

# Audit & Governance Committee 20 November 2024

# 6 Month Complaints Update Report 2024/25

#### Purpose of the report:

This report provides a summary and analysis of complaints received during the period 1 April 2024 to 30 September 2024. The report supports the Customer Promise principles in listening to customer feedback and delivering excellent customer service.

#### Recommendations:

It is recommended that:

- 1. The Committee notes the content of this report, the analysis of the Council's complaints performance
- 2. The Committee notes the improvement actions that have been delivered and actions in progress.

#### Introduction:

- The Council provides the facility for customers to make a complaint or compliment in relation to Council services in an accessible and consistent way.
- 2. The Council has a two-stage procedure for complaints about all Council Services except complaints about Adult Social Care and Children's Social Care Services. Adult Social Care operates a single stage statutory complaints procedure. Children's Social Care operates a three-stage statutory complaints procedure.
- Complaints are managed and handled by three Customer Relations Teams. The complaint teams operate independently, each addressing specific service-related complaints, compliments, and member enquiries. The Adults Social Care Team deals with statutory

complaints about Adult Social Care services. The Children's and Education Team handles statutory complaints for Children's Social Care and non-statutory Education complaints. The Customer, Digital and Change (CDC) team manages all other non-statutory complaints except Education, including complaints about Payroll and Pensions.

- 4. For Education services, the Tribunals team offers a route to appeal decisions. When complaints relate solely to disagreement with the outcome of a decision, the Customer Relations team signpost to the Tribunals team.
- 5. This report provides an analysis of the number of complaints recorded about Surrey County Council between 1 April 2024 and 30 September 2024, including complaints from the Local Government & Social Care Ombudsman (LGSCO).

## Key Highlights:

- 6. Annex 1 and 2 shows the complaints volumes and performance position at the end of Quarter 1 and Quarter 2 for the 2024/25 year. The compliment volumes are also included within those annexes.
- 7. The table below (figure 1) shows a breakdown of complaints by service and stage for the first six months of this financial year.
- 8. This includes the number of complaints handled at each stage of the complaints process for statutory and non-statutory complaints.

Figure 1: The number of complaints received at each stage of the complaints process

|                        | Stage 1 | Stage 2 | Stage 3 | LGSCO<br>Decisions |
|------------------------|---------|---------|---------|--------------------|
| Children's Social Care | 291     | 21      | 3       | 1                  |
| Education              | 397     | 159     | 0       | 62                 |
| AWHP                   | 188     |         |         | 16                 |
| All Council Services   | 215     | 106     | N/A     | 17                 |
| TOTAL                  | 1129    | 286     | 3       | 86                 |

9. The top theme for complaints about Children's Social Care were in relation to delays with the assessment process.

- 10. The top themes for complaints about the Education service were missed provision and delays in Annual Reviews for Educational Health Care Plans (EHCPs).
- 11. The top themes for complaints for corporate (all other services) were about Highways issues, specifically, grass cutting, vegetation, trees and road works (resurfacing, road signs and potholes).
- 12. The volume of complaints received in the first 6 months has decreased compared to the same period in the last two financial year. There has been a 6% decrease in the number of complaints received. See figure 2 and figure 3.

Figure 2: A downward movement in the number of complaints received compared to last year

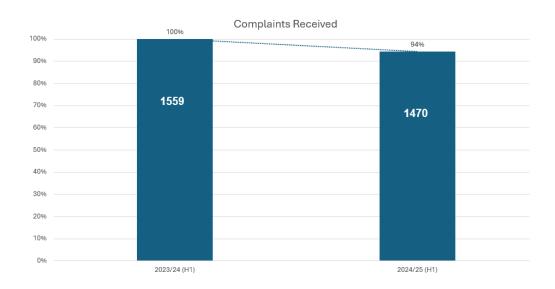
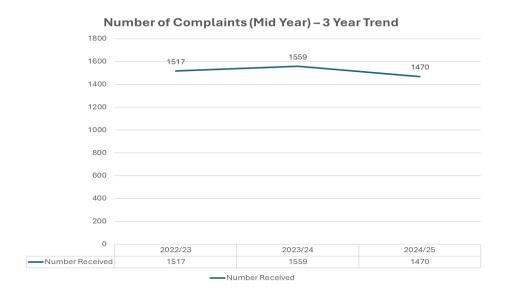


Figure 3 - Mid-year volumes for the last 3 years



- 13.26% of complaints raised so far in 2024/25 escalated to Stage Two. The Council recognises that further work is required to understand the quality of investigations at Stage One and to identify reasons for escalations and will review this as part of the ongoing improvement plan.
- 14. The lower volumes are a positive sign and reflect the efforts made by services across the Council to resolve complaints early on and in the timeliness of responses.

Figure 4: Performance against Key Performance Indicators (KPIs)

The table below shows the KPIs for complaints handling for statutory and non-statutory complaints.

| Case type                  | Response timeframes  | Target<br>(KPI) |
|----------------------------|--|-----------------|
| Corporate Stage 1          | 10 working days  | 90%             |
| Corporate Stage 2          | 20 working days  | 95%             |
| Statutory Children Stage 1 | 10 working days  | 80%             |
| Statutory Children Stage 2 | 25 working days (up to 65 working days)  | 80%             |
| Statutory Children Stage 3 | Within 15 days of review panel's report  | 80%             |
| Statutory Adult Stage 1    | 20 working days (internal) 6 months (legislative national statutory timeframe) | 90%             |

15. The summary table below shows the number of complaints responded to on time against complaint KPIs. The data is split into statutory and non-statutory categories.

| Non-Statutory | Corporate      | Education     | Total         |
|---------------|----------------|---------------|---------------|
| Stage One     | 58% (124/215)  | 52% (213/408) | 54% (337/623) |
| Stage Two     | 100% (106/106) | 85% (116/137) | 91% (222/243) |

| Statutory   | AWHP           | Children's Social Care |
|-------------|----------------|------------------------|
| Stage One   | 100% (144/144) | 62% (190/305)          |
| Stage Two   |                | 74% (14/19)            |
| Stage Three |                | 100% (3/3)             |
| Total       | 100%           | 63% (207/327)          |

- 16. Performance at Stage One is generally not meeting KPI targets. The responsibility to investigate and respond to complaints at Stage One sits with the services and work is underway to understand the reasons for underperformance to improve the response rate at Stage One.
- 17. The Complaint Teams investigate and respond to complaints that escalate to Stage Two. The data shows a notable improvement in the response rate at Stage Two for statutory and non-statutory complaints.
- 18.AWHP are meeting 100% performance in line with the national statutory timeframe which requires a response within 6-months. The service's response rate against the Council's target of 20 working days was 48% (69/144) complaints answered within 20 working days. This is because AWHP complaints are often complex and involve muti-agency responses. Where investigations and responses take longer than 20 working days, the complainant is always made aware of the extended response date before the deadline and in line with the legislation and best practice.

#### **Ombudsman Decisions:**

- 19. The table below shows the Ombudsman Decisions received in the first six months of 2024/25, these include volumes, the number of complaints upheld, and complaints not investigated further by the Ombudsman.
- 20. It is important to note that the number of complaints upheld by the Ombudsman includes complaints that were already investigated by the Council first and where the Council had offered a suitable remedy which the Ombudsman decided was fair and proportionate, with no further investigation undertaken by the Ombudsman. This distinction is reflected in the breakdown of upheld complaints (first two columns).

Figure 5: Breakdown of Ombudsman Decisions

| Service | Upheld | Upheld with no further action (Council had provided suitable remedy) | Not Upheld | Closed after initial enquiries with no further action |
|---------|--------|--|------------|---|
| AWHP    | 6      |  | 1          | 9   |

| CFLL           | 38 | 6 | 1 | 22 |
|----------------|----|---|---|----|
| Education      |    |   |   |    |
| Service        |    |   |   |    |
| CFLL           | 1  | 0 | 0 | 5  |
| Children's     |    |   |   |    |
| Social Care    |    |   |   |    |
| Corporate (all | 2  |   | 1 | 14 |
| other council  |    |   |   |    |
| services)      |    |   |   |    |
| Total          | 47 | 6 | 3 | 50 |

- 21. Education Services in particular are working to resolve concerns at the earliest stage, providing updates, solutions and appropriate provision as soon as an issue is identified at Stage One of the process.
- 22. Some of these issues are related to more wide-spread themes requiring system-wide improvements. The EHCP Recovery Plan is one such issue, which is now delivering clear performance improvements in 2024/25. Consequently, Stage One complaints relating to delays in EHC Needs Assessments have decreased, as noted in the recent <u>LGSCO Report</u>.
- 23. This previous report anticipated that a consequent reduction in the number of investigations upheld by the LGSCO would not be seen until 2025/26 due to the number of complaints already progressing within the complaints procedure. However, both the number and the proportion of LGSCO investigations related to delays in needs assessments have already decreased in the first six months of this year (2024/25), constituting only 39% of upheld investigations as opposed to 64% in the period April to September 2023 and 61% in the period October 2023 to March 2024.
- 24. The overall number of upheld investigations related to Education Services has not followed the upward trajectory of the past few years, but instead is levelling off following last year's levelling off of complaint volumes at Stage One. Between April and September 2023 there were 45 upheld investigations, and a further 72 between October 2023 and March 2024. In this current financial year (April to September 2024), there have been 44 upheld investigations, 6 of which with no further action as the Council had already acknowledged fault, resolved the issues and fully remedied at an earlier stage of the complaint procedure.
- 25. In terms of other key themes, there were 9 investigations related to delay in Annual Reviews of EHCPs last year, compared to 7 already in the first six months of this year, which indicates that this issue is

increasing in prevalence, as also noted in the recent LGSCO report. There is an action plan underway to address delays in processing annual reviews with 72% now up to date. We anticipate that this theme will begin to reduce over time as historic LGSCO complaints are finalised.

- 26. The Council previously reported to the Audit & Governance Committee on the time lag between improvements delivered and realising the impact of these actions on complaint volumes, especially given the historic nature of some complaints currently active in the complaint procedure.
- 27. The Council agreed at the last Committee meeting to share data on when a complaint, which had now received a final decision from the LGSCO, had first been raised at Stage 1. For 32 of the 38 (84%) LGSCO decisions so far this year related to Education services, the original complaint was raised in the financial year 2023-24. The remaining 6 were initiated during the current financial year.

## Financial Remedies:

- 28. When the Council recognises that a person has suffered an injustice, we try to put them back in the position they would have been had the error not occurred.
- 29. The Council has adopted the Ombudsman's approach and guidance on remedies as published in Summer 2023. This involves changing procedures to ensure that suitable remedies are provided at an earlier stage of the complaint procedure when more significant fault or injustice is found.
- 30. The total amount of financial redress paid in the first six months of 2024/25 year is set out in Figure 6 (below):

Figure 6: Financial Redress breakdown for six months

| Service Area  | Local remedy | LGSCO remedy | Total remedy |
|---|--------------|--------------|--------------|
| Adult Wellbeing and Health Partnerships (AWHP)                                | Nil          | £2410.63     | £2410.63     |
| Children Families and<br>Lifelong Learning (CFLL) -<br>Children's social care | £14,835.12   | £550.00      | £153,85.12   |
| Children Families and<br>Lifelong Learning (CFLL) -<br>Education              | £138,190.00  | £82,775.00   | £220,965.00  |
| Corporate (all other services)  | £200.00      | £550.00      | £750.00      |

| TOTAL | £153,225.12 | £85,735.63 | £239,510.75 |
|-------|-------------|------------|-------------|
|       |             |            |             |

- 31. During the first six months of this year the Council has paid £239,510.75 in financial remedies.
- 32. The majority of financial redress payments relate to Education services, with the largest individual payments arising from complaints about missed education or missed provision. This is where a child is unable to attend school because appropriate or alternative support has not been provided, or where the provision agreed in an Educational Health Care Plan (EHCP) has not been put in place. Missed education and missed provision is a factor in 20 of the 38 LGSCO investigations this year.
- 33. The three largest individual remedies so far this year (of £11,650, £8,900 and £8,353) were each issued primarily to recognise periods of missed educational provision.
- 34.So far this year, there has only been one significant payment for Children's Social Care, of £8,325.12, which related to errors and omissions in the application of a Special Guardianship Order.

#### Complaints Learning & Analysis:

#### Children's Families and Lifelong Learning

- 35. The data so far this year provides evidence that the year-on-year increase in Stage 1 complaint volumes in CFLL (Children's, Families & Lifelong Learning) Directorate continues to taper off and slightly decrease.
- 36. The increase in recent years in upheld LGSCO investigations can be attributed both to the nature of complaints about delays in the EHCP process (these can continue to be progressed through the complaint procedure even when they are appropriately upheld and remedied at an earlier stage), and to the changes in LGSCO practice around financial remedies.
- 37. The data above indicates that the number of upheld investigations is levelling off but not yet reducing, and also that the impact of the EHCP recovery plan is already starting to be seen at LGSCO investigation stage.
- 38.CFLL services are issuing more financial remedies at an early stage where this is justified, as shown in the percentages graph under paragraph 26. Although this means that the total payments for this year will likely be at a similar level to last year, this does need to take into account the change in Ombudsman guidance and practice. Were we not to take this approach, the overall remedy total would almost certainly be higher.

- 39. Communication is still a key theme in 30-40% of all complaints about CFLL services with a number of these, but not all, relating to Special Educational Needs (SEN) communications. There is a range of activity underway in response to this as part of the End-to-End Review of the EHCP process and in the Additional Needs & Disabilities Partnership Strategy. A Service Manager has been appointed to embed relational working across Education Services and training has already begun to build the skills and confidence of staff in using a restorative approach to resolve issues at the earliest stage possible.
- 40. Regarding the larger financial payments relating to periods of missed provision, these are often instances where a child is not attending school but has not yet been assessed as needing alternative provision or additional support. A planned restructure of Education Services with a greater focus on prevention, attendance and inclusion should see improvements in this area, and a more detailed update on the review of Section 19 duties was provided in September for the Audit & Governance Committee workplan under action A14/24.
- 41. The increase in complaints related to delays in Annual Reviews of EHCP has been addressed by the service deploying staff from the EHCP Recovery Plan to support on a short-term basis with outstanding reviews.
- 42. Additional posts that were recruited to SEND services and to the CFLL Customer Relations team have led to a gradual improvement in timeliness as evidenced when comparing this year's data in paragraph 13 to the <u>Annual Complaints Report</u> for last year.
- 43. Of particular note is the improvement in response time to enquiries that residents send via MPs and Councillors. A new dedicated mailbox, additional staff resource, and an increase in signposting families to the complaint procedure has led to less duplication of work and a much-improved service. Average response time has come down from over 20 working days in 2023-24 to 8 working days in 2024-25, with 96% of enquiries responded to on time.
- 44. More detail on the points above, and on other aspects of the improvements underway in CFLL services is described in more detail in Annex 2 of the recent LGSCO report.

#### **Adult Wellbeing and Health Partnerships**

45. In AWHP (Adults, Wellbeing & Health Partnership) Directorate over the last half year, the volumes of complaints recorded has continued to be around 90-100 complaints per quarter. This has now levelled after an increase of 25% in previous years.

- 46. The directorate is offering staff the opportunity to attend the LGSCO 'Effective Complaint Handling' online training workshops covering skills in investigating complaints. This course is aimed at staff dealing with complaints at the later stages of the process, such as managers and complaints officers.
- 47. As part of the Council's commitment to equality, diversity, and inclusion (EDI), AWHP analyse complaints through an EDI lens to understand if complaints received from residents with protected characteristics (age, ethnicity, disability) are relative to the number of open cases and therefore how accessible our complaints process is.
- 48. The AWHP Customer Relations team are also working on an internal 'Learning from Complaints' report to share with the Practice Assurance Board to ensure any learning is being embedded into practice.

#### **Corporate - Other Council Services**

- 49. The Corporate Customer Relations Team has focused on delivering effective complaints handling training to support front line services drafting Stage One complaint responses. The service has seen an improvement in performance against timescales and continues develop good complaints handling practices to improve the customers complaints journey and experience. The improvement is also notable from fewer Ombudsman decision about corporate service complaints. This is indicative of improvements implemented locally to the Council's complaints process and in providing comprehensive responses to complainants.
- 50. From April 2024, the Customer Relations Team has streamlined processes and now carries out an initial assessment on new complaints, with a focus on early resolution. This has positively impacted customer service and improved working relationships between the Customer Relations Officers and operational colleagues. Further work is under way with services to improve complaints handling at Stage One to provide high quality responses early thereby preventing unnecessary escalation. The team are also working to improve complaints information on the Council's website so that residents can self-serve more easily and have access to the right information and processes rather than make a complaint.
- 51. The Customer Relations Team has adopted the latest advice, guidance and best practice from the Ombudsman's complaint handling code. In applying this new approach to complaints handling, the team are focusing on early resolution and achieving an excellent

- response rate to complaints considered at the final stage of the complaint procedure.
- 52. In August 2024, Anitha Pillai joined the Council as our Senior Complaints Practice Lead in the Council's Customer Services team and is leading the cross-Council improvement works summarised below.

#### Summary of improvement work underway

- 53. The Committee asked for an update on the improvement actions and details of progress made. We have introduced a number of enhancements which include changing the frequency of performance reporting to provide an update to leadership team on key complaint volumes, timeliness and escalation rates, with breakdown by services and graphs showing year-to-date.
- 54. Further work is ongoing to improve the report format to refine and improve clarity and impact.
- 55. Work is underway to stabilise and improve the complaint IT system and reporting functionalities. This includes addressing current system challenges in the short term; and designing technology requirements to inform better ways of working in the medium term.
- 56. All tasks remain on track for completion by March 2025. Please find further details at Annex 3.

#### Financial and value for money implications

57. Complaints are an integral component of any customer facing service. Payment of financial redress (as shown in figure 4) is the financial implication of complaint handling. Responding to complaints quickly and resolving concerns as early as possible ensures complaints do not escalate unnecessarily through the process and minimises the requirement to pay financial redress.

#### **Equalities and Diversity Implications**

58. Ensuring we maintain good complaint handling processes enables our service to remain accessible to all. We continually review ease of access to all three complaints procedures to ensure groups, and individuals with protected characteristics, are not disadvantaged in any way. Should an equality or diversity issue be identified through a complaint investigation, this will be addressed directly with the service concerned and remedial actions put in place. The learning will also be shared as part of the Council's commitment to equality, diversity, and inclusion.

# **Risk Management Implications**

59. The complaints process does not have any direct risk management implications. However, complaints do carry both a financial and reputational risk to the Council's if the subject of the concerns is not appropriately addressed by the services to which they relate. Complaints are included in the Risk Register for the appropriate service and monitored accordingly. We routinely review and report on complaints data to ensure our processes are effective and to minimise any risk.

#### Legal Implications:

60. This report is a noting report and there are no legal implications directly arising from the contents. The implementation of our learning from complaints and listening to our residents should lead to a reduction of complaints received and a reduction in those going to the Ombudsman or the Courts. Social Care services for Adults and Children are required to follow a separate procedure stipulated by the Department of Health (DOH) and Department for Education & Skills (DFES) as set out in the report. Regular reports on the Council's performance in responding to complaints assists the Council to ensure that it complies with its best value duty to secure continuous improvement in the way in which its functions are exercised having regard to a combination of economy, efficiency, and effectiveness.

#### Next steps:

- 61. The operational review undertaken in Q4 2023/24 recommended a number of improvement actions. Some of these actions have been implemented and others are underway. Services will continue to work together to deliver on the improvement actions and a further update on progress will be provided as well as a report on this financial year's complaints performance as per the Audit and Governance workplan for 2025/26.
- 62. The Customer Transformation Programme is underway in Surrey County Council to deliver better outcomes for customers. The review on complaints handling process and technology has commenced and offers an excellent opportunity to take a one council approach to improving complaints performance.

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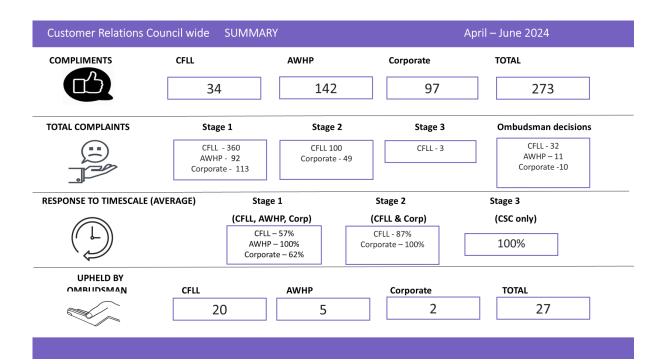
# Sources/background papers:

None

## **Annexes/Appendices:**

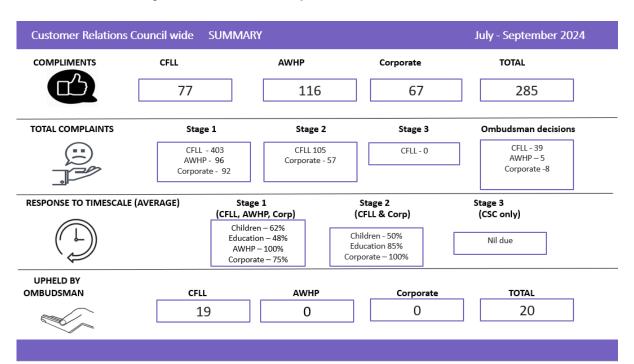
- Annex 1 Summary report for first quarter (1 April to 30 June 2024)
- Annex 2 Summary report for second quarter (1 July to September 2024/25
- Annex 3 Progress update on Improvement Actions

**Annex 1: Summary Quarter One Complaints Data** 



B: AWHP on time response KPI = legislative statutory time frame (6 months), not SCC internal KPI target (20 working days).

**Annex 2: Summary Quarter Two Complaints Data** 



NB: AWHP on time response KPI = legislative statutory time frame (6 months), not SCC internal KPI target (20 working days).

# Annex 3 – An update on Service Improvement Actions

| Improvement Actions   | Progress Update   | Status /Target Date  |
|---|---|--|
| The EHCP Recovery Plan  | The EHCP Recovery Plan has led to ongoing improvements in issuing EHCPs within statutory timescales, from 16% in September 2023 to 64% issued on time in September 2024   | KPIs with targets for 31 December 2024 can be found in Appendix 5 – Table 7 (Page 185) in the CFLLC Select Committee papers dated 12 September 2024. |
| To carry out an evaluation of SCC's existing complaints case management system (in progress)  | A working group set up to look at system requirements and options for a new case management system. This includes understanding existing systems in SCC   | Ongoing - on target to be completed by November 2024   |
| To review complaints reporting (content and frequency) along with key performance indicators to ensure they are fit-for-purpose and provide the right insight (in progress – included as part of a wider review of customer experience performance reporting) | <ul> <li>The frequency and format of performance reporting from weekly to monthly reports to give Senior Leadership team month on month data and insight.</li> <li>To standardise the format of the monthly and quarterly reports (Work in progress)</li> </ul> | Ongoing - on target to be completed by December 2024   |
| To design and roll out a comprehensive training programme for staff in complaint handling   | This includes a full review<br>on policy and process and<br>delivery of training for staff<br>across all services.  | Work in progress – completion<br>by March 2025   |
| To establish a community of practice (CoP) within Customer Relations to share best practice, address performance challenges and create consistency in approach  | <ul> <li>Identified core members who are responsible for complaints management and created an online platform for communication and collaboration.</li> <li>Organised regular meetings to share knowledge and experiences.</li> </ul>                           | In development – completion<br>by December 2024  |
| To set up a framework for continuous improvement to manage the learning from complaints and support ongoing service improvement   | This framework will be developed as part of the new case management system which will support learning and continuous improvement to systemically learn from complaints   | In design – completion by March 2025   |