

Report of the Director of Finance & IT to the meeting of the Governance & Audit Committee to be held on 25th November 2021

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Subject:

Update on Complaints performance and activity

Summary statement:

The purpose of this report is to present an update on the Council wide complaint handling performance and activity outcomes, for Q1 and Q2 of the current financial year, to assure the Committee that the Council's complaint handling arrangements are improving and that progress is being made on implementing identified key improvement actions.

EQUALITY & DIVERSITY:

This report concludes there are no equality and diversity implications which negates the need for an Equality Impact Assessment.

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Director of Finance & IT

Portfolio:
Leader of the Council & Corporate

Overview & Scrutiny Area: Corporate

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1. SUMMARY

The purpose of this report is to present an update on the Council wide complaint handling performance and activity outcomes for Q1 and Q2 of the current financial year to assure the Committee that the Council's complaint handling arrangements are improving and that progress is being made on implementing identified key improvement actions.

2. BACKGROUND

On 22nd April 2021 the Committee was presented with the 2020/21 annual Complaints report which highlighted the performance issues the Council was facing in responding to complaints and the key improvement actions being taken to improve performance. Committee requested a report on progress at the half yearly point of the current financial year 2021/22.

3.0 OTHER CONSIDERATIONS

3.1 Performance

The following table (*Table 1*) represents the Councils overall performance, in responding to the different complaint stages, within the current prescribed timescales (*See Appendix 1*), for the year ending 31st March 2021 and for Q1 and Q2 of the current financial year ending 31st March 2022. A full performance breakdown is shown at *Appendix 2*.

TABLE 1	2020/21	2021/2022 YTD	Q1 21/22	Q2 21/22
% of Pre-complaints responded to in time	29%	30%	23%	36%
% of Stage 1 responded to in time	49%	58%	60%	56%
% of Stage 2 responded to in time	41%	71%	53%	87%

As is demonstrated in the table above there has been performance improvements in responding to all complaint types in the first 2 quarters of the current financial year and as can be seen from the latest Q2 figures the performance improvement when compared with the 2020/21 financial year return has improved across all complaint types.

The introduction of a Corporate Complaints Team (CCT) Service Improvement Plan with key improvement actions has, without doubt, been the catalyst for improvement and *Table 2* below demonstrates the progress made in the key actions highlighted in the report to Committee on 22nd April 2021.

TABLE 2	
1. Introduction of specific complaints handling key performance indicators monitored at a senior level.	√ A comprehensive suite of complaint handling KPI's have been developed and are to be shared with CMT and Services / Departments on a regular basis. This has helped identify areas for improvement within the service

<p>2. Consistent recording of the complaints received by the different Departments and Services in the Council, to assure the reliability of the management information.</p>	<p>√ All complaints are now directed into the CCT who are responsible for recording them and ensuring that they are responded to by Services/Departments within the appropriate timescales, using a new escalation process where necessary. Activity continues in ensuring complaints are appropriately identified and recorded wherever they arrive within the Council</p>
<p>3. Consideration of a single CRM solution which will incorporate complaints</p>	<p>X</p> <p>Work on this has not yet started - the Council is contracted to a bespoke Complaint handling system until Summer 2022 at the earliest. The performance indicators introduced do cover all complaints recorded</p>
<p>4. Equipping the CCT with the capacity and resources to support and drive improved Council wide complaint handling performance and to support the monitoring of trends to improve service delivery and/or reduce further complaints.</p>	<p><i>In progress</i></p> <p>Based on the volumes of work, approval for an additional 3 permanent staff was given in addition to temporary Agency staff pending their appointment to clear backlogs.</p>
<p>5. Reviewing the current complaint handling operating model to ensure it is fit for purpose and supports the ambition to improve performance.</p>	<p><i>In progress</i></p> <p>Whilst some changes to the operating model have been identified these changes are yet to be fully implemented. The improvement in performance does evidence the positive impact of changes made to date</p>
<p>6. Reaffirming responsibilities and accountabilities for complaint handling across Departments and Services.</p>	<p><i>In progress</i></p> <p>Guidance is currently being drafted to share with Departments and Services and a more generic way of working has been introduced into the CCT. Additionally CMT have been asked to approve some further key changes and processes.</p>
<p>7. Assessing whether the improvement actions introduced in Information Governance, which gave rise to significant performance and process improvement, could be replicated</p>	<p>√</p> <p>A number of process improvements have been successfully replicated from Information Governance.</p>

within complaint handling with similar success.	
8. Reviewing the Councils complaint handling policy focussing on the timescales for responding to complaints ensuring that they are, realistic, achievable, comparable to neighbouring Councils whilst demonstrating the Councils ambition to substantially improve both response times and the quality of responses.	X Work on this has not yet started and it is anticipated that this may not start until the step change in current performance has been achieved. The intention is to improve local performance response times once we have elevated current performance and removed backlogs
9. Reviewing the content of all external and internal websites to ensure up to date information is available for employees and Service users.	<i>In progress</i> The external websites have recently been reviewed and updated but the internal websites are yet to have a full review.
10. Ensuring all those involved in complaint handling have access to specialist advice, support, guidance, training and training material.	<i>In progress</i> The CCT has been reconfigured to ensure that staff are available to support Departments and Services in all aspects of complaint handling but the training has yet to be addressed.

4. FINANCIAL & RESOURCE APPRAISAL

Please see point 4 of the action plan above which covers the temporary and permanent additional resources recently added to the CCT.

5. RISK MANAGEMENT AND GOVERNANCE ISSUES

A complainant can refer to the Local Government and Social Care Ombudsman (LGSCO) at any time after making their complaint; however, the LGSCO will not normally take any action until the Council's own investigations have been concluded (immediately following the Stage 1 for Adult Social Care and Public Health complaints; following Stage 3 for Children's Social Care, and following Stage 2 for all other complaints). Where investigations are upheld by the LGSCO there could be both a reputational and financial risk to the Council as their investigation reports are made public and substantial compensation can be awarded to individual complainants. Additionally, the LGSCO annual performance reports are made public.

From the annual 2020/21 performance report issued by the LGSCO at the end of July 2021 (see link in 12. Background Documents), it was confirmed that the LGSCO carried out 23 detailed investigations, as a result of complaints, about Bradford Council and whilst this was fewer than the previous financial year (35) the uphold rate increased from 60% in

2019/20 to 83% in 2020/21.

This level of performance, as assessed by the LGCSO, is leaving the Council at increased reputational and financial risk and whilst some of the detailed investigations carried out by the LGCSO will be as a result of the Councils previous poor response rates, this will not be applicable to all referrals to the LGCSO and our improved response rates may not impact as positively on the uphold rate for the current year as we would like. This is why it is important that the team start to look at the action highlighted in part 4 above – “to support the monitoring of trends to improve service delivery and/or reduce further complaints”.

Appendix 3 details the Councils performance, as assessed by the LGCSO, for the last two financial years, benchmarked against the 4 West Yorkshire Councils.

6. LEGAL APPRAISAL

There are no additional legal issues. Complaint procedures and responses are required by law.

7. OTHER IMPLICATIONS

7.1 SUSTAINABILITY IMPLICATIONS

There are no sustainability implications

7.2 GREENHOUSE GAS EMISSIONS IMPACTS

None

7.3 COMMUNITY SAFETY IMPLICATIONS

None

7.4 HUMAN RIGHTS ACT

There are no Human Rights implications

7.5 TRADE UNION

There are no trade union issues arising from the contents of this Report.

7.6 WARD IMPLICATIONS

None

7.7 AREA COMMITTEE ACTION PLAN IMPLICATIONS (for reports to Area Committees only)

N/A

7.8 IMPLICATIONS FOR CORPORATE PARENTING

None

7.9 ISSUES ARISING FROM PRIVACY IMPACT ASSESMENT

None

8. NOT FOR PUBLICATION DOCUMENTS

None

9. OPTIONS

N/A

10. RECOMMENDATIONS

- (1) That the performance improvements detailed within report be noted and that the ongoing improvement actions be supported.**
- (2) That the 2021/22 full annual performance report is submitted to the Committee in Spring / Summer 2022.**

11. APPENDICES

Appendix 1 Resolution timescales
Appendix 2 Performance Statistics 2020/21
Appendix 3 LGCSO annual performance data

12. BACKGROUND DOCUMENTS

LGSCO Annual Report – [City Of Bradford Metropolitan District Council - Local Government and Social Care Ombudsman](#)

APPENDIX 1

Resolution timescales

The following table represents the current timescales for resolving a complaint either in accordance with legislation (*green*) or in accordance with Council policy (*amber*). For those internal (Council policy) response times it is the intention that we will reduce these to be comparable with best practice on a phased implementation basis to allow backlog and other legacy issues to be addressed and to ensure that we are able to deliver consistently.

	Stage 1	Stage 2	Stage 3
Adult Social Care and Public Health	20 working days	Not applicable	Not applicable
Children's Social Care	10 working days (an extension of up to an additional 10 working days is permitted)	25 working days (an extension of up to an additional 40 working days is permitted)	50 working days (Review Panel 30 working days from request; Chair's report 5 working days from Review Panel; Director's response 15 working days from Chair's report)
All other Departments	20 working days	65 working days	Not applicable

APPENDIX 2
Performance Statistics 2020/21

		Adult Social Care & Public Health		Childrens Social Care		All Other Departments		<u>TOTALS</u>	
		2020/21	*2021/22	2020/21	*2021/22	2020/21	*2021/22	2020/21	*2021/22
Pre Complaint (Stage 0)	Received	65	16	144	52	247	56	<u>456</u>	<u>124</u>
	Resolved	98	16	174	57	299	46	<u>571</u>	<u>119</u>
	Resolved in timescale	26	9	30	12	112	15	<u>168</u>	<u>36</u>
	% resolved in timescale	27%	56%	17%	21%	37%	33%	<u>29%</u>	<u>30%</u>
Formal Resolution (Stage 1)	Received	126	73	191	181	658	49	<u>967</u>	<u>553</u>
	Responded to	137	65	187	166	422	24	<u>746</u>	<u>498</u>
	Responded to in timescale	18	36	32	103	317	13	<u>367</u>	<u>287</u>
	% responded to in timescale	13%	55%	17%	62%	75%	54%	<u>49%</u>	<u>58%</u>
Formal Resolution (Stage 2)	Received	N/A	N/A	37	11	117	29	<u>154</u>	<u>40</u>
	Responded to	N/A	N/A	25	4	100	80	<u>125</u>	<u>84</u>
	Responded to in timescale	N/A	N/A	11	3	41	57	<u>52</u>	<u>60</u>
	% responded to in timescale	N/A	N/A	44%	56%	41%	71%	<u>41%</u>	<u>71%</u>

***to 30/9/2021**

APPENDIX 3

LGSCO - Annual Performance

2020/2021	Bradford	Calderdale	Kirklees	Leeds	Wakefield	WY Average
No.of detailed investigations	23	12	21	33	8	19
No. of upheld decisions	19	11	13	25	6	15
% Uphold rate	83%	92%	62%	76%	75%	76
% Compliant with Recommendations	100%	100%	100%	100%	100%	1
No. of satisfactory remedies prior to Complaint	1	0	1	4	0	1
% of satisfactory remedies prior to Complaint	5	0	8	16	0	6

2019/20	Bradford	Calderdale	Kirklees	Leeds	Wakefield	Average
No.of detailed investigations	35	19	23	49	19	29
No. of upheld decisions	21	14	12	31	7	17
% Uphold rate	60%	74%	52%	63%	37%	59
% Compliant with Recommendations	94%	100%	100%	100%	100%	1
No. of satisfactory remedies prior to Complaint	0	0	1	4	0	1
% of satisfactory remedies prior to Complaint	0	0	8	13	0	3