



Standards Committee

Date **Friday 16 September 2011**
Time **10.00 am**
Venue **Committee Room 2 - County Hall, Durham**

Business

Part A

**Items during which the Press and Public are welcome to attend.
Members of the Public can ask questions with the Chairman's agreement.**

1. Minutes of the Meeting held on 27 May 2011 (Pages 1 - 6)
2. Declarations of Interest, if any
3. Performance Report for Quarter 1 of 2011/12: Complaints, Compliments and Suggestions - Report of Corporate Director, Neighbourhood Services (Pages 7 - 38)
4. Annual Report of Statutory Adult Social Care Complaints, Compliments and Comments 2010/11 - Report of Corporate Director Adults, Wellbeing and Health (Pages 39 - 78)
5. Draft Annual Report of the Standards Committee 2010/11 - Report of the Chair of the Standards Committee (Pages 79 - 154)
6. Town and Parish Council Sub Committee - Report of the Chair of the Town and Parish Council Sub Committee (Pages 155 - 158)
7. Such other business as in the opinion of the Chairman of the Meeting is of sufficient urgency to warrant consideration.
8. Any resolution relating to the exclusion of the public during the discussion of items containing exempt information.

Part B Items

during which it is considered the meeting is not likely to be open to the public (consideration of exempt or confidential information)

9. Update on the handling of Current Complaints - Report of Head of Legal and Democratic Services and Monitoring Officer (Pages 159 - 164)
10. Review of Completed Complaints
11. Such other business as in the opinion of the Chairman of the Meeting is of sufficient urgency to warrant consideration.

Colette Longbottom

Head of Legal and Democratic Services

County Hall
Durham
8 September 2011

To: The Members of the Standards Committee

Mrs D Winter (Chairman)
Councillor P Charlton (Vice Chairman)

Councillors J Armstrong, A Bainbridge, E Bell, C Carr, D Farry, G Holland, J Shiell, D J Southwell, W Stelling, M Williams and S Zair

Mr J G Armstrong, Mr D Balls, Mrs D Balmer, Mr J Hitchman and Mrs T Naples

Councillors T Batson, F Duggan, M Goyns, D Liversidge and J Marr

- N.B.**
- 1. All other Members of the County Council and the Co-opted Voting Members of the County Council's Overview and Scrutiny Management Board are invited to attend for Part A Business**
 - 2. Members of the Standards Committees of Durham Police Authority and County Durham and Darlington Fire and Rescue Authority are also invited for Part A Business**

**DURHAM COUNTY COUNCIL
STANDARDS COMMITTEE**

At a Meeting of **Standards Committee** held in Committee Room 2 - County Hall, Durham on **27 May 2011** at **10.00 am**

Members of the Standards Committee:

Chairman: Councillor P Charlton (Vice Chair)

County Councillors J Armstrong, A Bainbridge, C Carr, D Farry, J Shiell and S Zair.

Mr D Balls, Mrs D Balmer and Mr J Hitchman.

Councillor D Liversidge

Other Members:

County Councillor B Myers

Apologies:

Councillors E Bell, G Holland, D Southwell, W Stelling, M Williams, Parish Councillors T Batson, F Duggan, M Goyns and J Marr, Mrs D Winter, Mr J Greenwell Armstrong, Mrs T Naples, Mrs Khan Willis, Mr W Ault and Mr P Thompson.

1 Minutes of the Meeting held on 18 February 2011

The minutes of the meeting held on 18 February 2011 were confirmed as a correct record and signed by the Chairman.

2 Declarations of Interest, if any

There were no declarations of interest received.

3 Performance Report for Quarter 3, 2010/11: Complaints, Compliments and Suggestions - Report of Corporate Director, Neighbourhood Services

The Committee noted a report of the Corporate Director, Neighbourhood Services, the purpose of which was to present performance in relation to complaints, compliments and suggestions for the financial year 2010/11 and to highlight any learning outcomes resulting from them. In addition the report provided an update in relation to developments in the collection, monitoring and management of complaints (for copy see file of Minutes).

The Service Development Manager was in attendance to deliver the report and an overview presentation. He began by providing an overview of non-statutory complaints, of which 1787 had been received during the period. The majority of those complaints related to Neighbourhood Services with issues such as the proposed closure of sports centres and the collection of bins during inclement weather being the key topics.

86% of non statutory complaints had been acknowledged within target at Stage 1 and the Committee were advised that the aim was to improve on that performance. The Service Development Manager clarified that although 72% of non statutory complaints had been responded to within target, contact was always maintained with complainants even though a response could not be provided within the preferred timescales. In relation to Stage 2 complaints, the Service Development Manager explained that due to their complexity, a much lower percentage were responded to on target, but again regular contact would be maintained with complainants.

553 (31%) of non statutory complaints during the period, had been found to be justified or partly justified and the Service Development Manager advised that when a determination of partly justified was delivered, that the Council was wholly or partly at fault.

The Committee were advised that 509 non statutory complaints were received during quarter 4 of 2010/11, 60% of which related to Neighbourhood Services. Again many of these related to refuse collections during December and January. In addition many related to the Medium Term Financial Plan proposals regarding leisure centres and public transport. The Service Development Manager advised that such complaints were fielded through to the service area as comments on the consultations.

The Service Development Manager highlighted that during the quarter there had been a reduction in the number of Stage 2 complaints which was possibly due to more satisfactory Stage 1 responses.

The Committee were provided with an overview of quarter 4 non statutory complaints received by each service area.

Four non statutory complaints had related to the Assistant Chief Executive Service and eleven had related to Adult, Wellbeing and Health. It was reported that no key trends or learning outcomes had been identified.

In response to the 6 complaints received which related to Children and Young People's Services, the Committee were advised that all staff had been made aware of the policy regarding the use of social media sites. Additionally where template letters were used, staff had been advised that care should be taken to ensure that all details were accurate. Finally, in areas where nurseries were being taken over by private providers, staff had been advised that the process including the payment of fees, should be fully explained to affected parents.

In response to the 113 complaints which related to Corporate Resources during quarter 4, additional staff had been delegated to deal with land purchases and right to buy matters and procedural changes had been made in relation to the handling of e-petitions. Furthermore changes had been made to the service delivery within both Derwentside and Chester le Street benefits services following some of the complaints which had been received.

A significant number of improvements and changes had been made as a result of learning outcomes identified from the 303 Neighbourhood Services specific complaints. Measures which had been taken to improve service delivery included the introduction of "queue busting" roles and also diverting calls to offices which tended to experience lower call volumes.

The Service Delivery Manager advised that as a result of the 72 complaints received which related to the Regeneration and Economic Development service, new tenant information had been produced and a new tenancy agreement had been introduced which required tenants to take out contents insurance. Measures had also been taken in conjunction with customer services to improve the reporting and recording processes in relation to repairs and maintenance.

The Committee were also provided with an overview of the statutory complaints which had been received during quarter 4 of 2010/11, which related specifically to Adult, Wellbeing and Health and Children and Young People's Services. In addition the Service Development Manager advised of the learning outcomes which had been identified following receipt of those complaints.

Members were informed that during quarter 4 16 complaints had been submitted to the Local Government Ombudsman, although 1 had been referred back to the authority as it had become apparent that the matter had not been considered as a corporate complaint in the first instance.

The Service Delivery Manager provided an overview of the compliments and suggestions which had been received during 2010/11. Members were advised of actions which had been taken further to receipt of suggestions, such as the implementation of extended opening hours at Durham City Homes' Customer Service Centres.

Members commended the report and the inclusion of the overview of suggestions which had been received. Members also welcomed the presentation which had accompanied the report.

Resolved:

That the report be noted.

4 Town and Parish Council Sub Committee

Consideration was given to a report of the Chair of the Parish and Town Council Sub Committee which provided an update in relation to the work which the Sub Committee had undertaken (for copy see file of Minutes).

The Deputy Monitoring Officer outlined the report and Members were made aware that the Town and Parish Council would be meeting following conclusion of the Standards Committee meeting.

Having visited a number of Parish and Town Councils in her role as a member of the Sub Committee, Councillor Liversidge advised that the main area of concern amongst Parish and Town Councillors and Clerks seemed to be regarding the future when the current standard regime would cease to exist, including the requirement to adopt a Code of Conduct. She continued by advising that the general consensus was a desire within the Parishes to retain a Code of Conduct, with many hopeful that Durham County Council would adopt a Code of Conduct which could then be issued to Parish and Town Councils as a template.

Councillor Armstrong advised that the Constitution Working Group had already considered a report of the Head of Legal and Democratic Services that advised on the future of obligations by councils in relation to the Code of Conduct and Standards Committees. The report sought the views of Members on whether this was an issue they wished to consult upon, sought views on whether a voluntary code should be adopted, and sought views on whether a Standards Committee would continue to be required. The Constitution Working Group had requested that a draft voluntary Code of Conduct be prepared with details of how it could be operated for their future consideration. That work was currently being undertaken by the Head of Legal and Democratic Services.

Resolved:

That the report be noted and the Committee be kept updated as to the future decisions taken by Constitution Working Group in relation to a future Code of Conduct and Standards Committee.

5 Composition of the Standards Committee

Consideration was given to a report of the Head of Legal and Democratic Services which provided an update on the membership of the Standards Committee (for copy see file of Minutes).

The Deputy Monitoring Officer outlined the report advising that Mr J Hitchman and Mr J Greenwell Armstrong had both been temporarily appointed as independent members of the Standards Committee until such time as the Decentralisation and Localism Bill received Royal Assent.

The Vice Chair welcomed both members to the Standards Committee.

Resolved:

That the report be noted.

6 Exclusion of the Public

Resolved:

That under Section 100A (4) of the Local Government Act 1972 the public be excluded from the meeting for the following items of business on the grounds that they involve the likely disclosure of exempt information as defined in paragraph 3 of Schedule 12A to the said Act.

7 Update on the Handling of Current Complaints - Report of the Head of Legal and Democratic Services

The Committee considered a report of the Head of Legal and Democratic Services which provided an update report in respect of complaints of alleged breaches of the Code of Conduct (for copy see file of Minutes).

A working document detailing and tracking the exact status of all complaints was circulated for information and Members noted that all complaints had been dealt with in designated timescales.

Resolved:

That the report be noted.

8 Review of Completed Complaints

Members of the Committee inspected a sample of completed complaints, comments and compliment files for the review period in question.

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Standards Committee

16 September 2011



Performance Report for Quarter 1 2011/12: Complaints, Compliments and Suggestions

Report of Terry Collins- Corporate Director, Neighbourhood Services

Purpose of the Report

1. To present performance in relation to complaints, compliments and suggestions for quarter 1, 2011/12.
2. To highlight any learning outcomes resulting from the complaints, compliments and suggestions received.
3. To update Standards Committee of developments in the collection, monitoring and management of complaints.

Background

4. Durham County Council strives to provide high quality services. However, we realise that sometimes we get things wrong and people are not always happy with what we do. As part of the cycle of continuous improvement and to ensure we meet the needs and expectations of the residents of the County, we analyse data received through the complaints, compliments and suggestions system to determine if we can further improve processes and thereby service delivery.
5. There are 2 types of complaint used throughout this report,
 - **Statutory.** A complaint which arises from the duties placed on a local social services authority to provide assessments and care services under the provisions of relevant adult and children's social care legislation. The process for managing such complaints is prescribed in Regulations.
 - **Non-Statutory.** All other complaints
6. Non-statutory complaints, compliments and suggestions are monitored by the corporate complaints team which is part of customer services and contained within the Neighbourhood Services service grouping. They can be defined as follows;
 - **Complaint.** An expression of dissatisfaction about the standard of service, action or lack of action by the Council, its staff or contractors/agents providing services on behalf of the Council affecting an individual customer or group of customers.
 - **Compliment.** An expression of satisfaction with a service the Council provides. This could be satisfaction with an individual member of staff, team or particular service area

- **Suggestion.** A remark made about a particular aspect of service which can be used to improve service delivery
7. Non-Statutory Complaints can be classified as Stage 1, Stage 2 or Stage 3.
 - **Stage 1:** complaint that can not be resolved at the first point of contact and so has been passed to Customer Services in order to 'champion' the complaint on behalf of the complainant.
 - **Stage 2:** complaint that can not be resolved at Stage 1 and so has been sent to the relevant director to investigate in conjunction with customer services
 - **Stage 3:** complaint that can not be resolved at Stage 2 and so has been referred to the Local Government Ombudsman (LGO) which will carry out an independent assessment on behalf of the complainant.
 8. This report contains information on all complaints received by the Authority and logged on the Customer Relationship Management (CRM) system or Social Services Information Database (SSID). All complaints received and reported relate to Durham County Council internally run services only. The overview section refers to the numbers of non-statutory complaints received across the Council. Details of the statutory complaints for Adults, Wellbeing & Health and Children & Young People's Services are provided in the section appropriate to that service grouping.
 9. The corporate complaints team, and the Council as a whole, work to specified service standards, previously agreed by Cabinet for non-statutory complaints, and so have a number of targets to achieve, for example, acknowledging all complaints within 2 working days, and responding to stage 1 complaints within 10 working days and stage 2 complaints within 20 working days.
 10. Performance updates are reported on a quarterly basis and this is the first routine report for 2011/12.

Data Quality

11. Previous work on data quality of complaints, compliments and suggestions highlighted a number of issues in relation to recording mechanisms in CRM, e.g. service requests being categorised as complaints or complaints being recorded as compliments or suggestions. This could result in flawed data analysis and incorrect conclusions reached. Steps have been taken to correct the situation through the corporate complaints group.

Progress of the Complaints Handling Review

12. An earlier review of the complaints handling process identified a number of relatively straightforward changes that could be introduced to improve service delivery. A number of these actions have now been delivered including:
 - The launch of new website pages
 - The availability of a re-drafted complaints form in 'pdf' format which allows copies to be printed as and when required
 - The completion of a survey of past complainants to gauge their views in relation to our complaints procedure. Results are being analysed and an update will be provided in the next standards report
 - The completion of testing the current complaints system. This is to be followed by an evaluation exercise and a report will be submitted to the Customer Focus Board during August outlining proposals to simplify current procedures.

13. In addition, a more detailed review of the complaints system is being undertaken and a report will be presented to the council's Corporate Management Team (CMT) in November 2011. This report is based on a pilot study of complaints received by Direct Services, a service area within Neighbourhood Services. Direct Services was chosen for this study as it receives the greatest number of complaints of any service area. During quarter 1, it received a third of all complaints received by DCC. Key actions to be delivered include:
- Revising the Corporate Complaints Policy and promoting its use
 - Revising the Corporate Complaints Procedure ensuring there is value at each step
 - Improving the CRM system to reduce the time taken to input cases
 - Ensuring Heads of Service take an active role in the complaint handling process and ensuring learning outcomes are incorporated into service delivery
 - Monitoring of the system by the Customer Focus board each month.
14. Progress against all actions will be included in future standards committee reports

Format of this report

15. This report is divided into 2 main sections.

Section 1: Overview of Quarter 1, 2011/12

Section 2: Detailed Quarter 1, 2011/12 report from each service grouping

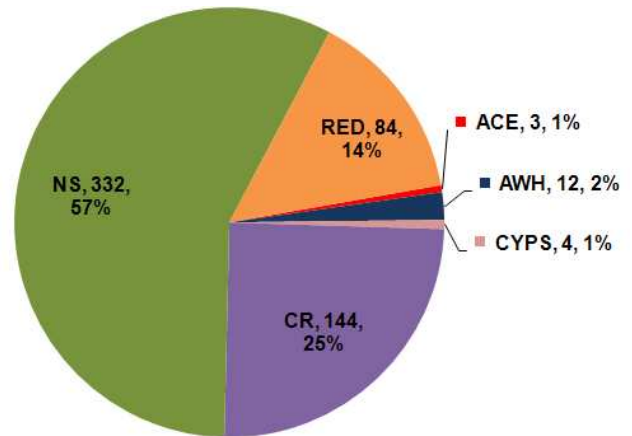
- Assistant Chief Executive's Office (ACE)
- Adults, Wellbeing and Health (AWH)
- Children and Young People's Services (CYPS)
- Resources (R)
- Neighbourhood Services (NS)
- Regeneration and Economic Development (RED)

Section 1: Overview of non-statutory complaints, Q1, 2011/12

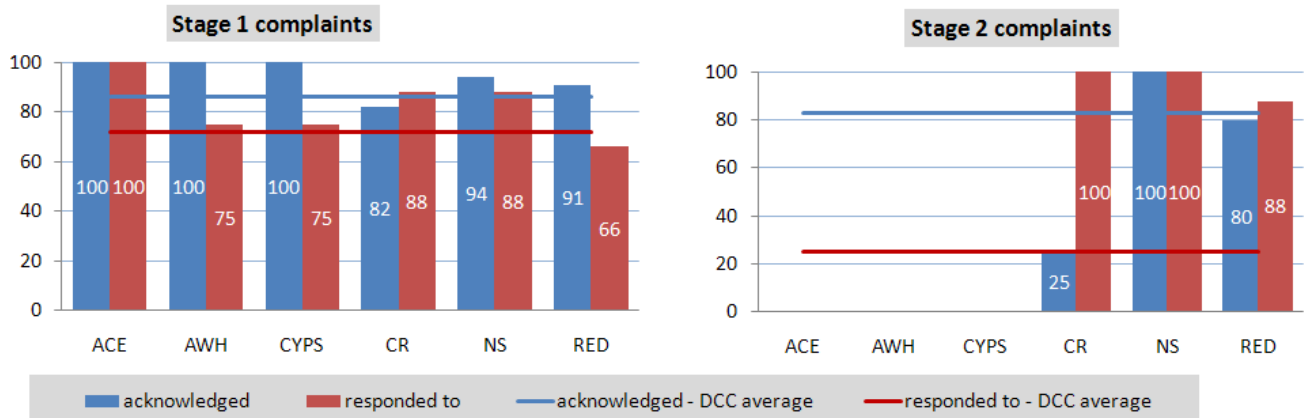
16. Between 1 April 2011 and the 30 June 2011, 579 non-statutory complaints, 433 compliments and 144 service suggestions were received by Durham County Council.

17. The chart on the right shows a breakdown of non-statutory complaints by service grouping.

18. The majority of complaints (57%) were received by Neighbourhood Services (NS). Consistent with the trend over the 2010/11 financial year, this is expected due to the front-facing nature of this service grouping.



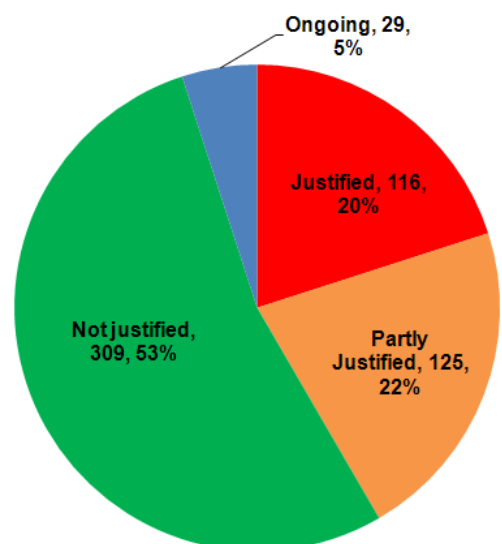
19. For all complaints there is an acknowledgement target of 2 working days. In addition, there is a responded to target time of 10 working days for stage 1 complaints and 20 working days for stage 2 complaints. The following graphs show the average response times throughout 2010/11.



20. On occasions when complaints are received and we have not been able to respond within the timescales holding letters are sent out explaining the reasons for the delays.

21. Further investigation of the 579 non-statutory complaints received during the quarter 1 shows that there were 309 occasions (53%) when the complaint was not upheld, indicating that although service users were dissatisfied with the service received, the service had in fact acted properly and followed appropriate procedures.

22. If the not justified complaints and those that are ongoing are removed, DCC is left with 241 (42%) justified complaints, 116 fully and 125 partly justified, from which there is possibility of learning.



23. Complaints can be classified as belonging to one of 8 categories. The following table shows the breakdown of the justified complaints received during quarter 1, 2011/12. As can be seen the majority of complaints have been categorised as either quality of service (48%) or service failure (28%).

| Complaint Category | Fully Justified | Partly Justified | Total | |
|-----------------------------|-----------------|------------------|--------|------------|
| | | | Number | % of total |
| Administration | 7 | 5 | 12 | 5 |
| Communication | 4 | 4 | 8 | 3 |
| Council Policy | 2 | 1 | 3 | 1 |
| Environmental Impact | 3 | 0 | 3 | 1 |
| Planning | 0 | 1 | 1 | 1 |
| Quality of Service | 47 | 69 | 116 | 48 |
| Service Failure | 38 | 30 | 68 | 28 |
| Speed of Delivery | 7 | 9 | 16 | 7 |
| Staff Attitude | 8 | 6 | 14 | 6 |
| TOTAL | 116 | 125 | 241 | |

24. In addition to complaints, we also analyse compliments and suggestions to determine if we can further improve processes, and thereby service delivery.

| Service Grouping | Complaints | Compliments | Suggestions |
|------------------|------------|-------------|-------------|
| ACE | 3 | 2 | 4 |
| AWH | 12 | 114 | 1 |
| CR | 144 | 26 | 16 |
| CYPS | 4 | 161 | 4 |
| NS | 332 | 91 | 103 |
| RED | 84 | 39 | 16 |
| Total | 579 | 433 | 144 |

25. Overall, the ratio of compliments to complaints is 0.75 and for every 4 complaints received, we receive a suggestion for improved service delivery.
26. More detail in relation to learning outcomes can be found in each service grouping's dedicated section of the report. However, the following is a list of some of the lessons learned and changes implemented as a result of complaints, compliments and suggestions.
- In response to concern about the introduction of charging for replacement wheeled bins and following consultation with the portfolio holder changes have been implemented to the procedure. If a resident reports their wheeled bin stolen for a second time within a year of a first report, a replacement bin will be provided free of charge.
 - During times of peak volume, Customer Services staff divert calls to area offices where call volumes are lower

- Leisure service pricing on the website has been amended to make it clearer
- Signage has been improved at Chester-le-Street Riverside.
- Since most benefits complaints are from landlords, meetings have been held with housing providers and private landlords to look at ways to enable better working together, and additional funding has been provided to outsource some of the processing to external providers during implementation.
- Resource has been temporarily increased at Seaham contact centre to help deal with benefits calls and processing of claims.
- Following a number of issues around the sale of some land, as a goodwill gesture Assets arranged for improved transfer of keys and for the land to be clear of unauthorised animals before completion of the sale.

Section 2: Detailed Q1, 2011/12 report from each service grouping

27. The following sections provide more detail of the types and numbers of statutory and non-statutory complaints received across the service groupings during quarter 1 of 2011/12:

Assistant Chief Executive's (ACE)

28. The ACE service grouping consists of 3 service areas and between 1 April 2011 and 30 June 2011, 3 complaints, 2 compliments and 4 suggestions were received.

| Abbreviation | Service Area |
|--------------|---------------------------------------|
| PCE | Partnerships and Community Engagement |
| PP | Planning and Performance |
| PC | Policy and Communications |

29. During quarter 1, 3 complaints were acknowledged within 2 working days with all 3 complaints were responded to within 2 working days.
30. During quarter 1, 1 complaint was received by Partnerships and Community Engagement and 2 by Policy and Communications.
31. Of the complaints received, 1 complaint was justified, two were unjustified.

Partnerships and Community Engagement

32. One complaint was received from an AAP forum member in relation to the cost of a consultation exercise and how projects were funded. Whilst the complaint did not ask a specific question, a full written response was sent to the complainant explaining the purpose of the exercise and offering to provide full details of how projects were identified. The complaint was not justified.

Policy and Communications

33. Two complaints were received in relation to Durham County News

- 34. One complaint was about non-delivery of the news bulletin. The Corporate Communications team is working closely with distributors to improve delivery.
- 35. The second complaint related to the tone of an article in Durham County News about the AV referendum. A response was provided explaining that the article was intended to encourage voters to register and not to influence their vote. No further action was taken.
- 36. No key trends or learning outcomes have been identified from the above complaints.

Compliments and Suggestions

- 37. During quarter 1, ACE received 2 compliments. Both of these were in Policy and Communications.
- 38. Four suggestions were submitted, 3 relating to information on the Council’s website and 1 relating to the County Durham Flag.
- 39. Following these suggestions, the project to create a new DCC web site includes an action to ensure that information is reviewed and updated more frequently and accurately.

Adults, Wellbeing and Health (AWH)

Non-statutory complaints, compliments and suggestions

Non-statutory Complaints

- 40. The AWH service grouping consists of 5 main service areas and between 1 April 2011 and 30 June 2011, 12 non-statutory complaints, 114 compliments and 1 suggestion were received.

| Abbreviation | Service Area |
|--------------|--------------------------------|
| AC | Adult Care |
| C | Commissioning |
| F | Finance |
| PPC | Policy, Planning & Performance |
| SI | Social Inclusion |

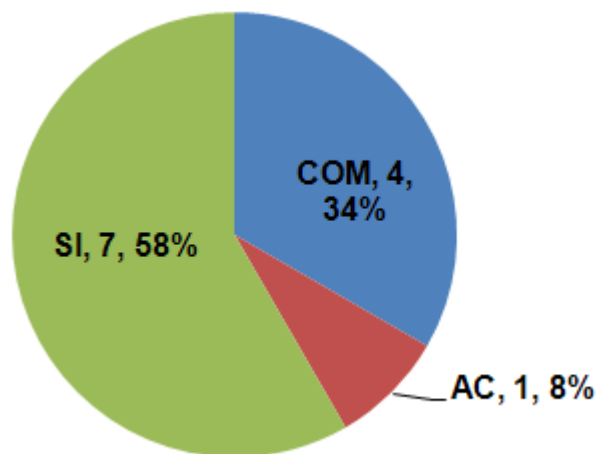
- 41. During quarter 1, 100% of complaints were acknowledged within 2 working days and 75% of complaints were responded to within 10 working days
- 42. The majority of complaints 7 (58%) were received by the Social Inclusion service area.

43. Further investigation of the complaints received during quarter 1, shows that there were 4 occasions (33%) where the complaint was not upheld, indicating that although service users were dissatisfied with the service received, the service had in fact acted properly and followed appropriate procedures.

44. If the 'not justified' complaints and those that are ongoing are removed, AWH is left with 7 complaints, 4 (33%) fully and 3 (25%) partly justified, from which there is possibility of learning.

45. No key trends or learning outcomes have been identified from the complaints received.

46. In all cases information, explanations and apologies were provided to complainants which resolved the enquiries satisfactorily.



Non-statutory compliments and suggestions

47. During quarter 1, AWH received 114 compliments. These included 113 for Social Inclusion (which included 99 for Welfare Rights and 11 for WorkAble Solutions) and 1 for Commissioning.

48. 1 suggestion was submitted to Adult Care.

Statutory complaints, compliments and suggestions

Statutory Complaints

49. During quarter 1, 29 statutory complaints were received by the AWH service grouping. This is a 17% decrease on the previous quarter. Details of the quarterly performance are shown below.

| Comparison of Statutory Complaints Received by Quarter | | | | | | |
|--|----------|----------|----------|----------|----------|---|
| Service Area | Q1 10/11 | Q2 10/11 | Q3 10/11 | Q4 10/11 | Q1 11/12 | Direction of Travel from previous quarter |
| Adult Social Care | 16 | 34 | 40 | 35 | 29 | ↓↓ |

50. All 29 complaints were acknowledged within three working days maintaining performance at 100% and Complaints Resolution Plans (CRP) were completed in all cases.

51. Of the 29 complaints received in the quarter, 19 were completed - all within the timescales agreed within the CRP. The remaining 10 cases were not concluded within the quarter but have not breached their agreed completion timescales.

52. Older People Services received the most complaints with 14 followed by 8 complaints in the Learning Disabilities Service. This reflects the type of service offered and should be noted that both areas have shown a decrease from the previous quarter.

| Statutory Complaints Received by Service Area | | |
|--|------------------|------------------|
| Service Area | Number | |
| | Current Quarter | Previous Quarter |
| Social Work Teams (Learning Disability /Mental Health/Carers) | 8 (28%) | 10 (29%) |
| Social Work Teams (Older Persons /Mental Health Services Older Persons/ Physical Disability and Sensory Impairment & Sensory Support) | 14 (48%) | 18 (51%) |
| Finance | 2 (7%) | 4 (11%) |
| County Durham Care and Support | 2 (7%) | 0 (0%) |
| Commissioning | 3 (10%) | 3 (9%) |
| Policy, Planning & Performance | 0 (0%) | 0 (0%) |
| TOTAL | 29 (100%) | 35 (100%) |

53. Of the 29 complaints received in the quarter, 8 were not upheld, 1 was partially upheld and 10 were upheld. The following table details the breakdown of findings per team.

| Outcome of statutory complaints completed in the quarter | | | | | |
|---|------------|------------------|-----------|-----------|-----------|
| Service Area | Number | | | | |
| | Not upheld | Partially Upheld | Upheld | TBC | Total |
| County Durham Care and Support | 1 | 0 | 0 | 1 | 2 |
| Social Work Teams (Learning Disability/Mental Health/Carers) | 1 | 1 | 2 | 4 | 8 |
| Social Work Teams (Older Persons/Mental Health Services Older Persons /Physical Disability and Sensory Impairment & Sensory Support) | 5 | 0 | 5 | 4 | 14 |
| Commissioning | 0 | 0 | 2 | 1 | 3 |
| Finance | 1 | 0 | 1 | 0 | 2 |
| TOTAL | 8 | 1 | 10 | 10 | 29 |

54. The complaints can be classified as shown in the table below. 'Application of Service Guidance/Procedures' and 'Quality of Service – Personal Financial Issues' (both 6) were the joint highest category of complaint. Both categories are linked to the application of procedures in the current review processes although the volume of these types of complaint have decreased since the last quarter.

| Statutory Complaints by Classification | |
|---|--------|
| Classification | Number |
| Application of Service Guidance/Procedures | 6 |
| Quality of Service – Personal Financial Issues | 6 |
| Conduct or Attitude Of Staff | 4 |
| Lack of Service – Contact/Visits/Service | 3 |
| Quality of Service – Work Of Other Agencies | 3 |
| Provision of Service Assessment | 2 |
| Lack of Service - Communications/Information | 2 |
| Quality of Service - Personal Care | 2 |
| Lack of Service - Restricted Choices Of Current Services | 2 |
| Lack of Service – Changes to a Clients Service As Per Care Plan | 1 |
| Provision of Service – Placement Provision | 1 |
| Provision of Service – Handling of Complaint | 1 |

NB. A complaint may have more than one classification recorded against it

55. During the quarter the Local Government Ombudsman (LGO) referred 1 complaint back to Durham County Council as the complainant had not given the Authority the opportunity to respond. Upon investigation the complaint was not upheld.
56. There are 4 complaints still being investigated by the LGO at the time of writing this report.
57. The Ombudsman concluded a case that had been received in the previous quarter. This case involved a person who was persistently requesting services but successive assessments had shown that the complainant did not meet the eligibility criteria. A stage two investigation had been concluded and not upheld four years previously on a similar issue. In the intervening period, assessments were always conducted when these were requested and if there was dispute about outcomes, second opinion assessments were conducted. However, none had concluded that the eligibility criteria were met. The LGO found no evidence of maladministration in this case.
58. Although there have been no key trends or outcomes identified, where complaints have been upheld or partially upheld examples of remedies include:-
 - Where clients/relatives have complained about the changes of care providers resulting in the loss of familiar carers, Direct Payments have been facilitated to enable clients to commission their own service and choose their preferred provider.
 - In two cases, complaints were made about delays in the assessment process and this was immediately remedied by assessments being conducted.
 - Apologies were given and explanations were provided or reiterated where communication had been poor.

Statutory Compliments and Suggestions

59. There were 86 compliments received in the quarter compared to 114 in the previous quarter (see table below). The ratio of compliments to complaints is 3:1, compared to 3.25:1 in the previous quarter.

| Statutory Compliments Received by Service Area | | |
|---|------------------|-------------------|
| Service Area | Number | |
| | Current Quarter | Previous Quarter |
| County Durham Care and Support | 57 (67%) | 80 (70%) |
| Social Work Teams (Learning Disability /Mental Health/Carers | 2 (2%) | 5 (4%) |
| Social Work Teams (Older Persons /Mental Health Services Older Persons /Physical Disability and Sensory Impairment & Sensory Support) | 24 (28%) | 27 (24%) |
| Policy, Planning & Performance | 2 (2%) | 1 (1%) |
| Finance | 0 (0%) | 1 (1%) |
| Commissioning | 1 (1%) | 0 (0%) |
| TOTAL | 86 (100%) | 114 (100%) |

60. One suggestion was received towards the end of the quarter regarding contacting Social Care Direct. When attempting to email Social Care Direct the person received an 'out of office' reply and therefore wanted a postal address instead. This is not available on the corporate website and the person suggested that it should be added. The suggestion has been forwarded to Social Care Direct for consideration

Children and Young People's Services

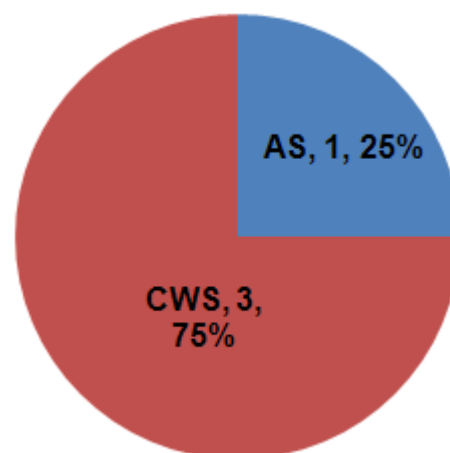
Non-statutory complaints, compliments and suggestions

Non-statutory Complaints

61. Since 1 April 2011 CYPS has been reduced from 6 to 5 service main service areas. Between 1 April 2011 and 30 June 2011, 4 non-statutory complaints, 161 compliments and 4 suggestions were received.

| Abbreviation | Service Area |
|--------------|---|
| AS | Achievement Services |
| CWS | County Wide Services |
| EI&PS | Early Intervention and Partnership Services |
| F | Finance Services |
| SaSS | Safeguarding and Specialist Services |

62. During quarter 1, 100% of complaints were acknowledged within 2 working days.
63. During quarter 1, 75% of complaints were responded to within 10 working days
64. The majority of complaints, 3 (75%), were received by the County Wide Services.
65. Further investigation of the complaints received during quarter 1 shows that none of the complaints were upheld, indicating that although service users were dissatisfied with the service received the service had in fact acted properly and followed appropriate procedures.
66. No key trends or learning outcomes have been identified from the complaints received.



Non-statutory Compliments and Suggestions

67. During quarter 1, CYPS received 161 compliments which were not about social care services. These included 151 for County Wide Services, 4 each for Achievement Services and Early Intervention and Partnership Services, and 1 each for Finance Services and former Extended Services.
68. 4 'suggestions' were submitted which took the form of comments which did not warrant a response.

Actions as a result of non-statutory representations

69. In all cases information and explanations and apologies were provided to complainants which resolved the enquiries satisfactorily.

Statutory complaints, compliments and suggestions

Statutory Complaints

70. During quarter 1, 7 statutory complaints were received by the CYPS service grouping. This is a 43% increase on the previous quarter. Details of the quarterly performance are shown below

| Comparison of Statutory Complaints Received by Quarter | | | | | | |
|--|----------|----------|----------|----------|----------|---|
| Service Area | Q1 10/11 | Q2 10/11 | Q3 10/11 | Q4 10/11 | Q1 11/12 | Direction of Travel from previous quarter |
| Safeguarding and Specialist Services | 10 | 9 | 3 | 4 | 7 | ↑↑ |

71. All 7 complaints were acknowledged within two working days maintaining performance at 100%.
72. Of the 7 complaints received in the quarter, 6 investigations were completed within the 20 working day timescale for response, with the remaining case breaching the response timescale.

| Statutory Complaints Received by Service Area | | |
|---|-----------------|------------------|
| Service Area | Number | |
| | Current Quarter | Previous Quarter |
| Family Pathfinder – The Dales | 1 (14%) | 0 (0%) |
| Fostering and Adoption | 0 (0%) | 2 (50%) |
| Looked After Children Aycliffe | 1 (14%) | 1 (25%) |
| Safeguarding Children - Crook | 1 (14%) | 0 (0%) |
| Safeguarding Children - Easington | 1 (14%) | 1 (25%) |
| Safeguarding Children - Seaham | 2 (28%) | 0 (0%) |
| Safeguarding Children - Spennymoor | 1 (14%) | 0 (0%) |
| TOTAL | 7 (100%) | 4 (100%) |

73. Of the 6 complaints resolved in the quarter, 2 were not upheld, 2 were partially upheld and 2 were upheld. The following table details the breakdown of findings per team.

| Outcome of Statutory Complaints completed in the quarter | | | | | |
|--|------------|------------------|----------|----------|----------|
| Service Area | Number | | | | |
| | Not upheld | Partially Upheld | Upheld | TBC | Total |
| Family Pathfinder – The Dales | 1 | | | | 1 |
| Looked After Children Aycliffe | | | 1 | | 1 |
| Safeguarding Children - Crook | | | 1 | | 1 |
| Safeguarding Children - Easington | | 1 | | | 1 |
| Safeguarding Children - Seaham | | 1 | | 1 | 2 |
| Safeguarding Children - Spennymoor | 1 | | | | 1 |
| TOTAL | 2 | 2 | 2 | 1 | 7 |

74. When categorised, 'Decision regarding Service' has the highest number of complaints. This can mean that either the complainant was not given (eligible for) a service s/he wanted, or that s/he was given a service which was felt to be unnecessary (as is often the case when social care services intervene in a family's life).

| Statutory Complaints by Classification | |
|---|--------|
| Classification | Number |
| Poor Service | 1 |
| Conduct or Attitude Of Staff | 2 |
| Decision regarding Service | 3 |
| Poor Service and Decision regarding Service | 1 |

Statutory Compliments and Suggestions

75. During quarter 1, CYPS received 24 statutory compliments. These compliments were all about Safeguarding and Specialist Services (SaSS) and are in relation to social care services.
76. The ratio of statutory compliments to statutory complaints is 3.43:1, compared to 5.75:1 in the previous quarter.

| Compliments Received by Service Area | | |
|---|-----------------|------------------|
| Service Area | Number | |
| | Current Quarter | Previous Quarter |
| Aycliffe Secure Services | 1 (4.2%) | 8 (34.8%) |
| Children Looked After - Aycliffe | 0 (0%) | 1 (4.4%) |
| Children Looked After - Durham | 0 (0%) | 1 (4.4%) |
| Development Support Unit | 0 (0%) | 1 (4.4%) |
| Disabled Children and Families Team | 3 (12.5%) | 1 (4.4%) |
| Fostering and Adoption Service | 3 (12.5%) | 0 (0%) |
| Full Circle | 0 (0%) | 2 (8.7%) |
| Initial Response Team | 1 (4.2%) | 1 (4.4%) |
| Safeguarding Children – Bishop Auckland | 1 (4.2%) | 1 (4.4%) |
| Safeguarding Children – Chester le Street | 1 (4.2%) | 0 (0%) |
| Safeguarding Children – Newton Aycliffe | 1 (4.2%) | 0 (0%) |
| Safeguarding Children – Peterlee | 1 (4.2%) | 1 (4.4%) |
| Safeguarding Children - Seaham | 0 (0%) | 1 (4.4%) |
| Children's Homes | 12 (50%) | 5 (21.7%) |
| Total | 24 | 23 |

Suggestions

77. No suggestions were received during the quarter regarding social care services.

Actions as a result of statutory representations

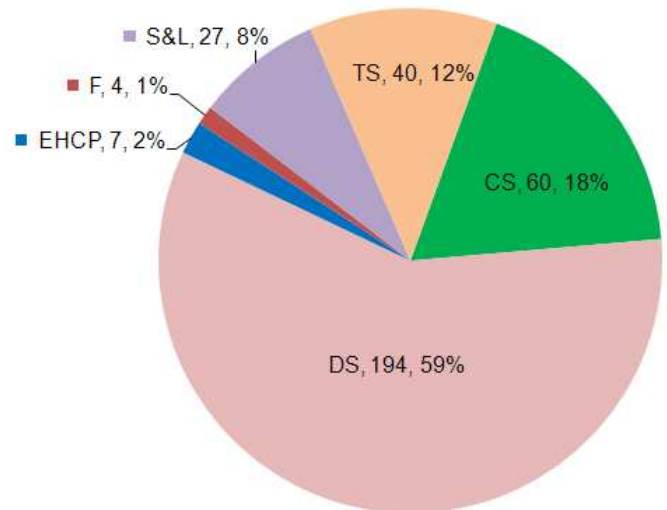
78. There have been no key trends or outcomes identified this quarter; the two complaints which were upheld had learning which was very particular to them. They were about a Social Work report to an Adoption Panel, and a placement transfer. One complaint which was partially upheld was about reports not having been shared in a timely manner, and this information has been communicated across the Service.

Neighbourhood Services

79. The NS service grouping consists of 5 main service areas and between 1 April 2011 and 30 June 2011, 332 complaints, 91 compliments and 103 suggestions were received.

| Abbreviation | Service Area |
|--------------|--|
| CS | Customer Services |
| DS | Direct Services |
| EHCP | Environmental Health & Consumer Protection |
| S&L | Sport and Leisure |
| TS | Technical Services |

80. 94% of stage 1 complaints and 100% of stage 2 complaints were acknowledged within 2 working days
81. 88% of stage 1 complaints were responded to within the target of 10 working days. 100% of stage 2 complaints were responded to within the target of 20 working days
82. The majority of complaints (58%) were received by Direct Services.
83. Further investigation of the complaints received during quarter 1 shows that there were 171 occasions (51%) where the complaint was not upheld, indicating that although service users were dissatisfied with the service received, the service had in fact acted properly and followed appropriate procedures
84. If the not justified complaints and those that are ongoing are removed, NS is left with 137 (41%) justified complaints, 67 fully and 70 partly justified, from which there is possibility of learning
85. The following section provides further analysis of complaints, by service area, and the associated learning outcomes:



Customer Services (CS)

86. During quarter 1, 60 complaints were received in relation to CS.

| | Justified | Partly Justified | Not justified | Resolved at 1 st point of contact | Ongoing | Total |
|---------------------|-----------|------------------|---------------|--|---------|-------|
| Number | 15 | 22 | 20 | 0 | 3 | 60 |
| % of total received | 62% | | 33% | - | 5% | - |

87. Complaints received during this period were fairly wide ranging but related to one of the following 7 areas:

Delays in handling telephone calls within contact centres

88. 25 complaints related to either delays in answering the phones or technical faults with the phone lines themselves. The overarching issue in relation to call answering is its complexity. DCC has 14 different telephone systems supporting the customer services teams across the Council. However, we are making progress in joining the Mitel contact centre systems together and this is reflected in the increase in the percentage of calls answered (77% of calls are answered within one minute, 4 percentage points higher than quarter 4, 2010/11)

Technical faults on telephone systems

89. Although technical faults do add to the problem, such faults are becoming more and more infrequent. However, it is difficult to determine whether callers are facing problems due to sheer volume of calls or actual technical failures. Either way this is not the level of service to which we aspire and a solution must be put in place as soon as possible. The Head of ICT has commissioned the procurement of a single telecommunications solution and the process is ongoing with a view to identifying a provider by September 2011.

Staff Attitude

90. Any complaint regarding staff attitude is taken extremely seriously and is dealt with by managers. In addition, training requirements have been explored to support staff in dealing with difficult customers and 3 of the staff in question have taken part in the Council's customer care training course. Others are scheduled to do so later in the year.

General comments on poor service

91. General comments relating to poor customer service cannot be linked to specific trends and usually are as a result of an error on the officer's part. However, where we have failed to deliver upon our service requirements, the problem is rectified as soon as possible and the customer provided with a full explanation.

Lack of response to requests for service from service teams

92. This is a relatively new trend identified during quarter 1, 2011/12 and this trend will be monitored. If a specific team or service is identified as a contributor to the problem, the issue will be addressed as part of the service improvement process.

Changes to cash collection service

93. In April 2011, the council introduced a new policy in relation to accepting cash payments for council services. As a result, we have received some complaints from customers. We are monitoring the situation, explaining to customers wishing to make cash payments of the changes and providing full details of alternative methods of payment.

Inconsistent / Out of date web-site information

94. On occasions when a complaint is received in relation to either lack of information or the provision of out of date information, the specific service team responsible are informed and asked to correct the information (if appropriate). The introduction of the web strategy in July will provide direction of this access channel.

Direct Services (DS)

95. During quarter 1, 194 complaints were received in relation to DS.

| | Justified | Partly Justified | Not justified | Resolved at 1 st point of contact | Ongoing | Total |
|---------------------|-----------|------------------|---------------|--|---------|-------|
| Number | 44 | 39 | 96 | 0 | 15 | 194 |
| % of total received | 43% | | 50% | - | 7 % | - |

96. The majority of complaints (45%) related to our refuse (31 complaints), recycling (26 complaints) and garden waste (31 complaints) collection services. Whilst we take complaints very seriously we need to be mindful that refuse and recycling crews collect at least 1 household wheeled bin from 215,000 properties every week as well as a selection of bins, bags and boxes of recycling every other week. Therefore, the number of complaints received is relatively small.
97. 20 of the 31 waste collection complaints (64%) refer to missed collections. This is in line with previous trends. As soon as we become aware that a bin has been missed we do our best to rectify the situation: If vehicles are in the area they will return and collect missed bins. If we are aware of a recurrent problem with bin collection, crews are issued new instructions to ensure they are aware of properties they have to make a collection.
98. A further 22 complaints (11%) were received in relation to the £20 replacement charge for wheeled bins, which will be effective as of 1 April 2011. This charge was introduced to alleviate the £120,000 annual cost to the authority of replacing missing wheeled bins. Following consultation with the Portfolio Holder, changes have been made to this policy. Resident who have had their wheeled bin stolen for a second time within a year of a first report will be provided with a replacement bin free of charge. We encourage residents to report all stolen bins to the police.
99. Other complaints related to, for example, grass cutting (5%), bulky waste collections (2.5%), pest control (1.5%), trees (1%), anti social behaviour (2%), recycling centres (1.5%).
100. Refuse and Recycling Managers meet on a regular basis to discuss harmonising services and part of this meeting focuses on improvements. If an emerging trend has been identified, an action plan will be developed in order to address and implement improvements. Streetscene Managers also meet regularly to discuss in detail each service section under their remit e.g. Clean and Green, Education and Enforcement etc.

Environment, Health and Consumer Protection (EHCP)

101. During quarter 1, 7 complaints were received in relation to EHCP.

| | Justified | Partly Justified | Not justified | Resolved at 1 st point of contact | Ongoing | Total |
|---------------------|-----------|------------------|---------------|--|---------|-------|
| Number | 1 | 0 | 4 | 0 | 2 | 7 |
| % of total received | 14% | | 57% | - | 29% | - |

102. 2 complaints are still being investigated, 1 relates quality of service provided and the other, environmental impact relating to a light nuisance.

103. Due to the small number and variation in complaints received, it has not been possible to identify any trends or learning outcomes.

Finance (FIN)

104. During quarter 1, 4 complaints were received in relation to FIN.

| | Justified | Partly Justified | Not justified | Resolved at 1 st point of contact | Ongoing | Total |
|---------------------|-----------|------------------|---------------|--|---------|-------|
| Number | 1 | 0 | 3 | 0 | 0 | 4 |
| % of total received | 25% | | 75% | - | - | - |

105. The following details complaints received by Finance, detailing any learning outcomes and action taken as a result

Complaint about the finance department

106. The complainant defaulted on an arrangement to repay debt to the Council, hence our calls to the complainant. We have written to the complainant, via email at their request, and agreed not to contact them at work in the future: future contact will be via email

Overdue invoice

107. This complaint could relate to any service area of the council and insufficient information was provided which would allow further investigation. NS has a short term plan to rectify the non-payment of invoices; however, this is a corporate issue. We ensure all invoices received are paid, however there are delays due to non conformance. In this case it is unclear whether this invoice relates to NS.

Damage caused by pothole

108. The complainant is unhappy about a decision made by the Council's Insurance Claims Handlers. As the Council employs claims handlers to manage and handle claims on their behalf, once they have been referred the Council can no longer enter into communication regarding liability. To do so would void the council's insurance policy as claims handlers have been approved by insurers. Therefore, we feel that this should

not be dealt with as a complaint. We have communicated with the complainant and advised him that, as the insurance claim is being dealt with by the Council's claims handlers, we are limited in the action we are able to take to resolve this issue. We advised that in the event of being unhappy with the decisions made by claims handlers, should he choose to do so he could take independent legal advice.

Sport and Leisure Services (S&L)

109. During quarter 1, 27 complaints were received in relation to S&L.

| | Justified | Partly Justified | Not justified | Resolved at 1 st point of contact | Ongoing | Total |
|---------------------|-----------|------------------|---------------|--|---------|-------|
| Number | 5 | 4 | 17 | 0 | 1 | 27 |
| % of total received | 33% | | 63% | - | 4% | - |

110. Examples of complaints received are;

- Conflict with a Park Superintendent of a Parish Council park at Murton.
- Of those received by Indoor Facilities, 9 were classed as not justified. Two related to Council Policies i.e. the under 8s policy for swimming pools and the pricing policy for gym membership.
- Of those received by Outdoor Sport and Leisure, 5 were classified as not justified.
- The complaint received by Countryside classified as not justified.

111. Indoor Facilities received the largest number of complaints. They are detailed below;

| Indoor Facility | Issue | Solution |
|-------------------|---|--|
| Freeman's Quay | Adjustments to the programme were met with resistance | Longer lead in times with appropriate consultation and communication. |
| | Pricing on the website was deemed as being unclear / misleading | Rectified |
| Spennymoor | Under 8s policy | Staff checking that customers understand the policy, especially if customers enquiring about pool opening times |
| | Membership sales | Clearly communicating options available to ensure the best value memberships are highlighted. |
| | Interruptions to normal programme | Improving communication to customers, especially customers for whom we keep contact details, e.g. swimming lesson customers |
| | Access Controls | Improve way in which we use access controls helping customers with small children in and out, as appropriate |
| Chester-le-Street | Class cancellations | Improved communication. These have been discussed at staff meetings and will be addressed within the facility improvement plan |
| | Equipment breakdown | |
| | Online booking service | |

112. The need for a closer working relationship was highlighted within outdoor sport and leisure. This remains an area for improvement as far as play areas are concerned. In response to three complaints, signage has been improved at Chester-le-Street, Riverside.
113. Complaints intelligence will be fed into facility improvement plans. Complaints against policy will be noted for future reference.
114. The need for S&L and DS's Clean and Green team to have regular meetings has been highlighted.

Technical Services (TS)

115. During quarter 1, 40 complaints were received in relation to TS.

| | Justified | Partly Justified | Not justified | Resolved at 1 st point of contact | Ongoing | Total |
|---------------------|-----------|------------------|---------------|--|---------|-------|
| Number | 1 | 5 | 31 | 0 | 3 | 40 |
| % of total received | 15% | | 78% | - | 7% | - |

116. It should be noted that of the 40 complaints allocated to TS, 10 (25%) were wrongly allocated as follows

- Outside of Technical Service (8) – were re-allocated to RED
- Outside Bodies (2). One related to Seymours – Contractor and one to Network Rail

These complaints have been re-assigned to the correct service area in line with council procedure

117. The remaining complaints can be allocated to service area as follows:-

- Strategic Highways (17)
- Highways Operations (12)
- Design Services (1)

118. Of the 17 complaints received by Strategic Highways, 14 were deemed not justified, 2 part-justified and 1 justified. They can be grouped as follows;

- Neighbourly Dispute (1): Private road dispute between neighbours
- Manhole replacement (1): Passed to Northumbrian Water Limited (NWL) but no action
- Surface Dressing (5): Tar sprayed on vehicles or chippings left on road
- Speed Humps (6): Speed humps too high or in wrong place
- Speeding problems (1): Excessive speed on 'A' road
- Street Names (1): Problems with name given to new properties
- Traffic Lights (1): Traffic lights should be part-time
- Street Lights (1): Street lights too bright

119. Learning outcomes for Strategic Highways centre around the need for timely and robust consultation both before and during any works. Inclusion of the public is shown to be crucial when developing new schemes and schedules. Further early consultation will be factored into the summer surfacing contracts with more public information available on speed humps and traffic calming measures.

120. Of the 12 complaints received by Highways Operations there is no key theme evident, 7 were deemed not justified, 3 part-justified and 2 justified. They can be grouped as follows;
- Street Lighting (1): Time taken to repair an outage as a consequence of a major fault
 - Condition of carriageway /footway (5); 3 potholes and 2 footway condition
 - Project duration (2): Frustrations from residents over delays due to roadworks
 - Staff behaviour (2): Both minor issues that have been addressed
 - Missing sign (1): Poor communication between Strategic Highways and Highways Operations
 - Dropped kerb (1): Neighbourly dispute
121. The greatest number of complaints for Highways Operations relate to the condition of carriageway / footway (5). Bearing in mind the pressures currently on our revenue budget this is likely to increase in the future
122. One complaint was received by Design Services relating to planning permission of Shotley Papermill Footbridge. Planning permission was dealt with by the Head of Planning as it did not justify being dealt with by the Planning Committee. The complainant said this denied them the opportunity to make representations to the Planning Committee. The complaint has been closed and no further representations from the complainant have been received. Site works by Highways Operations are ongoing.

Compliments and Suggestions

123. During quarter 1, NS received 91 compliments and 103 suggestions.

Compliments

124. A large proportion of compliments related to staff in recognition of their support and help in resolving the customer's concerns and issues. On each of these occasions, the individual officer is notified of the compliment and thanked by their line manager.
125. Other compliments relate to service provision, e.g. 3 compliments were received as a result of prompt action from the street lighting team and 3 from repairing of potholes
126. A number of compliments were received in response to a presentation delivered by our Civic Pride Officers (North) at Park View Community School in Chester-le-Street. During the Pride Team's visit an informative DVD (Open Your Eyes) was played and the team facilitated a quiz to ensure that young people from years 7 and 8 were aware of the environment and the impact discarding litter had on it. Pupils appeared to enjoy the quiz and the Head Teacher approached the Civic Pride Team and requested they return to the school shortly after the summer holidays to continue with this type of education.
127. Within NS the focus has been to ensure that complaints are correctly recorded and actioned. Consequently, compliments have not been given the attention they deserve. Compliments tend to be accepted but not recorded and it is hoped that as the process for reporting complaints improves, service areas will increase the number of compliments recorded on the CRM so they can be given the attention they deserve.
128. The NS link officer group has reviewed CRM licences across the service grouping to ensure all appropriate people can access and update the system. Discussions are taking place in relation to training provision and this will result in greater accuracy of

not only the recording of compliments but the recording of and response to complaints and suggestions.

129. Display boards are being set up at key locations throughout the County. Thank you posters will be displayed on these boards and any compliments received will be highlighted.

Suggestions

130. NS receives a comparatively high number of suggestions due to the front-facing nature of our service delivery. However, it should be noted that suggestions often have an element of complaint within them. The process for dealing with suggestions was discussed at the last NS correspondence group. Following agreement from Heads of Service, the mechanism for routing suggestions will change during quarter 2. Previously, PAs to Heads of Service received the suggestions as part of their CRM work queue. However, it has become apparent that there are delays in reading and actioning suggestions due to time and training constraints. In the future, the suggestions will be routed in the same manner as complaints: they will be transferred to the appropriate link officer for that area. If an officer feels a suggestion should really be a complaint, it will be converted by contacting the corporate complaints team. The resulting complaint will then be subject to the complaints procedure.

131. Examples of suggestions received during quarter 1 include

- Customer Services received 8 suggestions detailing how we might improve the telephone systems. These have been considered as part of the procurement process for the single telephone system.
- Greater leniency should be applied in response to requests to additional waste (over and beyond the capacity of bins and boxes)
- 24 suggestions were received in relation to the proposed leisure centre closures. These were all included in the consultation process.

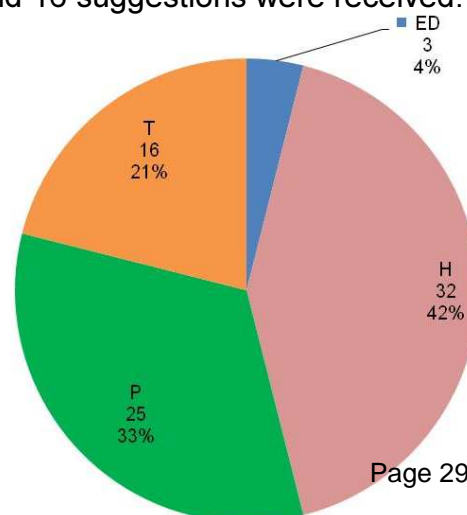
132. Not all suggestions can be implemented, for example: -

- The request for more payments to be accepted through the Automated Payments System. This is not possible due to system limitations.
- The suggestion to reduce the number of disabled parking bays at Seaham. This is not possible as the number is required to meet equality legislation.

Regeneration and Economic Development

133. The RED service grouping consists of 4 main service areas and between 1 April 2011 and 30 June 2011, 84 complaints, 39 compliments and 16 suggestions were received.

| Abbreviation | Service Area |
|--------------|----------------------|
| ED | Economic Development |
| H | Housing |
| P | Planning and Assets |
| T | Transport |



134. Housing received the greatest number of complaints, with 32 (42%)

Economic Development (ED)

135. During quarter 1, 2 complaints were received in relation to ED

| | Justified | Partly Justified | Not justified | Resolved at 1 st point of contact | Ongoing | Total |
|---------------------|-----------|------------------|---------------|--|---------|-------|
| Number | 1 | 0 | 1 | 0 | 0 | 2 |
| % of total received | 50% | | 50% | - | - | - |

136. As the numbers of complaints received by the Economic Development service are small it is difficult to identify any underlying trends. The 2 complaints received during this quarter were in connection with works being undertaken at North Bailey, Durham City and the planned closure of the Tourist Information Office in the City. Any future complaints will be monitored to enable trends to be identified.

Housing (H)

| | Justified | Partly Justified | Not justified | Resolved at 1 st point of contact | Ongoing | Total |
|---------------------|-----------|------------------|---------------|--|---------|-------|
| Number | 2 | 7 | 22 | 0 | 1 | 32 |
| % of total received | 28% | | 69% | - | 8% | - |

137. Of the 32 complaints received by the Housing Service, 24 of them were in connection with repairs and maintenance and housing management of Durham City Homes. Supported Housing received 4 complaints, Housing Solutions 3 and the Renewal and Improvement service 1. An analysis of the Durham City Homes complaints has shown that when customers request call backs for example to re-schedule appointments, sometimes the contact details held on record are not up to date, which leads to staff not being able to contact the customer and delays in resolving issues. To improve this situation a new procedure has been agreed to ensure customer contact details are correct.

Planning and Assets (P)

| | Justified | Partly Justified | Not justified | Resolved at 1 st point of contact | Ongoing | Total |
|---------------------|-----------|------------------|---------------|--|---------|-------|
| Number | 2 | 0 | 28 | 0 | 2 | 32 |
| % of total received | 6% | | 88% | - | 6% | - |

138. Of the 32 Planning and Assets related complaints received, 25 were related to Planning issues and 7 were in relation to Asset Management. Of the 25 planning

related complaints many were based on customers not being happy with a planning decision and others relate to customer expectations of delivering a responsive and helpful service. None of the Planning related complaints were found to be justified providing comfort as to the solidity of procedures and the quality of work output.

Transport (T)

| | Justified | Partly Justified | Not justified | Resolved at 1 st point of contact | Ongoing | Total |
|---------------------|-----------|------------------|---------------|--|---------|-------|
| Number | 2 | 4 | 12 | 0 | 0 | 18 |
| % of total received | 33% | | 67% | - | - | - |

139. The majority of the Transport related complaints were in relation to public transport services and the cuts to subsidised services. The cuts, albeit they are at times where less people travel, do affect a great number of people's access to services. Whilst the complaints were anticipated due to the severity of the cuts there is little opportunity to reinstate services due to lack of funding. However, work continues with bus operators to optimise the Public Transport network.

Compliments and suggestions

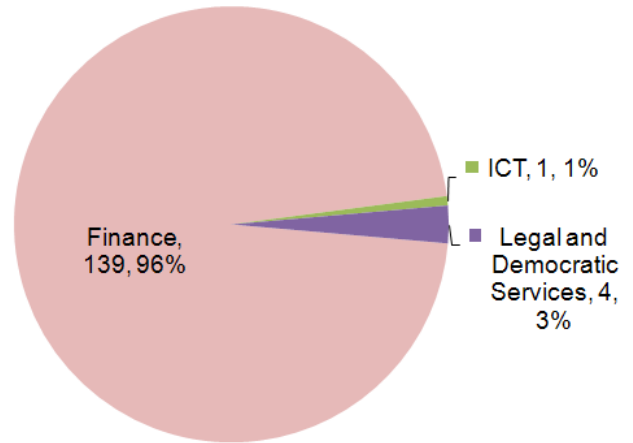
140. During quarter 1, RED received 39 compliments and 16 suggestions.
141. 33 of the compliments relate to Planning and represent the importance customers attach to a timely, helpful and problem solving approach to Planning. Of the comments and suggestions received, a number of the Housing related comments are to be considered and a Transport suggestion has been put to the bus operator who considers it not feasible to implement.

Resources

142. The Resources service grouping consists of 4 main service areas and between 1 April 2011 and 30 June 2011, 144 complaints, 26 compliments and 16 suggestions were received.

| Abbreviation | Service Area |
|--------------|--|
| F | Finance |
| HR | HR and Organisational Development |
| ICT | Information and Communication Technology |
| LDS | Legal and Democratic Services |

143. During quarter 1, 82% (84% in Q4) of complaints were acknowledged within 2 working days with 88% (83% in Q4) of complaints were responded to within 10 working days.
144. The vast majority of Resources Q1 complaints (96%) related to Finance, namely the Revenues and Benefits service.
145. Further analysis of the Q1 complaints reveals that 27% were justified, 25% were partly justified and 42% were not justified. In these instances, whilst complainants were dissatisfied with the service they received, Resources staff had followed appropriate council procedures.
146. The main trend identified is the continued increase in complaints relating to our Benefits Service. Complaints have increased due to delays with processing benefits applications over the last year. Problems with processing are due to a number of factors including staff turnover, the economic down turn, but more importantly, the implementation of a new countywide ICT system. While the 7 former district council systems are converted into an appropriate format and merged onto the new system, processing benefits is interrupted. The result is significant backlog and reduced service to our customers. Plans have been put in place to improve processing rates and we should see significant improvements during 2012. Every effort is being made to mitigate the impact upon our most vulnerable customers.



Finance (F)

147. During quarter 1, 139 complaints were received in relation to Finance.

| | Justified | Partly Justified | Not justified | Resolved at 1 st point of contact | Ongoing | Total |
|---------------------|-----------|------------------|---------------|--|---------|-------|
| Number | 36 | 41 | 60 | 0 | 18 | 139 |
| % of total received | 55% | | 43% | - | 2% | - |

148. Of the complaints received this quarter about Benefits, the majority related to delays in the assessment of claims for benefit (35). Other trends related to payments being issued incorrectly to the tenant instead of the landlord (8) problems in contacting the service by telephone (7). There were a number of complaints relating to the administration issues but there were no key trends to these issues and were as a result of errors being made in the calculation of entitlement.
149. Delays in the assessment of claims have occurred due to increased workload as a result of the rise in caseload and system downtime as part of the implementation of the new computer system. The failure to make payments to landlords has highlighted the need to review our procedures. The problems with contacting the service by telephone are due to the increased volumes of calls due to the delays in assessment of claims.
150. As the majority of complaints were from landlords we have recently held meetings with housing providers and private landlords to discuss the current situation and look to ways we can work together during this difficult period. Additional funding has also been

provided to outsource some processing to external providers during the implementation period.

151. The circumstances under which payments can be made to landlords is currently being reviewed taking account of suggestions made at the meetings with the private landlords.
152. The complaints about contacting the service by telephone are at sites where the benefit service still provides front line customer services. There is insufficient resource at these sites to deal with the volume of calls whilst also trying to process claims to reduce delays in assessment. We have however, increased the resource at the Seaham contact centre on a temporary basis.
153. Of the complaints received this quarter about Revenues, 23 were due to quality of service (one of which is still open), there were 16 due to service failure (with one still open), 5 in respect of administration and 1 in respect of council policy. 21 complaints were deemed to be unjustified, 14 were classed as justified, 8 complaints were partly justified (2 still open).
154. The number of complaints has reduced slightly since the last quarter. Historically we would expect to see a higher number of complaints in the first quarter due to the annual billing for Council Tax and Non Domestic Rates. That coupled with the implementation of the new cash and income management system (ICON), plus the implementation of the new Revenues and Benefits system (3 former district councils merged to a unitary system within this 1st quarter) it is surprising that there are only 2 more complaints this year than for the same period last year.
155. With regard to a trend, 17 of the complaints related to problems with paying and payments, which is not unexpected given the fact that the ICON project was and still is so substantial, and, the sheer volume of payments that we receive as a unitary council.
156. Finally, the cash offices closed within this quarter with only 2 formal complaints being received.
157. We continue to review resources on a weekly basis to maintain as high a service standard as we can and cause as little disruption to customers as possible as we move forward with the merger to one unitary system.
158. No recovery action was taken during this period and as much resource as possible was directed to the ICON project and the initial teething problems with the payments themselves and the allocation.

Information and Communication Technology (ICT)

159. During quarter 1, 1 complaint was received in relation to ICT.

| | Justified | Partly Justified | Not justified | Resolved at 1 st point of contact | Ongoing | Total |
|---------------------|-----------|------------------|---------------|--|---------|-------|
| Number | 0 | 0 | 1 | 0 | 0 | 1 |
| % of total received | - | - | 100% | - | - | - |

160. With 1 complainant it was not possible to assess any trend. However, as part of learning from complaints, we will continue to remind our customers of the best way to log issues with ICT Services.

Legal and Democratic Services (LDS)

161. During quarter 1, 4 complaints were received in relation to LDS

| | Justified | Partly Justified | Not justified | Resolved at 1 st point of contact | Ongoing | Total |
|---------------------|-----------|------------------|---------------|--|---------|-------|
| Number | 2 | 0 | 2 | 0 | 0 | 4 |
| % of total received | 50% | | 50% | - | - | - |

162. The type of complaint has been the quality of service, service failure and staff attitude.

163. One complaint arose following the handling of a sale of land which had been dealt with by assets and the conveyancing team. There had been delays in dealing with certain aspects of the sale which was hindered by issues involving stray animals, incomplete set of keys etc. The staff involved in the sale responded to all correspondence and had taken action where needed. As a goodwill gesture assets arranged for workmen to remove and add locks as deemed appropriate. The council had listed the services of other service groupings and private contractors to ensure the land was clear of unauthorized animals etc prior to the completion of the sale.

164. A query with the registry office resulted in a member of the public disputing the price of a copy birth certificate. The complainant exclaimed that the price was ridiculous and then alleged the member of staff put the phone down. At the time of the complaint the registrar's office was having problems with the BT line and the lack of a message system. This exacerbated the situation as well as the complainant confirming that the certificate needed had originally been registered in Newcastle. It appears there was a misunderstanding as to who had put the phone down, but it seems that the phone line problem had been the main issue.

165. A customer complained about getting through to an answer phone message when ringing to register a death. The customer commented that this type of service is not appropriate when people are distressed. The complaint was resolved at first point of contact. The service area tries to respond to messages as soon as possible to alleviate causing further distress to the public.

166. A customer reported being unable to get through to a registry office to arrange to register a birth. The complaint was responded to and resolved.

Compliments and Suggestions

167. During quarter 1, Resources received 26 compliments and 16 suggestions. Some expressed gratitude to Benefits staff for their assistance with handling benefits claims. Others related to experiences with family history searches and at wedding ceremonies. These were passed on to relevant managers and staff. Suggestions were noted by the relevant services.

Local Government Ombudsman (LGO): current activity

168. During the quarter the Local Government Ombudsman (LGO) made initial enquiries / initiated investigations into 15 matters:

- **Planning and Building Control.** The Ombudsman returned a finding of 'No or Insufficient Evidence of Maladministration' in relation to 2 cases which are now

closed. The outcome of a third case is awaited.

- **Planning and Environmental Health.** The investigation into a single case is ongoing.
- **Adult Social Care.** 4 cases are under investigation and the outcomes are awaited.
- **Children Services.** 1 case is under investigation and the outcome awaited.
- **Noise Nuisance / Anti-Social Behaviour.** 2 investigations are taking place and outcomes awaited.
- **Housing / Regeneration.** 1 case is under investigation and the outcome awaited.
- **School Admissions.** 3 cases are being investigated and the outcomes awaited.

169. The LGO delivered decisions on 12 matters which were subject to investigations initiated prior to quarter 1.

- **Planning and Building Control.** 6 decisions were delivered. 'No Evidence of Maladministration' was the result in 4 of these cases, the LGO exercised discretion in one case and the final case was concluded as a local settlement.
- **Adult Social Care.** 2 decisions were delivered. The LGO exercised discretion in both of these cases.
- **Housing.** 2 decisions were delivered. Both cases were concluded as local settlements.
- **Benefits.** 1 decision was delivered. The case was concluded as a local settlement.
- **Anti-Social Behaviour.** 1 decision was delivered. The LGO exercised discretion in this matter.

170. During quarter 1, the Ombudsman notified the Council of the outcome in relation to a range of matters which were not subject to full investigation. The Ombudsman's investigators reached their decisions on the basis of the details supplied by complainants, supplemented in some instances with contextual information from Council officers. These matters can be summarised as follows:

- **Planning & Building Control.** 1 case, no maladministration
- **Housing.** 1 case, no maladministration
- **Household Waste.** 1 case, no maladministration
- **Agricultural issue.** 1 case, LGO's discretion
- **Local Taxation/Public Finance.** 2 cases. 1, no maladministration/ 1 LGO's discretion.

Learning Outcomes

171. The following learning outcomes /recommended actions have been noted by officers on completion of LGO reviews:

- In relation to a Planning and Building Control issue which was closed at the Ombudsman's discretion, the LGO criticised the Council for not consulting the complainant. However there were three applications for permission relating to this site. Although DCC's planning division failed to consult the complainant in relation to the first application, the complainant became aware of the application during the consultation process and submitted comments. Although DCC files show the complainant was notified of the later applications, the complainant claims not to have received these letters. As the letters were not returned by Royal Mail the case officer assumed that they had been delivered. It is not possible to determine if letters have been delivered unless they are returned by Royal Mail. In practical terms the only way to undertake public consultation is by Royal Mail and the Council cannot verify delivery due to the large number of letters sent out.
- In relation to a Planning and Building Control issue which was closed with a verdict of No Maladministration, the complainant alleged that the Planning Committee

failed to properly consider the planning application and were misled as to the law relating to the Council's consideration of its own policies, and that the Committee reports summary of consultee advice was selective and misleading. No new learning outcomes were identified as a result of the investigation. Earlier intervention to avoid the complaint reaching the LGO would not have been appropriate in this case, as DCC was unable to reach agreement with the complainants in relation to the main issues. Therefore, the intervention of the LGO Ombudsman was welcomed as a means of drawing the matter to a close. No action has been taken as it is considered that the procedures in place, in terms of referral of committee reports to the Council's Legal Section in advance of their publication, seeks to ensure that the likelihood of maladministration occurring as a result of the misapplication of law or policies is unlikely to arise.

- The LGO's decision relating to a complaint of noise nuisance from agricultural premises where the Ombudsman concluded No Maladministration, refers to a lack of structure in the investigation and therefore a lack of information being passed to the complainant. There is now a written noise investigation procedure which contains standard letters to be sent to complainants at various times of the investigation to keep them up to date.
- The following learning outcomes have been identified in relation to a housing complaint where the Ombudsman found maladministration by the Council with a recommendation of a compensatory payment:
 - Wherever a person presents to the Council in circumstances where there is reason to believe that that person is homeless then a referral should be made to the Council's Housing Solutions Service.
 - Wherever there is reason to believe that a person is homeless the Housing Solutions Service must take an application and carry out the statutory investigations to ascertain whether a duty is owed to that person and, if so, the extent of that duty.
 - Improved communication between services is needed to ensure that there is no prejudice to the service user.
 - Procedures in relation to the banding of applications need to be followed in all cases.

In addition the following actions pre-date the complaint but are relevant and it is hoped would mean that the same case will not arise again.

- Procedures in relation to Band F are in the process of being revised.
- Training has been delivered to Durham City Homes and all other partners in Durham Key Options in relation to Band F (January 2011).
- Training has been delivered to all Housing Solutions Officers on decision making in homelessness cases (July 2010).

In addition to the above there is a recommendation for training to be provided to customer services officers on how to identify whether a person may be homeless in order that the appropriate referral can be made to Housing Solutions.

RECOMMENDATIONS AND REASONS

172. Members of the Standards Committee are asked to:

- Note the report
- Discuss the requirements/areas of further development in relation to the complaints handling process

Contact: Neil Green

Tel: 01388 761933

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Standards Committee

16 September 2011

**Annual Report of Statutory Adult Social Care
Complaints, Compliments and Comments
2010/2011**



Report of Rachael Shimmin Corporate Director, Adults, Wellbeing and Health

Purpose of Report

1. The primary purpose of the Annual Report is to detail the performance of Durham County Council's Adults, Wellbeing & Health Statutory Adult Social Care Complaints Procedure. The Report also includes details about the compliments and comments received from service users and carers during the year.

Background

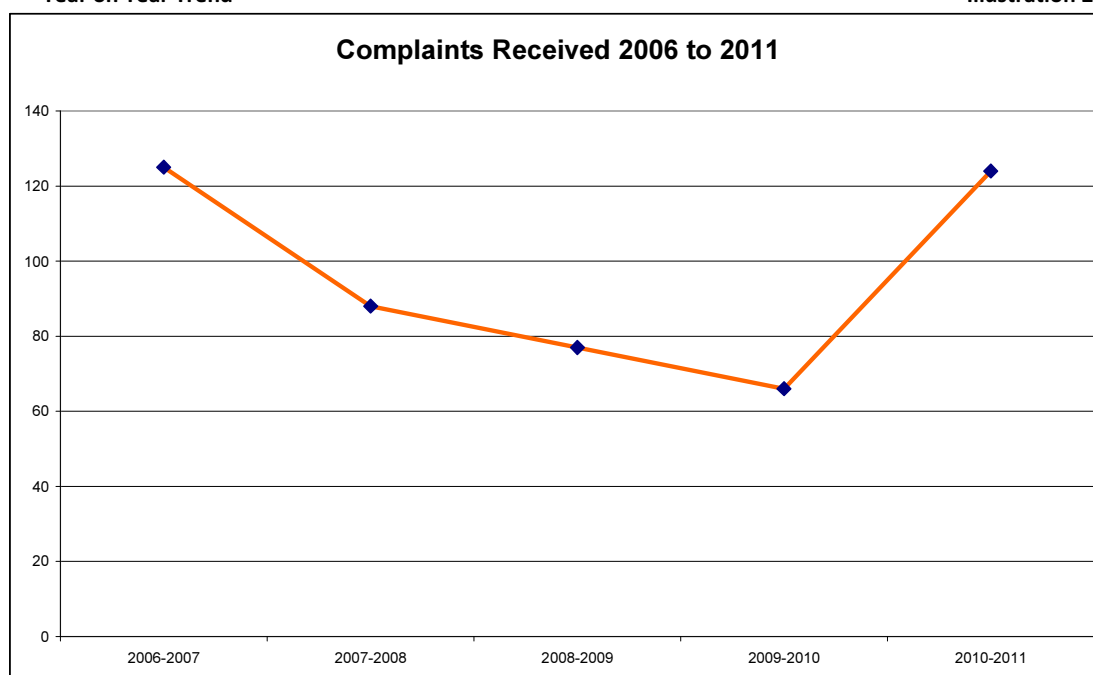
2. This Annual Report is the second published under the provisions of the Local Authority Social Services and National Health Service Complaints (England) Regulations 2009. The reporting format reflects the requirements detailed in the Regulations.
3. Under the regulations there are just two timescales that apply to the management of a complaint. Complaints must be acknowledged within 3 working days and it is expected that a complaint will be completed at "Local Resolution Stage" using a Complaints Resolution Plan within 6 months unless there are very exceptional circumstances.

Content

4. The report brings together information previously reported to Standards Committee on a quarterly basis on the management of complaints, compliments and comments from service users and carers.

Key issues

5. In 2010/2011 a total of 124 complaints were received and progressed through the Statutory Adult Social Care Complaints Procedure. This number, compared to 66 in the previous reporting year, is an increase of 88%. This is in sharp contrast to the downward trend in the number of complaints year on year since 2006/2007 (please see the illustration).



Complaints by Client Group

6. The largest number of complaints by Client Group was Older People with 68 complaints (54.8%) followed by Learning Disabilities 33 complaints (26.6%) which reflects the customer base of the Service.

Age Profiles of Service Users Making Complaints

7. The greatest number of complaints 31 (25%) were made about services for male service users aged 18-64, closely followed by services for males over the age of 85 with 26 complaints (21%) and females aged 18-64 with 25 complaints (20%). This is not in line with the demographic profile of service users but is explained due to the increase in complaints received by the Learning Disabilities Service in respect of the application of procedures and criteria during the re-assessment /review process.

Ethnicity and Diversity

8. When complaints are analysed by ethnicity 99% are recorded as White British and this reflects the demographic profile of the population of the County as reported by the Office of National Statistics 2009.

Categories of Complainant

9. In accordance with trends from previous years, relatives (non-parent) constituted the highest category of complainant at 55 complaints (44.3%). Nevertheless, 31 complaints (25%) were brought by service users on their own behalf. In 2010/2011 there was a sharp rise in the number of parents making a complaint 27 (21.8%) compared to 6 (9%) in 2009/2010. This can be directly attributed to the application of policies and procedures applied in Learning Disability reviews.

Outcome of Complaints

10. Of the 124 complaints received, 116 were completed by the end of the reporting year. Of the 116 complaints completed 30 (25.9%) were upheld in full and 21 (18.1%) were partially upheld, compared to the performance in 2009-10 where 24 (31.2%) were upheld in full and 18 (23.3%) were partially upheld.
11. In 2010/2011, 65 complaints (56%) were not upheld which compares with 21 complaints (35.5%) in 2009/2010. Reasons for complaints not being upheld are varied, in many of the cases not upheld related to the changes to service provision. The investigations found that service users care plan review processes were robust, the criteria correctly applied and no exceptional circumstances existed that had been overlooked.
12. There has been a 20% decrease in the number of complaints where the issues raised were well founded.

Number of Complaints Referred to the Local Government Ombudsman

13. During the course of 2010/2011 the Local Government Ombudsman (LGO) referred 12 adult social care cases. In 1 case, the Ombudsman took the view that there was maladministration but it had caused no injustice. A small compensatory payment of £250 was agreed in recognition of the time the complainant had to spend in bringing the complaint. In 3 cases the complaint had been made to the LGO without Durham County Council being given the opportunity to investigate and respond and the complainants were referred back to the local process. In 4 cases the LGO did not uphold the complaints. In 4 cases the LGO made preliminary enquiries and the outcome is awaited.

Summary of the Subject Matter of Complaints Received

14. There were 147 reasons recorded for the 124 complaints received. 'Conduct or Attitude of Staff' constituted the highest category of complaint relating to 28 complaints (19%) with 'Lack of Service – Communications/Information' closely following with 22 complaints (15%). The next two highest reasons were 'Application Of Service Guidance/Procedures' 16 (10.9%) and 'Lack Of Service – Change To Clients Service As Per Care Plan' 13 (8.8%).

Timescales for managing Complaints

15. The timescale for acknowledging a complaint is 3 working days. All of the 124 (100%) of complaints received were acknowledged within 3 working days.
16. Under the Regulations there are no set timescales for the management of complaints. However, the Service has monitored the speed of response to complaints and 50 (43.1%) complaints were concluded within 10 working days. The average time per case, on the 116 cases completed within the year, is 16 working days.

Duty to Co-operate – Joint Social Services and NHS Complaints

17. Four complaints were received during the year that involved both adult social care and health services. One case involved the Tees, Esk & Wear Valley NHS Trust and 3 cases involved County Durham and Darlington Foundation Trust. All of these

complaints were effectively managed and satisfactorily resolved and the benefit to the complainant was they received a single joint response to their complaint.

Declined Complaints

18. During the year 1 complaint was declined as the service user did not give their consent to a complaint being made on their behalf.

Remedies and Learning Outcomes

19. Providing remedies to issues that have arisen in a complaint are essential if confidence is to be restored between the Service and its service users. Even where complaints are not upheld full explanations, further information and often apologies are provided.
20. It should be noted that compensatory redress will only be considered where there is very strong evidence of shortcomings that may be in accordance with the Local Government Ombudsman's definition of maladministration.
21. Complaints provide valuable information from which the Service learns how to improve. Complaints also act as a prompt to ensure all staff work consistently to policies and procedures.
22. The learning outcomes acted upon in the reporting year include:-
 - All social work and health staff in the Learning Disability Integrated Teams have been instructed to verify documentation for accuracy when completing new or updated assessments and that all assessment information is properly coordinated and verified.
 - Social work staff have been reminded that accurate assessment of social care need is a professional responsibility.
 - In an in-house residential respite service for people with a Learning Disability, staff have been advised that all personal care needs are now recorded in detail to identify personal hygiene needs. Also the Client Activity List has been revised to enable more detailed information to be recorded about a service user's daily activities and participation in events.
 - Where there are likely to be changes to service provision, following a service users care plan review, a letter for service users explaining the review processes along with how the eligibility criteria is applied has been developed and issued.
 - A clearer process is now in place with regard to obtaining funding decisions on care packages in the Learning Disabilities Service. This includes new guidance and training for staff. Feedback is now routinely disseminated between staff and information recorded on the relevant service user case file. Staff at all levels have been reminded of the importance of effective communication with families/carers/service users especially when services are changed or modified.

Performance

23. Durham's ratio of complaints per 10,000 population - 2.97, compared with the average of other Regional Local Authorities - 3.43 and Comparator Local Authorities - 4.69 is still low. Work is on-going to monitor performance and to learn from other Authorities and ensure service users and carers are fully aware of how to submit a complaint.
24. Adults, Wellbeing & Health has adopted the Regional Quality Band Assessment in respect of Care Homes and Care Homes with Nursing for Older people for contract monitoring of the independent sector. Providers will be measured against a number of evidence based measures within 16 domains, one of which relates to Complaints. This work is in the early stages of development and more details on performance will be provided in next years Annual Report.

Developments

25. Work continues on a number of developments within the Service on the management of complaints. The review of the Regional Joint Protocol for Health and Social Care Organisations on Complaints Handling is close to conclusion. The Joint Protocol defines the management of complaints that span both health and social care and meets the requirements relating to the duty to co-operate under the Regulations. This has been developed with 6 North East Local Authorities and 13 NHS organisations across the Region.
26. Contracting arrangements for commissioning Independent Investigating Officers is being reviewed. The outcome of this work will lead to new arrangements for the provision Independent Investigating Officers (IIOs) for social care complaints and increased choice for suitably skilled and qualified IIO's on a regional basis, standardise costs to ensure better value for money and improved quality control. The scoping work for this is progressing well and it is hoped that this Framework will be implemented within the year.

Numbers of Compliments Received

27. In the reporting year a total of 576 compliments were received within the Service Areas. This represents an increase of 43% from the 403 received during 2009/2010 and continues the upward trend being 113% higher than the 271 in 2008/2009 and 75% higher than the 330 compliments in 2008/2009.

Ratio of Compliments to Complaints

28. The ratio of compliments to complaints received is 4.65:1. This is a decrease from the 6:1 ratio in 2009/2010. The decreased ratio reflects the impact of the higher number of complaints received in 2010/2011.

Compliments by Service Area

29. County Durham Care and Support (CDCS) the in-house provider received 464 compliments (80.5%) of the total number of compliments which is consistent with reporting in previous years.

Conclusion

30. The Annual Report indicates positive achievements in Adults, Wellbeing and Health performance in the management and consideration of complaints, compliments and comments, during the year 2010/2011. The new way of working in complaint resolution is now embedded and working effectively. The implementation of learning outcomes arising from complaints provides the opportunity to change practice and improve service delivery. Of the 116 cases completed within the year, the Service has continued to provide a timely response to the matters raised.
31. The Service receives a large number of compliments each year. This remains a significant reminder of the excellent work that is conducted at a difficult time in people's lives.

Recommendations

32. That Standards Committee
 - Note the content of this report and receive the Annual Report

Contact: Peter Appleton Head of Service Policy, Planning and Performance
Tel: 0191 3834543

Background Papers

Statutory Adult Social Care Complaints, Compliments and Comments Annual Report
2010/11

Appendix 1: Implications

| | |
|--------------------------------------|---|
| Finance | None at this stage. However complaints can lead to claims for compensation in extreme cases. |
| Staffing | N/A |
| Risk | N/A |
| Equality & Diversity | Consistent with national and local requirements Complaints, Compliments and Comments Procedure has been Impact Assessed. |
| Accommodation | N/A |
| Crime and disorder | System can record any complaints about bullying, harassment or racist incidents. |
| Sustainability | N/A |
| Human rights | Compatible with Human Rights Act there is a system to record and respond to complaints about alleged breaches. |
| Consultation | Work is on-going with Health Trusts in the joint management of Statutory Adult Social Care Complaints. |
| Procurement | Work is on-going in the development of the regional Collaborative Framework Agreement for commissioning Independent Investigating Officers. |
| Disability Discrimination Act | N/A |
| Legal Implications | The Annual Report is published under the provisions of the Local Authority Social Services and National Health Service Complaints (England) Regulations 2009. |

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Adults, Wellbeing and Health

Statutory Adult Social Care Complaints, Compliments and Comments Annual Report 2010/11

Adults, Wellbeing and Health

Statutory Adult Social Care Complaints, Compliments and Comments Annual Report 2010/11

**Any comments or queries about this
report can be made to:**

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(England) Regulations 2009 No. 309**

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ANNUAL REPRESENTATIONS REPORT 2010/2011

SUMMARY AND KEY MESSAGES

OVERVIEW

1. This Annual Report is the second that is published under the provisions and requirements of the Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 that became operative on 1 April 2009. The reporting format reflects the requirements detailed in the Regulations.
2. The primary purpose of the Annual Report is to detail the performance of Durham County Council's Adults, Wellbeing & Health Statutory Adult Social Care Complaints Procedure. Whilst there is no requirement to publish data on Compliments it is important that the fullest picture is obtained about what service users, their carers and other representatives think about the services and the professionalism of staff they experience.
3. As explained in the previous Annual Report, the 2009 Regulations promoted new ways of managing and seeking to resolve complaints and the key principles are re-stated here. A complaint made verbally, if capable of being resolved within one working day, does not constitute a complaint for recording purposes under the new regulations. For complaints that are formalised, the process is no longer driven by prescribed timescales* and incremental stages of resolution, as in the past. Now complaints are risk-assessed to ensure that there are no safeguarding or other procedural issues that might supersede the complaints procedure.
4. Consent has to be obtained to confirm that someone making a complaint on another's behalf has been given the authority to do so.
5. Complainants are fully involved in planning how their complaint is to be addressed, within what timescale and their expectations on the desired outcome and from this a Complaints Resolution Plan is produced.
6. Enabling complainants to voice their grievances at an early stage and be listened to without judgment and with empathy establishes the foundations of conciliation as the complaint progresses. Different resolution methods are utilised depending on the issues being addressed and individual preferences and circumstances.

* Apart from the 3 working days to acknowledge a complaint and a 6 month completion target

7. Where all proportionate resolution mechanisms have been exhausted and if the complaint remains unresolved, the complainant can be referred to the Local Government Ombudsman.
8. The data and analysis presented reflects the requirements of the Regulations but additional analysis is also included as it provides useful information upon which improvements can be made or trends monitored.
9. From the issues raised in complaints, real opportunities are presented to change and improve services by having a clearer understanding about what works best for service users leading to a service user-centred provision. The frequent aspiration of complainants is that they do not want what happened to them, to happen to anyone else.
10. By committing to learn from complaints a genuine partnership is created between service users and carers, the staff and the Service. Complaints provide an opportunity for reflection both at an individual practice level and at strategic level. Could something have been done differently and are there wider implications, lessons to be learnt and changes made?
11. Details about the Adults, Wellbeing Health Complaints process are available on Durham County Council's website (www.durham.gov.uk) and public information is in key locations throughout the County.

KEY ISSUES

Numbers of Complaints

12. In 2010/2011 a total of 124 complaints were received and progressed through the Statutory Adult Social Care Complaints Procedure. This number, compared to 66 in the previous reporting year, is an increase of 88%. This is in sharp contrast to the downward trend in the number of complaints year on year as recorded since 2002/2003.

Complaints by Client Group

13. The largest number of complaints by Client Group was Older People with 68 complaints (54.8%) followed by Learning Disabilities 33 complaints (26.6%) which reflects the customer base of the Service.

Age Profiles of Service Users Making Complaints

14. The greatest number of complaints 31 (25%) were made in respect of males aged 18-64, closely followed by males over the age of 85 with 26 complaints (21%) and females aged 18-64 with 25 complaints (20%). This is not in line with the demographic profile of service users but in the case of young males and females is explained due to care plan review processes and changed eligibility criteria, especially in the Learning Disabilities Service.

Ethnicity and Diversity

15. When complaints are analysed by ethnicity 99% are recorded as White British and this reflects the demographic profile of the ethnic population of the County as reported by the Office of National Statistics 2009.

Categories of Complainant

16. As has been the trend over previous reporting years, relatives (non-parent) constituted the highest category of complainant at 55 complaints (44.3%). In almost all cases an adult child made the complaint on behalf of their parent and this reflects the concerns and anxieties that family have about their elderly relative's care, safety and well-being. Nevertheless, 31 complaints (25%) were brought by service users on their own behalf. In 2010/2011 there was a sharp rise in the number of parents making a complaint, 27 (21.8%) compared to 6 (9%) in 2009/2010. This can be directly attributed to the application of policies and procedures being applied in Learning Disability care plan reviews in the reporting year.

Outcome of Complaints

17. Of the 124 complaints received, 116 were completed by the end of the reporting year. Of the 116 complaints completed 30 (25.9%) were upheld in full and 21 (18.1%) were partially upheld compared to the performance in 2009-10 where 24 (31.2%) were upheld in full and 18 (23.3%) were partially upheld. In 2010/2011, 65 complaints (56%) were not upheld which compares with 21 complaints (35.5%) in 2009/2010.

Reasons for complaints not being upheld are varied, in many of the cases not upheld related to the changes to service provision. The investigations found that service users care plan review processes were robust, the criteria correctly applied and no exceptional circumstances existed that had been overlooked.

18. There has been a 20% decrease in the number of complaints where the issues raised were well founded.

Number of Complaints Referred to the Local Government Ombudsman

19. During the course of 2010/2011 the Local Government Ombudsman (LGO) was referred 12 adult social care cases. In 1 case, the Ombudsman took the view that there was maladministration but it had caused no injustice. In 3 cases the complaint had been made to the LGO without Durham County Council having been given the opportunity to investigate and respond and the complainants were referred back to the local process. In 4 cases the LGO did not uphold the complaints. In 4 cases the LGO made preliminary enquiries and the outcome is awaited.

Summary of the Subject Matter of Complaints Received

20. There were 147 reasons recorded for the 124 complaints received. 'Conduct or Attitude of Staff' constituted the highest category of complaint relating to 28 complaints (19%) with 'Lack Of Service – Communications/Information' closely following with 22 complaints (15%). The next two highest subjects were 'Application Of Service Guidance/Procedures' 16 (10.9%) and 'Lack Of Service – Change To Clients Service As Per Care Plan' 13 (8.8%).
21. Further analysis on the subject matter of the complaints received, where the complaint is upheld, is planned work for 2011/2012.

Timescales for managing Complaints

22. The timescale for acknowledging a complaint is 3 working days. All of the 124 (100%) complaints received were acknowledged within 3 working days.
23. Under the Regulations there are no set timescales for the management of complaints. However, the Service has monitored the speed of response to complaints and 50 (43.1%) complaints were concluded within 10 working days. It has been calculated that the average time per case, on the 116 cases completed within the year, is 16 working days.

Duty to Co-operate – Joint Social Services and NHS Complaints

24. Four complaints were received during the year that involved both adult social care and health services. One case involved the Tees, Esk & Wear Valley NHS Trust and 3 cases involved County Durham and Darlington Foundation Trust. All of these complaints were effectively managed and satisfactorily resolved and the benefit to the complainant was that they received a single joint response to their complaint and had one point of contact.

Declined Complaints

25. During the year 1 complaint was declined as the service user did not give their consent to a complaint being made on their behalf.

Remedies and Learning Outcomes

26. Examples of the remedies used to achieve resolution and the learning and practice developments that have accrued from complaints are provided at pages 24- 25 in the main body of the report.

Numbers of Compliments Received

27. In the reporting year a total of 576 compliments were received within the Service Areas. This represents an increase of 43% from the 403 received during 2009/2010 and continues the upward trend being 113% higher than the 271 in 2008/2009 and 75% higher than the 330 compliments in 2008/2009.

Ratio of Compliments to Complaints

28. The ratio of compliments to complaints received is 4.65:1. This is a decrease from the 6:1 ratio received in 2009/2010. The decreased ratio reflects the impact of the higher number of complaints received in 2010/2011.

Compliments by Service Area

29. County Durham Care and Support (CDCS), the in-house provider, received 464 (80.5%) of the total number of compliments which is consistent with reporting in previous years.

ANNUAL REPRESENTATIONS REPORT 2010/2011

PART ONE - INTRODUCTION

PURPOSE OF THE REPORT

1. This Annual Report provides details about the performance of Durham County Council's Adults Wellbeing & Health, Statutory Adult Social Care Complaints Procedure during the year 2010/2011. The report also provides analysis and narrative on the Compliments received in the Service Areas for the same period to provide a representative overview of what service users, their carers and/or their representatives think of the services provided.
2. Where complaints are made about adult social care services, a Statutory Procedure has to be followed. In April 2009, a new Integrated Social Services and Health Complaints Procedure was implemented and this report is the second to be produced which covers the reporting criteria prescribed within Local Authority Social Services and National Health Service Complaints (England) Regulations 2009. These will be described in more detail in the following section.

PART TWO – THE COMPLAINTS PROCEDURE EXPLAINED

BACKGROUND

1. Requirements on the procedures for handling and considering complaints in adult social care are enshrined in the *Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 (No. 309)*.

WORKING WITH THE 2009 REGULATIONS IN ADULTS, WELLBEING & HEALTH

2. The 2009 Regulations recognise the need for engagement and partnership with complainants. Consequently, as soon as a complaint is received (and after a risk assessment process and eligibility assessment, accepted as a complaint), every effort is made to communicate personally with the complainant to discuss what has happened, what expectations they have and what outcomes they would like to achieve. This stage of the procedure is conducted by the Complaints Officer who provides a consistent point of contact for the complainant throughout the process. The complainant is provided with information about what will happen next in terms of investigation and response and a timescale is agreed which can only be amended with the agreement of the complainant. On most occasions it is possible to identify complaints that will require a longer period of investigation due to their complexity and this is also discussed to ensure that the complainant is fully-informed. Once agreed a Complaints Resolution Plan (CRP) is completed and provided to the complainant.
3. Once the CRP is completed and agreed with the complainant it is referred to the relevant Manager for investigation and response within the agreed timescales. If the timescales cannot be achieved, full reasons have to be provided and these are communicated to the complainant.
4. Once the complaint response is provided to the complainant, if they do not agree with the response, discussions take place to see whether other forms of resolution methods might be used. These include offers of meetings, the provision of further information, compensatory redress, independent investigation and conciliation and mediation based on an assessment of reasonableness and proportionality. If all attempts at resolution have failed the complainant is provided with the contact details for the Local Government Ombudsman to whom they can refer their complaint.

TIME LIMIT FOR MAKING A COMPLAINT

5. The time limit for making a complaint is 12 months from the date that the event complained about occurred or came to the notice of the complainant. If a complaint is made after the 12 month limitation period, discretion can be exercised if there are legitimate reasons why a delay in bringing the complaint has occurred and provided it is still possible to investigate the complaint effectively and fairly.

VERBAL COMPLAINTS

6. Within the Regulations, there is an exception to the above process. If a complaint is received verbally and can be resolved, with the agreement of the complainant, within one working day then it is not logged or recorded as a complaint. This is to encourage staff to feel empowered to resolve a complaint as soon as it is brought to their attention and to provide immediate action for the complainant. It is important to stress, however, that this only applies to complaints made verbally and complainants need to be asked whether they want the matter resolved in this way or whether they would prefer to have the complaint formalised. If the latter the procedure detailed above applies.

WHO IS ELIGIBLE TO COMPLAIN

7. The Statutory Adult Social Care Complaints Procedure in Adult Care can be accessed and used by individuals who are/have been in receipt, and/or are eligible to receive or be assessed for Social Care Services. A representative can make a complaint on their behalf subject to the necessary consent.
8. The 2009 Regulations recognises the following:
 - i. *“A person who receives or has received services from [adult social care] or*
 - ii. *A person who is affected, or likely to be affected, by the action, omission or decision of [adult social care]*
 - iii. *A person acting on behalf of a person who has died covered by i and ii above*
 - iv. *A person acting with the consent of a person covered by i and ii above*
 - v. *A person acting on behalf of someone with physical or mental incapacity (the latter within the meaning of the Mental Capacity Act 2005(a) where the [local authority] is satisfied that the representative is acting in the best interests of the person on whose behalf the complaint is made.”*

EXCLUSIONS TO THE COMPLAINTS PROCEDURE

9. Complaints are **not** eligible to be heard under the 2009 Regulations if they are:-
 - not consented to by the subject on whose behalf the complaint is made (where the subject has capacity)
 - not made in the best interests of a person who lacks capacity
 - made by a responsible body that has a disagreement with another responsible body i.e. another local authority or NHS organisation
 - made by an employee complaining about matters relating to their employment
 - about subject matter the same as complaints previously raised, investigated and responded to under the current or past procedures
 - being investigated by the Local Government Ombudsman

- arising from an alleged failure to comply with a Freedom of Information request
- arising from an alleged failure to comply with a data subject request under the provisions of the Data Protection Act

OTHER KEY CHANGES IN THE 2009 REGULATIONS

Disciplinary and Legal Action

10. In a departure from the previous procedures a complaint can be investigated even where:-
 - disciplinary action is being considered or taken. The two arrangements will remain separate and confidentiality for the parties must be maintained.
 - legal action is being considered or taken. Only if the complaint investigation might prejudice subsequent legal or judicial action should the complaint be suspended following discussion and the complainant advised of the reasons why.

Duty to Co-operate

11. Local Authorities, NHS bodies and other responsible organisations now have a statutory duty to co-operate with each other in the resolution of a complaint that spans more than one organisation.
12. The duty to co-operate includes:-
 - identifying which authority will take the lead
 - co-ordinating the handling and communication of a complaint
 - ensuring the complainant receives a co-ordinated response to the complaint
 - ensuring each organisation provides relevant information in pursuance of the complaints investigation as deemed necessary and relevant
 - attending meetings in connection with the consideration and resolution of a complaint

Publicity

13. There is a statutory duty placed on the Local Authority to make information available to the public about:-
 - Its arrangements for dealing with complaints
 - How further information about those arrangements may be obtained.

The Annual Report

14. The 2009 Regulations requires the publication of an Annual Report to inform service users, their carers and/or representatives, elected members, staff, the general public and other statutory organisations such as the Care Quality Commission about how the Service has performed in handling complaints.

PART THREE - MANAGEMENT AND OPERATION OF THE COMPLAINTS PROCEDURE

1. Within Adults, Wellbeing & Health the complaints management function is within Quality Standards Team of Policy, Planning and Performance. Nevertheless there is a close working relationship and collaboration with all operational managers and staff in all of the Service Areas in Adult Care.
2. Complaints can be received by a variety of methods – by post, email, telephone, to members of staff – and at a variety of locations. However, the formal acknowledgement and initial recording of Statutory Adult Social Care Complaints are managed by the Central Administrative Team at County Hall on the Social Services Information Database (SSID).
3. Once logged the complaint is passed to the Complaints Officer who conducts the risk assessment and negotiates the Complaints Resolution Plan (CRP) with the complainant.
4. The CRP contains all relevant information about the complaint and is provided to the relevant Senior Manager who will allocate the complaint for investigation and provide a response from the findings.
5. If a complaint is unresolved the Complaints Officer will liaise with the complainant to identify further attempts at resolution or provide advice about a referral to the Local Government Ombudsman (LGO).
6. Information about the complaints procedure is published and promoted throughout the Service. Service User Guides, which are provided to all Adult Care service users, contain a section on how to make a complaint, comment or compliment. Additionally, staff are expected to provide verbal information and advice to service users. Details about the Adults, Wellbeing Health Complaints process are available on Durham County Council's website (www.durham.gov.uk) and public information is in key locations throughout the County.

PART FOUR – STATUTORY ADULT SOCIAL CARE COMPLAINTS 1 APRIL 2010 TO 31 MARCH 2011

REPORTING REQUIREMENTS UNDER THE REGULATIONS

1. This section covers the reporting requirements of the 2009 Complaints Regulations. Sub-sections will cover:
 - The number of complaints received under the Statutory Adult Social Care procedure
 - The number of complaints found to have been well-founded
 - The number of complaints referred to the Local Government Ombudsman
 - A summary of the subject matter of complaints received
 - Learning Outcomes for services or complaints handling
2. In addition to the compulsory elements of the reporting process, this report will also include additional analysis which Adults, Wellbeing & Health consider important.
3. The data provided within this document is taken from the Social Services Information Database (SSID).

ANALYSIS OF THE STATUTORY ADULT SOCIAL CARE COMPLAINTS

4. In order to contextualise the complaints made in Adult Care it is important to appreciate the level and complexity of the services provided by the Authority. In 2010/2011 the total number of adults who received a service (provision) was 19,875*. Of these 7,092 were aged 18-64 and 12,783 were aged 65+. Each service user will have multiple contacts over the course of one year.

The number and analysis of complaints received under the Statutory Adult Social Care Procedure

5. In 2010/2011 the Authority received 124 Statutory Adult Social Care Complaints. As a proportion of the total number of contacts with service users and carers this represents a very small percentage.
6. As can be seen from Table 1, the service receiving the largest number of complaints is Older People/Physical Disability/Sensory Support services representing 54% of the total number of complaints. This shows a consistent pattern over several years of reporting. Given that the majority of referrals to Adult Care Services are of people aged 65 and over and given the demographic increase in the numbers of older people living longer, the proportions are within expectations.

* Sourced from the 2011 RAP Return.

Number of complaints received by service type

Table 1

| Service | Complaint | Percentage |
|--|------------|-------------|
| Older People/Mental Health Services for Older People/ Physical Disabilities/Sensory Impairment/ Sensory Support | 67 | 54% |
| Learning Disabilities/Mental Health/Carers | 34 | 27% |
| Finance | 10 | 8% |
| County Durham Care And Support | 8 | 7% |
| Commissioning | 4 | 3% |
| Policy, Planning & Performance | 1 | 1% |
| Total | 124 | 100% |

7. Table 2 below illustrates the number of complaints by Client Group. Complaints about services for older people constituted the highest proportion at 54.84%, with services for learning disability service users at 25%.

Complaints by Client Group

Table 2

| Service | LD | MH | OP | PD | SCD | N/S | Total |
|---|------------|--------------|---------------|---------------|--------------|--------------|-------------|
| Learning Disabilities/Mental Health/Carers | 25 | 3 | 1 | 1 | 2 | 2 | 34 |
| Older People/Mental Health Services for Older People/ Physical Disabilities/Sensory Impairment/ Sensory Support | 0 | 0 | 54 | 10 | 0 | 3 | 67 |
| County Durham Care and Support | 1 | 1 | 4 | 1 | 0 | 1 | 8 |
| Finance | 4 | 0 | 6 | 0 | 0 | 0 | 10 |
| Policy, Planning & Performance | 0 | 0 | 0 | 1 | 0 | 0 | 1 |
| Commissioning | 1 | 0 | 3 | 0 | 0 | 0 | 4 |
| Total | 31 | 4 | 68 | 13 | 2 | 6 | 124 |
| Percentage | 25% | 3.23% | 54.84% | 10.48% | 1.61% | 4.84% | 100% |

8. The greatest number of complaints were made about services for male service users aged 18-64, 31 complaints (25%), closely followed by services for males over the age of 85 at 26 complaints (21%) and females aged 18-64 with 25 complaints (20%). This is not in line with the demographic profile of service users but is explained due to the increase in complaints received by the Learning Disabilities Service. See Table 3 below.

Age Profiles of Service Users Making Complaints

Table 3

| Age Group | Complaints | |
|----------------|------------|-----------|
| | Female | Male |
| 18 - 64 | 25 | 31 |
| 65 - 74 | 6 | 6 |
| 75 - 84 | 16 | 7 |
| 85+ | 26 | 7 |
| Total | 73 | 51 |

9. When complaints are analysed by ethnicity 99% are recorded as White British and this reflects the demographic profile of the ethnic population of the County as reported by the Office of National Statistics 2009.
10. Table 4 and Illustration 1 below show that the greatest proportion of complaints (44.4%) were made by relatives (excluding parents) of the service user. This reflects a slight decrease on last year's figure of 48.5% but remains indicative of the growing population of older people receiving services and reflects the concerns, usually of sons and daughters, of their parent's situation. If someone is making a complaint on behalf of a service user, the service user's written consent is obtained. Whilst the majority do give their consent some service users have withheld it as there can sometimes be differences of perceptions and expectations between a service user and their relative. Where a service user declines their consent this has to be respected and explained to the relative.
11. Service users making complaints on their own behalf constitutes the second highest category of complainant at 25%, closely followed by complaints made by parents at 21.8%. This reflects the increase in complaints within the Learning Disabilities Service.

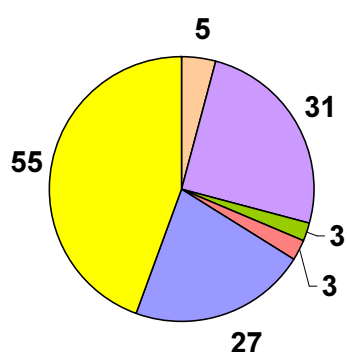
Categories of Complainants

Table 4

| Service | Advocate | Friend | Client/ Service User | Other | Parent | Relative | Total |
|---|-----------|-------------|----------------------------|-------------|--------------|--------------|-------------|
| Learning Disabilities/Mental Health/Carers | 3 | 2 | 6 | 1 | 21 | 1 | 34 |
| Older People/Mental Health Services for Older People/ Physical Disabilities/Sensory Impairment/ Sensory Support | 1 | 1 | 21 | 1 | 2 | 41 | 67 |
| County Durham Care and Support | 0 | 0 | 1 | 0 | 1 | 6 | 8 |
| Finance | 0 | 0 | 1 | 1 | 2 | 6 | 10 |
| Policy, Planning & Performance | 0 | 0 | 1 | 0 | 0 | 0 | 1 |
| Commissioning | 1 | 0 | 1 | 0 | 1 | 1 | 4 |
| Total | 5 | 3 | 31 | 3 | 27 | 55 | 124 |
| Percentage | 4% | 2.4% | 25% | 2.4% | 21.8% | 44.4% | 100% |

Regulated Adult Social Care Complaints (by complainant type) Period 1st April 2010 - 31st March 2011

■ Advocate
 ■ Client
 ■ Friend
 ■ Other
 ■ Parent
 ■ Relative (Non-Parent)



Number of Complaints established to have been well-founded

12. At the end of the reporting year 8 of the 124 complaints had not been completed and, for the purpose of the analysis below, are excluded from the calculation. 116 complaints therefore equate to 100%.

Outcome of Complaints

Table 5

| Service | Upheld | Partially Upheld | Not Upheld | Total of the complaints completed | (Ongoing – complaints not yet completed) |
|---|-------------------------|------------------|------------|-----------------------------------|--|
| Learning Disabilities/Mental Health/Carers | 5 | 9 | 17 | 31 | 3 |
| Older People/Mental Health Services for Older People/ Physical Disabilities/Sensory Impairment/ Sensory Support | 19 | 9 | 36 | 64 | 3 |
| Commissioning | 1 | 1 | 1 | 3 | 1 |
| County Durham Care and Support | 2 | 0 | 5 | 7 | 1 |
| Finance | 2 | 2 | 6 | 10 | 0 |
| Policy, Planning & Performance | 1 | 0 | 0 | 1 | 0 |
| Total | 30 | 21 | 65 | 116 | 8 |
| Percentage | Of completed complaints | | | Of all complaints received | |
| | 26% | 18% | 56% | 94% | 6% |

13. The number of complaints upheld in full constituted 26% of the total. Where complaints are partially upheld this indicates that part of the elements of complaint were also upheld. If the figures of upheld and partially upheld are combined the total is 44%, compared to 56% not upheld. In 2010/2011 65 complaints (56%) were not upheld, compared with 21 complaints (35.5%) in 2009/2010.
14. There has been a 20% decrease in the number of complaints where the issues raised were well founded. However, where a complaint is held as unfounded this does not mean that the complainant did not have just reasons for submitting their concerns.
15. Remedies and learning outcomes arise where complaints are upheld and these are detailed in Part 5 of this report.
16. Reasons why complaints are not upheld are varied and during the course of the year more detailed explanations have been reported in the quarterly cycle. Some examples of why complaints have not been upheld follow:-
 - Complaints made about changes to service provision were not upheld when the investigation found that service users care plan review processes were robust, the criteria correctly applied and no exceptional circumstances existed that had been overlooked.
 - A service user's 2 days per week attendance at a day centre was terminated as he no longer met the criteria. The Local Government Ombudsman adjudicated this complaint and it was not upheld.
 - An older citizen complained that no help had been provided to her during the adverse weather conditions when she was unable to leave the house and had no food and her rubbish was piling up. In fact when the referral came to Social Care Direct she was contacted immediately by the social work team and within 48 hours two social work staff went to her house, cleared the snow and ice from her paths, ensured she had food provisions and transferred all her accumulating rubbish into her wheelie bin.
 - A solicitor complained about delays in the Finance Department appointing a Deputy to manage a service user's finances. The investigation showed that the delay was caused by the Court of Protection, not Durham County Council.

Number of Complaints Referred to the Local Government Ombudsman

17. At the conclusion of a complaint, if there remains dissatisfaction and no further resolution mechanisms remain, advice is given to the complainant about how to refer the matter to the Local Government Ombudsman (LGO). A complainant has twelve months within which they can refer an unresolved complaint to the LGO.
18. During the course of the year the Local Government Ombudsman was referred 12 adult social care cases.
19. In 1 case the Ombudsman took the view that there was maladministration by the Council in relation to the feasibility assessment (with regard to converting an existing bathroom into a walk-in shower) but it had caused no injustice. A small compensatory payment of £250 was agreed in recognition of the time the complainant had to spend in bringing the complaint. In 3 cases the complaint had been made to the LGO without Durham County Council having been given the opportunity to investigate and respond and the complainants were referred back to the local process. In 4 cases the LGO did not uphold the complaints and in a further 4 cases the LGO made preliminary enquiries and the outcome is awaited.
20. From 1 October 2010 the LGO assumed new powers to investigate complaints made by people who self-fund and make their own arrangements for their adult social care. Previously self-funders could only obtain redress through the courts.

Summary of the Subject Matter of Complaints Received

21. The Social Services Information Database enables the recording of the subject matter of complaints under different categories and these are reproduced in the table below.
22. Some complaints will have different elements within them which require more than one subject matter to be categorised. Table 6 below illustrates the subject matter of the complaints received.

Table 6

| Subject Matter of Complaints Received | No. of Complaints | % |
|--|-------------------|-------------|
| Conduct or Attitude Of Staff | 28 | 19% |
| Lack of Service - Communications/Information | 22 | 15% |
| Application Of Service Guidance/Procedures | 16 | 10.9% |
| Lack of Service – Change To Clients Service As Per Care Plan | 13 | 8.8% |
| Quality of Service - Personal Financial Issues | 11 | 7.5% |
| Lack of A Service – Other | 10 | 6.8% |
| Provision of Service – Equipment | 7 | 4.8% |
| Quality of Service - Personal Care | 7 | 4.8% |
| Provision of Service – Assessment | 6 | 4.1% |
| Provision of Service - Placement Provision | 6 | 4.1% |
| Lack of Service - Restricted Choices Of Current Services | 4 | 2.7% |
| Provision of Service - Reviews/Conferences | 3 | 2% |
| Quality of Service - Work Of Other Agencies | 3 | 2% |
| Special Case – Confidentiality | 3 | 2% |
| Lack of Service - Contact/Visits | 2 | 1.4% |
| Provision Of Service | 2 | 1.4% |
| Other | 1 | 0.7% |
| Quality of Service – Physical Handling | 1 | 0.7% |
| Quality of Service – Refreshments | 1 | 0.7% |
| Special Case – Protection Investigations | 1 | 0.7% |
| Total Number of reasons of Complaint recorded for the 124 complaints received | 147 | 100% |

23. The highest categories of complaint are the '*Conduct or attitude of staff*', '*Communications and information*' and '*Application of Service Guidance/procedures*'. In the majority of cases citing failures in communication and information there is a direct link with conduct/attitude of staff.
24. Further analysis on the subject matter of the complaints received, where the complaint is upheld, is planned work for 2011/2012.

Time Taken to Conclude Complaints

25. There is no reporting requirement to analyse the length of time taken to conclude a complaint as there are no set timescales or targets. However, the Service has monitored the speed of response to complaints and the details below in Table 7 provide an indication on turnaround time of a complaint. Of the 116 complaints received in the year that were concluded at Local Resolution stage, 8 are still ongoing. If a complaint is unresolved at the first response stage other means of seeking to resolve the complaint are offered which inevitably lengthens the time taken to conclude a complaint.

Working Days to Conclude Local Resolution

Table 7

| Working Days To Complete | Total | % |
|---------------------------|------------|-------------|
| Within 10 Working Days | 50 | 43.1% |
| Within 20 Working Days | 40 | 34.5% |
| Within 30 Working Days | 13 | 11.2% |
| More Than 30 Working Days | 13 | 11.2% |
| Total | 116 | 100% |

26. There were 43.1% complaints concluded within 10 working days and 34.5% within 20. Of those concluded within 30 working days and beyond most involved organising a meeting with the relevant Senior Manager and some required a more in-depth or independent investigation due to their complexity. It has been calculated that the average time per case to conclude a complaint based on the 116 that were completed is 16 working days.

Complaints Acknowledged within 3 Working Days

27. All 124 complaints received between 1st April 2010 and 31st March 2011 were acknowledged within 3 working days.

Duty to Co-operate – Joint Social Services and NHS Complaints

28. Four complaints were received during the year that involved both adult social care and health services. One case involved the Tees, Esk & Wear Valley NHS Trust, 2 cases involved NHS County Durham and Darlington and 1 case involved both Darlington Memorial Hospital and County Durham and Darlington NHS. All of these complaints were effectively managed and satisfactorily resolved and the benefit to the complainant was that they received a single joint response to their issues and a single point of contact.

Declined Complaints

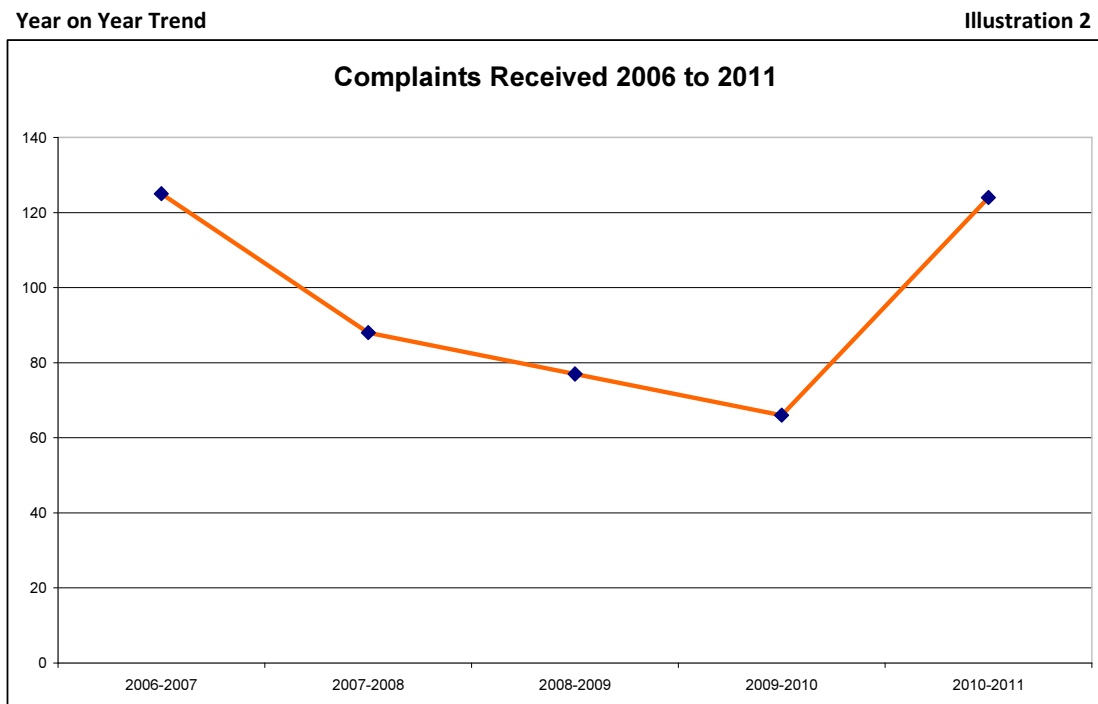
During the year, 1 complaint was declined as the service user declined to give their consent for the complaint to be heard.

Other Procedures

In 2 cases the Complaints Procedure was superseded by the Safeguarding Procedures due to the nature of the issues raised. In another 2 cases Tees Esk and Wear Valley NHS Trust was identified as the Responsible Body and the complaints were referred to them for investigation and response.

Year on Year Comparisons

29. In order to obtain an overview of overall performance from previous annual reports, Illustration 2 below shows year on year comparisons of the numbers of complaints received.



30. In 2010/2011 a total of 124 complaints were received and progressed through the Statutory Adult Social Care Complaints Procedure. This number, compared to 66 in the previous reporting year, is an increase of 88%. This is in contrast to the downward trend in the number of complaints year on year as recorded since 2006/2007. The upward trend coincides with the application of policies and procedures and eligibility criteria allied to the care plan review process.

Local Authority Complaints comparisons

Table 8

| |
|--|
| Regional Complaints Comparators per 10,000 18+ population Performance |
|--|

| Local Authority | Adults Population | Nos. of complaints 2009/2010 | Complaints per 10,000 population | Nos. of complaints 2010/2011 | Complaints per 10,000 population |
|---------------------|-------------------|------------------------------|----------------------------------|------------------------------|----------------------------------|
| Sunderland | 232,200 | 168 | 7.24 | 125 | 5.38 |
| Redcar & Cleveland | 112,300 | 49 | 4.36 | 60 | 5.34 |
| Middlesbrough | 113,000 | 41 | 3.63 | 49 | 4.34 |
| Gateshead* | 157,100 | 64 | 4.07 | 61 | 3.88 |
| Darlington | 81,200 | No response | No response | 30 | 3.69 |
| Durham | 418,200 | 66 | 1.58 | 124 | 2.97 |
| South Tyneside | 126,000 | 24 | 1.90 | 32 | 2.54 |
| Hartlepool | 72,900 | 27 | 3.70 | 17 | 2.33 |
| Stockton-on-Tees* | 154,800 | No response | No response | 30 | 1.94 |
| North Tyneside | 162,300 | 35 | 2.16 | 30 | 1.85 |
| Northumberland * | 258,100 | 69 | 2.67 | No response | No response |
| Newcastle upon Tyne | 238,700 | No response | No response | No response | No response |
| Average | 177,233 | 60 | 3.48 | 55.8 | 3.43 |

* Also IPF Comparator, see table 9

(Population statistics from ONS mid-2009 estimates)

Local Authority Complaints comparisons

Table 9

| |
|--|
| National Complaints Comparators per 10,000 18+ population Performance |
|--|

| Local Authority | Adults Population | Nos. of complaints 2010/2011 | Complaints per 10,000 population |
|--------------------|-------------------|------------------------------|----------------------------------|
| Stoke-on-Trent | 193,200 | 192 | 9.94 |
| Bolton | 210,000 | 155 | 7.38 |
| Kirklees | 323,400 | 165 | 5.10 |
| Tameside | 173,400 | 88 | 5.07 |
| Gateshead | 157,100 | 61 | 3.88 |
| Wakefield | 264,100 | 80 | 3.03 |
| Durham | 418,200 | 124 | 2.97 |
| Stockton-on-Tees | 153,800 | 30 | 1.95 |
| St. Helens | 144,100 | 19 | 1.32 |
| Barnsley | 183,800 | No Response | n/a |
| Doncaster | 234,600 | No Response | n/a |
| Rotherham | 204,800 | No Response | n/a |
| Wigan | 248,500 | No Response | n/a |
| Northumberland | 258,100 | No Response | n/a |
| North Lincolnshire | 130,900 | No Response | n/a |
| Dudley | 249,100 | No Response | n/a |
| Average | 221,693 | 104 | 4.69 |

(Population statistics from ONS mid-2009 estimates)

31. As shown in Table 8 above when consideration is given to Durham's performance per 10,000 population - 2.97, compared to other Regional

Local Authorities- 3.43, you can see the sharp rise in the number of complaints received is not reflected in the performance of the other Local Authorities. The recent increases in complaints in Durham can be primarily attributed to the outcomes of care plan reviews and reassessments in both Older Persons and Learning Disability services.

32. The picture is very similar in Table 9 above when consideration is given to Durham's performance to comparator Local Authorities-4.69. Although Durham has the 4th highest number of complaints received, however when the population numbers are considered this then shows Durham's performance as low.
33. Work has been on-going throughout the year with Local Authorities on the reasons why their numbers may have fluctuated and the following was provided:
 - Increase in complaints about day care costs (about a perceived lack of consultation etc)
 - Increase in complaints relating to billing for care due to a system change
 - A persistent complainant raised 10 issues within one quarter
 - Felt that their rise in numbers could be partially attributed to 5 parents making the same complaint about a Learning Disability service.
 - Increase in complaints due to changes in the supported living service
 - Improved publication of the complaints procedure
 - Increase in complaints relating to a wide range of financial issues
 - Slight fall in numbers which may be attributed to an increase in front line staff resolving at the point of contact
33. There has been no clear trends or learning outcomes found that correlate with issues within Durham, although the Quality Standards Team continue to consider ways to advocate and promote the complaints arrangements to service users/carers.

PART FIVE – REMEDIES AND LEARNING OUTCOMES FROM STATUTORY ADULT SOCIAL CARE COMPLAINTS

Remedies

1. Providing remedies to issues that have arisen in a complaint are essential if trust and confidence are to be restored between the Service and its service users. Even where complaints are not upheld full explanations, further information and often apologies are provided.
2. Remedies can be varied and examples of some provided in this reporting year include:-
 - Re-assessment of need following the reduction in care packages (in some cases this resulted in the reinstatement of services)
 - Explanations provided or reiterated where communication had been poor
 - Occupational Therapy re-assessments were conducted where disputes arose following the original assessments for adaptations
 - Residential care contributions, which should have been charged at the permanent rate, were revised to the lower rate for temporary placements due to invoicing and communication errors
 - Transport service to attend day care was reinstated for a service user whose circumstances provided exceptional reasons why public or private transport could not be accessed
 - Durham Home Care service reinstated their input for a service user with complex care needs in order to stabilise the care package before it transferred to another provider
 - Waiving of respite care fees where it was upheld that there had been a failure to provide appropriate equipment for a service user
3. It should be noted that compensatory redress will only be considered where there is very strong evidence of shortcomings that may be in accordance with the LGO's definition of maladministration. It is recognised however, that where AW&H is responsible for failings that have caused losses and significant emotional distress it is clearly the Service's duty to acknowledge that and avoid further distress to the complainant.
4. Meetings with Managers within the Service have proved extremely effective in satisfactorily concluding complaints. Complainants appreciate the time that Managers give to addressing their concerns in an open and informal way.

Learning Outcomes

5. Complaints provide valuable information from which the Service learns how to improve. Complaints also act as a prompt to ensure all staff work consistently to policies and procedures.
6. The learning outcomes acted upon in the reporting year have included:-
 - All social work and health staff in the Learning Disability Integrated Teams have been instructed to verify documentation for accuracy when completing new or updated assessments and that all assessment information is properly coordinated and verified.
 - Social work staff have been formally reminded that accurate assessment of social care need is a professional responsibility.
 - In an in-house residential respite service for people with Learning Disability, staff have been advised that all personal care needs are now recorded in detail to identify personal hygiene needs whilst in respite. Also the Client Activity List has been revised to enable more detailed information to be recorded about a service user's daily activities and participation in events whilst in respite care.
 - Where there are likely to be changes to service provision following a care plan review, a letter for service users explaining the review processes along with how the eligibility criteria is applied has been developed and issued.
 - A clearer process is now in place with regard to obtaining funding decisions on care packages in the Learning Disabilities Service. This includes new guidance and training for staff. Feedback is now routinely disseminated between staff and information recorded on the relevant service user case file. Staff at all levels have been reminded of the importance of effective communication with families/carers/service users especially when services are changed or modified.

PART SIX – COMPLIMENTS AND COMMENTS RECEIVED IN ADULT SOCIAL CARE

Numbers of Compliments Received

1. In the reporting year a total of 576 compliments have been received within the Service Areas. This represents an increase of 43% from the 403 received during 2009/2010 and continues the upward trend being 113% higher than the 271 in 2008-09 and 75% higher than the 330 compliments in 2008/2009.

Ratio of Compliments to Complaints

2. The ratio of compliments to complaints received is 4.65:1. This is a decrease from the 6:1 ratio received in 2009/2010. The decreased ratio reflects the impact of the higher number of complaints received in 2010/2011.

Compliments by Service Area

3. As outlined in Table 10 below, County Durham Care and Support received 80.5% of the total number of compliments.

| Service | Compliments Received | Total Percentage |
|---|----------------------|------------------|
| Learning Disabilities/Mental Health/Carers | 9 | 1.6% |
| Older People/Mental Health Services for Older People/Physical Disabilities/Sensory Impairment and Sensory Support | 100 | 17.6% |
| County Durham Care and Support | 464 | 80.5% |
| Finance | 1 | 0.1% |
| Social Inclusion | 1 | 0.1% |
| Policy Planning & Performance | 1 | 0.1% |
| Total | 576 | 100% |

4. The large number of compliments received in the Service, is illustrative of the good practice that exists and the value placed upon the service and staff by service users and carers. It is important that staff know that they are appreciated and acknowledged.

Themes of the Compliments Received

5. Themes arising from compliments are illustrated below:
 - Appreciation of the quality of care provided to individuals by staff in residential and domiciliary care services
 - The support, care and kindness given by staff to carers and service users before and following family bereavement
 - The help given with obtaining aids and adaptations
 - The ease by which services could be accessed
 - The confidence arising from the understanding and support being given by staff
 - Staff explaining issues in a way the service user understood
 - The regaining and maintaining of independence due to the rehabilitation obtained in intermediate care settings

- Help with maintaining dignity
- Empowering service users to achieve and maintain independent living
- Assisting service users settling into new environments and reassuring other family members
- Responding quickly to requests for assistance.

Numbers of Comments Received

6. Two comments were received in the reporting year by Adult Social Care. These related to why staff in a CDCS residential care home did not wear name badges. It was explained that this had been previously considered but the risk of injury to service users receiving personal care if the pin became disconnected made this inappropriate.

PART SEVEN - CONCLUSIONS

1. The new way of working in complaint resolution is now embedded and working effectively. Whilst the number of complaints has increased, this is viewed as positive that service users and their carers and relatives feel able to make their views known and seeking remedies where things have gone wrong. Of the 116 cases completed within the year, the Service has continued to provide a timely response to the matters raised. Even where complaints have not been upheld the reasons and explanations provided as to why not is often sufficient for the complainant to feel they have been heard. Monitoring of the complaints figures will continue to be closely reviewed in the Services' Quarterly reports to ensure all staff are providing the appropriate opportunities to service users and carers to submit complaints.
2. Work continues on a number of developments within the Service on the management of complaints. The review of the Regional Joint Protocol for Health and Social Care Organisations on Complaints Handling is close to conclusion. The Joint Protocol defines the management of complaints that span both health and social care and meets the requirements relating to the duty to co-operate under the Regulations. This has been developed with 6 North East Local Authorities and 13 NHS organisations across the Region.
3. Contracting arrangements for commissioning Independent Investigating Officers is being reviewed. The outcome of this work will lead to new arrangements for the provision of Independent Investigating Officers (IIOs) for social care complaints and increased choice for suitably skilled and qualified IIO's on a regional basis, standardise costs to ensure better value for money and improved quality control. The scoping work for this is progressing well and it is hoped that this Framework will be implemented within the year.
4. AW&H has adopted the Regional Quality Band Assessment in respect of Care Homes and Care Homes with Nursing for Older people for contract monitoring of the independent sector. Providers will be measured against a number of evidence based measures within 16 domains, one of which relates to Complaints. This work is in the early stages of development and more details on performance will be provided in next year's Annual Report.

5. The Service receives a large number of compliments each year. This remains a significant reminder of the excellent work that is conducted at a difficult time in people's lives.

6. Complaints and compliments are a valuable source of feedback to inform service improvement. This Annual Report indicates positive achievements in performance in the handling and consideration of complaints and compliments but also recognises the need to strive for continuous improvement. The implementation of learning outcomes arising from complaints provides the opportunity to change practice and improve service delivery with transparency and accountability.

GLOSSARY OF ABBREVIATIONS

| | |
|-----------------|--------------------------------------|
| AW&H | Adults, Wellbeing & Health |
| CDCS | County Durham Care and Support |
| CRP | Complaints Resolution Plan |
| DCC | Durham County Council |
| IPF | Institute of Public Finance |
| LD | Learning Disabilities |
| LGO | Local Government Ombudsman |
| MH | Mental Health |
| NHS | National Health Service |
| N/S | Not Stated |
| ONS | Office of National Statistics |
| OP | Older People |
| PD | Physical Disability |
| SCD | Social Care Direct |
| SSID | Social Services Information Database |

Standards Committee

16 September 2011

Draft Annual Report of the Standards Committee



Report of Colette Longbottom, Head of Legal and Democratic Services

Purpose of the Report

1. To reflect and report on the work of the Standards Committee during 2010/11 and to set out the future direction which the Committee intends to take during 2011/12.

Background Information to the Annual Report

2. Although there is no legislative requirement for Standards Committees to produce an Annual Report, doing so is recognised as good practice. Not only does the report publicise the work of the Committee to the wider general public, it is also a means for the Authority itself to monitor the Committee's work.
3. There are several purposes of the report, beginning with a reflection of the role and make-up of the Standards Committee.
4. Primarily this report provides a review of the work undertaken by the Standards Committee during the previous municipal year. Furthermore, the report will communicate the future direction of the Standards Committee.

Membership of the Standards Committee

5. 2010/11 saw several changes made to the membership and composition of the Standards Committee.
6. Members were saddened by the news that Town Council representative Councillor J Day of Tow Law Town Council, passed away. Councillor Day had previously been a Town Council representative on Wear Valley District Council's Standards Committee before successfully being appointed to the Standards Committee of the new Unitary Authority.
7. The decision was taken not to fill this vacant position as the requirement under the Standards Committee (England) Regulations 2008 ('the Regulations') is for at least two members of the Standards Committee to be members of parish/town councils and the Committee is fulfilling this requirement.

8. Also during the year 2 independent Members took the decision to resign from the Standards Committee due to excessive time constraints. It is a requirement under the Regulations that at least 25% of the members of a Standards Committee are independent members and as such the Committee were required to appoint to both vacant positions.
9. Members were mindful of the uncertainty surrounding the future of Standards Committees as the proposals within the Decentralisation and Localism Bill are to abolish the requirement to maintain a standards committee.
10. Standards for England guidance allows for independent members of another standards committee (for example police and fire authority standards committees) to be temporarily appointed to another standards committee to consider a particular assessment, review or hearing or for a particular period of time. As such the decision was taken to temporarily appoint two independent members from one of the Authority's affiliated committee's - County Durham and Darlington Fire Authority Standards Committee and Durham Police Authority Standards Committee.
11. Following a request for expressions of interest to the independent members of these affiliated Standards Committee's, the Committee were pleased to temporarily appoint Mr J G Armstrong and Mr J Hitchman as independent members of the Durham County Council Standards Committee until such time as the Decentralisation and Localism Bill comes into force.
12. As such the Standards Committee is comprised of 6 Independent Members, 5 Parish/Town Council Members and 12 County Council Members, as follows:

Joe Armstrong

Joe has represented the Esh Electoral Division on Durham County Council for almost 10 years.

Allan Bainbridge

Allan was elected to the County Council in 2008 and represents the Chester-le-Street South Electoral Division.

Eddie Bell

Eddie was elected to the County Council in 2008 and represents the Deneside Electoral Division. Eddie was also a Councillor on the former Easington District Council.

Colin Carr

Colin was elected to the County Council in 2006 and is a former Chartered Wastes Manager. Colin was also Councillor on the former Chester-le-Street District Council.

Pauline Charlton

Pauline is a former teacher and was elected to Durham County Council in 2008. She served as a Councillor on the former Teesdale District Council and was Clerk to Cockfield Parish Council for a number of years.

David Farry

David was elected to the County Council in 2008 and was a Councillor on the former Sedgfield Borough Council.

Grenville Holland

Grenville was elected to the County Council in 2008 and was a Councillor on the former Durham City Council. He represents the Nevilles Cross Electoral Division on the County

John Shiell

John was elected to the County Council in 2008 and represents the Chester-le-Street North and East Division. He was previously a member of Chester-le-Street District Council, having been elected in 2007.

Dennis Southwell

Dennis was elected to the County Council in 2005 and was a Cabinet member on the former Durham City Council. Dennis also serves on Belmont Parish Council and Durham Police Authority.

Watts Stelling

Watts has represented the Leadgate and Medomsley Electoral Division on the Council since 2001 and was also a Councillor on the former Derwentside District Council. He has been a member of the Standards Committee since 2001.

Mac Williams

Mac was elected to the County Council in 2006 and represents the Durham South Electoral Division and is currently the Chairman of Durham County Council.

Sam Zair

Sam was elected to the County Council in 2008 and is a successful local businessman. He is also a member of Bishop Auckland Town Council.

Independent Members

James Greenwell Armstrong

James worked in the Civil Service for 48 years and has been an independent member on the County Durham and Darlington Fire and Rescue Standards Committee for 2 years.

David Balls

David has been a magistrate for 21 years. He is also actively involved as an Education Appeals Panel member for the Local Authority.

Denny Balmer

Denny is a former senior civil servant and a serving Justice of the Peace. She also serves as a non-executive director of a Citizens Advice Bureau.

John Hitchman

John was principal of a Chartered Architect's practice in Durham City and is a member of the County Durham and Darlington Fire and Rescue Standards Committee as an independent lay member.

Tina Naples
Tina is a retired civil servant.

Dorothy Winter
Dorothy is a Human Resources Business Partner with the Land Registry and chairs the Council's Standards Committee. Dorothy became a magistrate in 1984.

She is an employment tribunal member (employer representative) and a chartered fellow of the Chartered Institute of Personnel and Development (Fellow of Institute of Leadership and Management).

Parish and Town Council Representatives

Terry Batson
Terry is a consultant Arborist, ex Local Government Officer and former Managing Director.

Frances Duggan
Frances plays an active role in a number of groups relating to health. He has been a member on the judging panel for Newcastle Strategic Health Authority for a number of years.

Marina Goyns
Marina was involved in retail management and is now retired.

Doreen Liversidge
Doreen is a retired Police officer and she is a member on her local parish council.

John Marr
John was a former technician/fitter and has been a Town Councillor on Spennymoor Town Council since 1989.

Role of the Standards Committee

13. The Members of the Standards Committee have a common interest in that we believe in principled local politics and value our role as champions of high standards of conduct amongst our local politicians.
14. In accordance with Article 9 of the Constitution of Durham County Council the roles and functions of the Standards Committee are as follows:
 - (a) promoting and maintaining high standards of conduct by councillors, independent members and co-opted members;
 - (b) assisting the councillors, independent members, co-opted members and parish and town council members to observe the Members' Code of Conduct and where appropriate the Planning Code of Practice;

- (c) advising the Council on the adoption or revision of the Members' Code of Conduct and the Planning Code;
- (d) monitoring the operation of the Members' Code of Conduct and Planning Code;
- (e) advising, training or arranging to train councillors, independent members, co-opted members and parish and town council members on matters relating to the Members' Code of Conduct and Planning Code;
- (f) granting dispensations to councillors, independent members, co-opted members and parish and town council members from requirements relating to interests set out in the Members' Code of Conduct and Planning Code;
- (g) the exercise of any functions under regulations made under section 54(4) of the Local Government Act 2000;
- (h) the assessment, investigation and determination of allegations of misconduct on the part of Members;
- (i) dealing with any alleged breach by a Member of a council protocol, in accordance with procedures approved by the Committee;
- (j) overview of probity aspects of internal and external audit;
- (k) overview of the Officers' Code of Conduct;
- (l) overview of the Protocol on Member/Officer Relations;
- (m) overview of the Council's Confidential Reporting Code;
- (n) overview of complaints handling and Ombudsman investigations;
- (o) power to make payments or provide other benefits in cases of maladministration etc.;
- (p) power to grant exemptions on the political restriction of officer posts;
- (q) the exercise of (a) – (h) in relation to parish and town council members.

The Work of the Committee During 2010/11 - Complaints to the Standards Committee

15. The responsibility for the consideration of complaints that a councillor may have breached the Code of Conduct lies with the Standards Committees of Local Authorities and as such this Standards Committee is responsible for handling all complaints made against members of Durham County Council and the members of the 104 Parish and Town Councils throughout County Durham.

16. There are number of Sub Committees of the Standards Committee responsible for the handling of complaints, as follows:

Assessment Sub Committee – considers complaints for initial assessment against the Assessment Criteria (appendix 1) in order to determine whether there is a potential breach of the Code of Conduct;

Review Sub Committee – considers requests by complainants to review the initial decision of the Assessment Sub Committee where a decision of No Further Action has been delivered.

Standards Committee Hearing Panel – following a decision of an Assessment / Review Sub Committee to refer the complaint to the Monitoring Officer for further investigation, the Hearing Panel will convene when the Investigating Officer, upon completion of an investigation, concludes that there has been a breach of the Code of Conduct.

17. During 2010/11 there have been 15 Assessment/Review Sub Committee Meetings which have dealt with a total of 61 complaints. 19 of these complaints were made against County Councillors. These figures indicate an increase in the work of the Standards Committee with only 13 Assessment / Review Sub Committee Meetings being held during 2009/10, which in total dealt with 48 complaints, 16 of which were against County Councillors.
18. Of these complaints, 31 were considered by a Review Sub Committee following request by the complainants, compared to just 17 in the previous year.
19. There has been at least 1 Assessment/Review/Hearing Sub Committee meeting per month between 1 June 2009 and 31 March 2010.
20. The Standards Committee Hearing Panel has convened 6 times during the period compared to just once in 2009/10. It upheld the findings of the Investigating Officer and as such imposed sanctions on the Councillors against whom the complaints had been made. The Councillors found to have breached the Code of Conduct were Parish Councillors.

Work of the Standards Committee during 2010/11 – plenary meetings

21. During the period the Committee have met in plenary session on 4 occasions. In addition one special meeting of the Committee was held in June 2010. It is commonplace for the members of the Committee to receive quarterly update reports on the current status of all live complaints and complaints which have recently been closed as dealt with since the previous session.
22. In conjunction with bullet (f) of Article 9 of the Constitution of Durham County Council, the Standards Committee has considered 2 requests for granting dispensations to councillors parish and town council members from requirements relating to interests set out in the Members' Code of Conduct and Planning Code. All requests for dispensation were successfully granted by the Committee.

23. In conjunction with bullet (n) of Article 9 of the Constitution of Durham County Council, the Standards Committee receives a Complaints, Compliments, Comments and Suggestions report at each plenary session, allowing the Committee to oversee the Council's complaints handling arrangements and performance throughout the Authority. These reports provide basic statistics, results against corporate performance targets, any relevant trends and details of levels of satisfaction. Individual Services provide detailed data regarding the nature of complaints received, any necessary action taken including preventative measures against reoccurrence and how the intelligence gained from complaints is used in future service planning and delivery.
24. Between 1 April 2010 and the 31 March 2011, 1787 non statutory complaints, 1412 compliments and 568 suggestions were received by Durham County Council. This compares with 1088 non statutory complaints, 385 compliments and 220 suggestions received in 2009/10.
25. The majority of complaints (60%) related to Neighbourhood Services. This service grouping is front facing and the scope of its service provision includes customer services, waste collection, street cleansing, highways and leisure provision. These services are provided to all residents of County Durham and as such this exposure explains why Neighbourhood Services receives the greatest percentage of complaints.
26. Of the 1787 non statutory complaints received during the financial year, further investigation shows that there were 1044 occasions where the complaint was not actually upheld. This indicates that although service users were dissatisfied with the service they received the services had in fact acted properly and followed appropriate procedures.

The Work of the Committee During 2010/11 – Development Strategy

27. During the year 2010/11 the Standards Committee adopted and implemented a Standards Committee Development Strategy, which set out exactly how it intended to continue building and maintaining the ethical framework of the authority. Accompanying the many commitments which were made within the Development Strategy was an Action Plan which detailed key performance indicators and targets that would support and aid to monitor the effectiveness of the strategy. For information a copy of the Development Strategy and accompanying action plan is attached at appendix 2.
28. However as it became apparent that the future of Standards Committees was somewhat uncertain due to the proposals contained within the Decentralisation and Localism Bill, the Committee resolved in November 2010 not to actively continue with the additional work as denoted in the Development Strategy until such time as the future proposals for Standards became clearer.

The Work of the Committee During 2010/11 – Parish and Town Councils Sub Committee

29. At the meeting of the Standards Committee held on 16 September 2010, Members resolved to appoint a Parish and Town Council Sub Committee. Doing so allowed the Standards Committee to fulfil their constitutional

obligations in line with paragraph 9.04 of Article 9 of the Constitution of Durham County Council which reads as follows:

“The Standards Committee will appoint a sub committee comprising 3 councillors, 3 parish/town council members and 3 independent members. The remit of the sub committee will be to support parish and town councillors and their clerks in maintaining high standards of conduct, whether through training or otherwise, and for this purpose to maintain close links with the County Durham Association of Local Councils.”

30. The Sub Committee subsequently adopted a Terms of Reference, attached as appendix 3 to this report. As per the Terms of Reference, the Sub Committee adopted action point 5 from the Standards Committee development strategy which is to develop communication links with local politicians, This is to improve awareness and understanding of the value of the Code of Conduct and the role and functions of the Standards Committee amongst the County's Parish and Town Councils with a view to reducing the number of complaints submitted to the Standards Committee.
31. In December 2010 the sub committee sent letters to all 104 Parish and Town Councils offering training and support in maintaining high standards of conduct. During the remainder of 2010/11 the Sub Committee attended 7 Parish/Town Councils to discuss issues such as the Code of Conduct, dual hatted Members and the future for standards following the Localism Bill. All visits undertaken have been extremely successful and well received with a number of local Councils requesting a return visit. At the end of 2010/2011 many more visits were already scheduled in to be undertaken and all subsequent visits will be reported in the 2011/12 Annual Report.

Local Government Ombudsman

32. The Local Government Ombudsman is a Government established independent service which investigates complaints about a wealth of council matters.
33. A breakdown of Local Government Ombudsman business for the previous quarter is reported to each plenary session of the Standards Committee.
34. On an annual basis the Ombudsman undertakes a health check (now in its ninth year) on each relevant authority and produces an Annual Review letter which provides complaint based information aimed at assisting Councils to assess and review their performance. For information a copy of the recent Local Government Ombudsman Annual Review Letter is attached at appendix 4.

Training and Development

35. The Standards Committee embarked on 2010/11 with extensive plans for training, development and indeed publicity. The financial year got off to a great start when the Standards Committee hosted the first Parish and Town Councils Conference, held in July 2010 at County Hall.

36. Much planning and preparation went into the Conference which mirrored in approach the Annual Assembly of Standards Committees. Delegates were invited from all of the County's 104 Parish and Town Councils and more than 100 people attended, with a broad mix of local councillors, clerks and chairs along with some members of the Standards Committee.
37. Presentations delivered during the event covered topics such as Quality Status, the Local Councils Charter and the Local Assessment process. The topics generated good debate and discussion with delegates and many attendees took the opportunity to seek clarification and ask questions on relevant issues.
38. All delegates were provided with an evaluation form and of those which were completed, the feedback proved extremely positive, with delegates commenting that the Conference had been informative, concise, well delivered and relevant.
39. In addition the Head of Legal and Democratic Services delivered two Member Seminars on Standards and the Code of Conduct, to which all Members of Durham County Council were invited.
40. However with the publication of the Decentralisation and Localism Bill and the future proposals for the future of Standards Committee's contained therein, the decision has been taken to hold back on training and development initiatives until such time as the future of Standards becomes clearer. The Parish and Town Councils Sub Committee of the Standards Committee will continue to deliver training and support to Parish and Town Councils in the meantime but no additional initiatives will be commenced at this time.

Moving Forward

41. The Standards Committee is continually dedicated to its responsibility to champion and promote high standards of conduct amongst the County's local politicians. As such during the year 2010/11 so far the Standards Committee has adopted and implemented a Standards Committee Development Strategy, which sets out exactly how it will continue as a Committee to build and maintain the ethical framework of the authority. Accompanying the many commitments which are made within the Development Strategy is an Action Plan which details key performance indicators and targets that will support and aid to monitor the effectiveness of the strategy.
42. The Local Government Act 2000 established a Standards Board for England, the purpose of which was to ensure an independent process for investigating instances of unethical conduct by local authority Members, including allegations of breaches of the Code of Conduct.
43. However in December 2010 the government published the Decentralisation and Localism Bill which proposed that the Code of Conduct that was introduced under the Local Government Act will cease to have effect and the undertakings to comply with the Code of Conduct given by Members when they signed the declaration will also cease to have effect when the code ceases to have effect.

44. It is proposed that the Secretary of State's power to specify principles which cover a Code of Conduct removed and that the Secretary of State will have no power to issue a model Code of Conduct. The provisions compelling Local Authorities to adopt the Code of Conduct will be rescinded and the County Council will no longer have responsibility for the Code of Conduct in relation to Parish Councils. Furthermore the Standards regime will end and Standards for England will be abolished.
45. The impact of this on local authorities is so far unknown, and as of yet, despite the actual contents of the bill to date there has been a lack of clarity regarding the future of Standards Committees and the Code of Conduct following various debates in Parliament and amongst relevant groups.
46. From a County Council perspective, Constitution Working Group is working on a proposed position for the authority with regard adopting a future Code of Conduct. They have recently agreed to wait until a draft Code of Conduct is prepared by the Association of County Secretaries and Solicitors and further debates have been held in Parliament before looking at a future position further.
47. In the meantime the Standards Committee will continue to operate as usual, promoting the values of good governance and providing a robust, open and transparent system of handling Code of Conduct complaints.

Conclusion

48. This is now the seventh Annual Report which the Committee has presented to the Council for consideration and the third which I have had the personal privilege to present as Chair of the Standards Committee.
49. The Standards Committee has continued to promote the principles and values of good governance within the Council and indeed with the introduction of the Parish and Town Council Sub Committee, the scope of this work has now developed across the County. The Members of the Standards Committee are committed, dedicated and hopeful that Durham County Council will, if necessary, opt for its future continuation.
50. Members views on the work of the committee and of the manner in which it reports to Council are always welcome.

Recommendations

51. Council is asked to note the report.

Contact: Jocasta Lawton Tel: 0191 383 3679

Assessment Criteria

The following criteria will be taken into account in deciding what action, if any, to take:

1. Has the complainant submitted enough information to satisfy the Assessment Sub-Committee that the complaint should be referred for investigation or other action?

If not:

The information provided is insufficient to make a decision. So unless, or until, further information is received, the Assessment Sub-Committee will take no further action on the complaint.

2. Is the complaint about someone who is no longer a member of the Council, but is a member of another authority? If so, does the Assessment Sub-Committee wish to refer the complaint to the monitoring officer of that other authority?

If yes:

The complaint will be referred to the standards committee of that other authority to consider.

3. Has the complaint already been the subject of an investigation or other action relating to the Code of Conduct? Similarly, has the complaint been the subject of an investigation by other regulatory authorities?

If yes:

There may be nothing more to be gained by further action being taken.

4. Is the complaint about something which happened so long ago that there would be little benefit in taking action now?

If yes:

Further action may not be warranted.

5. Does the complaint appear too trivial to justify the cost or inconvenience of further action?

If yes:

Further action will not be warranted.

6. Does the complaint appear to be simply malicious, politically motivated or tit-for-tat?

If yes:

Further action will not normally be warranted.

7. Is the complaint anonymous?

If yes:

No action will normally be taken unless there are compelling reasons to suggest otherwise, e.g. if it includes documentary or photographic evidence indicating an exceptionally serious or significant matter.

8. Is it appropriate to refer the matter to the Standards Board?

- Does the Committee believe that the status of the member or members, or the number of members about whom the complaint is made, would make it difficult for it to deal with the complaint?
- Does the Committee believe that the status of the complainant or complainants would make it difficult for the committee to deal with the complaint?
- Does the Committee believe that there is a potential conflict of interest of so many members of the Standards Committee that it could not properly monitor the investigation?
- Does the Committee believe that there is a potential conflict of interest of the Monitoring Officer or other officers and that suitable alternative arrangements cannot be put in place to address the conflict?
- Is the case so serious or complex, or involving so many members, that it cannot be handled locally?
- Will the complaint require substantial amounts of evidence beyond that available from the Council's documents, its members or officers?
- Is there substantial "governance dysfunction" in the Council or its Standards Committee?
- Does the complaint relate to long-term or systemic member/officer bullying which could be more effectively dealt with by someone outside the Council?
- Does the complaint raise significant or unresolved legal issues on which a national ruling would be helpful?
- Might the public perceive the Council to have an interest in the outcome of a case?
- Are there exceptional circumstances which would prevent the Council or its Standards Committee investigating the complaint competently, fairly and in a reasonable period of time, or meaning that it would be unreasonable for local provision to be made for an investigation?

Durham County Council Standards Committee 2010/2011 Development Strategy

The Standards Committee have a common interest in that we believe in principled local politics and part of our role being to champion and promote high standards of conduct amongst our local politicians.

Research has proved that councils, which display good conduct, enjoy higher levels of public confidence than those, which do not.

It is widely recognised that a number of factors may affect public trust in local government, a key driver is often the amount to which the public are kept informed.

Building and maintaining an ethical framework is of paramount importance, and we believe that the ethical framework and Standards Committee have become an established and accepted part of the corporate life within County Durham.

Public expectations of Parish, Town and Unitary Authority Councillors remain high. It is for this purpose that a Development Strategy for the Standards Committee has been established.

Code of Conduct – Approach

The task is to encourage greater awareness and the acceptance of the 'values of the code of conduct' not just the regulator element, but also the ethics of the code as a whole. The code can provide the public with confidence that Councillors are acting on their behalf working to the guidelines of probity and good behaviour and within an ethical framework.

Development Strategy

This Development Strategy sets out how we will continue to build and maintain our ethical framework. The Standards Committee will:

- Work cohesively with the Chairman and Leader of the Council, CEO Officers, Councillors (County, Town and Parish), Monitoring Officer, 151 Officer and Council staff (see appendix A),
- Be open and transparent about the work of the Chair and Vice Chair and committee members and proposed agendas
- Create an opportunity for Councillors to comment on the code and how they would like to improve it
- Creating an awareness and understanding of the ethical framework
- Develop communication links with Councillors, officer's and the general public
- Consider the financial implications of the DCC Standards Committee (SC) and the work that is carried out on their behalf e.g. investigations.
- Demonstrate development through specific objectives, key performance indicators, personal and annual committee appraisal
- Extending the opportunity for training and awareness of the code

Development Plan

Leadership

To provide positive leadership through:

- The appointment of the Standards Committee Chair who will provide leadership and guidance
- The appointment of a Vice Chairman with a view to contribute to development is essential.
- The Standards Committee being consulted and agreeing the agenda for development.
- Regular meetings with Monitoring Officers to appraise progress and consider future development. *An essential part of the programme is to work with the Officers advice and guidance –generally the Standards Committee should know their Council members and procedure*

Understanding the Role of Standards Committee

The Standards Committee will develop its role by:

- Being aware of Council structures, how the Council operates and its protocols and procedures
- The Chairman and Vice-Chairman of the Standards Committee will meet with officers to plan meeting agendas and to gain further understanding of items being presented
- Building alliances with other committees
- Becoming aware of how to use and work with Standards for England (SfE), information and direction. *This is an on-going process; there is something new to learn about protocol and procedure all the time. Independent members have to grapple with a whole new set of procedures many very different from the commercial setting. Furthermore this is currently under review further to the Governments announcement of its intention to abolish the Standards Board regime*

Raising awareness of the 'Value of the Code'

The Standards Committee will raise awareness of the 'value of the Code' by:

- By recognising that raising awareness of the Code is an on-going task; we must focus on four key areas that have a vested interest in the success of the programme; SC, All Councillors, Officers/staff and General Public in Durham.
- We have established a series of Key Performance Indicators which are being used to evaluate our performance.

Councillor / Standards Committee Training and Development

The Standards Committee will:

- Ensure that the training and development needs of Councillors and Standards Committee members are identified and action is taken to meet these needs.
- Town and Parish Council training/briefing programmes will be set up by the Monitoring Officers and the SC Chair. Independent members to introduce aspects of the development programme at these sessions.
- SC to be invited to specific 'Chairman' training events and updates on the code.
- Ethics and Governance sessions will be organised for Councillors and SC to explain how relevant this area is and the role for SC in its execution
- New Independent members induction training will be provided followed by an open discussion with all Independent members and Monitoring Officers on the importance of independence and scrutiny

Demonstrating the Value of the Standards Committee

To demonstrate the value of the Standards Committee we will:

- Identify a number of Key Performance Indicators (KPI) and these will be linked to the national indicators. Performance against targets will be reported to the Standards Committee on a regular basis and to the Council annually.
- The Chairman and Independent members will visit Parish and Town Councils to raise awareness of the value of the code.
- The Standards Committee Members will raise awareness of the value of the Code with other Members of the Council.
- Training will be provided to Standards Committee and Council personnel and to raise awareness of the ethical framework.
- After every conference attended, full feedback will be given to the Standards Committee. *Again this is under review further to the Governments recent announcement of its intention to abolish the Standards Board regime.*

Development Programme 2010

To establish a transparent and open development programme is 'an opportunity not to be missed' in the opinion of the Chair.

It will be a learning curve into the world of working in collaboration with an organisation plus the added dimension of the 'political' approach, which is to be taken into account.

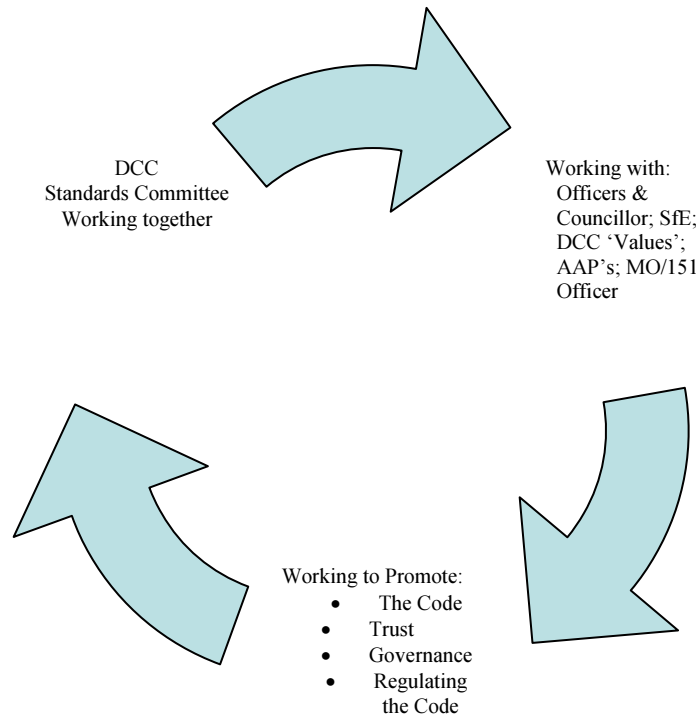
Challenges for the Development of the Code of Conduct

Looking to the future of the code there are many areas that could be strengthened given the climate surrounding behaviour of public figures. One of these areas is that of balancing sanctions for member's who have breached the code. The experience of a SC suggests that there could be further discussion on the possibility to create further differentiation on sanctions and a larger number of options at the Hearing Committee's disposal.

Gaining Councillors support for the code will be an on-going issue for all involved, great progress has been made however continuous focus to bring about a cohesive approach to the ethical framework should not be overlooked.

The DCC Standards Committee Development plan is a working document and may be able to identify additional development opportunities.

Development Programme Evolving Mission 2010



Awareness of the Code of Conduct

- The Standards Committee will implement the statutory code. Areas for improvement will be reflected back to the Chief Executive of Standards for England.
- The Standards Committee will recommend actions for improvements, to all who are subject to the Code of Conduct.
- The Standards Committee will communicate to the general public on how the Code is being implemented.

GLOSSARY OF TERMS:

- Section 151 Officer - A nominated Senior Officer being responsible for the proper administration of the Council's financial affairs;
- Monitoring Officer - A nominated Senior Officer being responsible for actions taken in accordance with Statute and Regulation

Appendix 2

| Improvement | Reason | Action | Completion Date | Outcome | Owner |
|--|---|--|---|---|--------------|
| LEADERSHIP | | | | | |
| <p>1. Assist the Leader, CE, Chairman of Overview and Scrutiny Committee, Chairman of Audit Committee, Chairman of the Council and Political Group Leaders to further promote the strong ethical agenda.</p> <p>Assist the leadership of the Council in setting the tone by creating a climate of openness, support and respect.</p> | <p>The Leader of the Council, Chairman of the Council and the Chief Executive are already recognised as good role models and proactively promote the ethical agenda, both inside and outside the Council. The Standards Committee advises the leadership as to how it can positively impact on staff, public confidence and trust in the organisation</p> | <p>Annual Meetings between the Chair of the Standards Committee and:</p> <ul style="list-style-type: none"> • Chief Executive • Leader of the Council • Chairman of Overview and Scrutiny • Chairman of Audit Committee • Leaders of Political Groups (to mutually exchange views and relevant information relating to Standards issues generally <p>6 monthly meeting between Chair of the Standards Committee and Chairman of the Council</p> | <p>August 2010 (completed) By Nov 2010 By Nov 2010 By Nov 2010</p> <p>July 2010 (completed)</p> | <p>August 2010. Had full discussion on our role, future plans, and the importance of ensuring high standards within the Durham county. Full commitment given to the work of the standards committee within our remit. Discussion re officer member protocol and raising awareness.</p> <p>June 2010. Full discussion on standards within the work undertaken together with the officer/member protocol.</p> | <p>DW/JL</p> |
| <p>2. Heighten importance of Corporate Governance for Councillors</p> | <p>It is recognised that the Standards Committee, Audit Committee and Overview and Scrutiny Committee all have delegated constitutional responsibilities for the Authority's Corporate Governance</p> | <p>Annual Meetings between the Chair of the Standards Committee and:</p> <ul style="list-style-type: none"> • Chairman of Overview and Scrutiny • Chairman of Audit Committee | <p>By Nov 2010 By Nov 2010</p> | <p></p> | <p>DW/JL</p> |

Appendix 2

| Improvement | Framework Reason | Action | Completion Date | Outcome | Owner |
|---|---|--|--|--|-------------------|
| COMMUNICATIONS | | | | | |
| <p>3. Increase awareness and accessibility of details regarding the local standards framework, the role of standards committee, meetings, accountability mechanisms, hearings and other relevant information</p> | <p>The Standards Committee is outward facing and therefore seeks to ensure that both its partners and the public have awareness of the local standards framework. Furthermore it recognises that a number of factors may affect public trust in local government, a key driver of mistrust being the degree to which the public are kept informed</p> | <p>Provision of a dedicated Standards Committee webpage</p> | <p>To be reviewed periodically</p> | <p>Feedback given on ensuring the webpage is reflecting current issues. Completed August 2010</p> | <p>MT</p> |
| <p>4. Raise public awareness of the values of the Code of Conduct and the role of the Standards Committee and proactively disseminate information to staff, local people and communities highlighting the importance of the</p> | <p>In order to improve public confidence that the Councillors acting on their behalf are working to the guidelines of probity, good behaviour and within an ethical framework particularly to highlight the importance of maintaining high standards of</p> | <p>Articles in Durham County News (minimum of 2 per year – contents to be agreed by the Standards Committee)</p> | <p>April 2010 2nd article – Quarter 1 2011</p> | <p>Feed received from a variety of sources on the importance of the raised awareness of the importance standards. Interest expressed by 2 individuals of becoming independent members of the standards committee. Responses given.</p> | <p>DW/C L</p> |

Appendix 2

| | | | | | | | | | |
|----------------|---------|--|--|--|--|--|--|--|--|
| ethical agenda | conduct | | | | | | | | |
|----------------|---------|--|--|--|--|--|--|--|--|

Appendix 2

| Improvement | Reason | Action | Completion Date | Outcome | Owner |
|--|---|--|---------------------------|---------|-------------------------------------|
| 5. Develop communication links with local politicians | To improve awareness and understanding of the value of the Code of Conduct and the role and functions of the Standards Committee amongst the County's Parish and Town Council's with a view to reducing the number of complaints submitted to the Standards Committee | <ul style="list-style-type: none"> • Article in Town / Parish Councillors newsletter • Chair and Independent Members of the Standards Committee to visit Parish and Town Councils, initially targeting those that have more than 2 complaints per year, those where a new Clerk is being appointed and newly formed Parish and Town Councils | Sept 2010 Nov 2010 | | DW/C L DW/C LSS/J L |
| 6. Communicate progress made in the development of the ethical environment to stakeholders, local people and communities | To openly communicate to the wider public the work of the Chair, Vice Chair and Standards Committee as a whole | Production of an Annual Report of the Standards Committee | To be completed annually | | DW/JL |

Appendix 2

| Improvement | Reason | Action | Completion Date | Outcome | Owner |
|---|---|---|---------------------|--|-------------------|
| TRAINING | | | | | |
| <p>7. To ensure that the training and development needs of Standards Committee members are identified and actions taken to meet these needs.</p> <p>In addition the Standards Committee will ensure that the opportunity for training and awareness is extended to all members of the Council</p> | <p>The Standards Committee recognises the value and importance of raising standards of ethical conduct through training, guidance and information. Furthermore it recognises the merit in providing such opportunities to all members of the council.</p> | <p>Ethics and Governance sessions will be organised for Councillors and the Standards Committee</p> | <p>Periodically</p> | | <p>CL/D W</p> |
| <p>8. Training to Standards Committee staff on administration of the Standards framework</p> <p>Page 101</p> | <p>To better understand the process, ensure efficient and effective administration of the Standards complaints process and to disseminate as appropriate</p> | <p>Half day one-to-one session between the Democratic Services Manager and relevant staff</p> | <p>July 2010</p> | <p>Democratic Services Manager met with Senior Committee Services Officer and reviewed all processes and procedures currently in place for the handling of complaints.</p> | <p>SS/JL</p> |

Appendix 2

| Improvement | Reason | Action | Completion Date | Outcome | Owner |
|---|---|---|-----------------|---------|------------|
| <p>9. Raise awareness of latest issues and developments affecting Members of the Standards Committee</p> | <p>To ensure that the Standards Committee and its Members are fully informed of issues relevant to Standards</p> | <p>Provide feedback following Members/Officer attendance at relevant conferences/events</p> | <p>Ongoing</p> | | <p>ALL</p> |
| <p>10. Ensure that all Members of the Standards Committee are aware of and fully understand the Authority's adopted Member/Officer protocol</p> | <p>To ensure that the Standards Committee meet their obligations in overseeing the protocol for Member/Officer relations.</p> | <p>To circulate the Member/Officer protocol to all members of the Standards Committee</p> | <p>Feb 2011</p> | | <p>JL</p> |

Appendix 2

| Improvement | Reason | Action | Completion Date | Outcome | Owner |
|---|---|--|---|---------|---------------------|
| REVIEW | | | | | |
| 11. Ensure that the development strategy is moving forward and is progressing in accordance with the agreed action plan | To ensure that the agreed action plan/development strategy and targets contained therein are being appropriately supervised | Chair and Vice-Chair of the Standards Committee to hold quarterly meeting with Monitoring Officer and Democratic Services Manager. | Ongoing, however effectiveness of this action to be reviewed in Sept 2011 | | SS/CL /JL |
| 12. Ensure that complaints to the Standards Committee are being dealt with within statutory timeframe | To ensure full compliance with the requirements of the Local Assessment Framework | Quarterly updates to be reported to every plenary session of the Standards Committee | Ongoing | | CL/SS /JL/Ext Audit |
| 13. Ensure that members of the Standards Committee are fulfilling their obligations | To encourage and monitor the commitment from all members of the Committee further to Section 85(1) of the Local Government Act 1972 | Chair and Vice Chair of the Standards Committee to receive annual updates on attendance of Standards Committee members | To be completed annually | | JL |

Key Performance Indicators 1, 3, 4 and 6 are aligned to Key Lines of Enquiry 2.3 – Does the organisation promote and demonstrate the principles and values of good governance?

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Town and Parish Councils Sub-Committee

Terms of Reference

1. Authority

This sub-committee is established by and takes its authority from the Durham County Council Standards Committee. It is accountable to and reports to the Standards Committee as required.

2. Membership

Members are appointed by the Standards Committee and comprise of 3 County Council members, 3 Town or Parish Council members and 3 independent members. The sub-committee will appoint a chair and vice-chair from among the independent members.

3. Meetings

The sub-committee will meet at least quarterly and more frequently, if required.

4. General Purpose

The Standards Committee will appoint a sub-committee comprising 3 councillors, 3 parish/town council members and 3 independent members. The remit of the sub-committee will be to support parish and town councillors and their clerks in maintaining high standards of conduct, whether through training or otherwise, and for this purpose to maintain close links with the County Durham Association of Local Councils.

5. Aims and Objectives

- a. To support the Standards Committee in the promotion of the standards contained within the Code of Conduct through the provision of advice, guidance and, where appropriate, training.
- b. To undertake such tasks as delegated by the Standards Committee.
- c. To encourage and support effective chairmanship in local councils through enabling advice, guidance and training.
- d. To enable support mechanisms for local clerks, and where appropriate and necessary, a means of advice in cases of difficulty.

6.Reporting

The sub-committee will report on its activities to the Standards Committee.

7.Approval

These Terms of Reference are approved by the Standards Committee.

Local Government OMBUDSMAN

Commission for Local
Administration in England



Annual Report 1011

Delivering Public Value

www.lgo.org.uk



Commission for Local Administration in England

Annual Report 1011

Presented to Parliament pursuant to Section 23A(3A) of the Local Government Act 1974 as amended by Section 170(1)(5) of the Local Government and Public Involvement in Health Act 2007; and Section 34S(5) of the Local Government Act 1974 as amended by the Health Act 2009 Section 35, Schedule 5, Part 1, paragraphs 1 and 2; and Section 219(5) of the Apprenticeships, Skills, Children and Learning Act 2009.

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What we do

Our mission is to

Provide an independent means of redress to individuals for injustice caused by unfair treatment or service failure by local authorities, schools and care providers and use our learning to promote good public administration and service improvement.

The role of the Local Government Ombudsmen (LGO) and the Commission for Local Administration in England is set out in the Local Government Act 1974 (amended by the Health Act 2009) and the Apprenticeships, Skills, Children and Learning Act 2009.

The LGO's jurisdiction now extends to a wide range of public bodies providing local services, including local authorities (excluding town and parish councils); adult social care providers; national parks; police authorities; education appeal panels and some maintained schools¹.

The three Ombudsmen have the power to investigate:

- > complaints by members of the public who consider that they have been caused injustice by maladministration or service failure in connection with action taken by, or on behalf of, bodies within the LGO's jurisdiction in the exercise of their administrative functions
- > complaints by members of the public who consider they have sustained injustice during the course of privately arranged or funded adult social care, and
- > complaints from pupils (or their parents) of injustice in consequence of an act/omission of a head teacher or governing body of a maintained school.

The Commission for Local Administration in England is the statutory body which provides the resources to support the activities of the LGO; it also has powers to publish advice and guidance on good practice. It is funded by a grant from the Government. The members of the Commission are the three Local Government Ombudsmen and the Parliamentary Ombudsman.

¹ In relation to 14 local authorities only – see *Who we cover* for full list.

Who we are



Membership of the Commission

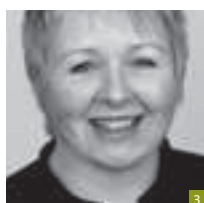
Sir Anthony Redmond Chairman (until 11 November 2010)

Dr Jane Martin Vice-chairman (and Acting Chairman from 12 November 2010)

Anne Seex Member

Ann Abraham Member

Sir Anthony (until his retirement), **Dr Jane Martin** and **Anne Seex** are **Commissioners for Local Administration** (Local Government Ombudsmen). **Ann Abraham** is the **Parliamentary Commissioner for Administration** (Parliamentary Ombudsman) and as such is a member *ex officio* of the Commission.



Senior staff

The senior staff of the Commission in 2010/11 were:

Nigel Ellis Deputy Ombudsman, London (from 7 June 2010)

Neville Jones Deputy Ombudsman, Coventry

Nigel Karney Deputy Chief Executive and Secretary

Michael King Deputy Ombudsman, York

Peter MacMahon Deputy Ombudsman, London (until 30 April 2010)



1 Sir Anthony Redmond

4 Nigel Ellis

2 Dr Jane Martin

5 Neville Jones

3 Anne Seex

6 Nigel Karney

7 Michael King



I am pleased to present this Annual Report for the year 2010/11 in my role as Acting Chairman of the Commission.

In November 2010 the Chairman and Chief Executive, Sir Anthony Redmond, retired after nine years in office. As Vice-chairman of the Commission I took over his responsibilities, pending the appointment of his successor. The role of Accounting Officer, which had been part of his role, has been assigned for the same period to the Deputy Chief Executive and Secretary of the Commission, Nigel Karney. Local authority areas under Sir Anthony's jurisdiction have been reallocated to myself and my colleague Ombudsman, Anne Seex, until his successor is in post.

Sir Anthony made a significant contribution during his time with the Commission and I would like to take this opportunity to pay tribute to him with our thanks and best wishes for what I know will be a full and rewarding retirement. During this interregnum period I have facilitated a team approach to managing the Commission's business, which has included convening fortnightly meetings of a corporate management team attended by Ombudsmen and deputies. I am extremely grateful to all concerned for their support for these

arrangements. We look forward to welcoming the new Chairman during the Autumn.

Eugene Sullivan resigned as Chairman of the Commission's Audit Committee in September 2010 due to work commitments. He is also Acting Chief Executive of the Audit Commission. He will remain on the Committee as an independent member. I am extremely grateful to him for his continued support and would also like to thank Lucinda Bolton who has stepped up from independent member to Acting Chairman of the Committee pending the appointment of Eugene's successor.

A year of change

Interregnum arrangements aside, 2010/11 has, of course, been a year of considerable change when we, like many other public bodies, have had to adapt to a new Government and respond to a full legislative programme going through Parliament. Working through our sponsor department, Communities and Local Government (CLG), we have been closely involved in advising on and informing the development of policy leading to draft legislation. This has included meeting with relevant ministers. We had discussions with Lord Young in preparation for his report for the

“ I wanted to thank you for your efficient investigation into our complaint. It was extremely stressful at some times during our long wait to get anything started and we are absolutely sure that without your involvement we would still be waiting.”

Ms B

LONDON

Prime Minister on health and safety regulation and in January put in place arrangements to fast-track complaints against local councils relating to urgent health and safety matters. We also met with the Secretary of State for Local Government, Eric Pickles, and the Local Government Minister, Grant Shapps, to discuss proposals in the Localism Bill, including the creation of a single Housing Ombudsman. We will continue to work with officials in CLG and with the Housing Ombudsman, Dr Mike Biles, and his colleagues to maintain a high quality cost-effective service to the public when new arrangements are introduced following legislation.

Constructive dialogue

We have also continued to have a constructive dialogue throughout the year with other government departments, regulators and national bodies. Following discussions with the new Government about the future of the new schools complaints service, we were disappointed that the Secretary of State for Education asked us to reduce the capacity of the pilot scheme during 2010 and decided to put proposals to Parliament in the Education Bill not to proceed with a national scheme. This meant that we have had to scale down this area of work during

2010/11 which necessitated some redundancies. In the meantime, pending the outcome of legislation, we will continue to offer the service to parents and pupils of schools in the pilot areas and work with the Department for Education to leave a positive legacy and ensure a smooth transition when the service ends.

The Department of Health provides funding for an extension to our service to take complaints from adults who arrange or fund their own social care which complements our established role in handling local authority complaints about adult social care. This means that since October 2010 we have had jurisdiction over all registered care providers, amounting to some 13,000 organisations. We appreciate the particular public concern about the need for robust accountability across this sector and have agreed a protocol with the Care Quality Commission to ensure that information is shared appropriately. We also undertake to signal any safeguarding issues to the local authority immediately.

We have combined our reporting on these new areas and our local authority complaints handling role into this one Annual Report to provide a comprehensive picture of our work.

Liaison with stakeholders

We do not underestimate the importance of being alert to the changing local government landscape and the value of listening to and learning from complaints from citizens. The LGO provides an increasingly significant mechanism for local public accountability and we have continued to develop our liaison with the Local Government Association, Citizens Advice, local councils and advocacy bodies to ensure that, as well as providing redress for individual citizens, lessons from complaints improve local public service delivery and benefit the wider community.

We recognise the unique challenges that members of the armed forces and veterans face in getting fair access to local services. We are committed to playing our part in rebuilding the armed forces covenant and in making sure that we are responsive to the needs of service families. We will take account of the distinctive nature of military service when we make judgements about individual cases, and also work with local authorities and care service providers to ensure that it is properly considered in service delivery and complaint resolution.

Land

Ms J asked the council to sell her a narrow strip of land alongside her home as she was building an extension and wanted to use it as a path. The council agreed to sell it for £2,950.

After a visit to the house, the council decided that her extension was being built onto a small, triangular part of the strip it had agreed to sell to her, rather than just using it for a path, so it had greater value to Ms J. It said it now wanted £7,000 for the land – effectively valuing the small triangle, 7 inches at its widest point, at £4,000.

The Ombudsman said Ms J justifiably felt a strong sense of outrage that the council had exploited her situation to obtain an ‘extortionate’ price. She added that it was inconceivable that the council could have obtained any value for the land from anyone else.

The Ombudsman found that the council:

- > did not consider the widely-acknowledged margin of error on drawn plans
- > did not consider Ms J’s means or the fact that the land had no value to anyone else, and so had not properly addressed what price could ‘reasonably be obtained’, and
- > fettered its discretion by rigidly applying its encroachment policy.

The Ombudsman recommended that the council should:

- > transfer the land to Ms J without cost, and
- > apologise and pay her £1,500 for her distress, plus costs arising from the delay in completing her extension.

Failure to properly address what price could ‘reasonably be obtained’ for a strip of land

Case reference 09 014 290

“ May I conclude with a generous and appreciative thank you personally for all you have patiently and diligently done in my interest.”

Ms W

HERTFORDSHIRE

Increased demand

Complaint numbers have increased over the year and we expect this upward trend to continue. Our Advice Team, the initial point of contact, dealt with a 21 per cent increase in complaints and enquiries, resulting in 7.5 per cent more complaints being forwarded to investigative teams. Despite this increased activity, the Commission underspent by £1.2m on the 2010/11 budget.

We anticipate that the pressures on public services in the current financial climate will lead to additional demand for our service. We will need to balance our response to this with the need to meet savings targets proposed by our sponsor department over the coming years. To prepare for this we have initiated an internal business review to consider where savings might be made whilst protecting the level and quality of service expected by the public, consistent with our statutory functions.

Commitment and support

I cannot close without mentioning the pending retirement of Ann Abraham as Parliamentary and Health Service Ombudsman towards the end of 2011. Throughout her period in office Ann has also been an

ex officio member of the Commission and an independent member of both the Audit Committee and Remuneration Committee. She has provided an invaluable wider perspective on our work. On behalf of all of us at the Commission I would like to wish her a long and happy retirement with our thanks for her unstinting support and encouragement.

Last, but certainly not least, may I thank all those who work at the Commission for their unfailing commitment during an uncertain and challenging time.



Dr Jane Martin
Acting Chairman

Planning

Mr and Mrs B complained about the way a council granted planning permission to their neighbours to replace an existing bungalow with a larger, two-storey property in an area of outstanding natural beauty.

The council considered the application twice because in the first instance it was only the action taken by the complainants and their legal team who identified errors in the process that prevented the council from issuing a decision notice thereby granting planning permission with maladministration.

The Ombudsman found that the council's failure to ensure appropriate plans were submitted in accordance with earlier planning conditions, together with other administrative errors, caused Mr and Mrs B to lose confidence in the council's decision-making process and believe that the building may not have been built had the council properly considered the matter in the first place. Mr and Mrs B suffered avoidable cost and inconvenience.

A largely new planning committee undertook a site visit and considered the application afresh. This committee granted permission with all the relevant information, including the benefit of expert comments and Mr and Mrs B's objections. The Ombudsman concluded that the final decision to grant permission was made properly.

In accordance with the Ombudsman's recommendations, the council:

- > apologised to Mr and Mrs B, paid them £5,000 as a contribution to the costs they reasonably incurred and £500 for their time and trouble in pursuing their complaint, and
- > reviewed its procedures to prevent such a situation occurring again.

Multiple errors in considering a planning application for a replacement building



PROFILE

Jane Martin

Local Government Ombudsman

Dr Jane Martin was appointed to the post of Local Government Ombudsman and Vice-chairman of the Commission for Local Administration in January 2010. She has extensive knowledge and experience of public service delivery. At the University of Birmingham and Warwick Business School she conducted research on public management and governance in the fields of education, health and local government. She has worked in local authorities across England as a consultant for the Improvement and Development Agency for Local Government (IDeA) and was the first Executive Director of the Centre for Public Scrutiny. Prior to joining LGO she was Deputy Chief Executive at the Local Better Regulation Office and a Non-executive Director of Coventry Primary Care Trust.

Ombudsmen's report Delivering public value

The year 2010/11 has been particularly eventful in both changes to the operation of our service and factors in the external environment that impact on our role and the citizens who can complain to us. During the year our powers to investigate complaints extended into two new areas giving more people access to a free and independent complaints service. The focus on localism and the financial pressures on council services will undoubtedly have an effect on the local government landscape. Our role in examining the experience of individual citizens and drawing on that knowledge and insight to identify issues of wider public benefit will take on greater significance.

Our role

Our new adult social care power came into force in October 2010. We can now investigate complaints about the actions of 13,000 or more care service organisations registered with the Care Quality Commission as providers of adult social care, as well as the 250 councils with adult social care responsibility already within our jurisdiction. It brings all complaints about adult social care services under our jurisdiction, 'plugging the gap' that had existed for the increasing number of people who arrange or fund their own care and had no route for redress. Many

of them are particularly vulnerable. The greater use of direct payments and personalised budgets mean that it is particularly important for us to be able to deal with such complaints.

We established specialist teams in each office to deal with the complexity of adult social care complaints across the full range of local authorities, private and voluntary sector care providers. In the six months from 1 October 2010 to 31 March 2011 we received 75 complaints under the new jurisdiction, concerning issues such as needs assessments, poor care quality, and fees and charges by care homes.

Legislation empowering us to consider complaints from pupils or their parents about schools also came into effect during 2010/11. The Apprenticeships, Skills, Children and Learning Act 2009 extended our jurisdiction in two pilot phases, and currently applies to schools in 14 council areas. Specialist teams in each office now deal with all complaints about children's services and education. The teams carried out a programme of awareness-raising activities in the 14 areas, covering local advice agencies and parent partnership organisations, and ran a series of workshops for schools and governing bodies on good practice in complaint handling. In the period 19 April 2010 to 31 March 2011

Adult social care

Mr C, a 43-year-old man with learning difficulties, died on a walk organised and supervised by the council. Mr C's family believed his death may have been precipitated by the strenuous nature of the walk, and considered that the way they were told of his death was insensitive.

A post mortem found Mr C had an undiagnosed heart condition and that he had suffered a heart attack some 24 hours before he died. The coroner decided Mr C had died of natural causes and declined to hold an inquest.

The Ombudsman said that in light of the coroner's conclusions there could be no suggestion that council fault caused Mr C's death. She considered that problems with the council's approach caused the family to suffer greater distress than they otherwise would.

The Ombudsman found that the council failed to identify some obvious risks that were on its own list of factors to be considered, such as the implications of any pre-existing medical conditions and the serious illness or incapacity of the group leader or group members on the walk. She also criticised the supervision arrangements for the walking group, including that the group leader was the only person who knew the route they were taking. She was concerned about the appropriateness of the route of the walk and found that communication with Mrs C was poor, including the way she was informed about Mr C's death.

The council improved its procedures to address the matters highlighted, and paid Mr C's family £2,000 in recognition of their additional distress.

Flawed risk assessments and supervision arrangements for a council-organised walking group

“ I would like to thank you for all your help. You made a difficult process less stressful by your friendly manner and by keeping us up to date with what was happening.”

Mr N

GREATER MANCHESTER



PROFILE

Anne Seex

Local Government Ombudsman

Anne Seex was appointed to the Commission as the Local Government Ombudsman based at York in October 2005. She previously had over 25 years' experience in local government, joining the Commission from Norwich City Council where she had served as Chief Executive for five years.

Anne's experience included 11 years in various roles in the Chief Executive's Department at Manchester City Council. She left Manchester to become Director of Community Services for Lancaster City Council where she was responsible for housing, leisure, environmental health, engineering and estates.

they had received 169 complaints about schools in the 14 areas mostly concerning bullying, teacher conduct and special educational needs. We also received 183 complaints about schools in other areas where we had no power to investigate. The Education Bill currently before Parliament proposes to rescind this power from July 2012.

Complaint numbers in both new areas of work have been lower than we anticipated. Our new powers coincided with the introduction of Treasury controls on expenditure, restricting our ability to inform care service users, pupils and parents about their new rights.

Changes in **complaints**

Looking across the whole range of our work, we can report achievement of targets over the year.

The LGO Advice Team, which deals with all initial contacts, has seen a rising trend in workload. Our advisers received 21 per cent more complaints and enquiries in 2010/11 compared to the previous year, and experienced their busiest month ever in March 2011. The percentage of calls answered within one minute has increased and, at 95.2 per cent, exceeds the target set for the year.

The trained team of advisers plays an important role in helping citizens to

understand our powers and to make their complaints. The law requires that we should not investigate a complaint if the organisation that is the subject of the complaint has not had a 'reasonable opportunity' to investigate and respond. We generally expect a complaints procedure to have been completed before we accept a complaint. In over a quarter of initial contacts, advisers decided that the organisation had not had a reasonable opportunity to deal with the complaint. In these cases the adviser refers the complaint to the organisation. More than 8,000 complaints and enquiries were referred as 'premature' complaints in 2010/11.

A total of 11,249 complaints were dealt with by investigative teams, an increase of 7.5 per cent from last year. Education and children's services now form the largest category of complaints, increasing by 15 per cent from last year. Complaints about special educational needs also rose. Adult social care complaints concerning councils have increased by nearly 50 per cent from 667 to 974. Work undertaken to publicise the new adult social care jurisdiction could have brought attention to our role in the sector overall. A reduction in complaints about planning may reflect a reduction in planning applications.

Public transport

A council's concessionary travel scheme allowed people over 70 years old and eligible disabled people to choose between a bus pass, a train pass or travel tokens. After the introduction of the National Bus Pass Scheme, it decided to stop issuing travel tokens.

Mr and Mrs W were directly affected by the change as they claimed travel tokens each year due to health and mobility problems. A local organisation representing the needs of older people also complained on behalf of local residents that the council's decision was made without proper consultation or a proper equality impact assessment.

The Ombudsman found that the council made its decision without adequate information about the impact on disabled people, and failed to consult voluntary groups. She said the council's statement that any alternative to the national bus pass was "purely discretionary" overlooked the need for it to properly consider its own duty towards disabled people when making changes to its arrangements. There was genuine uncertainty as to what the outcome might have been if the council had reached its decision properly.

The Ombudsman found maladministration causing injustice and the council:

- > ensured that, in future, it took account of its duties under the Disability Discrimination Act
- > apologised to the complainants, and
- > paid Mr and Mrs W £100.

A further recommendation, to revisit the decision about travel tokens, became inappropriate because responsibility passed to the county council.

Failure to consider duty to disabled people when deciding to stop issuing travel tokens

Case reference 08 020 845 & 09 000 561

“ [We] would like you to know that we deeply appreciate the courtesy and help which you have given us and we would like to offer our most sincere thanks to you and all those at the LGO service with whom we have had contact.”

Mr & Mrs L

GLOUCESTERSHIRE

We have key performance indicators for our investigative work covering the time taken to reach a decision. These cover the percentage of complaints determined within 13 weeks, 26 weeks and 52 weeks. All three indicators were met. Throughout the investigative process we apply our organisational values of being independent, fair and consistent.

When we complete an investigation on council complaints we generally issue a report that includes recommendations for a remedy for the complainant. In 2010/11 we issued reports on 28 council complaints finding maladministration causing injustice, and one finding no maladministration. More than a third of the reports concerned education matters, finding faults in areas such as school admission arrangements, the provision of school transport and special educational needs.



Seeking customer **feedback**

We value feedback from people who complain to us and from the organisations under our jurisdiction. Last year we reported on the research then in progress to gain further insight into the experiences and expectations of people who complain to us. This study has been completed. It showed that many respondents were positive about the complaints process and the Ombudsmen's staff they encountered. They appreciated that our service is available to them, especially at no financial cost, but those who receive a negative decision are unlikely to express satisfaction with other elements of the service.

We are responding to the issues raised in the research through our business plan for 2011/12, including ways of increasing transparency, such as improving the clarity of our written materials and publishing more accessible information about our decisions.

Shaping our **future service**

We expect the rising trend in complaints numbers to continue over the next year. This is linked to potential growth in demand for our service as a result of public spending reductions and an increase in complaints about privately funded or arranged adult social care. We also await the passage through Parliament of the Localism Bill and other legislation which will affect our work. Like other public sector bodies, we face budget reductions over the next three years.

We recognise the need to shape our service to reflect this changing environment. During the year we reassessed our mission and objectives so they are fit for the period ahead. We have agreed a new mission statement and four strategic objectives to guide our work from 2011 onwards. We are now working to deliver a business plan this year to achieve these objectives.

We are grateful for the commitment and achievements of our staff during this very challenging year. We will face more challenges and uncertainties in the year ahead but we are determined to ensure that our service is effective and continues to deliver public value.

Jane Martin
Anne Seex

In this section we present figures on our work during the year ended 31 March 2011, including how these compared to our business plan assumptions, and what progress we have made towards achieving our business goals in the year.

Analysis of complaints

Complaints and enquiries received

The LGO Advice Team is the single point of contact for all enquiries and new complaints. The Advice Team received a total of 21,840 complaints and enquiries in 2010/11, compared with 18,020 in 2009/10 – an increase of more than 21 per cent.

The figures include telephone enquiries that were not pursued any further at the time beyond giving the caller advice; complaints taken down over the telephone and forwarded to one of the investigative teams; and complaints received in writing – either via the complaint form on our website, or through the post. There was a 7.5 per cent increase in the number of complaints forwarded to the investigative teams.

The subjects of complaints and enquiries received during the year are shown in table 1 overleaf, along with the way they were handled.

Premature complaints and enquiries are where the citizen has not already complained to the organisation first. After they have done so, the citizen may resubmit their complaint to the Ombudsman if they remain unsatisfied after the organisation has considered it. These will be forwarded

to an investigative team as a 'resubmitted premature' complaint.

A total of 8,303 premature complaints and enquiries were received during 2010/11. The 11,249 complaints forwarded to the investigative teams, combining resubmitted premature complaints and new complaints, accounted for just over half of all complaints and enquiries received.

The number where advice was given indicates where people have telephoned the LGO Advice Team and have been told that it is unlikely the Ombudsman can deal with their complaint and that they should try another organisation, go to an advice agency, or that their complaint is outside the Ombudsman's jurisdiction. The figure also includes cases where the citizen has not given enough information for clear advice to be given, but they have, in any case, decided not to pursue the complaint.

“ I would like to thank you once again for your commitment to a fair and amicable outcome for the issue.”

Ms H

DORSET

Table 1: Subjects of complaints and enquiries received 2010/11 (with 2009/10 in *italics*)

| | Adult social care | Education and children's services | Housing | Planning and development | Benefits and tax | Highways and transport | Environmental services, public protection and regulation | Corporate and other services | Other** | Total |
|--|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|--|------------------------------|---------------------------------|---------------------------------------|
| Premature complaints and enquiries | 370 <i>216</i> | 600 <i>374</i> | 1,540 <i>1,187</i> | 887 <i>703</i> | 1,163 <i>862</i> | 566 <i>412</i> | 857 – | 257 – | – 799 | 6,240 4,553 |
| Advice given (excluding premature advice) | 401 <i>169</i> | 899 <i>460</i> | 805 <i>559</i> | 490 <i>353</i> | 493 <i>391</i> | 445 <i>358</i> | 383 – | 435 – | – 712 | 4,351 3,002 |
| Forwarded to investigative team (resubmitted premature)* | 101 <i>81</i> | 118 <i>116</i> | 513 <i>422</i> | 486 <i>467</i> | 255 <i>230</i> | 191 <i>172</i> | 290 – | 109 – | – 378 | 2,063 1,866 |
| Forwarded to investigative team (new) | 948 <i>586</i> | 2,538 <i>2,187</i> | 1,521 <i>1,526</i> | 1,361 <i>1,484</i> | 630 <i>640</i> | 897 <i>825</i> | 712 – | 579 – | – 1,351 | 9,186 8,599 |
| Total | 1,820 <i>1,052</i> | 4,155 <i>3,137</i> | 4,379 <i>3,694</i> | 3,224 <i>3,007</i> | 2,541 <i>2,123</i> | 2,099 <i>1,767</i> | 2,242 – | 1,380 – | – <i>3,240</i> | 21,840 <i>18,020</i> |

* 'Resubmitted premature' complaints will previously have been a 'premature complaint or enquiry' so these two figures would need to be added together to get the total number of premature complaints and enquiries made.

**In 2009/10, 'Other' covered subjects now shown in 'Environmental services, public protection and regulation' and in 'Corporate and other services'.



The number of complaints and enquiries in each subject category for 2010/11 is shown in chart 1 opposite.

This compares with the subject breakdown of complaints and enquiries received in 2009/10 shown in chart 2 opposite. Housing remains the largest category while education and children's services complaints and enquiries have gone up by

32 per cent overall from 2009/10, making it the second largest category in 2010/11. Adult social care complaints and enquiries have gone up by 73 per cent overall from 2009/10 to 2010/11.

“ After near enough two years of seeking help, only you managed to do something about our case. About a week ago, we moved into our OWN flat thanks to you and your help. Thanks to your involvement my daughter has an amazing room to herself. Just wanted to thank you for everything you have done for us and let you know how much we appreciate it.”

Ms S

LONDON

Chart 1: Complaints and enquiries received by category 2010/11

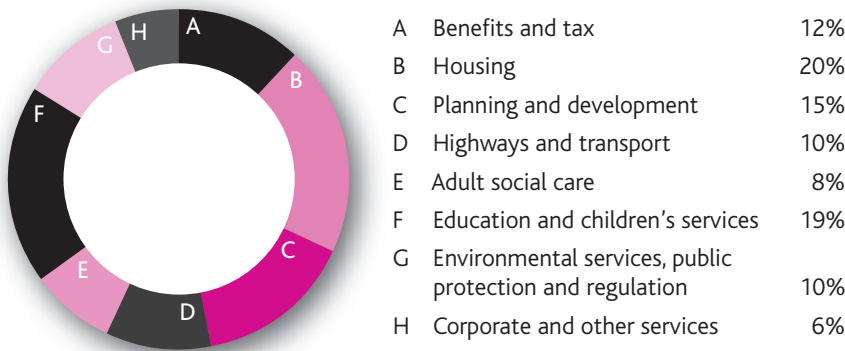


Chart 2: Complaints and enquiries received by category 2009/10

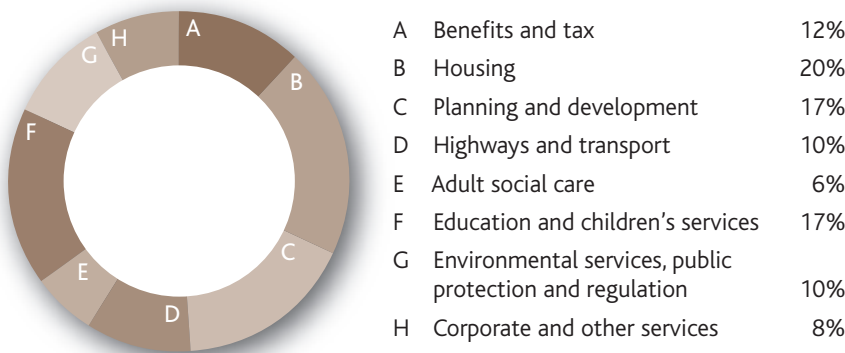


Chart 3 overleaf shows that the proportions of each subject change to a small degree for the complaints that get forwarded to the investigative teams.

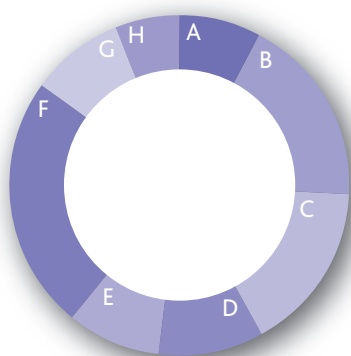
Complaints investigated

Just over half of the complaints and enquiries received by the Advice Team were forwarded to the investigative teams. Of the complaints forwarded, education and children's services now forms the largest category, with an increase of 15 per cent from the previous year. It is followed by housing and then planning and development.

Within the education category, school admission complaints forwarded to the investigative teams have reduced slightly, by around two per cent. There has been an increase of around a third in the number of complaints forwarded about special educational needs, however.

Looking specifically at the complaints from pupils or their parents about schools (included within the education and children's services category), by the end of 2010/11 we had received 169 complaints about schools in the pilot areas. Across the 14 pilot areas, the biggest complaint categories were bullying (34 per cent), teacher conduct (27 per cent) and special educational needs (21 per cent).

Chart 3: Complaints forwarded to investigative teams by category 2010/11



| | | |
|---|--|-----|
| A | Benefits and tax | 8% |
| B | Housing | 18% |
| C | Planning and development | 16% |
| D | Highways and transport | 10% |
| E | Adult care services | 9% |
| F | Education and children's services | 24% |
| G | Environmental services, public protection and regulation | 9% |
| H | Corporate and other services | 6% |

Adult social care complaints forwarded to the investigative teams increased by 57 per cent from 2009/10 to 2010/11. This is in part explained by the new area of jurisdiction coming in to force during the year, but is mostly due to a significant increase in complaints about care arranged or funded by councils.

On adult social care complaints covered by the new jurisdiction, a total of 141 complaints and enquiries were received, with 58 people receiving advice, and 75 complaints being forwarded to the investigative teams, since October 2010.

Complaints forwarded to the investigative teams about planning applications have fallen by around 10 per cent and follows the pattern of reduction in planning applications

made and the impact of permitted development. There has been a fall of around 5 per cent in the whole planning and development category.

A more detailed breakdown of the subjects of complaints and enquiries received is available on our website.

Outcome of complaints

We decided 10,792 complaints forwarded to the investigative teams during the year, compared to 10,309 in 2009/10, an increase of 4.7 per cent. A breakdown of the outcomes of these complaints is shown in the following three tables – we have split them in this way because of changes to our jurisdiction during the year, and the subsequent introduction of new decision reasons (see the *Glossary of terminology* for an explanation of these).

“ Please may I take this opportunity to thank you for the manner in which you have handled this complaint and for working in such a patient, respectful and professional manner. I have absolutely no doubt that as the investigating officer, you have been fair-minded and thorough.”

Ms B

NORTHAMPTONSHIRE

Table 2 summarises the decisions made on complaints forwarded to the investigative teams, excluding decisions on adult social care (ASC) complaints and complaints from pupils or their parents about schools. Table 3 summarises the decisions on schools complaints, and table 4 summarises decisions on all adult social care complaints. In addition, table 5 shows the decisions for adult social care complaints covered by the new jurisdiction (Part 3A).

The total number of complaints where redress was obtained or recommended for the complainant was 2,474 – 27.1 per cent of all complaints determined (excluding the complaints that were outside our jurisdiction). This is very similar to the previous year (when it was 27.7 per cent).

Decisions in the 14 school pilot areas can be summarised as follows:

- > In 47 per cent of cases we initiated an investigation.
- > In 48 per cent of cases the complaint was referred back to the school for it to consider using its own procedures as it had not had the opportunity to do so.
- > In 5 per cent of cases we were unable to consider the complaint as it was not within our jurisdiction.

Table 2: Analysis of outcome of complaints 2010/11 (excluding ASC and schools complaints)

| Outcome | Number of complaints | Percentage of total (excluding those outside jurisdiction) |
|---|----------------------|--|
| Local settlements | 2,215 | 26.34 |
| Maladministration causing injustice (issued report) | 25 | 0.30 |
| Maladministration, no injustice (issued report) | 0 | 0.00 |
| No maladministration (issued report) | 1 | 0.01 |
| No or insufficient evidence of maladministration (without report) | 4,012 | 47.71 |
| Ombudsman’s discretion | 2,156 | 25.64 |
| Outside jurisdiction | 1,574 | |
| Total | 9,983 | |

Note: See the *Glossary of terminology* for an explanation of terms used.

Table 3: Outcome of schools complaints 2010/11

| Outcome | Number of complaints | Percentage of total (excluding those outside jurisdiction) |
|----------------------------------|----------------------|--|
| Investigation complete | 0 | 0.0 |
| Discontinued: injustice remedied | 19 | 39.6 |
| Discontinued: other | 25 | 52.1 |
| Investigation not initiated | 4 | 8.3 |
| Outside jurisdiction | 11 | |
| Total | 59 | |

“ Thank you very much for providing me with an easy to read report and for making this complaint process as stress-free as possible.”

Ms J

WEST MIDLANDS

Table 4: Outcome of adult social care complaints 2010/11

| Outcome | Number of complaints | Percentage of total (excluding those outside jurisdiction) |
|---|----------------------|--|
| Discontinued: injustice remedied/ local settlements | 212 | 30.8 |
| Maladministration causing injustice (issued report) | 3 | 0.4 |
| Investigation complete: no service failure or injustice | 1 | 0.1 |
| No or insufficient evidence of maladministration (without report) | 205 | 29.8 |
| Discontinued: other/Ombudsman's discretion | 196 | 28.4 |
| Investigation not initiated | 72 | 10.5 |
| Outside jurisdiction | 61 | |
| Total | 750 | |

The outcome of the 47 per cent of schools cases where we initiated an investigation was:

- > A satisfactory resolution was reached between the parties in 25 per cent of cases following the Ombudsman's involvement (and the investigation was discontinued).
- > We secured a remedy and/or agreement for action to prevent similar problems recurring in 13 per cent of the cases.
- > In 9 per cent we found that there was no fault in the actions of the school or there was no substance to the complaint.

Table 5: Outcome of Part 3A adult social care complaints (October 2010 – 31 March 2011)

| Outcome | Number of complaints |
|----------------------------------|----------------------|
| Discontinued: injustice remedied | 0 |
| Discontinued: other | 1 |
| Investigation not initiated | 6 |
| Outside jurisdiction | 1 |
| Total | 8 |

Putting things right

We seek to achieve redress for injustice caused by maladministration or service failure.

When we reach a decision on a complaint, the complainant and the body in jurisdiction are sent a statement of reasons covering all the substantive issues and the decision. This approach was introduced during the year for our local government jurisdiction and the new areas of work. Every statement of reasons is anonymised and the Ombudsman can also publish all or part of the statement if it is considered to be appropriate. There will be a publications policy setting out when and how we will publish statements in due course.

We will often discontinue enquiries into a complaint when we consider that a satisfactory response has been reached during the course of the investigation. We have previously called these 'local settlements' but from April 2011 the term is no longer being used. For 2010/11 local settlements were agreed in 2,418 cases – 26.8 per cent of all decisions (excluding outside jurisdiction complaints and adult social care complaints received since October 2010). This is a similar proportion to the previous year (26.9 per cent of all decisions, excluding outside jurisdiction complaints).

Table 6: Type of remedy obtained (excluding adult social care complaints received since October 2010)

| Type of remedy | 2008/09 | 2009/10 | 2010/11 |
|---|--------------|--------------|--------------|
| Apology | 640 | 585 | 631 |
| Take action: | | | |
| New hearing/appeal | 170 | 223 | 198 |
| Offer of new accommodation | 24 | 15 | 18 |
| Revise publication/published information | 24 | 38 | 29 |
| Consider others in similar situation | 15 | 5 | 9 |
| Make inspection and take appropriate action | 99 | 57 | 59 |
| Other | 1,507 | 1,224 | 1,217 |
| Review policies and/or procedures | 272 | 220 | 288 |
| Make payment: | | | |
| 'Before and after' valuation | 17 | 18 | 6 |
| Other payment | 1,577 | 1,379 | 1,342 |
| Total number of remedies recorded* | 4,345 | 3,764 | 3,797 |
| Total number of complaints where a remedy was recorded | 2,857 | 2,435 | 2,414 |

* Some complaints have more than one remedy description recorded against them so the number of remedies recorded is greater than the number of complaints remedied.

When we complete a council investigation and find maladministration causing injustice, we issue a report that includes recommendations for a remedy for the complainant. In 2010/11 we issued reports on 29 complaints, compared with reports on 74 complaints in 2009/10. Education matters formed the largest

proportion of reports issued (38 per cent of all reports issued) finding fault in areas such as school admission arrangements, the provision of school transport and special educational needs. Housing formed the second largest (14 per cent) proportion on matters concerning homelessness, applications for disabled facilities

“ I would just like to take this opportunity to say a huge thank you to you for all your help and effort put in on my behalf, I do not believe I would have got anywhere near sorting this without your invaluable help.”

Mr M

WEST YORKSHIRE



grants and housing repairs. Planning and transport and highways formed the third biggest categories of reports issued (10 per cent)¹.

Table 6 (on page 23) sets out the number of remedies obtained in the year, showing the type of outcome reached. (It does not include any remedies on adult social care complaints received since October 2010².) Where the remedies resulted in a payment being made, the amounts obtained or recommended came to a total of over £1.2m compared with £1.3m in 2009/10. This figure represents the minimum we have achieved as there are currently cases where an authority has agreed to undertake a 'before and after' valuation,³ and to pay the difference in value to the complainant, but we do not yet know the amount. Many of the individual settlements are relatively small amounts but may be linked to other actions to provide fair redress.

1 A table giving a breakdown of the subjects of reports issued, and a full list of reports issued, is available on our website.

2 During the year, we introduced a new complaint management system. Adult social care complaints were recorded on the new system from October, while other complaints continued to be recorded on the old system. Some figures in this chapter could only be obtained from the old system, as reporting on the new system is not yet fully operational.

3 That is, the valuation of a property that has been adversely affected by neighbouring development before and after that development took place.

- 2 To provide customers with a service that meets their needs and reasonable expectations.
- 3 To promote awareness, understanding and use of our services.
- 4 To influence the improvement of local government through guidance and advice.
- 5 To increase our efficient use of resources.

The Business Plan for 2010/11 set out medium term objectives relating to these goals, and specified assumptions and targets for planned outputs to deliver these objectives in the year. The remainder of this chapter reports on our performance against meeting these objectives, which are grouped around three themes – 'dealing with complaints from the public', 'adding public value' and 'improving our organisation'.

Performance against business goals

Our Strategic Corporate Plan 2009-2012 set out five business goals reflecting the operational principles around which we base our development and assess our business performance. They were:

- 1 To make decisions that are sound and justified.

Dealing with complaints from the public

We make planning assumptions about the number of complaints and enquiries we will deal with during the year, and set targets on how quickly we will deal with them.

Our planning assumption for the LGO Advice Team was that we would deal with 50,000 telephone enquiries

School transport

Mrs B complained that a council acted unreasonably in not providing home-to-school transport for her six-year-old grandson who was on the school's special educational needs register. She argued that the council had not properly considered the medical and other evidence which showed he was unable to make the journey unaccompanied and the evidence that neither she nor her daughter were able to take him because of their health issues.

Initially the council failed to consider whether there was an exceptional need for school transport to be awarded. When the council did, it did not consider the evidence properly or keep proper records of the evidence it relied on in support of its decisions. It failed to explain the reasons for its decision and failed to properly consider its duties under the Disability Discrimination Act (DDA).

The Ombudsman said there appeared to be compelling evidence that the medical issues affecting Mrs B and her daughter were covered by the provisions of the DDA, and he would have expected to see explicit consideration of whether the provision of school transport was a reasonable adjustment to meet needs.

As a result of the council's fault and delay, the family was caused considerable distress and inconvenience.

"I do not believe the council has ever explained exactly how it expected [the boy] to get to school if transport was not provided," said the Ombudsman.

The Ombudsman welcomed the procedural improvements the council agreed to make as a result of the investigation. The council agreed to pay Mrs B £2,000 in recognition of the injustice caused and her significant unnecessary time and trouble.

Failure to consider disability issues properly when refusing to provide transport to school

Case reference 09 010 645

Table 7: Advice Team activity 2008/09 – 2010/11

| | 2008/09 | 2009/10 | 2010/11 |
|--|---------------------|---------|---------------|
| Total telephone calls received | 40,392 | 40,204 | 43,917 |
| Total telephone calls answered | 38,558 | 39,575 | 43,186 |
| Average time to answer call (seconds) | 33 | 23 | 18 |
| Number of text messages received | 88 [#] | 137 | 194 |
| All post, including written complaints | 15,000 [*] | 12,836 | 13,397 |
| Complaints made via website form | 774 ^{**} | 3,607 | 3,715 |
| Total emails received | 19,471 | 30,443 | 38,229 |

[#] This is the figure for the second six months of the year.
^{*} This figure is an estimate based on collected data over six months.
^{**} This is the figure from 12 January, when the website was launched.

in 2010/11. The number of calls received fell slightly short of this figure, but the number of calls answered has gone up by 9 per cent over the previous year. The average time taken to answer calls has improved by five seconds and is two seconds quicker than our target of 20. We also met the target of answering 95 per cent of calls within one minute, with the actual figure of 95.2 per cent (compared with 89.1 per cent in 2009/10). The improvement is due in part to further refining of the workflow process, introduced during the previous year, which ensures an even distribution of calls to Advisers; and the recruitment of a further three Advisers.

Table 7 above summarises the LGO Advice Team’s performance during the last three years.

The total contacts in the table show an increase from 82,991 in 2009/10 to 95,006 in 2010/11 – an increase of 14.5 per cent. Over the last three years, the number of contacts by phone, email and text has increased while post has reduced. The number of calls received and answered differ as some calls are always lost because the caller hangs up before the call is answered.

We continue to seek customer feedback on the Advice Team’s service. A postal survey was conducted throughout the year in

2010/11. The results show continued high levels of customer satisfaction. A total of 97 per cent of respondents either strongly agreed or agreed that staff dealt with them in a polite, sensitive and helpful way. Ninety-five per cent strongly agreed or agreed that they knew how to proceed with their complaint by the end of the call.

On complaints, our planning for the year 2010/11 was based on the investigative teams taking decisions on 10,500 local government complaints, 500 decisions on school complaints and 450 decisions on adult social care complaints. They made decisions on 10,725 local government complaints. Fifty-nine decisions were taken on school complaints. We dealt with 750 adult social care complaints in all, with eight of these being on complaints in the new area of jurisdiction. The lower number of complaints dealt with in the new areas of jurisdiction was affected by the constraints in our ability to publicise the new areas as a result of the spending controls introduced by the Treasury for its public expenditure reduction programme. On the new schools complaints service we reduced the capacity of the pilot scheme during 2010 following the Government’s decision to repeal the service as announced in the Education Bill.

“ I am very impressed with your report, it is precise, well balanced, to the point and arrived very much quicker than I expected.”

Mr P

DEVON

Table 8: Cases decided within time bands

| Key indicator | March 2009 | March 2010 | March 2011 ⁴ | |
|--|------------|------------|-------------------------|-------------|
| | Actual | Actual | Target | Actual |
| Percentage of all complaints (excluding prematures) determined within 13 weeks | 53.4 | 56.8 | 50.0 | 54.2 |
| Percentage of all complaints (excluding prematures) determined within 26 weeks | 82.3 | 85.2 | 80.0 | 83.4 |
| Percentage of all complaints (excluding prematures) determined within 52 weeks | 96.2 | 96.9 | 96.0 | 97.0 |
| Number of cases more than 52 weeks old | 122 | 122 | – | 133 |

Our performance is also affected by the response times from complainants and local authorities. We ask local authorities to respond to our enquiries within 28 days. Table 9 below shows the percentage of authorities that have responded within this timescale.

We monitor output levels of individual staff. The number of complaints decided per head of staff allocated to the investigative process (excluding premature complaint decisions) was 112.1 in 2010/11. This is against a target of 120 per year in local government and 100 in adult social care. This compares to 122.2 and 130.6 in 2008/09 and 2009/10 respectively, when there was a single target of 120 per year. As previously stated, the flow of complaints in the new areas of jurisdiction was not as high as we had anticipated.

Table 9: Average local authority response times 2010/11 (Figures for 2009/10 in brackets)

| Authorities (number) | < 28 days (%) | 29-35 days (%) | > 36 days (%) |
|-------------------------------|---------------|----------------|---------------|
| District councils (198) | 65 (60) | 23 (22) | 12 (18) |
| Unitary authorities (54) | 59 (65) | 28 (26) | 13 (9) |
| Metropolitan authorities (36) | 64 (53) | 19 (39) | 17 (8) |
| County councils (30) | 66 (58) | 17 (32) | 17 (10) |
| London boroughs (33) | 64 (52) | 30 (36) | 6 (12) |

The time we spend handling cases is an important factor in customer satisfaction. We monitor our overall performance against three time bands as shown in table 8 above.

All our targets for time taken were met and exceeded.

We also monitor the overall number of older cases. A small minority of complaints take us more than 12 months to decide, either because of their complexity or because of external factors (such as the illness of the complainant).

4 During the year, we introduced a new complaint management system. Adult social care complaints were recorded on the new system from October, while other complaints continued to be recorded on the old system. Some figures in this chapter could only be obtained from the old system, as reporting on the new system is not yet fully operational.



We measure the level of complaints about us, dealt with in accordance with our complaints procedure. We categorise complaints as either review requests, when a complainant challenges the decision made, or service complaints, where the complainant is unhappy with our service. Table 10 shows a breakdown of the outcome of these complaints over the past three years. Totals are higher than the actual number of complaints made, as one complaint can have more than one review outcome.

⁵ During the year, we introduced a new complaint management system. Adult social care complaints were recorded on the new system from October, while other complaints continued to be recorded on the old system. Some figures in this chapter could only be obtained from the old system, as reporting on the new system is not yet fully operational.

Table 10: Customer complaints in 2008/09 – 2010/11 (excluding adult social care complaints received since October 2010)⁵

| | 2008/09 | 2009/10 | 2010/11 |
|--|--------------|--------------|--------------|
| Review request: decision confirmed | 1,108 | 977 | 1,015 |
| Review request: decision correct, but wrongly justified | 14 | 3 | 5 |
| Review request: decision correct, but further explanation provided | 47 | 30 | 22 |
| Review request: investigation relaunched because of new information | 50 | 27 | 34 |
| Review request: investigation relaunched because of procedural error | 23 | 20 | 23 |
| Non-substantive response sent* | 22 | 23 | 32 |
| Service complaint: not upheld | 24 | 37 | 27 |
| Service complaint: upheld in part or in full | 34 | 18 | 19 |
| Total | 1,322 | 1,135 | 1,177 |

* These are cases where the complaint did not go through the review process, usually this is because the review was not requested quickly enough (within three months of the decision on the case).

Cases questioning our decisions on complaints are reviewed by a senior member of staff not previously involved in the case to see if the concerns are justified. In 2010/11, we relaunched the investigation because of procedural error on 23 review requests. Our target is that less than three per cent of the complaints made about our decisions are found to be justified following a rigorous internal review. The figure for 2010/11 is two per cent.

We analyse all those service complaints that are upheld to learn lessons for improvement in our performance. The substantial decrease in the number of service complaints upheld in part or in full between 2008/09 and 2009/10 has been sustained in 2010/11.

“ Once again, I remain very grateful for the time and significant effort applied to this investigation as the knock-on effect will serve to help others in my position, hopefully providing greater protection than our terrible experience.”

Ms T

WARWICKSHIRE

We recognise that there could be errors that do not get picked up because the complainant does not request a review of our decision, so we also check a sample of files from each investigator as part of our quality control process. We pass on any learning points from the file examination back to our staff – both individually and, where there are general lessons, to use them in staff workshops and written guidance.

We monitor compliments as well as service complaints about our conduct. Examples of the compliments we have received are included throughout the main text of this report.

The only challenge to the Ombudsmen’s decisions is through the courts by way of judicial review. Our aim is that any judicial reviews will not find legal fault in our decisions. There are two stages in the judicial review process. The applicant has to apply for permission for judicial review of a decision and only if permission is granted is there a second stage hearing in the Administrative Court. The figures for applications and judicial review hearings for the last three years are given in table 11.

Table 11: Judicial review applications 2008/09 – 2010/11

| | 2008/09 | 2009/10 | 2010/11 |
|---|---------|---------|---------|
| Applications for permission for JR | 9 | 13 | 7 |
| Applications for permission refused | 7 | 11 | 5 |
| Applications for permission withdrawn | 2 | 0 | 1 |
| Applications for permission awaiting the court’s decision | 0 | 0 | 1 |
| Applications granted permission by the court | 0 | 2 | 0 |
| Awaiting JR hearing in the Administrative Court | 0 | 1 | 0 |
| JR proceedings withdrawn | 0 | 1 | 0 |

Adding public value

An important part of the public value agenda is to promote the Local Government Ombudsman service and the impact of our work.

Ombudsmen and staff gave a wide range of presentations to local and national advice organisations during the year. These give their staff and volunteers a better understanding of the role of the Ombudsman and the complaints we can investigate, and encourage appropriate use of our service. Two seminars for advisers, organised with the Public Law Project, took place in November 2010 in Manchester and London.



“ Thank you for the work you have put into this investigation on our behalf. After dealing with the council and the police without any satisfactory results it was a relief to finally find someone who had a genuine concern about what had happened.”

Mr B

NORTHUMBERLAND

We sent annual reviews to every local authority summarising the complaints we had dealt with over the year, and visited a number of individual local authorities.

Anne Seex spoke at the Institute of Revenues, Ratings, and Valuations’ Collection and Enforcement Conference in May 2010 on the subject of revenues collection and the Ombudsman. Sir Anthony Redmond also spoke at their national conference in September.

We ran a spotlight session at the Chartered Institute of Housing’s annual conference in June, jointly with the Housing Ombudsman, on the theme of the two services working together following agreement on a protocol between our two offices.

We exhibited at the Local Government Association’s conference in July, and Sir Anthony Redmond also spoke at a fringe session. In September we exhibited at the Citizens Advice national annual conference.

To promote the new adult social care service, we exhibited at the International Carers Conference in July and at the National Children and Adult Services annual conference in November. We presented a workshop at the Action on Elder Abuse annual conference. We participated in a

workshop at the National Care Association annual seminar in October, and a number of regional speaking opportunities were organised through the National Care Association.

We ran six information sessions to inform providers of adult social care services about the changes to our jurisdiction. More than 200 people attended across the six sessions. Feedback was extremely positive and the providers who attended said the day was informative and engaging.

The new children and schools teams have carried out a range of visits to schools in the 14 school pilot areas and relevant youth/parent groups. These included awareness raising events and a series of training workshops for governing bodies, schools, parent partnerships and CABs, among others. We provided information for councils’ newsletters



for residents and websites in the pilot areas.

We continued to develop our website, launched in January 2009, including new sections on the two new areas of work – adult social care and schools.

Table 12: Website statistics 2009/10 – 2010/11

| Period | Visits | Page views | Home page views | Complaints made via web |
|----------------|----------------|----------------|-----------------|-------------------------|
| 2009/10 | 226,143 | 970,797 | 167,313 | 3,607 |
| 2010/11 | 240,680 | 921,416 | 152,154 | 3,715 |

Notes:

'Visits' represent the number of individual sessions initiated by all the visitors to the site (it is designed to come as close as possible to defining the number of actual, distinct people who visited the site).

'Page views' – a view of a page on the site.

Internal management of schools

A mother complained that a school failed to put in place adequate health care support for her son who has asthma. She said he was left to sit in wet clothes and, on another occasion, was let out to play several times during the day without his inhaler.

The Ombudsman has the power under the Apprenticeships, Skills, Learning and Children Act 2009 to consider complaints of injustice made by a pupil or parent.

Usually the Ombudsman would not have investigated the complaint as the school's governing body had not had the opportunity to respond. However, as the health and safety of a child was involved the complaint was accepted.

After the Ombudsman contacted the head teacher, she readily agreed to:

- > meet the mother to discuss her complaint and try and resolve the issues
- > arrange an appointment with the school nurse and agree how the school needed to manage the child's condition
- > advise the mother of the school's complaints policy and her right to complain to the school governors and then the Ombudsman if she is still not satisfied, and
- > investigate the two incidents and let the mother know the outcome.

The Ombudsman discontinued her involvement and the mother was satisfied with the school's response.

“ Thank you so very much for listening to me and taking my complaint seriously. I’m sorry to be over dramatic but I have to say there really is justice in the world. I felt very let down by the council but am of course now very pleased with this outcome.”

Ms P

HAMPSHIRE

The range of subject-specific fact sheets has been further expanded, including topics in the new areas of work. These are made available on the website, as well as being sent out by our Advice Team in response to specific enquiries.

Media coverage, focused on investigation reports and the annual reviews that we send to every council, helps to increase understanding of the Ombudsman’s service by demonstrating the impact of our work. We issued 22 press releases on reports over the year and secured 158 items of press coverage as a result. We also had 288 items of press coverage arising from publication of the annual reviews to councils. The Ombudsmen were interviewed for several BBC and independent regional radio stations and one regional TV news programme. We also provided articles for a range of specialist press.

Our programme of training in complaints handling and investigation for all levels of local authority staff continued, and we delivered 103 courses in 2010/11 against a target of 120 for the year. This compares to 118 and 128 in 2009/10 and 2008/09 respectively. The courses continue to get excellent feedback – 96 per cent of delegates were satisfied with the training. The overall number included four open courses for groups of staff from smaller authorities held at our offices at Millbank Tower and at

venues in Manchester, Peterborough and Taunton. We aim to run more regional courses in 2011/12 in different locations.

We work with partner organisations across various areas of our work. During the year, memoranda of understanding were agreed with OFSTED and the Care Quality Commission covering work in the new areas of jurisdiction.

We played an active part in the work of a number of groups and forums set up to review the mechanisms for dealing with complaints about councils and bodies covered by the LGO’s extended jurisdiction. These included:

- > The Department for Community and Local Government’s Housing Transition Working Group and Steering Group.
- > Liaison meetings with the Department for Education (DfE) in relation to internal school complaint matters and the proposals in the Education Bill 2010/11.
- > The Ministry of Justice’s and Equality and Human Rights Commission’s joint Regulators, Inspectorates and Ombudsmen Forum on human rights.

- > A DfE consultation group on revising the School Admission and School Admission Appeal Codes.

We responded to a number of consultation exercises, sometimes jointly with other ombudsmen schemes. These included:

- > The Committee on Standards in Public Life’s survey of regulators to ascertain the impact of the Ethical Framework.
- > The Law Commission’s consultation on reform of Adult Social Care legislation (jointly with the Health Service Ombudsman).
- > The Department for Transport’s consultation on reforming the blue badge scheme.
- > Informing the Care Quality Commission’s *Assessments of Quality*.
- > The Department of Health’s *Equity and Excellence: Liberating the NHS*.
- > The Department of Health’s consultation *Increasing Democratic Legitimacy in Health*.
- > A joint response with other Public Sector Ombudsmen operating in England and Wales to the Law Commission’s review of the law in relation to Public Service Ombudsmen.

Improving our organisation

We are continuously improving our service drawing on feedback from complainants and the wider public. Ipsos MORI conducted qualitative customer satisfaction research for us in 2010, following on from the quantitative survey they conducted in 2007. Their report, published in October 2010, is available on our website.

Despite the introduction of subject-specific fact sheets to better explain our service, it is clear from the research that we need to do more to manage complainant expectations. So we are looking at ways of making it clearer to people from the outset how likely it is that their case will be successful, and what powers the Ombudsmen have. We are also looking at ways to make our investigations more transparent, including improving the clarity of our written materials.

The Advice Team received specific subject training to equip them with the knowledge they needed to handle enquiries on the new areas of jurisdiction. Some processes and procedures were also changed to better suit the requirements of these new areas.

A review of the first 18 months of operation of the Advice Team was

carried out. Some points arising from the review were:

- > To change the management structure from having one supervisor to two. This was implemented before the end of the year.
- > To make sure quality monitoring (QM) takes place: so a new QM framework was designed and implemented.
- > To get more feedback from investigators about the work of the Advice Team: an investigator feedback form was piloted in the second half of the year.
- > A workflow plan was implemented.

During 2010/11 we particularly focused on establishing consultation arrangements with bodies in jurisdiction and users of the new services to inform how best to meet their needs. We recognised the importance of opening a dialogue with a new sector of social care providers who were brought into our jurisdiction in October 2010, and held six regional events across the country. We hope to continue this engagement as the new service develops. Further examples of consultation with stakeholders during the schools pilot are also

noted above under 'Adding public value' on page 29.

Each of our office business plans for 2010/11 included programmes of targeted activity to raise awareness in areas where there are particular problems of service access and disadvantage. These programmes included meetings with a youth homelessness project, MIND, and local advice agencies such as Citizens Advice Bureaux.

We aim to ensure all our offices have a common and proactive approach to the identification of maladministration arising from failures by the bodies we investigate relating to their equality duties and responsibilities under the Human Rights Act. In 2010/11, staff in the Coventry office have been trained on the new Equality Act, and there are plans to roll out this training to staff in the other offices.



“ [We] are grateful for the thoroughness of your investigation and for the eventual findings in the report. Will you please pass our collective and sincere thanks to [the investigator] for her diligence in looking into every facet of our complaint.”

Mr W

CHESHIRE

We have continued to implement our knowledge management strategy in order to improve knowledge sharing, collaboration and the spread of good practice. The new staff intranet, developed during 2009/10, was launched fully in November 2010. It is being used to improve access to information and expertise and make it easier for staff to share knowledge. Subject-specific forums are being established to increase collaboration between the three offices.

Our quality and customer service standards are embodied in the competency framework we use to assess the performance of our investigators and managers. The revised investigator framework and performance-related pay arrangements are with our sponsor department (DCLG) for approval prior to implementation.

Improvements have been made to our use of energy – see 'Sustainable development' section in Chapter 5.

Financial accounts

for the year ended 31 March 2011

For the period of these accounts the arrangements agreed between our sponsor department, Department for Communities and Local Government, and the Commission, with the consent of the Treasury, for the use of grant are described in a Grant Memorandum, which was brought into effect on 1 September 1999. This can be viewed on the Commission's website, on the page www.lgo.org.uk/about-us/governance.

For the year ended 31 March 2011, operational expenditure totalled £15.882 million after capitalisation for the year.

The National Audit Office will audit the financial statements and issue their certificate in July 2011.

The tables which follow show the summarised financial statements for the year ended 31 March 2011. The figures have been extracted from the unaudited accounts. The audited accounts, prepared in the form agreed with the Department for Communities and Local Government, and the statement of accounting policies and the notes to the accounts will be published separately. They will be available from the Secretary of the Commission at 10th Floor, Millbank Tower, Millbank, London SW1P 4QP, telephone 020 7217 4683 and on our website at www.lgo.org.uk in August 2011.

“ May I thank you for the prompt and courteous way in which the Ombudsman’s office have dealt with our complaint.”

Mr H

NORTH YORKSHIRE

Table 13: Statement of financial position at 31 March 2011

| Liabilities | Balances at 31.3.11 £'000 | Balances at 31.03.10 £'000 | Assets | Balances at 31.3.11 £'000 | Balances at 31.3.10 £'000 |
|------------------------|---------------------------------|----------------------------------|-------------------------|---------------------------------|---------------------------------|
| | | | Non-current assets | 1,275 | 1,633 |
| Creditors | 636 | 685 | Cash and bank deposits | 2,172 | 1,699 |
| Pension Fund liability | 14,966 | 32,753 | Pension Fund reserve | 14,966 | 32,753 |
| Working balance | 3,470 | 3,761 | Debtors and prepayments | 659 | 1,114 |
| | 19,072 | 37,199 | | 19,072 | 37,199 |

Table 14: Income statement for year ended 31 March 2011

| Expenditure | 2010/11 £'000 | 2009/10 £'000 | Income | 2010/11 £'000 | 2009/10 £'000 |
|------------------------|------------------|------------------|---|------------------|------------------|
| Staffing | 11,707 | 9,584 | Grant in Aid | 15,261 | 16,145 |
| Accommodation | 2,269 | 2,318 | Rents and service charges | 180 | 627 |
| Office expenses | 1,080 | 960 | Training income | 111 | 139 |
| Professional costs | 555 | 723 | Interest on deposits | 26 | 17 |
| Travel and subsistence | 271 | 208 | Other receipts | 12 | 17 |
| Total expenditure | 15,882 | 13,793 | Total income | 15,590 | 16,945 |
| | | | Surplus (deficit) charged to working balance | 292 | -3,152 |
| | 15,882 | 13,793 | | 15,882 | 13,793 |

Care in a private nursing home

Mr M stayed at a nursing home for respite care several times over the period of a year. When his health deteriorated he moved there permanently until his death several weeks later.

His family were told that Mr M had died in his sleep, but later learned that he had been found on the floor. They were told staff had initially tried to spare their feelings by not telling them he had been found on the floor. The family complained to the home but were not satisfied with the response.

His daughter complained to the Ombudsman about the care given to her father at the home and specifically that:

- > the family was not notified of a fall the day before his death
- > his body was moved after he had died and before a doctor was called
- > he suffered unexplained injuries around the time of his death, and
- > questions raised by the family had not been answered.

The Ombudsman investigated this complaint under powers introduced by Part 3A of the Local Government Act 1974 that came into force during October 2010.

The Ombudsman found that the home had:

- > made a prompt and thorough investigation of the family's complaint and had been open with them about its findings
- > been sensitive and courteous in all its written communications and answered the family's questions
- > fully accepted and apologised for the failure to notify the family of Mr M's fall and for his body having been moved before the doctor attended
- > instigated disciplinary action against two members of staff
- > begun to formulate a policy on staff and residents paying their respects in the event of a death, and
- > asked manufacturers to test why a pressure mat had failed to work and discovered that there had been a faulty component.

The Ombudsman said: "While I understand the daughter's ongoing distress, I do not believe that anything further could be achieved by pursuing this complaint. I am satisfied with the action that the home has taken and propose to discontinue my involvement in this case."

Case reference confidential

“ Thank you for your painstaking intervention, which has had such a satisfactory result ... It has been a pleasure to work with someone who reads what we actually write, not what he or she thinks at a quick glance what we might have written; and we wish you well in the future.”

Mrs K

LANCASHIRE

Staffing in 2010/11

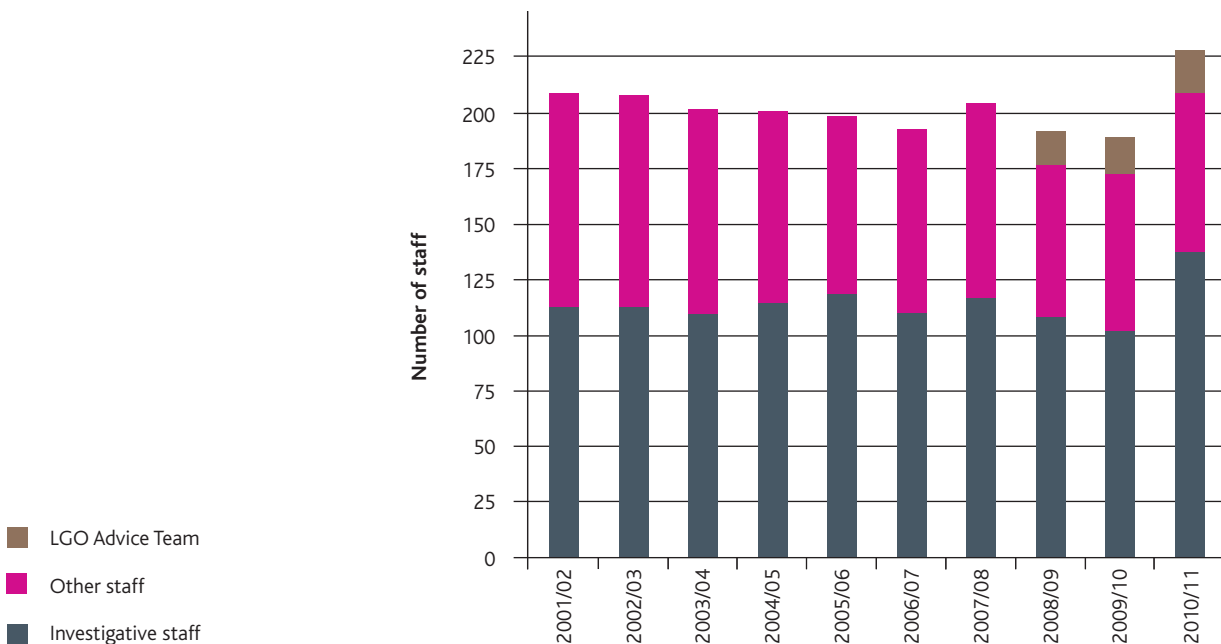
The total employee payroll bill for the year was £10.8 million. The number of Ombudsmen and their staff whose salary at 31 March exceeded £30,000 is shown in Table 15. The new teams created to deal with the two new areas of jurisdiction are reflected in the increased number of staff for 2010/11 in Graph 1.

(The salary of the Chairman and Chief Executive of the Commission was linked to that of a High Court Judge, and those of the other Local Government Ombudsmen were linked to the salaries of circuit judges; the salaries of staff are based on local and national government scales.)

Table 15: Salaries exceeding £30,000

| | 2010 | 2011 |
|---------------------|------------|------------|
| £30,001 – £40,000 | 46 | 73 |
| £40,001 – £50,000 | 36 | 44 |
| £50,001 – £60,000 | 12 | 14 |
| £60,001 – £70,000 | 2 | 1 |
| £70,001 – £80,000 | 0 | 1 |
| £80,001 – £90,000 | 3 | 2 |
| £90,001 – £100,000 | 1 | 1 |
| £100,001 – £110,000 | 0 | 0 |
| £110,001 – £120,000 | 0 | 1 |
| £120,001 – £130,000 | 1 | 2 |
| £130,001 – £140,000 | 0 | 0 |
| £140,001 – £150,000 | 0 | 0 |
| £150,001 – £160,000 | 0 | 0 |
| over £160,001 | 1 | 0 |
| Total | 102 | 139 |

Graph 1: Commission staff 2000/01 to 2010/11



Monitoring equality and diversity

Ensuring that the complaints service that we deliver is open and accessible is integral to the mission of the Local Government Ombudsman and reflected in our Corporate Plan 2009–12 as well as our Business Plan for 2010/11.

Equality monitoring forms an essential activity in evidencing progress in terms of this objective in relation to accessibility. Our forms currently collect data on age, ethnicity, disability and sex, but from 2011/12 we will additionally ask questions about religion, belief and sexual orientation, in line with new equalities legislation (Equality Act 2010) and best practice.

In 2010/11 we received 2,409 returned forms, which was an increase of over a third from the previous year. The figures in table 16 overleaf show the broad 'equality profile', on a sample basis, of citizens who have a complaint registered with the Ombudsman. In interpreting the results, as mentioned last year, it is important to keep in mind that the 2001 census data is now a decade out of date, so judging how representative the profile of our users is by using this data can be misleading. In addition, the users of many public services provided by local authorities, such as social

housing or adult social care have a different 'equality profile' from the general population. The results in the last year show that, as in previous years, our complainants are most likely to be white, male and aged between 25 and 59 years of age.

Ethnicity

Table 16 overleaf shows that the ethnic composition of citizens who registered a complaint with the LGO has remained largely static over the last three years. Citizens from a black ethnic group constitute a larger proportion of complainants than their number in the population according to 2001 census data. However, black households are more likely to live in social housing at 43 per cent (J Hills: 2007¹), and housing constitutes one of the largest categories of LGO complaints overall.

Sex

The male to female ratio of complainants remains the same as the previous year. Men still seem to be more likely to register a complaint than women.

1 J Hills, (2007) *Ends and Means: The Future Roles of Social Housing in England*, p3 <http://sticerd.lse.ac.uk/dps/case/cr/CASereport34.pdf>. (It should be noted that these figures relate to occupants of local authority social housing and registered provider social housing.)

“ I’d like to thank you for your co-operation and for dealing with my case in a very professional manner. I am extremely pleased with the way you have dealt with my complaint.”

Ms Z

WEST MIDLANDS

| Table 16: Equality monitoring data of complainants 2008/09 – 2010/11 | | | | |
|---|----------------------|----------------------|----------------------|--|
| Area monitored | 2008/09 % | 2009/10 % | 2010/11 % | 2001 census % of population |
| <i>Ethnic group</i> | | | | |
| White | 85 | 86 | 86 | 91 |
| Black | 6 | 6 | 7 | 2 |
| Asian | 5 | 5 | 5 | 5 |
| Mixed race | 2 | 1 | 1 | 1 |
| Other ethnic group | 2 | 2 | 1 | 1 |
| Total number | 4,562 | 1,757 | 2,409 | 49,138,831 |
| <i>Sex</i> | | | | |
| Male | 56 | 55 | 55 | 49 |
| Female | 44 | 45 | 45 | 51 |
| Total number | 4,837 | 1,841 | 2,396 | 49,138,831 |
| <i>Age</i> | | | | |
| 24 or under | 3 | 3 | 3 | 31 |
| 25-59 | 65 | 57 | 58 | 48 |
| 60-64 | – | – | 13 | – |
| 65 and over** | 32 | 40 | 27 | 21 |
| Total number | 4,448 | 1,734 | 2,415 | 49,138,831 |
| <i>Disability</i> | | | | |
| With disability | 25 | 26 | 31 | 34* |
| Total number | 4,384 | 1,698 | 2,370 | 20,451,427* |
| Note: This data excludes 'unspecified' responses. | | | | |
| * This percentage and number relates to the number of households that include a person with a disability. | | | | |
| **This category was 60 and over until 2010/11. | | | | |

Age

In 2010/11 we expanded our older age range categories which makes historical comparisons slightly more difficult. However, from table 16 it is possible to see that our age profile remains unchanged from last year. The shift towards more elderly complainants remains.

Disability

The major shift in the profile of complainants in 2010/11 is a 5 per cent increase to 31 per cent of people who regard themselves as being disabled.

Freedom of Information

Analysis of how we have dealt with freedom of information requests, under the provisions of the Freedom of Information Act 2000, are shown in table 17 below.

In 2010, there was an increase in requests over 2009 of nearly 7 per cent, but this was considerably smaller than the 16 per cent increase the previous year. There were increases in both the general requests and in requests from complainants about their individual complaint. A large number of general requests came from a small number of individuals.



Table 17: Analysis of requests in 2005 – 2010

| Year | Number of requests | Number of requests met in full | Number of full refusals | Number of partial refusals | Complaints upheld (full or partial) | Complaints not upheld | Number referred to Information Commissioner | Number not meeting 20-day deadline |
|------|--------------------|--------------------------------|-------------------------|----------------------------|-------------------------------------|-----------------------|---|------------------------------------|
| 2005 | 241 | 52 | 146 | 43 | 11 | 31 | 8 | 9 |
| 2006 | 168 | 57 | 74 | 37 | 6 | 19 | 6 | 8 |
| 2007 | 185 | 77 | 62 | 45 | 4 | 11 | 6 | 12 |
| 2008 | 253 | 109 | 75 | 69 | 4 | 20 | 9 | 15 |
| 2009 | 294 | 124 | 100 | 65 | 8 | 25 | 6 | 32 |
| 2010 | 314 | 165 | 76 | 71 | 4 | 23 | 3 | 31 |

The majority of the refusals on individual complaints were because the information related to investigation files. Under section 44 of the Act, information is exempt if its disclosure is prohibited by another Act. The Local Government Act 1974, section 32(2) requires the Ombudsman to keep confidential any information obtained in the course of, or for the purposes of, an investigation, except in order to conduct the investigation.

The refusals that did not relate to complaint files were mostly because we did not hold the information requested.

Of the cases that the Information Commissioner's office considered during the year (some of which were requests we dealt with in the previous year) three files were closed without a decision notice being issued (although some procedural deficiencies were noted on one of them). Five decision notices were issued, with the complaints not being upheld, although in two decision notices the Ombudsman was criticised for failing to specify

the exemption applied in the initial responses to the FOI requests. In one of the cases resulting in a decision notice, the requester applied to the Information Tribunal for the case to go before them, and this case is still ongoing.

In the case that was before the Information Tribunal at the end of 2010, the requester eventually withdrew his application to the Tribunal.

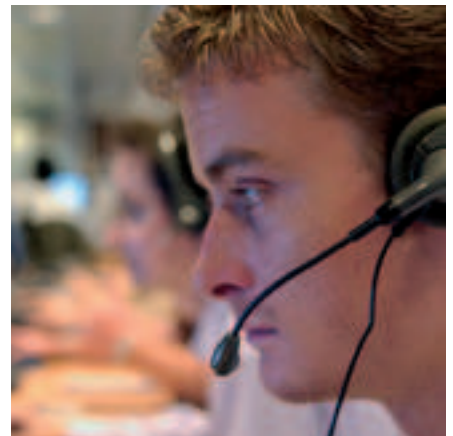
Our Publication Scheme² is available on the website, in the publications section. There is also a section on Access to Information from where the Guide to Information can be accessed.

Sustainable development

The focus for 2010/11 was to achieve local and national targets in two areas: the reduction in CO₂ production and the reduction in landfill volumes.

The main contributors for CO₂ are through energy consumption in the office and travel for business and commuting purposes.

The most recent Display Energy Certificates (October 2010) indicated that the London and Coventry offices have reduced CO₂ generation by some 20 per cent over the previous three years. York had



reduced by 5 per cent, hitting the local target. The DCLG target for CO₂ reduction is 10 per cent over the coming year, and each office will be looking at how energy is used in the buildings and how consumption can be further reduced.

With regard to travel, a new contract with our travel supplier will provide management information on how much CO₂ each office generates through travel for work purposes.

New cleaning and waste management contracts were negotiated in each office during the year, which take effect in 2011/12. By the late summer 2011, all offices will have available an increased range of materials that can be recycled, and management information on volumes diverted from landfill will be available in order to benchmark our performance against other organisations and national averages.

² Copies of the Publication Scheme are available from the Secretary of the Commission, 10th Floor, Millbank Tower, Millbank, London SW1P 4QP. Tel 020 7217 4683.

“ Thank you so much for your carefully balanced work on this case.”

Ms R

GREATER MANCHESTER

Good governance

For the period of this report the arrangements agreed between our sponsor department, the Department for Communities and Local Government, and the Commission, with the consent of the Treasury, for the use of grant are described in a Grant Memorandum.

The Commission is responsible for the provision of accommodation, staff and other support services for the Local Commissioners. It met seven times during 2010/11. Open papers and minutes of the meetings are available on our website at: www.lgo.org.uk/about-us/governance/.

The Commission has had a *Code of Conduct for Commission Members* since 1995. There is a *Register of the Interests of Commission Members* which is open to public inspection at the Commission's office in London. A copy of the information in the register can be supplied on request³. Both the Code and the Register are available on our website on the page noted above.

We have an Audit Committee that considers reports from our internal and external auditors, and oversees our risk management arrangements. It comprises an independent Chairman, the Parliamentary Ombudsman, another independent

member, and the Commission Chairman.

At the end of 2010/11, the Acting Chairman was Lucinda Bolton. She was recruited as an independent member during 2008, and took up her post as Acting Chairman in September 2010. Lucinda is a Governor of Thames Valley University and chairs its Audit Committee, a board member of the NHS Information Centre, a member of the NHS Pay Review Body and an Independent Assessor for public appointments for the Department for Culture, Media and Sport. She previously worked in investment banking.

The other non-Commissioner on the Committee is Eugene Sullivan. He is Acting Chief Executive of the Audit Commission. Previously he was employed as Partner and Head of Public Sector Services at RSM Robson Rhodes LLP.

We also have a Remuneration Committee, which met three times during 2010/11. The Committee is made up of three members appointed by the Commission. In the year in question they were:

Sir Anthony Redmond (until November 2010), Dr Jane Martin (from November 2010), Ann Abraham, Eugene Sullivan (until February 2011), Lucinda Bolton

(from February 2011). Sir Anthony Redmond was Chairman of the Committee until 11 November; his successor is Dr Jane Martin.

³ Copies of the *Code of Conduct for Commission Members* are available from the Secretary of the Commission, Millbank Tower, Millbank, London SW1P 4QP. **Tel** 020 7217 4683. Requests for information from the *Register of Interests* should also be addressed to the Secretary.

Glossary of terminology

Complaints and enquiries handled by the LGO Advice Team

Premature complaints and enquiries

The Ombudsman does not normally consider a complaint unless the organisation concerned has first had an opportunity to deal with the complaint itself. So if someone complains to the Ombudsman without having taken the matter up with the organisation concerned, the Ombudsman will either refer it back to the organisation as a 'premature complaint' to see if it can itself resolve the matter, or give advice to the enquirer that their complaint is premature.

Advice given

These are enquiries where the LGO Advice Team has given advice on why the Ombudsman would not be able to consider a complaint that is not premature. For example, the complaint may clearly be outside the Ombudsman's jurisdiction.

Forwarded to the investigative team (resubmitted prematures)

These are cases where a premature complaint has been resubmitted to the Ombudsman when the person complaining is not satisfied with the

response from the organisation they are complaining about.

Forwarded to the investigative team (new)

These are complaints that have been forwarded from the LGO Advice Team to the Investigative Team, for further consideration. They are from people who have not been in touch with us before (on the matter in hand) but who have already had their complaint considered by the organisation concerned.

Complaints handled by the Investigative Teams

Some terminology was changed towards the end of 2010/11. In future we will use the different decision descriptions that are intended to give a more precise representation of complaint outcomes and also add further transparency to our work.

Outside jurisdiction

The Ombudsmen can investigate most types of complaints against local authorities, private adult social care providers and schools in 14 local authority areas. But there are some things the law does not allow them to investigate, such as personnel matters, and matters which affect all or most of the people living in a council's area. Such complaints,

when they are decided, are described as being outside jurisdiction.

Local settlements

The term local settlement is used to describe the outcome of a complaint where, during the course of our consideration of the complaint, the organisation concerned takes, or agrees to take, some action that the Ombudsman considers is a satisfactory response to the complaint and the investigation is discontinued. This may occur, for example, in any of the following circumstances:

- > a council on its own initiative says that there was fault that caused injustice, and proposes a remedy which the Ombudsman accepts is satisfactory
- > an organisation accepts the suggestion by the Ombudsman that there was fault which caused injustice, and agrees a remedy which the Ombudsman accepts is satisfactory
- > an organisation and the person complaining themselves agree upon a course of action and the Ombudsman sees no reason to suggest any different outcome.

Local settlements will in future be described as 'Discontinued investigation: injustice remedied'.

“ Many thanks for the time and effort you have spent with me in considering our complaint. The professional manner in which your investigation was conducted was greatly appreciated.”

Mr M

CAMBRIDGESHIRE

Ombudsman’s discretion

Complaints described as closed by Ombudsman’s discretion are those that have been discontinued because, for example:

- > the complainant wishes to withdraw his or her complaint, or
- > the Ombudsman considers that there is insufficient injustice to warrant the public expense of further investigation.

Ombudsman’s discretion will in future be described as either ‘Discontinued investigation’ or ‘Not to initiate an investigation’ depending on at what stage the decision was taken not to pursue the complaint any further.

Remedy

When a report is issued finding injustice caused by a council, the Ombudsman will recommend what the council should do to put matters right (the remedy).

First report

When an Ombudsman issues a report after completing an investigation into a complaint about a council, this is referred to as the first report on the complaint.

Further report

If a council does not respond satisfactorily to the Ombudsman’s recommendations in a first report within a given time limit, the Ombudsman must issue a further report, which must be considered by the full council. This further report is sometimes referred to as a second report.

Who we cover

Bodies within jurisdiction

- > District, borough, city and county councils (but not town or parish councils)
- > School admission and exclusion appeal panels
- > Schools (the internal management of)*
- > School governing bodies (about admissions only)
- > Adult social care providers
- > Joint boards of local authorities
- > Internal drainage boards
- > National park authorities
- > Fire and rescue authorities
- > The London Fire and Emergency Planning Authority
- > Police authorities (but not about the investigation or prevention of crime)
- > The Greater London Authority
- > Transport for London
- > London TravelWatch
- > The London Development Agency
- > Urban development corporations
- > Homes and Communities Agency (town and country planning matters only)
- > The Norfolk and Suffolk Broads Authority
- > The Environment Agency (flood defence and land drainage matters only)

* Only where complaints relate to schools maintained by any one of the following authorities: the London Boroughs of Barking and Dagenham, Hammersmith and Fulham, Hillingdon, Kensington and Chelsea; Cambridgeshire County Council; Medway Council; Sefton Council; Bristol City Council; Dorset County Council; Kent County Council; Lincolnshire County Council; Portsmouth City Council; Sheffield City Council and Wolverhampton City Council.

Where to contact the Local Government Ombudsmen

website: www.lgo.org.uk

LGO Advice Team: 0300 061 0614
text 'call back' on 0762 480 4299

All new complaints should be sent to:
PO Box 4771, Coventry CV4 0EH

E: advice@lgo.org.uk

Jane Martin's office is at:

The Oaks, No 2
Westwood Way
Westwood Business Park
Coventry CV4 8JB

T: 024 7682 0000

F: 024 7682 0001

Anne Seex' office is at:

Beverley House
17 Shipton Road
York YO30 5FZ

T: 01904 380200

F: 01904 380269

The Chairman's office and the office
of the Secretary of the Commission
are at:

10th Floor
Millbank Tower
Millbank
London SW1P 4QP

T: 020 7217 4620

F: 020 7217 4621

All photos, other than those of the Ombudsmen and senior staff, do not depict real Ombudsman cases and are posed by models. Courtesy of www.third-avenue.co.uk

**Commission for Local
Administration in England**

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W: www.lgo.org.uk

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Standards Committee

16 September 2011

Town and Parish Council Sub Committee



Report of Tina Naples, Chair of the Town and Parish Council Sub Committee

Purpose of the Report

1. To provide an update to members in relation to the work undertaken by the Town and Parish Council Sub Committee of the Standards Committee.

Work of the Sub Committee

2. I have little new of note to report since my last report to the Standards Committee about the work of the Town and Parish Council sub-committee. Although this period has been a little quieter due to the recess, we have managed to visit more councils. The full list visited since we began our work is at Appendix A.
3. The same issues around the Code of Conduct and concerns about the future when the current standards regime comes to an end continue to be raised. We continue to advocate that local councils adopt a code of conduct under the new arrangements. From a personal point of view, I am finding it a little difficult that we still have no news or steer from the county council that we can feed into discussions.
4. Feedback from those Councils which have been visited continues to be positive and gives us the motivation to carry on.

Recommendation

5. Standards Committee is invited to note the content of this report.

Contact: Jocasta Lawton Tel: (0191) 383 3679

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| Parish/Town Council | Visit Date | Visit Time | Requirements |
|----------------------------|-------------------|-------------------|---|
| Horden Parish Council | 6 Jan 2011 | 8pm | Code/Dual Hatted/Localism Bill |
| Brandon & Byshottles PC | 9 Feb 2011 | 6:30pm | Code/Dual Hatted/Localism Bill/Complaints Criteria |
| Cassop cum Quarrington PC | 16 Feb 2011 | 7pm | Q & A re future of Standards |
| Great Aycliffe TC | 10 Mar 2011 | 6:30pm | General refresher, Planning & dual hat cllrs, Outside bodies representing the Town Council/declarations of interest |
| Sedgefield Parish Council | 14 March 2011 | 7pm | Future of Standards etc the q & a (v.brief, max 20 mins on agenda) |
| Tow Law Town Council | 15 March 2011 | 6:30pm | Work of Cttee followed by general discussion on Standards matters |
| Haswell | 29 March 2011 | 6pm | COC refresher/update on future/q&a |
| Shadforth Parish Council | 5 April 2011 | 6:30pm | COC / Dual Hatted |
| Ferryhill Town Council | 13 April 2011 | 6:30pm | COC/Standards in General |
| Wingate Parish Council | 14 April 2011 | 6:30 | General refresher, |
| Esh Parish Council | 12 April 2011 | 7pm | Explanation and discussion re. the role of the Standards Committee |
| Monk Hesleden | 23 May 2011 | 6pm-8pm | Code of Conduct- review declaration of interests Alternative to Standards Board Roles and Responsibilities in particular the role of Chairman Code of Conduct and the Future |
| Ouston Parish Council | 23 June 2011 | 7pm | |
| Thornley Parish Council | 5 July 2011 | 7pm | Code of Conduct overview and update on the future |
| Eldon Parish Council | 26 July 2011 | 7pm | Update on the future |
| Spennymoor Town Council | 6 Sept 2011 | 6:45pm | Update on the future |

| | | | |
|------------------------------|-----------------|--------|--|
| Stanley Town Council | 13 Sept 2011 | 6:30pm | Update on the future/open questions |
| Ferryhill TC Visit No. 2 | 26 Sept 2011 | 6pm | Overview on Code of Conduct/Update on the future |
| Bishop Auckland Town Council | 27 Sept 2011 | 6pm | Dual Hatted Members/Update on the future |
| Brancepeth Parish Council | 17 Oct 2011 | 7:30pm | Overview and Update on future |

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of the Local Government Act 1972.

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