# Southend-on-Sea Borough Council

Report of Chief Executive to

**Executive Briefing - 20 October 2020** 

Cabinet - 3 November 2020

Report prepared by:

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

Agenda Item No.

# Annual Report – Comments, Complaints and Compliments – 2019/20 All Scrutiny Committees

A Part 1 Public Agenda Item

#### 1. Purpose of Report

- 1.1 This report is to:
  - Provide performance information about comments, complaints and compliments received across the Council for 2019/20
  - 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 2019/20. 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 the changes recommended to be made to the corporate Comments, Complaints and Compliments policy as detailed in Section 4.3 of the Corporate Comments, Complaints and Compliments Report (Appendix A).

# 3. Background

- 3.1. Complaints which do not have an alternative bespoke process are considered under the corporate Comments, Complaints and Compliments process. It is good practice for the Cabinet to receive an annual report on the operation of the process and insight arising from it; this report is attached at **Appendix A**.
- 3.2. Legislation requires that statutory processes be 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, Complaints and Compliments (Corporate and Statutory) processed in 2019/20 in comparison with the previous three years.

Туре	2016/17	2017/18	2018/19	2019/20
Complaints (including Statutory)	866	681	603	608
Comments and Compliments	2441	2230	2138	1825
Grand Total	3307	2911	2741	2433

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 and Social care Ombudsman's principles of good complaints handling as being customer focused, putting things right and seeking continuous improvement.

4.2 As the Council seeks to redesign and transform its services, data from Comments, Complaints and Compliments is a valuable source of information about how those services are received in practice. Feedback from users of our services is used to remedy individual instances and also to inform service design, revise practices and procedures and provide insight to service areas about how their delivery is experienced in practice.

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

#### 5. Future developments

- In the coming year we will seek to strengthen the learning from insight provided by customers through complaints. We will do this by providing quantitative and qualitative information to service areas, service redesign initiatives, internal audit and others which enables them to hear what service users are saying and take action upon it.
- During 2019/20 the senior management structure altered considerably. The corporate Comments, Complaints and Compliments process requires amendment to better reflect the revised structure and the management responsibilities within it. See section 4.3 of the Corporate Comments, Complaints and Compliments Report (Appendix A).

# 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 remedies being recommended by 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, development needs 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. Adjustments to the process are made for those who require it because of a protected characteristic.

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

#### 7.8 Risk Assessment

Personal data regarding comments, complaints and compliments are recorded in approved centralised systems 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 regarding investigations of the LGSO

# **Corporate Comments, Complaints and Compliments Report**

#### 1. Purpose of Report

1.1 To report on the performance relating to the Corporate Comments, Complaints and Compliments (non-statutory) 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 1st April 2019 and 31st March 2020.
- 2.2 To endorse in principle that the process be revised to:
  - Reflect the revised configuration of the senior management structure of the Council
  - Deliver good quality responses within achievable timescales.

#### 3. Background

- 3.1 The Council's Corporate Comments, Complaints and Compliments procedure has been in place since 2009 and is well established throughout the organisation. It services all general feedback about the Council, except those that have their own bespoke process.
- 3.2 Examples of complaints outside the process 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

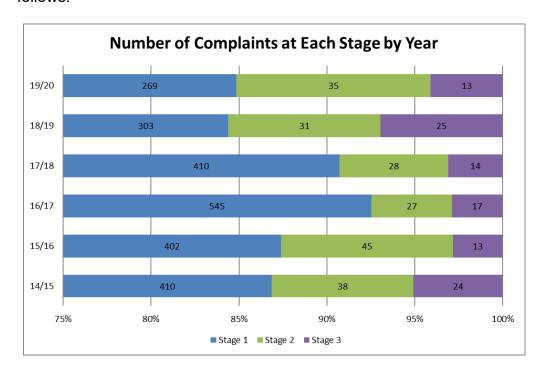
# 4.1 The number of complaints received



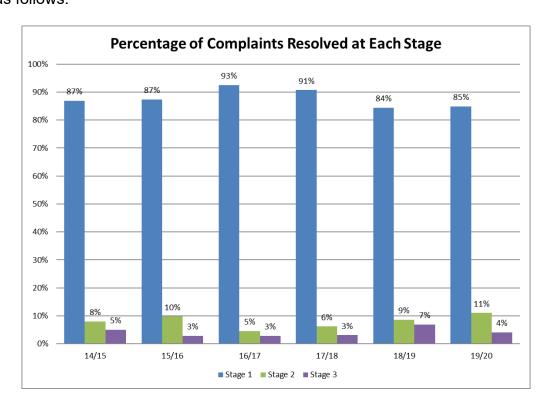
The number of complaints made under the corporate process has continued its downward trend. The complaints received have spanned 33 different council products and services.

#### 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 the total number of complaints made has decreased this year, the proportion of complainants satisfied with the response received at the first Stage of the complaint process has remained almost the same. 48 complaints progressed further, with 35 being resolved at the second Stage and 13 at the third and final Stage. The proportion resolved at Stage 2 has risen and the third stage is accessed by a small proportion at the level commonly seen before the peak last year.
- 4.2.4 The 13 complaints which reached Stage 3 spanned 9 different services with the maximum any service had being 3. Details of Stage 3 complaints which went on to be considered by the LGSCO are included in the Monitoring Officer Report of LGSO Investigations. Due to the time lag for Ombudsman resolution, these complaints may have originated in years prior to 2019/20 and some complaints from 2019/20 may yet be referred to the Ombudsman.

#### 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 66% of cases which is a decline over previous years. Resource has been increased in the Performance and Business Support team, which is expected to improve the position, but the target of 80% of complaints being met within timescale remains elusive.

2017	//18	2018/19		201	9/20
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
438	73%	334	76%	304	66%

- 4.3.2 When someone has taken the trouble to complain, it adds intensity to their grievance when they receive a late response. This then becomes an additional cause for complaint at subsequent stages. Having spoken to complaint officers, it would seem that in many instances at Stage 1 and 2 of the process, ten days is simply not enough time to draft a considered response and there is a tension between timeliness and quality.
- 4.3.3 Extending the timescale at Stage 1 and 2 to allow for more investigation and a comprehensive response, would hopefully reduce the need for complainants to escalate their complaint and cause less additional cause to complain because of unmet expectations in reponse time. Where complaints are escalated, there would be more opportunity for in depth investigation earlier in the process and less liklihood that a Stage 2 response would simply mirror a Stage 1 reply.
- 4.3.4 It is therefore proposed that the Stage 1 deadline be extended to 15 working days and Stage 2 to 20 working days.
- 4.3.5 The Local Government and Social Care Ombudsman recommends that a complaint process take no more than 12 weeks in total. As a consequence of extending the time available at Stage 1 and 2, the Stage 3 response period of 35 working days will need to be reduced. It is recommended that this be reduced to 25 working days.
- 4.3.6 Some of the current time taken at the third stage can be recouped by simplifying the sign off process for Stage 3 complaints. It is proposed that in future Stage 3 complaints are signed by the most relevant member of the Corporate Management Team (CMT Executive Director, Deputy Chief Executive or Chief Executive). Not only will this provide more flexibility and remove one stage of the current sign off process, but also will better reflect the senior leadership role of all members of CMT. No change is proposed to the part of the Leader of the Council in the process.
- 4.3.7 For some Stage 3 complaints it can be seen from the outset that there is nothing to be gained from an additional investigation. The LGSCO will not usually consider a complaint until the Council has had an opportunity to investigate it fully. Some Stage 3 complaints are made with the stated objective of getting through the final stage in order to be able to complain to the Ombudman.

- 4.3.8 It is proposed that, in order to more effectively focus resources, the option be made available at Stage 3 of the process to determine that there is no benefit from further investigation, that the Stage 2 response is the Council's final position and the complainant is free to approach the LGSCO should they so wish. This is in accordance with LGSCO procedures.
- 4.3.9 In order to ensure impartiality, such a decision would be made by an officer of the Corporate Strategy Group and agreed by the Executive Director concerned. It is expected that this option would be used sparingly but would reduce unnecessary duplication of work and allow complainants who are unlikely to be satisfied at Stage 3 to go the the Ombudman with less delay.
- 4.3.10 Some complainants seek to use the corporate complaints process in preference to other review processes. It is proposed that the complaints process be clarified to state that where an alternative review or appeal process exists concerning the matter being complained of, a complaint will not be considered under the corporate process until that review or appeal has been concluded.
- 4.3.11 The sum of these changes will be a better service for complainants with more consideration of their complaint earlier in the process. To enable the extra time at Stage 1 and 2 to be most effective, over the next year training in listening to and learning from complaints, understanding the benefits of the insight provided by those who complain and how to respond well, will be offered to those officers who have handling complaints as part of their responsibilities.
- 4.3.12 Unfortunately there are some complainants whose behaviour is unreasonable, no matter how well their business with us is conducted. The Policy on the Management of Unreasonable Complainant Behaviour is available where this is the case. It too will be amended so that the formal decision to apply appropriate limitations on contact may taken by any member of CMT, rather than relying on only the Deputy Chief Executive and Chief Executive.

#### 4.4 Nature of Complaints

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

The main reason for complaint in 245 instances was that the customer believed the Council (or its contractor) had provided a poor level of service or had not followed a procedure correctly.

Where an outcome was recorded, 52% of this type of complaint was upheld.

4.4.2 Category - Staff have been rude or unhelpful

In 40 instances a complaint was made because a customer felt that a representative of the Council had been rude or unhelpful. Where an outcome was recorded, 54% of this type of complaint was upheld.

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

There were 11 complaints where the customer felt that the Council had wrongly interpreted the law, a council policy or procedure. Where an outcome was recorded,12% of such complaints were upheld.

#### 4.4.4 Category - Service required not offered

21 complaints were received in this category. Where an outcome was recorded, 69% of such complaints were upheld because the service was indeed not available.

# 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, the same as the previous year. 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, including telephone and letter, 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

4.6.1 The most frequent remedial action is the issue of a meaningful apology, recorded as being made in 100 instances. In 59 cases a solution or service was offered to resolve the complaint. A review of procedures or services was initiated on 6 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, 358 compliments were recorded, highlighting that the telephone and face to face 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 In addition, Adult and Children's Social Care received a total of 135 compliments, as detailed in their reports, and a further 92 compliments were recorded by the rest of the organisation.
- 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

- 4.8.1 Data collection and recording regarding complaint outcomes has been enhanced to reflect best practice. This allows complaints data to be used in a responsive way to inform service analysis and improvements.
- 4.8.2 In the coming year it is the intention to strengthen the link between feedback being provided and service improvement. This will not only be through existing links with the Service Redesign team, but also linking with Internal Audit and other inspection regimes to provide context to their investigations. The data being provided to management teams will also be reviewed with the intention of providing greater meaningful insight based on the experience of their service users.

#### 5. CONCLUSION

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

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

#### 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 2019 / 2020.

#### 2. Recommendation

- 2.1 That performance during 2019 / 2020, 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.
- 3.3 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.

- 3.4 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.
- 3.5 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 2019/2020

#### **4.1 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 73 compliments about its social care services in 2019/2020.

Table to show the number of compliments received in 2019/2020 and a Comparison with previous two years

Apr 17 – Mar 18	Apr 18 – Mar 19	Apr 19 – Mar 20
Number	Number	Number
94	45	73

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 a large number of service users who have not recorded a complaint or compliment, which suggests they are generally satisfied with the service

#### 4.2 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 formal complaint, and this process facilitates that.

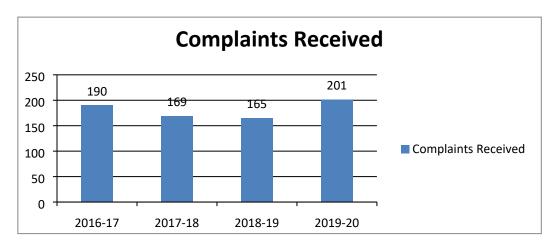
Adult and Community Services 7 'concerns' about its social care services in 2019/2020.

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

#### 4.3 Complaints

Adult Services received and processed a total 201 statutory complaints about its statutory social care services in 2019/20

The Graph to show the total number of complaints received and processed by Southend-on-Sea Borough Council during 2019/2020 and comparison with previous three years.



The complaints received in 2019/20 have increased by 21% on the previous year. The upturn has been seen in internal services and domiciliary care, where residential care has remained the same.

However, the number of complaints remains low, representing 6.7% of the adults that we provided a service to in 2019/20.

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 statutory complaint process. In addition, complaints about external providers can be raised directly with them and these are not recorded by the Council.

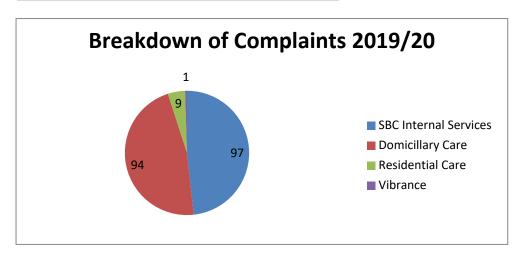
#### **4.4 Overall Response Times**

Adherence to response times is measured by compliance with the agreed dates set out in the individual complaint 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.

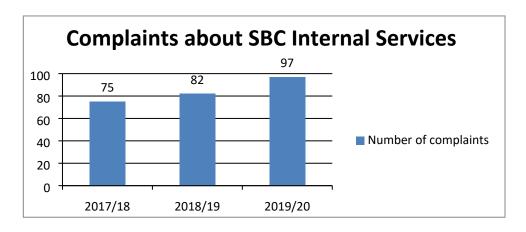
Out of the 201 complaints received, 4 complaints were withdrawn prior to response. Therefore, out of the 197 complaints responded to, 124 complaints were responded to within the initial timescales agreed locally between the complaints service and the complainant. This represents 63% of responses made and is an increase of 17% 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. <u>Breakdown of Complaints by Service Area</u>



#### 5.1 Complaints about Internal Southend Council Services

Out of the total 201 complaints received 97 complaints were received regarding Internal Southend Council Services. This is an increase of 18% on 2018/19.



Of the 97 complaints responded to, 64 complaints (66%) were given a full response within the timescales agreed.

Some Complainants raise more than one issue therefore the 97 complaints raised related to 114 Issues.

Of these 114 Issues - 52 were upheld

2 were partially upheld

40 were not upheld

13 were unable to reach a finding

5 were out of SBC jurisdiction

1 withdrawn

1 did not receive response

The top four issues were :-

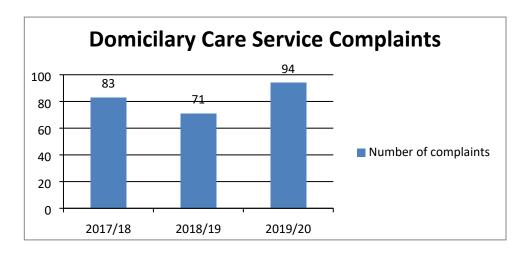
	Total	Outcome
Care charges not explained	50	18 Not upheld
Professionalism	14	5 Not upheld *
Delay/ Failure to keep informed	11	5 Not upheld
Insufficient Support	8	2 Not upheld

<sup>\*</sup> To add more context in respect of the issue of professionalism, 3 were upheld and 1 was withdrawn. On 3 of the complaints we were 'unable to reach a finding'. Often this issue is a subjective view of the Adult that staff were unprofessional, where there is no evidence to prove or disprove this view then we are unable to make a determination as to the outcome.

# 5.2 Complaints about services from Commissioned Providers

#### 5.2.1 **Domiciliary Care**

Of the 201 complaints received by Southend-on-Sea Borough Council, 94 were about Domiciliary Care Providers. This is an increase of 32% on 2018/19.



Of the 94 complaints that received a full response, 61 (65%) were responded to within the timescales agreed.

94 complaints related to 184 issues that were raised.

Of the 184 Issues raised – 109 were upheld

3 were partially upheld

14 were not upheld

55 were unable to reach a finding

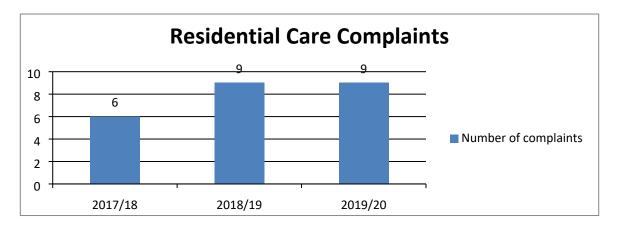
3 were withdrawn

The top four issues were: -

	Total	Outcome
Late calls	36	1 Not upheld
Timing of planned homecare calls	26	3 Not upheld
Missed calls	21	2 Not upheld
Medication Issues	15	0 Not upheld

#### 5.2.2 Residential Care

9 complaints were received about Residential Care homes. This represents 1% of the number of adults placed in Residential Care under a Southend-on-Sea Borough Council contract.



5 were responded to with the timescale agreed
The main issues raised were around inadequate support and poor personal
care.

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

Complaints investigated by the Local Government and Social Care Ombudsman are detailed in the report of the Monitoring Officer (Appendix D).

# 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. <u>Learning from Complaints</u>

- 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 2019/20, as a result of complaints: -
  - Ongoing review of how best to ensure financial information and the implications are consistently communicated and understood by the Adult and/or their family.
  - Charges leaflet to be updated to include how we will approach the calculation of income for a temporary residential placement.

# Children's Social Care - Compliments and Complaints Report

# **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 2019 to March 2020.

#### Recommendation

That performance during 2019/2020 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.

Within children's services most complaints fall under a statutory process within the Children's Act 1989, where the expected performance regarding response times is described. This is also an area routinely reviewed within an inspection or regulatory visit. They are also mainly about how the actions of our staff are perceived by the families they interact with and therefore the majority of complaints include complaints about specific members of staff.

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, an Investigating Officer is appointed, 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 Executive Director who formally responds to the complainant.

The process is based on the premise that at each stage, a more senior officer responds. 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, as described in the Corporate Comments, Complaints and Compliments Report (Appendix A).

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 2019/20

We have worked to gather more data this year and have received 62 compliments as well as many positive responses within feedback forms used by some teams. Last year, 2018/19, we received 21 compliments. An issue with compliments is that unlike complaints they do not need a specific response, and so there is a possibility that in the past some compliments may not have been passed on to the complaints team to be formally logged.

#### Complaints received in 2019/2020

From 2019 performance on complaints is reported quarterly to the Performance Board so that senior management are better informed.

Over the previous two years, complaint numbers have been consistent, however during the first nine months of 2019/20 there was an increase in the number of complaints received, as well as those escalating to stage 2. Had we continued at that rate we would have had a total of 100 complaints. However, as can be seen below, we received only 15 complaints in the 4th quarter, the previous 3 quarters had averaged 25/quarter. In the 4th quarter of 2019, we had 23 complaints.

Complaints by Qtr	2018/19	2019/20
	complaint	complaint
q1	17	27
q2	17	21
q3	22	27
q4	23	15
TOTAL	79	90

The number of complaints reduced significantly from January onwards, possibly in part due to the effects of Covid 19. The total number of complaints received across the year is still above that of the previous two years. It can be seen below that the reductions in complaints were in January (before Covid 19) and in March (during the Covid 19 pandemic).

4th Quarter complaints-Monthly detail

	18/19	19/20
JAN	7	3
FEB	5	7
MAR	11	5
Qtr 4 total	23	15

We record and report on the number of complaints received, and also on the number of issues raised. This better allows us to help identify the things which create complaints, as well as better manage our responses to the complainant.

In 2019/20 we received 90 complaints, which were made up of 145 issues. On average each complaint was made up of 1.6 issues.

#### **COMPLAINTS Stage 1**

In 2019/20 we received 90 complaints in total. To put this in context last year in 2018/19 we had 81. The increase is significant in statutory complaints with a reduction in corporate complaints, with an overall increase of 14% Statutory complaints account for 83 or 92% of the 90 complaints received.

TYPE OF COMPLAINT	2017/18	2018/19	2019/20	change	% change
TOTAL COMPLAINTS	81	79	90	11	14%
STATUTORY COMPLAINT	60	65	83	18	28%
CORPORATE COMPLAINT	21	14	7	-7	-50%

The reason or cause of each complaint and issue received is recorded. Of the 145 issues received in 2019/20 they are categorised and distinguished as below.

ISSUE/DESCRIPTION	NUMBER	
Biased	5	3.4%
Breach of confidentiality	5	3.4%
Delay delivering service	4	2.8%
Delay/failure to keep informed	11	7.6%
Failure to take account of S/U or families views	14	9.7%
Insufficient Support	26	17.9%
Meeting minutes not sent or delay in sending	2	1.4%
Non-adherence to procedure	3	2.1%
Not invited to meetings	2	1.4%
Not returning calls/e-mails	9	6.2%
Other	1	0.7%
Outcome of decision/assessment	6	4.1%
Poor communication style	8	5.5%
Professionalism	38	26.2%
Rude / unhelpful	11	7.6%
Grand Total	145	

There are broader themes within the types of complaints which seem to drive many of the areas of complaint.

## From the perception of the complainant they are;

- **Communication** they feel we are not listening to them or taking note of their views, we are making decisions without involving them, we don't respond to phone messages or e-mails. That we don't communicate clearly with them.
- **Staff actions** They feel that at times our staff are unprofessional, are slow at decision making, and to put support in place. That the support provided is not sufficient. That the staff can be unhelpful at times.
- **Processes** They feel that we do not follow our own processes and procedures, and that decisions can be arbitrary and biased. That notes of meetings are sometimes not produced and shared in a timely fashion.

This does not mean that the complaints are valid, as only 12% of complaints have been upheld, with a further 26% being partially upheld, but that this is what people are actually complaining about.

#### **Outcomes**

During the year there were 145 different issues complained about within the 90 complaints.

After investigation at stage 1, the majority (56%) were found to be not upheld, while 38% (26% + 12%) were found to be upheld or partially upheld, where the complainant was found to be correct or partially correct and there was some fault in our actions or processes.

#### **STAGE 1 ISSUES OUTCOMES**

NOT UPHELD	81	56%
PARTIALLY UPHELD	37	26%
UPHELD	17	12%
Unable TO REACH A FINDING	9	6%
WITHDRAWN	1	1%
TOTAL ISSUES	145	

#### **STAFF**

Of the 145 issues raised in the complaints, there were 99 (68%) in which staff were identified. This proportion has been fairly consistent over the last 3 years, and 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. The perception of the complainant 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.

Issue Outcomes in cases where a staff member is named in the complaint.

Not Upheld	55	56%
Partially Upheld	26	27%
Unable to reach a		
finding	8	8%
Upheld	9	9%
TOTAL	98	

Each complaint which was upheld or partially upheld was responded to with an apology, and a small proportion having a reassessment or other service provided.

#### MANAGEMENT OF COMPLAINTS

The performance in the timeliness of response to the complaints had improved consistently in the last two years. However, there is an area of concern around the times taken to respond to complaints at stage1. The proportion of stage 1 complaints responded to within 10 working days and also within 20 working days is less that in

2018/19. Some of this may be due to the obvious significant increase in complaint numbers during the first three quarters, but not all. The performance in response times was evident in the December report and is not due to the impact of Covid 19.

RESPONSE TIMESCALES	2017/18		2018/	2018/19		2019/20	
WITHIN 10 DAYS	28	35%	40	51%	31	34%	
10-20 DAYS	23	28%	17	22%	27	30%	
OVER 20 DAYS	30	37%	22	28%	32	36%	
TOTAL COMPLAINTS	81		79		90		
CLOSED IN 20 W/DAYS	51	63%	57	72%	58	64%	

# Complaints by children

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

During 2019/20 we received 8 separate complaints from young people, which is an increase from the previous years when it was three or four each year. Most of these young people were supported by an advocate, and where not they were offered the services of one.

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

All stage 2 and 3 complaints were "paused" due to the Covid 19 issue and are now starting to be resumed with all those involved working and communicating remotely. This is in line with guidance from the government generally and the specific LGA Ombudsman advice. The ombudsman service was stopped entirely due to Covid 19 and has recently re-started in a "remote" fashion.

In 18/19 there were 5 complaints which eventually escalated to stage 2, so far for 2019/20 this year the figure is 7. It is possible that more may occur as complainants have time and opportunity to disagree with the stage 1 outcome. Reviewing the stage 1 responses it does not seem that the quality of the responses is poorer than last year, although the timeliness of the responses is not as good. It may be that the increase in complaints is driving the increase at stage 2.

Of the complaints which have been concluded at stage 2 to date, two stage 3 panels have taken place and three are in the process of doing so now that our Covid 19 restrictions are easing.

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 and Social Care Ombudsman

Complaints investigated by the Local Government and Social Care Ombudsman are detailed in the report of the Monitoring Officer (Appendix D).

#### **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. This better allows 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.

Given the changes we are putting in place to conduct stage 2 and 3 activities, we may continue these remote/on-line methods in the future once the covid 19 pandemic is ended, as it may provide a more efficient and cost effective way of dealing with these issues.

#### **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 2019/20 as a result of 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.
- That, in all cases where MARAT has concluded that a case of domestic abuse is high risk, team managers should consider if a risk assessment should be completed before any Local Authority employee is required to have face to face contact, or visit the homes of the service users. This is to ensure that the Local Authority discharge their duty of care to the families involved and our staff.

Where claims of bias or unfairness are concerned:

- That staff now provide both parents with a confirmation letter when their child's file is closed.
- That in the cases involving separated parents, staff have been made aware that they must not appear to favour or support one parent. To help identify an advocate to provide support if one party needs additional support

#### **Areas for improvement**

To build on the development of 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 LGSO 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 2019/20 the Local Government and Social Care Ombudsman (LGSCO) has investigated 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. Their focus is placed on the outcomes of complaints and what can be learned from them.

Complaints are upheld when some form of fault is found in an authority's actions, including where that fault has already been accepted prior to LGSCO intervention.

#### 4. Complaints made to the LGSCO

In 2019/20, 67 complaints and enquiries were made to the LGSCO in respect of Southend-on-Sea Borough Council.

63 decisions were made by the LGSCO, as follows:

Advice Given	1
Closed after initial enquiries	18
Incomplete/Invalid complaint	6
Not upheld	3
Referred back for local resolution	28
Upheld	7
Number of decisions made	63

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

The LGSCO concluded 10 detailed investigations in respect of Southend-on-Sea Borough Council in the period between 1 April 2019 and 31 March 2020 with 7 complaints being upheld. This is consistent with previous years.

Year	16/17	17/18	18/19	19/20
Number of detailed investigations	15	8	7	10
Number of detailed investigations upheld	8	6	4	7
Upheld rate	53%	75%	57%	70%

# 5. Complaints upheld by the LGSCO

The following is a summary of the upheld complaints:

Function	Maladministration/Fault	Agreed Remedy
Housing	There was no fault in how SBC reached a decision not to take formal action against the complainant's landlord. However, some complaints were not pursued with the landlord and there were delays in dealing with his complaints. These faults did not cause significant injustice.	No remedy required.

Adult Care Services	A care home provider, commissioned by SBC, did not adequately deal with complaints made on behalf of a resident. They inappropriately gave notice to the resident because of the complaints made. SBC took too long to follow up the concerns raised and did not investigate the matter in sufficient depth.	Apology. Financial redress for avoidable distress/time and trouble. Provide training and/or guidance.
Housing	SBC did not properly handle an application for housing on account of homelessness and failed to consider the suitability of interim accommodation offered.	Apology. Financial redress: Avoidable distress/time and trouble.
Education & Children's Services	Fault was found with SBC's response to allegations regarding an assault on a child. After the allegation, over a prolonged period there was a failure to provide suitable alternative education.	Apology. Financial redress: Avoidable distress/time and trouble. Financial redress: Loss of service. Financial Redress: Quantifiable Loss. Procedure or policy change/review. Provide information/advice. Provide services. Provide training and/or guidance.
Highways & Transport	SBC initially failed to properly consider information provided concerning a debt it was pursuing from someone claiming to live at the complainant's property. This was remedied at Stage 3 of the	None

	complaints process and the apology then offered was considered sufficient by the LGSCO.	
Adult Care Services	SBC did not adequately explain the charging basis when the complainant left hospital to go into interim care.	Apology. Financial redress: Avoidable distress/time and trouble. Procedure or policy change/review.
Adult Care Services	The LGSCO agreed with the complainant that SBC had not properly explained the financial implications of their spouse moving into a care home. A full needs assessment and financial assessment had not been completed and the position for temporary care placements had not been well communicated.	Apology. Financial redress: Avoidable distress/time and trouble. Procedure or policy change/review.

The following is a summary of the complaints investigated by the LGSCO but not upheld:

Function	Maladministration/Fault
Education and Children's Services	SBC did not, as had been alleged, fail to clearly communicate to the complainant its decision not to award their preferred choice of home to school transport provider.
Education and Children's Services	Since making an unsuccessful appeal for a place for their child at an infant school, a place had become available and offered. There was therefore no benefit in continuing to investigate.

Adult Social Care	There was no evidence to suggest that SBC was
	at fault for charging for the complainant's care at
	a care home. The was also no evidence that SBC
	had delayed adaptations to his property.

Further details of complaints are available on the LGSCO website.

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

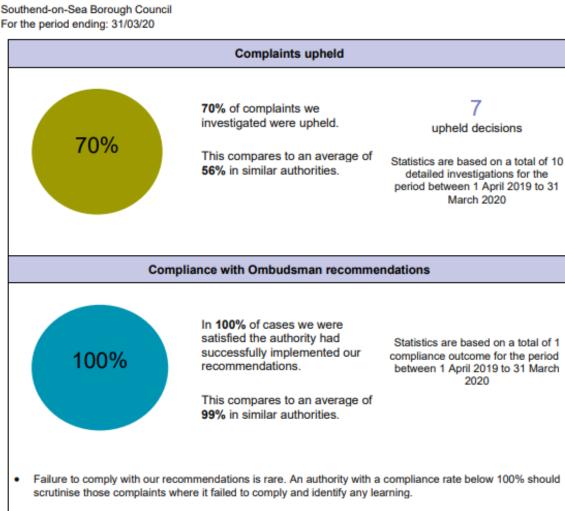
The LGSCO recommends ways to put things right when faults have caused injustice and they monitor to ensure recommendations are complied with. The Council has accepted all final recommendations made by the LGSCO and has a 100% compliance rate, that is, agreed remedial action has been demonstrated to have been taken.

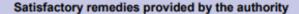
#### 7. LGSCO Annual Review Letter

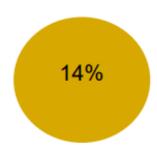
Statistics from the annual review letter of the LGSCO are provided at Appendix D1.

#### 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.







In 14% of upheld cases we found the authority had provided a satisfactory remedy before the complaint reached the Ombudsman.

This compares to an average of 11% in similar authorities.

satisfactory remedy decision

Statistics are based on a total of 10 detailed investigations for the period between 1 April 2019 to 31 March 2020