<b>129</b>		<b>81</b>		<b>79</b>	
CLOSED IN 20 W/DAYS	60	47%	51	63%	57	72%

The proportion closed within 10 working days has improved across the last three years 29% to 51%. The rate at which complaints are closed within 20 working days is up from 47% to 72%.

This improvement means that the responses taking more than 20 working days has fallen from 53% to 28%.

### **Complaints by children**

Children are defined as those who are under 18 years old.

The number of complaints received by children is fairly consistent. In 2016/17 3 children made complaints, in 2017/18 it was 4, and in 2018/19 it was 3 again. All children who have made a complaint in 2018/19 did so using an advocate.

Any young person wishing to make a complaint and who does not have an advocate is always advised to use one and is provided with contact details and helped to contact the advocacy service.

### **Stages 2 and 3**

In 2017/18 6 complaints escalated to stage 2, and 2 of these then went to stage 3.

To date of the complaints made in 2018/19, 8 have chosen to go to stage 2. However, it needs to be noted that some complainants may still decide to proceed to stage 2 of the process.

Of the 4 complaints which have been concluded at stage 2 to date, 1 has taken their complaint to stage 3 and another is in the process of doing so.

To better manage the number of complaints being escalated beyond stage 1 of the complaints process, we advise the complainant and suggest that they meet with the social work manager/staff involved to discuss the issue and hopefully resolve it in a constructive way rather than the more formal and time consuming stage 2 process.

### **Local Government Ombudsman**

To date we are not aware of any complaints from the LGO that require us to act or respond in relation to any complaint from 2018/19.

### **Developments in the complaints process**

During 2018/19 we began using a new software package which allows us to record and report in finer detail about complaints, in that as well as the actual number of complaints we receive, we can now report on the number of issues raised and the nature or type of the issues, as well as those in which a named staff member or team are integral to the complaint. This will better allow us to help identify the things which

create complaints, as well as better manage our responses to the complainant and the management of our staff and processes.

### **Learning from Complaints**

The Council continues to welcome complaints as a means of improving services and to plan for the future. Local authorities are being asked to show what has changed as a result of complaints and other feedback it receives.

Improvements made in 2017/18 as a result of complaints;

- Earlier intervention by team managers has helped reduce the numbers of issues which develop into formal complaints.
- Following a Stage 1 response if the complainant remains dissatisfied, a meeting can be offered with a manager to try to resolve the issues and avoid going to stage 2 of the complaints process.

### **Areas for improvement**

To build on the improved data available on our complaints to develop the management reporting, so that we can identify and then address the issues which cause people to make complaints by improving our services and how they are delivered.

### Monitoring Officer Report of LGSCO Investigations

#### 1. Purpose of Report

The Monitoring Officer must provide councillors with a summary of the findings on all complaints relating to the Council where in 2017/18 the Local Government and Social Care Ombudsman (LGSCO) has conducted an investigation and upheld a complaint.

This report therefore fulfils the Monitoring Officer's duty under section 5(2) of the Local Government and Housing Act 1989 and the Local Government Act 1974.

#### 2. Recommendation

To note the annual letter to the Council from the LGSCO and note the summary of their findings regarding upheld complaints.

#### 3. Background

The LGSCO 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 LGSCO may suggest a remedy.

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

The LGSCO may publish public interest reports against a Council or require improvements to a Council's services. No such action has been taken in respect of Southend-on-Sea Borough Council.

In his annual letter, the LGSCO stresses that the number of complaints, taken alone, is not necessarily a reliable indicator of an authority's performance. The volume of complaints should be considered alongside the uphold rate (how often the LGSCO found fault when he investigated a complaint), and alongside statistics that indicate an authority's willingness to accept fault and put things right when they go wrong.

#### 4. Complaints made to the LGSCO

47 complaints and enquiries were made to the LGSCO in respect of Southend-on-Sea Borough Council.

44 decisions were made by the LGSCO, as follows:

Upheld	4
Not upheld	3
Referred back for local resolution	22
Closed after initial enquiries	13
Incomplete/Invalid	2

## 5. Number of decisions investigated in detail by the LGSCO

The LGSCO conducted 7 detailed investigations in respect of Southend-on-Sea Borough Council in the period between 1 April 2018 and 31 March 2019 with 4 complaints being upheld. This is an improving picture, as demonstrated below:

Year	16/17	17/18	18/19
Number of Detailed LGSCO Investigations	15	8	7
Number of complaints upheld by LGSCO	8	6	4
Upheld rate	53%	75%	57%

## 5. Complaints upheld by the LGSCO

The following is a summary of the upheld complaints:

Function	Maladministration/Fault	Agreed Remedy
Council Tax Recovery	There was fault in how enforcement agents, acting on behalf of the Council, dealt with the ownership of a vehicle they had removed. This meant the complainant was wrongly required to pay storage fees.	Fees refunded (by the enforcement agent) and a payment made to reflect his time and trouble.
Library service provision	There was no fault by the Council leading up to its decision to change the library management system. The issue complained about (a shortage of books) was caused by technical problems and the Council was at fault in not finding another way to mitigate the shortage of books until the technical problems were resolved.	None as there was minimal injustice as books were available from other library branches.
Care charges	The Ombudsman did not investigate a late complaint about the Council charging for care for a deceased individual. This was because on initial contact from the LGSCO the Council had agreed to waive the outstanding charges.	Written apology made and fees waived.

Housing Benefit	The Council gave incorrect information regarding the maximum amount of housing benefit the Council would pay an individual for a one-bedroom property. This led to her renting a property she could not afford.	Written apology made.
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Further details of each complaint are available on the [LGSCO website](#).

## **6. Acceptance of fault and putting things right when they go wrong**

The Council has accepted all recommendations made by the LGSCO and has a 100% compliance rate, that is, agreed remedial action has been demonstrated to have been taken in all cases.

## **7. LGSCO Annual Report**

The annual report of the LGSCO is provided at Appendix D1.

## **8. Conclusion**

The Council is co-operating in full with the LGSCO and successfully collaborating with them to identify the appropriate resolution for complaints made.

**Local Authority Report:** Southend-on-Sea Borough Council  
**For the Period Ending:** 31/03/2019

For further information on how to interpret our statistics, please visit our [website](#)

### Complaints and enquiries received

Adult Care Services	Benefits and Tax	Corporate and Other Services	Education and Children's Services	Environment Services	Highways and Transport	Housing	Planning and Development	Other	Total
7	5	7	8	4	7	5	3	1	47

### Decisions made

				Detailed Investigations			Total
Incomplete or Invalid	Advice Given	Referred back for Local Resolution	Closed After Initial Enquiries	Not Upheld	Upheld	Uphold Rate (%)	
2	0	22	13	3	4	57	44

**Note:** The uphold rate shows how often we found evidence of fault. It is expressed as a percentage of the total number of detailed investigations we completed.

### Satisfactory remedy provided by authority

Upheld cases where the authority had provided a satisfactory remedy before the complaint reached the Ombudsman	% of upheld cases
0	0

**Note:** These are the cases in which we decided that, while the authority did get things wrong, it offered a satisfactory way to resolve it before the complaint came to us.

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