

OVERVIEW PANEL

26 September 2022

Commenced:
15:30

Terminated:16:25

Present: Councillors Naylor (Chair), Smith, Cooney, North, Fitzpatrick Fairfoull, Reid, N Sharif and Roderick

In Attendance:

Sandra Stewart	Chief Executive
Ashley Hughes	Director of Resources
Julie Speakman	Head of Executive Support
Simon Brunet	Head of Policy, Performance, Communications & Scrutiny
Tracy Brennand	Assistant Director, People & Workforce Development
Gemma McNamara	Interim Assistant Director of Finance
Emily Drake	Head of Payments, Systems and Registrars

**Apologies for
Absence:** Councillors Kitchen and Billington

8. DECLARATIONS OF INTEREST

There were no declarations of interest.

9. MINUTES

The minutes of the Overview Panel meeting on the 1 August 2023 were approved as a correct record.

10. SCRUTINY UPDATE

Consideration was given to a report of the Chief Executive that provided a summary of the work undertaken by the Council's Scrutiny Panels for July 2023 to September 2023.

It was reported that on the 27 July 2023, the Place and External Relations Scrutiny Panel met with the Executive Member for Climate Emergency & Environmental Services / Assistant Executive Member (Armed Forces & Enforcement) / Director of Place / Assistant Director, Operations and Neighbourhoods / Head of Operations and Greenspace / Regulatory Services Manager / Partnership Manager and received an overview of neighbourhood enforcement. Members also received the Scrutiny Annual Work Programmes for 2023/24. On the 12 September 2023, the Panel met with the Executive Member (Towns & Communities) / Director of Place / Assistant Director, Operations and Neighbourhoods / Superintendent, Greater Manchester Police and received an update on the implementation and effectiveness of the GMP neighbourhoods model and received a forward plan of activity for the Community Safety Partnership. The Panel also received Executive Responses to LGSCO focus reports, "Out of Order – learning lessons from complaints about antisocial behaviour" and "Not in my back yard – Local people and the planning process".

Members were advised that on the 26 July 2023 the Children's Services Scrutiny Panel met with the Deputy Executive Leader (Children and Families) / Director of Children's Services / Assistant Director of Children's Services / Head of Service and received an introduction and overview of the care leavers services to inform a review into the effectiveness of services and support received to care leavers in Tameside. The Panel also received the Children's Services performance scorecard specific to Early Help and Social Care and the Scrutiny Annual Work Programmes for 2023/24. Future training was also discussed, in particular with a greater focus on corporate parenting. On the

13 September 2023, the Panel also met with the Deputy Executive Leader (Children and Families) / Director of Children's Services to receive an update on Children's Social Care.

On the 27 July 2023, the Health and Adult Social Care Scrutiny Panel met with the Executive Member for Population Health and Wellbeing / Director of Population Health / Strategic Domestic Abuse Manager and received an update and overview regarding Domestic Abuse in Tameside. The Panel also received the Scrutiny Annual Work Programmes for 2023/24. On the 14 September 2023, the Panel met with the Executive Member (Adult Social Care, Homelessness & Inclusivity) / Director of Adult Social Care where the Panel received an update on Adult Social Care Reforms. The Panel continued to be focussed on access to GP surgeries and health inequalities within Tameside.

The report explained that the Scrutiny Panels continued to review all decisions and focus reports published by the Ombudsman to ensure that learning opportunities were identified and shared with the Executive and services in a timely manner and where necessary, a formal response and/or position statement would be returned to an appropriate Scrutiny Panel within agreed timescales. Members were advised that a report from Administrative Justice Council on Special Educational Needs and Disability (SEND): Improving Local Authority Decision Making, was shared with the Executive Member for Education & Achievement on 14 August 2023, for information and awareness. This had been an area of focus for the LGSCO, including a focus report of 2019 regarding Education, Health and Care Plans (EHCP). SEND improvement remained a priority area for the Council and the Children's Services Scrutiny Panel received an update report on this at a meeting on 8 March 2023.

Members were advised that the independence of scrutiny enabled Members to seek assurance on the Council's financial position during 2023/24 and looked forward to budget planning, process and priorities for 2024/25. The mid-year budget update sessions for all Scrutiny members, was scheduled to take place later this year. The Executive continued to receive a formal response of the Scrutiny Chairs and it was explained that this captured a range of themes and highlighted any concerns and specific areas for consideration in supporting the Council's ongoing work in this area.

RESOLVED

That the content of the report and summary of scrutiny activity be noted.

11. STRATEGIC DELIVERY & PERFORMANCE FRAMEWORK.

Consideration was given to a report of the Chief Executive / Executive Leader that summarised the proposed implementation of a strategic delivery and performance framework which was appended to the report at Appendix 1.

The Head of Performance, Intelligence and Scrutiny Service explained that the council should have a clearly understood and effectively implemented strategic delivery and performance framework. It was explained that a codified, clearly understood and effectively implemented strategic delivery and performance framework contributed to good governance and the achievement of better outcomes. Following the establishment of the Office for Local Government, the consultation on new Best Value statutory guidance and the need for continuous improvement, it was therefore appropriate and timely to review and refresh the Council's approach.

Discussion ensued with regard to the importance of having the framework summarised within a written document that was accessible to all staff and members as part of the council's wider arrangements around good governance. Members recognised that updating the strategic and delivery framework was a key element for effective management and delivery of the council's performance in order to drive continued improvement.

RESOLVED

To note the framework at Appendix 1 to the report and to support its implementation and delivery subject to agreement by the Executive Cabinet on 27 September 2023.

13. UNDERSTANDING OUR CUSTOMER CONTACTS AND LEARNING FROM OUR COMPLAINTS

Consideration was given to a report of the First Deputy (Finance, Resources and Transformation)/Chief Executive / Head of Executive Support that provided an update and strategic overview in relation to dealing with and responding to customer contacts. The report also provided a summary of complaints received by the organisation, those that had escalated to a statutory panel and or Local Government and Social Care Ombudsman. In addition, the report provided a summary of how the review and management of these contacts could help drive system improvement.

With regards to complaints and customer care, for the period 1 April 2022 to 31 March 2023, the organisation had received and processed a total of 1,324 complaints of which 1074 were Stage 1 and 250 were Stage 2. This was compared with a total of 1,188 for 1 April 21 to 31 March 2022 (increase of 206), of which 946 were Stage 1 (increase of 128) and 242 Stage 2 (decrease of 8). The report detailed a breakdown of the complaints received at Stage 1 and Stage 2, together with the volume received per service directorate and whether they were fully responded to within the 20 working day timescale.

From the total complaints received during the reporting period, 85% of cases were responded to within the prescribed timescale compared with 78% from the previous reportable year for Stage 1 complaints. It was important to note that although there was 15% outside of the prescribed timescales there were many reasons for this however active dialogue with customers would have taken place to keep them update on progress of when they would be receive their response. For Stage 2, 68% were responded to within the prescribed timescale which was a slight improvement on last year's response rate of 62%.

A summary of complaints received during the period of April 2022 – March 2023 was shown in Appendix A to the report, which identified at the top level the type and root cause of the complaint. In relation to the top 4 issues/root causes, it was explained that there were common themes prominent across the organisation. Members were advised that for this reportable period, the main themes were: -

- Quality of service - Failure to do something and not to the standard expected.
- Communication – Lack of contact & no response to calls or messages. New top theme for 22/23
- Staff conduct – Inappropriate behaviour & staff attitude.
- Payment or disputed charges – Disagrees with charges.

It was explained that by the nature of the service provided, some Service Areas received higher volumes of complaints. The data that was held within the system was used to identify the specific issues which helped to inform service improvement and where additional staff training would be required across specific areas.

Members of the Panel were advised that the Local Government and Social Care Ombudsman (LGSCO) was 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). Each July the Ombudsman published 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 was attached to the report at Appendix B to the report.

It was reported that this information would be valuable in helping local authorities assess their performance in handling complaints. Intrinsic to the learning from this process the annual report was reported to Overview/Scrutiny which informed learning of systems and processes for improved outcomes for service delivery and customer experience from these.

The Annual Letter for the period 1 April 2022 to 31 March 2023 provided an update on the current performance and how this compared with other local authorities in relation to number of cases, type

and learning. For the reportable period, the LGSCO received a total of 63 compared with 74 complaints for the previous year across the directorate service themes.

It was reported that the LGSCO would uphold complaints if they found fault in an organisation's actions, including where the organisation accepted fault before they investigated. There was an upheld rate of 79% (based on 15 of 19 cases) detailed investigations compared with 81% (17 of 21 cases) the previous year. This compared to the average uphold rate of similar authorities of 77%.

In addition for some cases where the LGSCO upheld the complaint the service area would have been asked to remedy the situation and of the 63 cases received there were 11 of the 15 upheld cases which required further action (compared with 74 cases last year with 12 requiring action).

Members were advised that it was important to record Compliments and Suggestions received from internal customers, residents and services users. For the reporting period April 2022 – March 2023, there were 98 compliments and 17 suggestions received. During July 2023, onsite surveillance had taken place, and it was pleasing to report that the organisation continued to meet the standard with 100% compliance with a continued 15 areas of compliance plus sustained.

It was reported that during the reporting period, Customer Care and Complaints Handling Training had been delivered to 59 members of staff across the organisation. Attendees of the training included Assistant Directors and Team Managers, as well as front-line staff, including staff from the very front-facing Call Centre. Feedback across all the sessions had been very positive, and further sessions were scheduled for the remainder of this calendar year.

It was further explained that work was underway in the development of a quarterly performance data for all services in the form of Dashboard Reports, with the plan for these to be delivered during the last quarter of the calendar year. Members were advised that an initial draft had been developed with Children's Services. These reports would include key performance data, as well as reporting on improvements made to services as a result of the identified learning. This work was in addition to and complementary to the weekly reports that were already published to services.

Wide ranging discussion ensued with regard to the use of data to highlight systematic trends and reoccurring themes from contact and complaints which would aid further learning and improvements within directorates.

RESOLVED

- (i) That the content of the update and strategic overview of complaint system/process be noted.**
- (ii) That the refreshed training offer being promoted across the organisation be supported.**

14. IMPROVEMENT TEAM UPDATE

Members agreed that this item should be deferred to a future meeting of the Panel

RESOLVED:

That an updated Improvement Team Update be submitted to a future meeting of the Overview Panel.

15. URGENT ITEMS

There were no urgent items for consideration.

CHAIR