

Report to:	OVERVIEW PANEL
Date:	26 September 2022
Reporting Officer:	Sandra Stewart – Chief Executive/Director of Pensions Julie Speakman – Head of Executive Support
Subject:	UNDERSTANDING OUR CUSTOMER CONTACTS AND LEARNING FROM OUR COMPLAINTS
Report Summary:	The report provides an update and strategic overview in relation to dealing with and responding to customer contacts. This report also provides a summary of complaints received by the organisation, those that escalated to a statutory panel and or Local Government and Social Care Ombudsman. The report also provides a summary of how the review and management of these contacts can help drive system improvement.
Recommendations:	Overview Panel are asked to note: <ul style="list-style-type: none"> (a) the content of the update and strategic overview of complaint system/process (b) support the refreshed training offer being promoted across the organisations; and (c) receive further more detailed reports in relation to the top 5 key areas of complaints.
Corporate Plan:	Putting people at the forefront of services is a key element of the Council's Corporate Plan. An effective and robust complaints handling procedure is a necessary step to achieving this.
Policy Implications:	An effective complaint function means that residents who do not receive the best quality service can notify the Council for the purposes of redress and the improvement of services in the future. It is important for the Council to take notice of findings and guidance on complaint handling to aid best practice. As a leader for the Customer Service Excellence standard it is also important to use this as an improvement tool to inform our custom and practice for service delivery.
Financial Implications: (Authorised by the statutory Section 151 Officer & Chief Finance Officer)	This report is an update on our performance in relation to complaints. Dealing with service failure has a financial impact both in terms of the consequences of the complaint and the significant resource required to respond to the complaint process.
Legal Implications: (Authorised by the Borough Solicitor)	<p>The report provides Members with an overview of the council's performance dealing with and responding to customer contacts.</p> <p>In 2020, the Local Government and Social Care Ombudsman stated: <i>The best authorities use complaints as a barometer of external opinion and as an early warning of problems that might otherwise stay unseen. They take that a step further and use critical feedback to drive a sophisticated culture of learning, reflection and improvement.</i></p> <p>Not only is having an effective process for managing contacts and complaints advisable for the effective delivery of services and to</p>

support the continuing drive for improvement it is also a legislative requirement with regard to the Ombudsman's role.

The Ombudsman's role is covered by the Local Government Act 1974 which defines the main statutory functions for the Ombudsman as:

- to investigate complaints against councils and some other authorities
- to investigate complaints about adult social care providers from people who arrange or fund their adult social care (Health Act 2009).

The Ombudsmen's jurisdiction under Part III of the Act covers all local authorities (excluding town and parish councils); police and crime bodies; and school admission appeal panels.

The LGO corporate strategy is based upon twin pillars of remedying injustice and improving local public services.

The Ombudsman is confident that the continued publication of decisions, focus reports on key themes and the data in the annual review letter is helping the sector to learn from its mistakes and support better services for citizens. The Ombudsman also urges the scrutiny of data on complaints to improve services.


In addition in 2020 the Local Government and Social Care Ombudsman issued new guidance on effective complaint handling for local authorities which provides practical advice and guidance on running effective complaints handling processes to which all councils are expected to comply.

Risk Management:

Failure to understand complaints received by the Council and analyse volumes and themes overall will lead to a risk of poor service delivery.

Access to Information:

The background papers relating to this report can be inspected by contacting the report writer Julie Speakman Head of Executive Support.

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1. INTRODUCTION

- 1.1 Tameside Council strives to deliver excellent customer service. The Council delivers a wide range of services and whilst endeavouring to provide a consistent, high quality service, with good outcomes for our customers, we also recognise that occasionally issues can occur and things can go wrong.
- 1.2 We recognise the importance of listening to any feedback we receive, as this provides a valuable source of information; it lets us know what we are doing well and equally where service improvements can possibly be made. The information that customers request is also a useful tool to understand what is important to them and what information we should be ensuring is readily available through our channels of communication including one of our main assets, our websites.
- 1.3 The iCasework complaints and information case management system is managed and maintained by the Information & Improvement Team for records, processes and monitors contacts received by the organisation which include:-
- Corporate Complaints
 - Social care complaints (Children's & Adult's)
 - LGO & ICO Enquiries & Complaints
 - MP Enquiries
 - Freedom of Information Requests (FOI)
 - Subject Access Requests (SARs)
 - PSI – Applications for re-use
 - Compliments
 - Suggestions (customers & staff)
 - General Customer Enquiries
 - Whistleblowing concerns
- 1.4 Table 1 outlines the case work volumes per theme.

Table 1

	Work Areas	Case Volumes		
		2020	2021	2022 **
	Information & Data Team			
	Freedom of Information requests - TMBC	1091	1069	663
	Freedom of Information requests - CCG/ICS	177	178	84
	FOI Internal Reviews	10	6	4
	ICO Enquiries / Investigations	1	2	1
	Subject Access Requests - TMBC	230	265	181
	Subject Access Requests - CCG	4	3	5
	Subject Access Internal Reviews	0	3	1
	Disclosure Request/Missing Person requests	8	13	7
	Coroners	3		
	Complaints & Customer Care Team			
	Childrens Complaints - Stage 1	102	221	102
	Childrens Complaints - Stage 2	41	67	38
	Childrens Complaints - Stage 3	4	2	0
	Adults Complaints - Stage 1	76	92	56
	Adults Complaints - Stage 2	21	32	12
	Corporate Complaints - Stage 1	457	606	563
	Corporate Complaints - Stage 2	84	154	90

LGO enquiries / complaints	42	56	21
MP enquiries - TMBC	1130	875	574
MP enquiries - CCG	40	88	14
Complaint telephone calls	805	1574	1050
Complaint web chats	935	2727	916
Whistleblowing	21	24	13
Enquiries / service requests - TMBC	1991	4250	2221
Compliments	16	87	14
CCG/ICS Enquiries/Complaints	47	175	79

**as at 31/07/2022

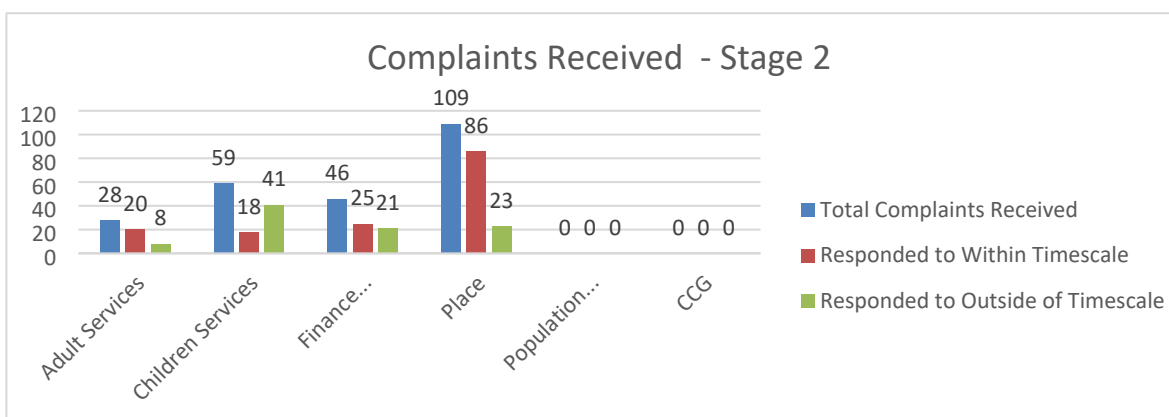
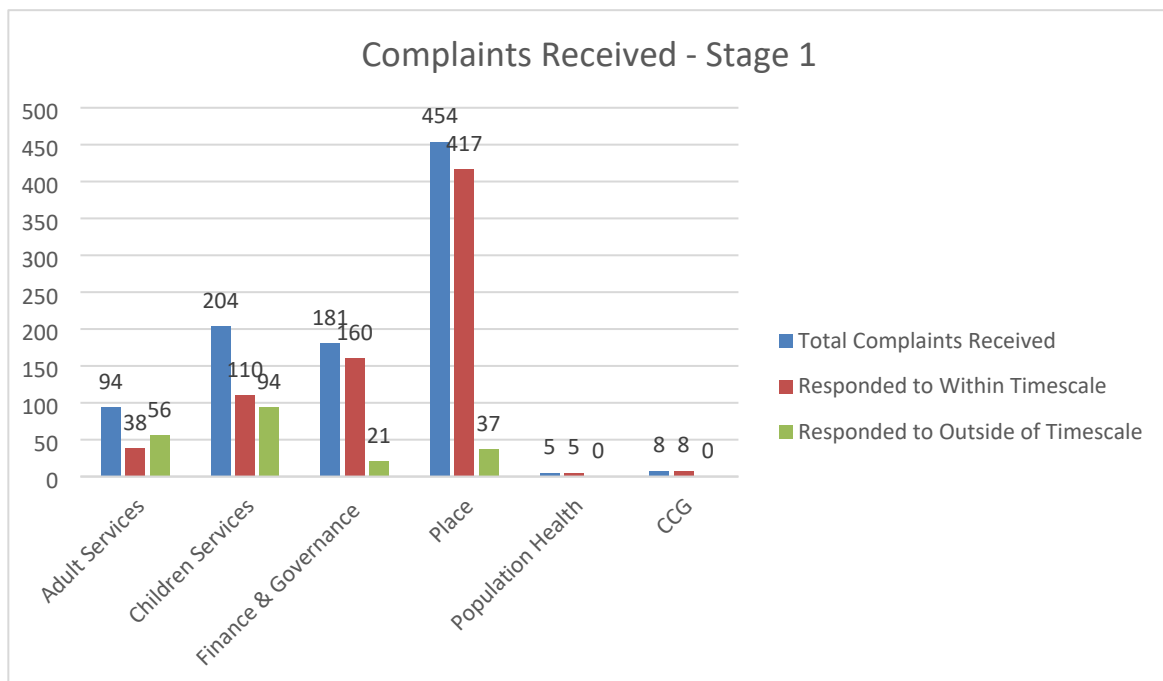
2. COMPLAINTS AND CUSTOMER CARE

- 2.1 In most cases, before any issues are considered via the formal complaints process, they must have been highlighted to the appropriate Council service through the service request process. By raising the issue as a service request initially, it allows us the opportunity to resolve the matter quickly and efficiently, so that customers can get the service that they want.
- 2.2 A complaint is generally defined as any expression of dissatisfaction specifically relating to a council service, or a body acting on behalf of the council, about the actions the service has taken, or a lack of action that has occurred. If at the end of the service request process, if the customer remain dissatisfied, they can contact the Complaints & Customer Care Team to raise a formal complaint. We will provide an impartial, fair and structured process for dealing with complaints.
- 2.3 It is our aim to make sure customers get a response as soon as possible, and where we can resolve issues quickly we will always endeavour to do so. Where cases are more complex, customers might be asked to agree a statement of complaint to ensure that all issues are fully understood and can be investigated; in these cases resolution may take a little longer.
- 2.4 There are three distinct areas in terms of the Council's complaints process that customers can access; these are the statutory processes for a) Children's Social Care,(Stage 1, 2 and 3 process) Adults Social Care and the corporate complaints(Stage1 and 2 process) relating to issues regarding to any other council wide service.
- 2.5 For any customer that remain dissatisfied in the handling or response to their council complaint then they can escalate their concerns to the Local Government and Social Care Ombudsman (LGSCO) who are independent from the council and investigate complaints and maladministration. The customer retain the right to approach the LGSCO during any stage of the complaints process, however the Ombudsman would ordinarily expect that contact is made with the council in the first instance, so that any issues raised can be considered locally and an attempt to reach a suitable resolution can be made.
- 2.6 Focusing on complaints for the period 1 April 2021 to 31 March 2022, the organisation has received and processed a total of 1,188 complaints of which 946 were Stage 1 and 242 were Stage 2.

Complaints Received 1 April 2021 - 31 March 2022



2.7 The breakdown of the complaints received at Stage 1 and Stage 2 together with the volume received per service directorate is outlined in the table below. This also identifies if these were fully responded to within the 20 working day timescale.

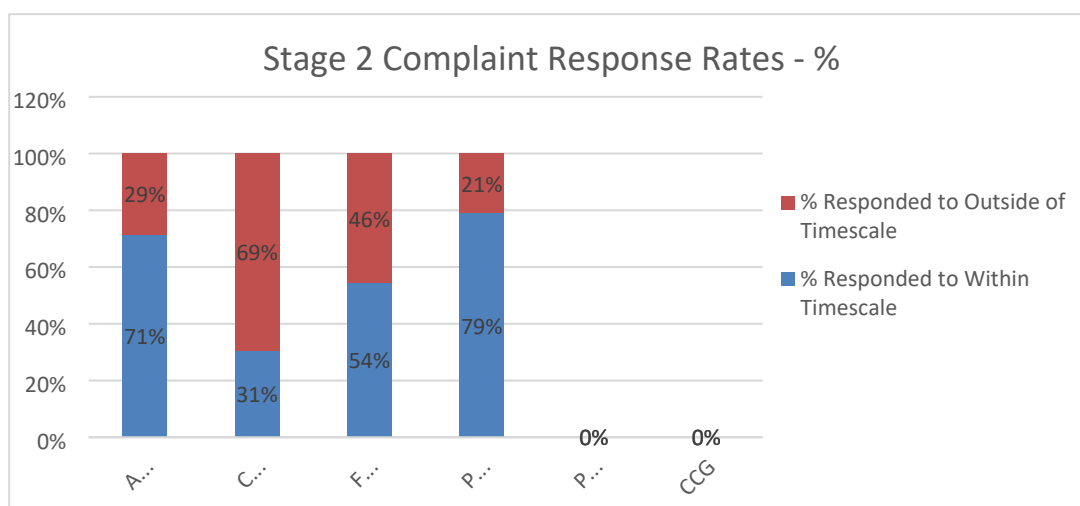
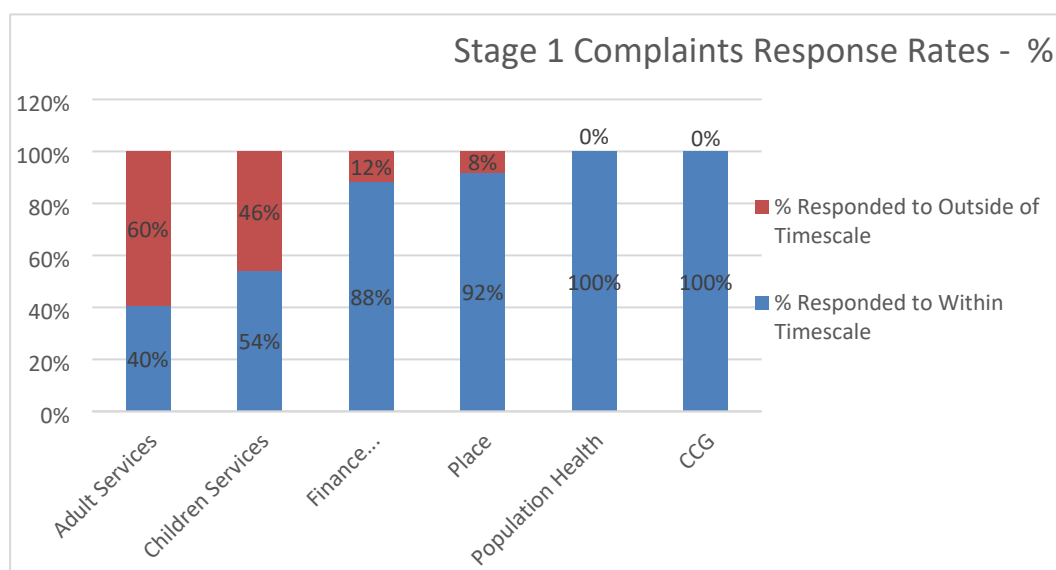


2.8 It should be noted that high volumes of complaints received, does not necessarily indicate the quality of the council's performance. High volumes of complaints can be a sign that we are an open organisation and complaints can act as an early warning of wider problems developing. Low complaint volumes, rather than always being an indicator that all is well, can be a worrying

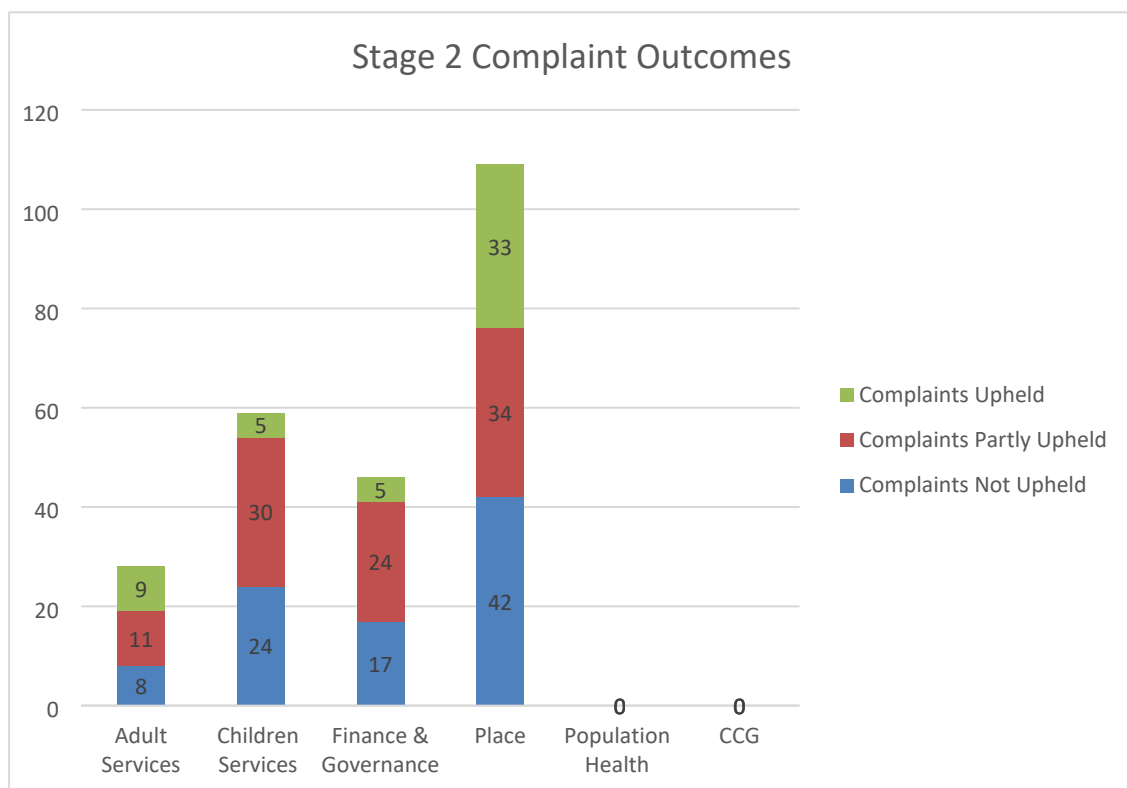
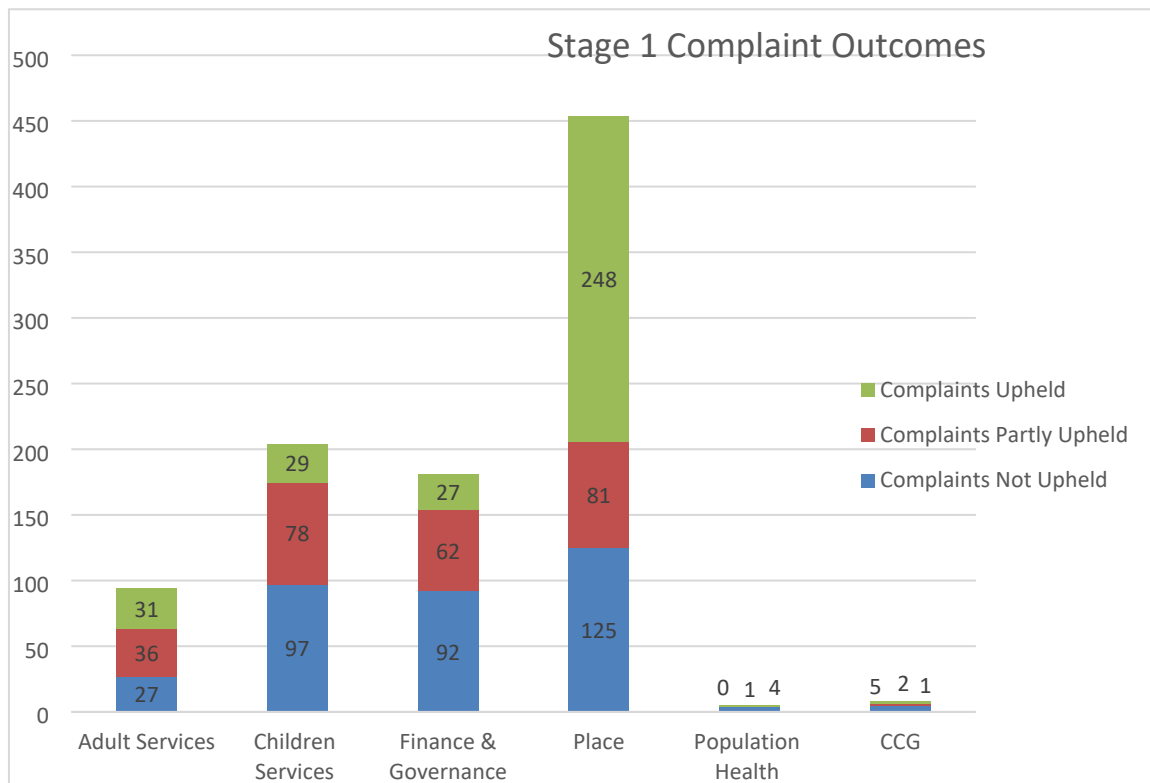
indicator that the authority is not alert to customer feedback and that service users do not believe that complaining will have an effect.

2.9 From the total complaints received during this reporting period, 78% of cases were responded to within the prescribed timescale compared with 57% from the previous reportable year for Stage 1 complaints. This is a pleasing improvement however, we cannot be complacent and must continue to work hard to increase this response rate. It is important to note that although there was 28% outside of the prescribed timescales there will be many reasons for this however active dialogue with customers will have taken place to keep them update on progress of when they would be likely to receive their responses. For Stage 2, 62% were responded to within the prescribed timescale and 38% outside of.

2.10 The following tables show the response rates of Stage 1 and 2 complaints by service directorate.



2.11 From the complaints processed and completed during the reporting period, the following complaint outcomes were recorded.



2.12 A summary of complaints currently in the system are attached to **Appendix A** and this also identifies at the top level the type and root cause of the complaint.

2.13 Understanding why customers (service users, residents) complain, is an important factor of the complaints process. Collecting and analysing this information, allows us to identify where

service failure is occurring, emerging patterns then helps provide us with the opportunity to put things right. Recognising where things are going wrong and implementing changes and improvements, will in turn reduce the number of complaints received and the improve the quality and experience that customers receive.

2.14 In relation to the top 4 issues/root causes we can see general themes coming through across the organisations this reportable period namely:-

- a) Failure or delay in doing something – 335. This is predominantly in Waste, Children's and Adults
- b) Not to the quality or standard expected – 74. This is predominantly in Children's, Adults and Waste.
- c) Disagree with charges – 39. This is predominantly in Exchequer Services.
- d) Inappropriate behaviour/staff conduct – 17. This is predominantly in Waste.

2.15 The data that is held within the system will also identify the specific issues that will help to inform service improvement and where additional staff training may be required across specific areas. During the last reporting period we can outline where the data has enabled improvements to be made which some are identified below.

Children's Social Care	
a)	As a result of complaints about the number of different social workers young people were experiencing, as well as delays in tasks being completed as a result of staff leaving, the Service gave a commitment to addressing the wider issues surrounding the recruitment and retention of social workers.
b)	As a result of a number of complaints about difficulties and delays in the process for obtaining passports for children and young people who are looked after by the local authority, amendments to that process were made to ensure that all documents received into the Council regarding the applications were logged and sent by Recorded Delivery to the Passport Office.
c)	Following a complaint about a failure to ensure parents were informed in a timely manner when the cancellation of a meeting is unavoidable, the need to ensure families were consulted at the earliest opportunity was raised with Teams in Children's Social Care.
d)	As a result of a complaint that concerns raised with a Manager had not been dealt with as a complaint, as had been expected, the Local Authority gave an undertaking that it would ensure managers in Children's Services attended Customer Care and Complaints Handling Training. It is anticipated that bespoke sessions will be provided to staff commencing in Autumn 2022.
e)	Following a complaint about a Risk Assessment document containing a number of errors, Children's Services agreed that training for staff in this area would be considered when setting the Children's Social Care training plan.
f)	Children's Social Care also gave a commitment to ensuring that its electronic recording systems remained compliant with General Data Protection Regulations (GDPR) thorough its thematic audits, supervision and quality assurance processes.
Adult Social Care	
a)	As a result of a complaint that information had been shared with a family member without the consent of either the Service User or the named Next of Kin. The Service recommended that a pre-existing consent form, which was ordinarily used for sharing information between professionals, be utilised to ensure explicit consent for information sharing with family members and other carers was sought.
b)	In addition to A) above, a recommendation was made for the Information Governance (UG) Team to provide additional IG training for Adult Social Care staff. This was above and beyond what is already provided for all Council employees as mandatory data protection training, in conjunction with the Caldicott Guardian, to ensure that it meets the needs of social workers and also recognises the need to share in appropriate circumstances, as well as not to share.

c)	There was also a commitment to a refreshed training programme regarding the owner of personal data, when an individual has capacity and when capacity is lacking.
Education	
a)	As a remedy for a complaint, it was agreed that the Early Years provider agreement be reviewed so that providers are not left out of pocket should placements be terminated early in circumstances where safeguarding concerns need to be reported. A commitment was given to asking the Early Years Funding Team to put a proposal together to include a notice period appeal mechanism should a parent choose to leave a provider without notice for exceptional reasons.
b)	A complaint about the delays in the School Admissions Team not having dealt with a school placement application within 20 school days, resulting in no school place being offered, a more timely process for following up applications was implemented to ensure this situation did not arise again.
c)	Following a complaint that the Special Education Needs (SEN) Team did not provide clear guidance on the process for re-assessment, this was discussed with the Team Manager, who agreed to reflect on this with the team, and consider how they could work more constructively with families in the future.
d)	A complaint that a SEN Caseworker did not reply within an agreed timeframe to questions raised by a parent, and the worker having no recollection of having committed to the timeframe, led to a concern that officers were not keeping good enough notes of discussions or sharing agreed actions with families. The Head of SEN was asked to address this in a training session for the team.
e)	In a complaint that information provided by a paediatrician, which a parent sent to the Council in support of her application for her child's EHCP, had not been included in the evidence submitted as part of the Panel process due to the Caseworker having left the Council's employment and not having undertaken a proper handover, the handover protocols for staff leaving the Council were reviewed to ensure that this cannot happen in the future.
Place	
a)	Waste – following an increase in the number of waste enquiries and/or complaints this triggered a service improvement plan to be instigated. Officers from the Service Directorate Support Team working closely with the Information & Improvement Team have been working with the service to understand in more detail the background to some of the issues being reported. A work programme has been developed with key areas including staffing hours, round routes, missed bins and complaint analysis, benchmarking with nearest neighbours and exploration of technology all under review.
b)	Planning – similarly with the Planning service a spike in service enquires, elected member contact and/or complaints has also triggered some service improvement work to be instigated which commenced in early August to gain understand the nature and patterns of the contacts and what can be put in place to alleviate this.

3. THE LOCAL GOVERNMENT & SOCIAL CARE OMBUDSMAN (LGSCO)

- 3.1 The Local Government and Social Care Ombudsman (LGSCO) is the final stage for complaints about councils and some other authorities and organisations, including education admissions appeal panels and adult social care providers (such as care homes and home care providers).
- 3.2 Every July the Ombudsman publishes information on the complaints and enquiries received by individual local authorities and the decisions made during that financial year as part of an Annual Letter. A copy of this can be found at **Appendix B**. This information can be valuable in helping local authorities assess their performance in handling complaints. Intrinsic to the learning from this process the annual report is reported to Overview/Scrutiny to provide further challenge and inform learning of systems and process for improved outcomes for service delivery and customer experience from these.
- 3.3 The Annual Letter for the period 1 April 2021 to 31 March 2022 provides an update on the

current performance and how this compares with other local authorities in relation to number of cases, type and learning for example and this report outlines this additional information.

- 3.4 For the reportable period, the LGSCO received a total of 74 compared with 43 complaints for the previous year across the service themes below. The number of complaints escalated to the LGSCO is in line with what we would have expected and similar to those that we would have received pre Covid pandemic.

Authority	Adult Social Care	Benefits and Tax	Education and Children's Services	Environmental Services, Public Protection & Regulation	Highways and Transport	Planning & Development	Housing	Corporate & Other	Total
Tameside	10	10	22	17	3	7	2	3	74

- 3.5 Of the complaints received by the Ombudsman the following outcomes were determined. Some of those cases determined though could have been from a previous reporting year.

Outcome	Adult Social Care	Benefits and Tax	Education & Children's Services	Environmental Services, Public Protection & Regulation	Highways and Transport	Planning & Development	Housing	Corporate & Other	Total
Advice Given	1	0	1	0	0	0	0	1	3
Upheld	4	4	4	1	1	1	2	0	17
Not upheld	0	0	2	2	0	0	0	0	4
Closed after initial enquiries	2	7	12	6	1	3	0	1	32
Referred back for local resolution	1	3	4	8	0	4	0	1	21
Incomplete/invalid	0	0	2	0	0	0	0	0	2
Total	8	14	25	17	2	8	2	3	79

- 3.6 The LGSCO uphold complaints when they find fault in an organisation's actions, including where the organisation accepted fault before they investigated. There was an upheld rate of 81% (based on 17 of 21 cases) detailed investigations compared with 56% (9 of 16 cases) the previous year. This compares less well to the average uphold rate of similar authorities of 68%.

- 3.7 In addition for some cases where the LGSCO upheld the complaint the service area will have been asked to remedy the situation and of the 74 cases received there were 12 requiring further action.

Remedy	Adult Social Care	Benefits & Tax	Education and Children's Services	Environmental Services, Public Protection & Regulation	Highways and Transport	Planning & Development	Housing	Corporate & Other	Total
Apology/financial redress – Time & Trouble	1	0	0	0	0	0	0	0	1
Apology Provide training and/or guidance	1	1	0	0	0	0	0	0	2
Apology Financial redress: Avoidable distress/time and trouble Financial Redress: Quantifiable Loss	0	1	0	0	0	0	0	0	1

Procedure or policy change/review									
Apology Financial redress: Avoidable distress/time and trouble Procedure or policy change/review Provide training and/or guidance	2	0	0	0	0	0	0	0	2
Financial redress: Avoidable distress/time and trouble New appeal/review or reconsidered decision	0	1	0	0	0	0	0	0	1
Apology Financial redress: Avoidable distress/time and trouble Provide training and/or guidance	0	0	1	1	0	0	0	0	2
Apology Financial redress: Avoidable distress/time and trouble Provide services to person affected	0	0	1	0	0	0	0	0	1
Financial redress: Avoidable distress/time and trouble	0	0	1	0	0	1	0	0	2
Total	4	3	3	1	0	1	0	0	12

3.8 In 100% of cases the Ombudsman was satisfied the authority had successfully implemented their recommendations (based on 12 compliance outcomes). In 24% of upheld cases the Ombudsman found that the authority had provided a satisfactory remedy before the complaint had reached them (based on a total of 17 upheld decisions), this compares favourably to an average of 11% in similar authorities.

3.9 The reportable period for the annual report and the comparative data contained in this report is 1 April 2021 – 31 March 2022. As part of the annual report local authorities receive data in relation to the service areas, the complaints received by the LGSCO relate. Table below shows the breakdown of complaints received by local authorities by service theme in addition to the overall total number of complaints received.

GMCA - Local Government & Social Care Ombudsman - Complaints and Enquiries Received (by category) 2021/2022										
Local Authority	Adult Social Care	Benefits and Tax	Corporate and Other Services	Education and Children's Services	Environmental Services, Public Protection and Regulation	Highways and Transport	Housing	Planning and Development	Other	Total
Bolton MBC	15	5	2	16	3	7	4	13	1	66
Bury MBC	4	9	2	24	11	10	2	4	2	68
Manchester CC	15	19	12	31	23	15	10	5	4	134
Oldham MBC	8	10	3	7	7	6	2	11	1	55
Rochdale MBC	8	3	2	6	4	0	2	5	0	30
Salford CC	7	15	2	15	8	4	5	7	0	63
Stockport MBC	20	7	3	25	11	10	3	15	3	97
Tameside MBC	10	10	2	22	17	3	2	7	1	74
Trafford	19	4	1	11	21	10	3	6	0	75
Wigan MBC	7	5	4	16	11	2	3	11	3	62

3.10 Table below outlines the number of detail investigations carried out by the LGSCO across GM local authorities.

GMCA - Local Government & Social Care Ombudsman - Investigations 2021/2022								
Local Authority	Number of details investigations	Number upheld	% Upheld	% Compliance with LGO recommendations	Number of Satisfactory remedies provided by council prior to LGO involvement	% Satisfactory remedies provided by council prior to LGO involvement	Public Reports Published by LGO in last 5 Years	Number of service improvements agreed by Council since April 2018
Bolton MBC	22	14	64%	100%	2	14%	2	20
Bury MBC	15	11	73%	100%	2	18%	1	12
Manchester CC	47	33	70%	100%	3	9%	1	19
Oldham MBC	17	13	76%	100%	0	0%	0	8
Rochdale MBC	18	13	72%	100%	2	15%	1	11
Salford CC	21	10	48%	100%	3	30%	1	10
Stockport MBC	14	9	64%	100%	0	0%	1	18
Tameside MBC	21	17	81%	100%	4	24%	3	10
Trafford	14	10	71%	100%	1	10%	1	21
Wigan MBC	7	5	71%	100%	0	0%	0	5
Average performance rates; (%)			68%	100%		11%		

3.11 In summing up in his Annual Review letter – ***the power to change*** it was reported that the LGSCO has directed more improvements to local councils in the past year than ever before with a view to help councils learn and improve services. Michael King, Local Government and Social Care Ombudsman, said:

“One complaint can have immense power to change things for the better, and we’re increasingly focusing on to how we, and the local authorities we investigate, take the learning from those complaints and improve service provision.

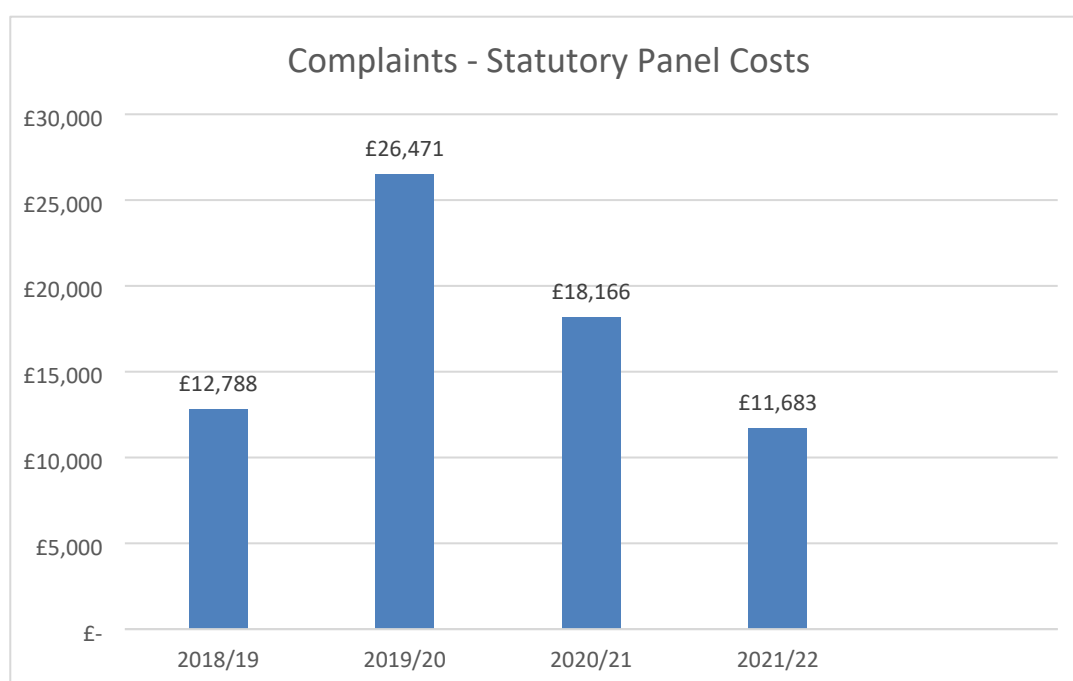
“The vast majority of councils agree to the recommendations we make and see them as common-sense ways of providing better services for people in their area. However, this can only happen when councils act swiftly when they have committed to do so.

“Unfortunately we are seeing some councils taking longer to make those changes, which put them at risk of making the same mistakes again. In 18% of cases we found compliance was late.

“While I welcome the professional way in which the majority of councils continue to work with us, I would urge those authorities who are having problems to pay close attention to this final, but crucial, step in the complaints process.”

3.12 Finally, in relation to complaints and the learning there are many costs (some hidden for example staff time) that can also be a driver for system improvement. Where complaints move either into a Statutory Stage 2 or 3 Panel and or move to the LGSCO there are in most instances additional costs incurred. Convening panels for independent reviews, report writing, holding of panels cost additional money and over the years, we have seen increases in this area of work and in costs. Once panels have concluded, some recommendations could be to make a remedy payment and this is similar to the LGSCO following some of their investigations.

3.13 There is an annual budget of £13k set aside to manage statutory Stage 2 and Stage 3 panels which sits within the Information and Improvements budget, the costs incurred for the last four as shown below. Although it is pleasing to see a reduction of costs for panel costs and within the allocated budget, these costs are still too high.



3.14 These costs are in addition to any “remedy costs” that might be paid out directly by the service as a result of the panel and any “remedy costs” incurred via any LGSCO involvement.

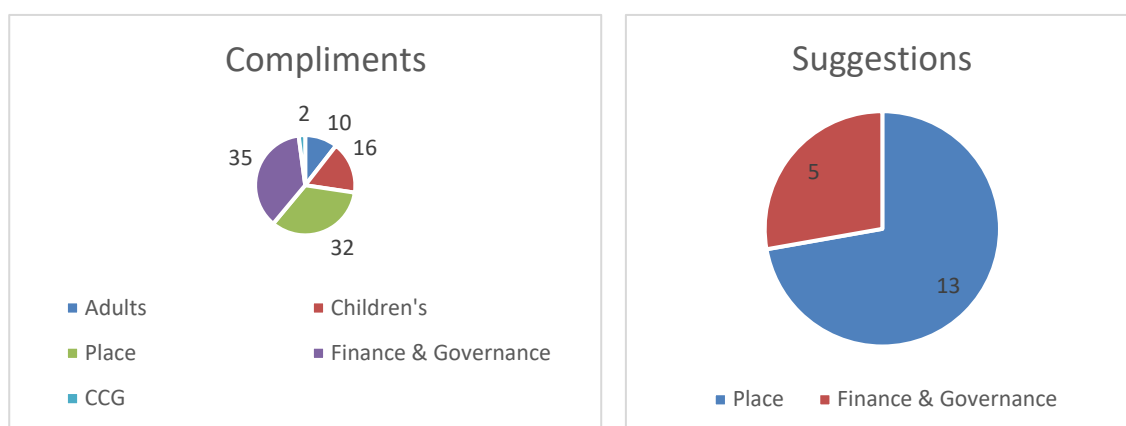
3.15 In relation to remedy costs as a result of the LGSCO involvement for the reportable period this totals an amount of £4625 which relates to 5 cases. These costs are borne directly by the service area budget.

Service	Reason	Amount
Adults	Uncertainty due to poor communication	200.00
Adults	Delays in provision and a shortfall in activities	700.00
Adults	Refund of costs £3025 Time and trouble payments £150 x 2	3325.00
Adults	Failure to provide consistent services	300.00
Growth	Time and trouble resulting from defective repair work	100.00

TOTAL		4625.00
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4. CUSTOMER SERVICE EXCELLENCE, COMPLIMENTS AND SUGGESTIONS

- 4.1 As challenging it can be in effectively dealing with complaints and customers reports of dissatisfaction, it is also important to record Compliments and Suggestions received internal and externally. For the reportable period of 1 April 2021 – 31 March 2022 there have been 95 compliments logged and 18 suggestions. The compliments received have been regarding a range of services of the council and in the majority of cases were reporting on the help, support and excellent customer service individuals had received.



- 4.2 In addition the organisation has held the Customer Service Excellence standard for over 16 years, each year achieving with 100% compliance and with additional areas of compliance plus (areas of best practice).
- 4.3 During July 2022 the onsite surveillance took place and it is pleasing to report the organisation continues to meet the standard with 100% compliance and a reported the 12 areas of compliance plus awarded last year still stood, with a further 3 new areas being awarded for are criteria

1.1.1 *We have an in-depth understanding of the characteristics of our current and potential customer groups based on recent and reliable information.*

1.1.2 *We have developed customer insight about our customer group to better understand their needs and preferences.*

3.3.2 *We evaluate how customers interact with the organisation through access channels and we use this information to identify possible service improvements and offer better choices.*

This is a remarkable achievement and one to be proud of.

- 4.4 Learning and development is an intrinsic element of good customer service, service improvement and staff development
- 4.5 During the reportable period we have delivered Customer Care and Complaints Handling Training to 97 staff across the organisation and attendees have included Assistant Directors and Heads of Service, as well as front line staff, including staff from the very front-facing Call Centre, and Library Services. The team has also delivered bespoke training sessions to colleagues from the Pension Service, and from the Control and Out of Hours Service, which have been tailored to the needs of the service. Feedback across all the sessions has been very positive. With further sessions booked in for the remaining of the calendar year, we expect to have delivered to over 150 staff.

- 4.7 In additions, 34 staff attended an Effective Complaint Handling workshop that the LGSCO have delivered this year with a waiting list for further sessions. Attendees included Assistant Directors, Heads of Service, Deputy Heads of Services, Service Managers, Development Managers, and Team Managers and attendance was from across all service areas.

5. NEXT STEPS

- 5.1 Ongoing work will continue with the root cause analysis which will help identify service areas where system process reengineering support might be of assistance or where staff training in particular areas of service delivery may be warranted.
- 5.2 The analysis work will also look at how demand is presenting itself into the organisation and what it is telling us and review which channel customers are making contact in addition to the monitoring and addressing any unreasonable complainant conduct.

6. RECOMMENDATIONS

- 6.1 As set out on the front of the report.

APPENDIX A

Service Area	Number of S1 Complaints Analysed	Most Common Causes of Complaints with volumes					
Operations	84	Failure to do something	19	Not to the quality or standard expected	13	Inadequate services provided by a third party	11
Transformation	6	Failure to do something	4				
Joint Commissioning & Performance Management	0	SMALL NUMBERS & NO COMMON THEMES					
Access Learning	9	SMALL NUMBERS & NO COMMON THEMES					
Cared for Children Services	38	Not to the quality or standard expected	11				
Child Protection and Children in Need	121	Failure to do something Count	30	No communication received Count	12	Not to the quality or standard expected Count	15
Early Help and Youth Offending	3	SMALL NUMBERS & NO COMMON THEMES					
Pupil Support Services Learning	27	Failure to do something	12				
Safeguarding and Quality Assurance	2	SMALL NUMBERS & NO COMMON THEMES					
School Performance Standards	1	SMALL NUMBERS & NO COMMON THEMES					
Financial Management (GOV)	0	SMALL NUMBERS & NO COMMON THEMES					
Risk Management & Audit Services	1	SMALL NUMBERS & NO COMMON THEMES					
Assess and Pay Income and Collection	173	Disagree with charge received	39	Not to the quality or standard expected	20	Failure to do something	18
Executive Support/Business Support	2	SMALL NUMBERS & NO COMMON THEMES					
Community Safety & Homelessness	20	Failure to do something	7				
Cultural and Customer Services	9	SMALL NUMBERS & NO COMMON THEMES					
Design & Delivery	24	Failure to do something Count	12				
Employment and Skills	0	SMALL NUMBERS & NO COMMON THEMES					
Environmental Development	1	SMALL NUMBERS & NO COMMON THEMES					
Environmental Services (Management & Operations)	8	SMALL NUMBERS & NO COMMON THEMES					
Environmental Services (Public Protection)	33	Failure to do something	9	Dissatisfied with response to reported issues	5		
Estates	3	SMALL NUMBERS & NO COMMON THEMES					
Highways and Transport	14	Not to the quality or standard expected	4				
Investments and Development	3	SMALL NUMBERS & NO COMMON THEMES					
Operations and Greenspace Planning	22	Failure to do something	8				
	30	Failure to do something	10	Service delays	8		
Strategic Infrastructure	2	SMALL NUMBERS & NO COMMON THEMES					
Waste Management	278	Service Failure	206	Inappropriate behaviour / Staff conduct	17	Not to the quality or standard expected	11
Population Health	5	SMALL NUMBERS & NO COMMON THEMES					
Commissioning	5	SMALL NUMBERS & NO COMMON THEMES					
Joint Commissioning	2	SMALL NUMBERS & NO COMMON THEMES					
Quality and Safeguarding	1	SMALL NUMBERS & NO COMMON THEMES					

Local Government & Social Care OMBUDSMAN

20 July 2022

By email

Ms Stewart
Chief Executive
Tameside Metropolitan Borough Council

Dear Ms Stewart

Annual Review letter 2022

I write to you with your annual summary of complaint statistics from the Local Government and Social Care Ombudsman for the year ending 31 March 2022. The information offers valuable insight about your organisation's approach to complaints. As such, I have sought to share this letter with the Leader of your Council and Chair of the appropriate Scrutiny Committee, to encourage effective ownership and oversight of complaint outcomes, which offer such valuable opportunities to learn and improve.

Complaint statistics

Our statistics focus on three key areas that help to assess your organisation's commitment to putting things right when they go wrong:

Complaints upheld - We uphold complaints when we find fault in an organisation's actions, including where the organisation accepted fault before we investigated. We include the total number of investigations completed to provide important context for the statistic.

Compliance with recommendations - We recommend ways for organisations to put things right when faults have caused injustice and monitor their compliance with our recommendations. Failure to comply is rare and a compliance rate below 100% is a cause for concern.

Satisfactory remedy provided by the authority - In these cases, the organisation upheld the complaint and we agreed with how it offered to put things right. We encourage the early resolution of complaints and credit organisations that accept fault and find appropriate ways to put things right.

Finally, we compare the three key annual statistics for your organisation with similar authorities to provide an average marker of performance. We do this for County Councils, District Councils, Metropolitan Boroughs, Unitary Councils, and London Boroughs.

Your annual data, and a copy of this letter, will be uploaded to our interactive map, [Your council's performance](#), on 27 July 2022. This useful tool places all our data and information about councils in one place. You can find the detail of the decisions we have made about your

Council, read the public reports we have issued, and view the service improvements your Council has agreed to make as a result of our investigations, as well as previous annual review letters.

Supporting complaint and service improvement

I know your organisation, like ours, will have been through a period of adaptation as the restrictions imposed by the pandemic lifted. While some pre-pandemic practices returned, many new ways of working are here to stay. It is my continued view that complaint functions have been under-resourced in recent years, a trend only exacerbated by the challenges of the pandemic. Through the lens of this recent upheaval and adjustment, I urge you to consider how your organisation prioritises complaints, particularly in terms of capacity and visibility. Properly resourced complaint functions that are well-connected and valued by service areas, management teams and elected members are capable of providing valuable insight about an organisation's performance, detecting early warning signs of problems and offering opportunities to improve service delivery.

I want to support your organisation to harness the value of complaints and we continue to develop our programme of support. Significantly, we are working in partnership with the Housing Ombudsman Service to develop a joint complaint handling code. We are aiming to consolidate our approaches and therefore simplify guidance to enable organisations to provide an effective, quality response to each and every complaint. We will keep you informed as this work develops, and expect that, once launched, we will assess your compliance with the code during our investigations and report your performance via this letter.

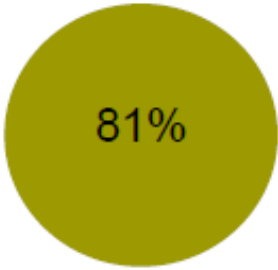
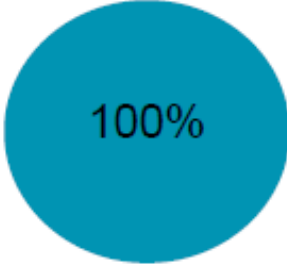
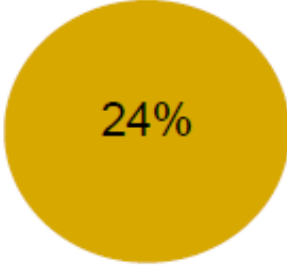
An already established tool we have for supporting improvements in local complaint handling is our successful training programme. We adapted our courses during the Covid-19 pandemic to an online format and successfully delivered 122 online workshops during the year, reaching more than 1,600 people. To find out more visit www.lgo.org.uk/training.

We were pleased to deliver two online complaint handling courses to your staff during the year. I welcome your Council's investment in good complaint handling training and trust the courses were useful to you.

Yours sincerely,



Michael King
Local Government and Social Care Ombudsman
Chair, Commission for Local Administration in England

Complaints upheld		
	<p>81% of complaints we investigated were upheld.</p> <p>This compares to an average of 68% in similar organisations.</p>	<p>17 upheld decisions</p> <p>Statistics are based on a total of 21 investigations for the period between 1 April 2021 to 31 March 2022</p>
Compliance with Ombudsman recommendations		
	<p>In 100% of cases we were satisfied the organisation had successfully implemented our recommendations.</p> <p>This compares to an average of 100% in similar organisations.</p>	<p>Statistics are based on a total of 12 compliance outcomes for the period between 1 April 2021 to 31 March 2022</p>
<ul style="list-style-type: none"> Failure to comply with our recommendations is rare. An organisation with a compliance rate below 100% should scrutinise those complaints where it failed to comply and identify any learning. 		
Satisfactory remedy provided by the organisation		
	<p>In 24% of upheld cases we found the organisation had provided a satisfactory remedy before the complaint reached the Ombudsman.</p> <p>This compares to an average of 11% in similar organisations.</p>	<p>4 satisfactory remedy decisions</p> <p>Statistics are based on a total of 17 upheld decisions for the period between 1 April 2021 to 31 March 2022</p>