

Adult Social Care Scrutiny Commission

Annual Report 2016/17
Adult Social Care Statutory / Corporate Complaints and
Commendations
Lead director: Ruth Lake

Useful information

- Ward(s) affected: All
- Report author: Joanne Tansey, Customer Feedback & Complaints Manager, Adult Social Care
- Author contact details: Joanne.Tansey@leicester.gov.uk Tel: 454 2472

1. Summary

The Annual Report 2016/17 details information about statutory, corporate complaints and commendations received by Adult Social Care during the last year. This information is provided with some further analysis for the Department and by service areas.

The full version of the Annual Report is attached for information at Appendix 1.

Of particular note from 2016/17:

- The number of statutory complaints received increased by 14% over the year.
- The percentage of complaints that were either partially or fully upheld in 2016/17 increased to 42%, compared to 33% in the previous year.
- Positively, the number of commendations noted also increased significantly, with 59% more than last year recorded.
- The number of LGO complaints determined with a maladministration finding decreased in 2016 /17 from 8 to 3.
- A greater number of complaints with less complex issues at heart were addressed more swiftly, following an adjustment to complaint response timescales.
- An action plan for activity around complaints work for 2017/18 is included at Appendix 4.

2. Recommendations

It is requested that the contents of the 2016/17 Annual Report are noted.

3. Supporting information including options considered:

The Annual Report is intended to provide an overview of matters relating to customer feedback that is identified through the Adult Social Care's complaints and commendation processes.

Specific complaint information is also highlighted in the Adult Social Care Annual Report (Local Account), as this meets the requirements of information to be published

and as defined in the Local Authority Social Services and National Health Services Complaints (England) Regulations 2009.

4. Details of Scrutiny

There are no further details in relation to scrutiny reviews or engagement processes.

5. Financial, legal and other implications

5.1 Financial implications

There are no financial implications to this report.

Martin Judson, Head of Finance, Adult Services Tel: 454 4101

5.2 Legal implications

There are no legal implications arising from the contents of this report.

Pretty Patel, Head of Law (Social Care & Safeguarding) Tel: 454 1457

5.3 Climate Change and Carbon Reduction implications

There are no significant climate change implications arising from the recommendations in this report.

Duncan Bell, Senior Environmental Consultant, Environment Team, Tel: 454 2249

5.4 Equalities Implications

Having a robust complaints procedure in place ensures fair redress to dissatisfaction experienced and reported by users of services and carers on their behalf. This process is in keeping with one of the Council's equality and diversity strategy priorities of improving resident/service users' perceptions of fair treatment by the Council.

This annual report provides evidence to inform progress against this outcome. In addition, recording and analysis of complaints received as set out in the report enables the Council to consider whether it is meeting the general Public Sector Equality Duty aims of eliminating discrimination and promoting equality of opportunity in its service provision.

Sukhi Biring, Corporate Equalities Officer, Tel: 454 4175

5.5 Other Implications (You will need to have considered other implications in preparing this report. Please indicate which ones apply?)

No further implications identified.

6. Background information and other papers:

The Adult Social Care complaint process adheres to the Local Authority Social Services and National Health Services Complaints (England) Regulations 2009.

The Regulations' publishing requirements for Local Authorities and complaints highlight that the following details should be made available annually:

- I. The number of complaints received within a period 1st April – 31st March.
- II. The number of complaints which were determined as well-founded.
- III. The number of complaints referred to the Local Government Ombudsman.
- IV. A summary of the subject matter of complaints received.
- V. A summary of any matters of general importance arising out of the complaints or the way in which they were handled.
- VI. Any matter where action has been taken or is to be taken to improve services as a consequence of those complaints.
- VII. Ensure that the annual report is available to any person on request.

7. Summary of appendices:

Appendix 1 Adult Social Care Statutory / Corporate Complaints and Commendations Annual Report 2016/17.

8. Is this a private report (If so, please indicated the reasons and state why it is not in the public interest to be dealt with publicly)?

Yes/No

However, information that is publicly available is primarily identified within Adult Social Care's Annual Report.

9. Is this a "key decision"?

Yes/No



ANNUAL REPORT 2016 – 2017

ADULT SOCIAL CARE COMPLAINTS AND COMMENDATIONS

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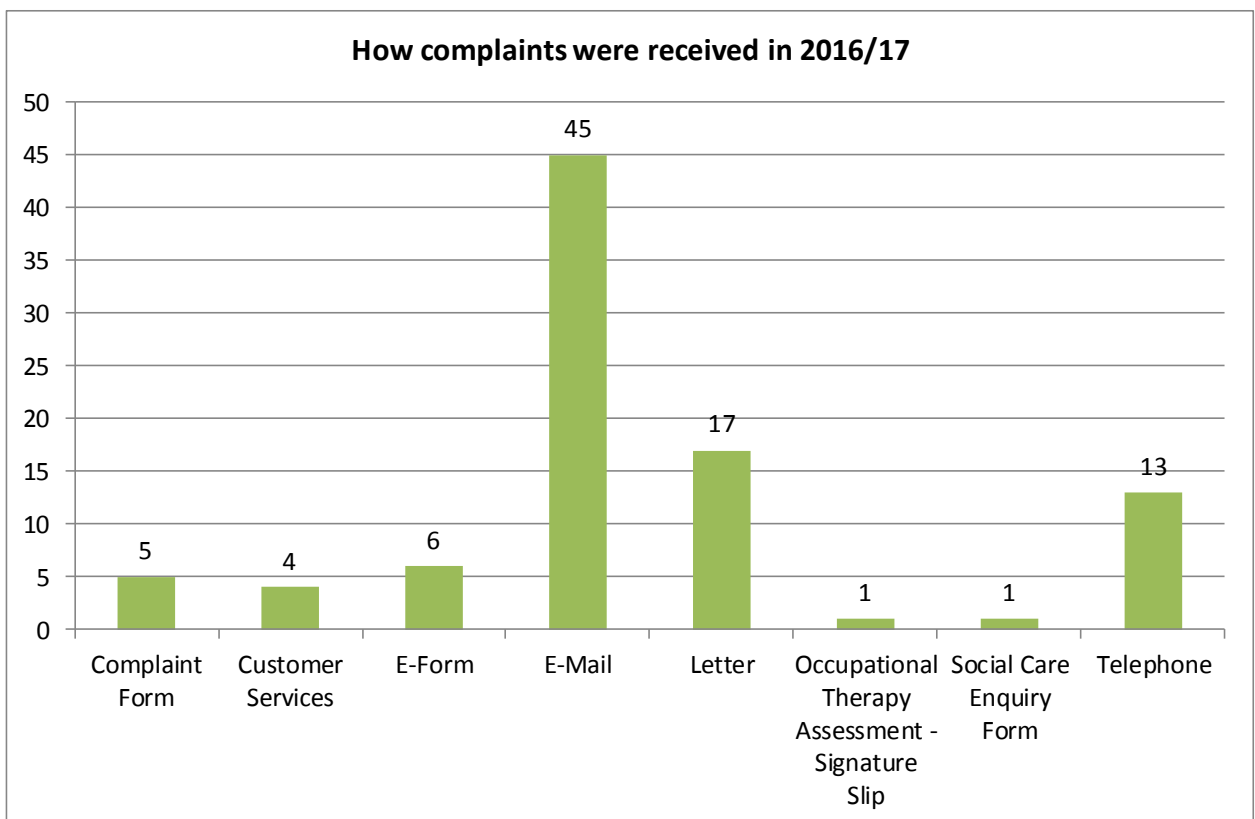
1. Executive Summary

- It is a statutory requirement for a Council's Adult Social Care department to produce an annual report in relation to complaints addressed under the Local Authority Social Services and National Health Services Complaints (England) Regulations 2009. The minimum reporting requirements are published with Adult Social Care's Annual Local Account.
- Complaints, as well as commendations, provide valuable feedback about the services provided by a Council. They provide an indication of the areas that are performing well and highlight where further attention may be required to improve service delivery.
- For all complaints reviewed under the statutory Adult Social Care (ASC) procedure, investigations at the first stage of the process are based on the following timescales, set out to help guide investigations.
 - Up to 10 working days - recorded as 'green' complaints
 - Up to 20 working days - recorded as 'amber' complaints
 - Up to 65 working days - recorded as 'red' complaints
- Complaints that progress to the second (final stage) of the process are considered by the Local Government Ombudsman.
- The number of formal statutory complaints recorded in 2016/17 was 92: an increase of 14% compared to 81 received in the previous year.
- The 3 main reasons for complaints received last year were in relation to:
 - Challenging practice decision
 - Staff attitude / behaviour
 - Failure to undertake task
- Initial Enquiries recorded increased during 2016/17 by 12%, with 64 being received compared to 57 in 2015/16.
- During 2016/17, the Local Government Ombudsman (LGO) directed 19 contacts relating to ASC services to the City Council. Thirteen of these were subject to more formal investigation processes of which 9 complaints were concluded during 2016/17.
- A 59% increase in the number of commendations was noted in 2016/17, with 252 received compared to 158 in 2015/16.
- Some complaints fall outside the remit of the statutory complaint procedure but can still be investigated under the Council's corporate procedure, which is currently being piloted with a changed, one stage approach (similar to ASC). Six ASC related matters were reviewed under the Council's corporate complaint procedure last year (2 less than 2015/16).

- A breakdown of the complaints received across the Department’s divisions and teams is included within the appendix of this report.
- Complaint information continues to be presented to ASC’s Leadership Team on a quarterly basis.

2. Accessibility of the complaint procedure

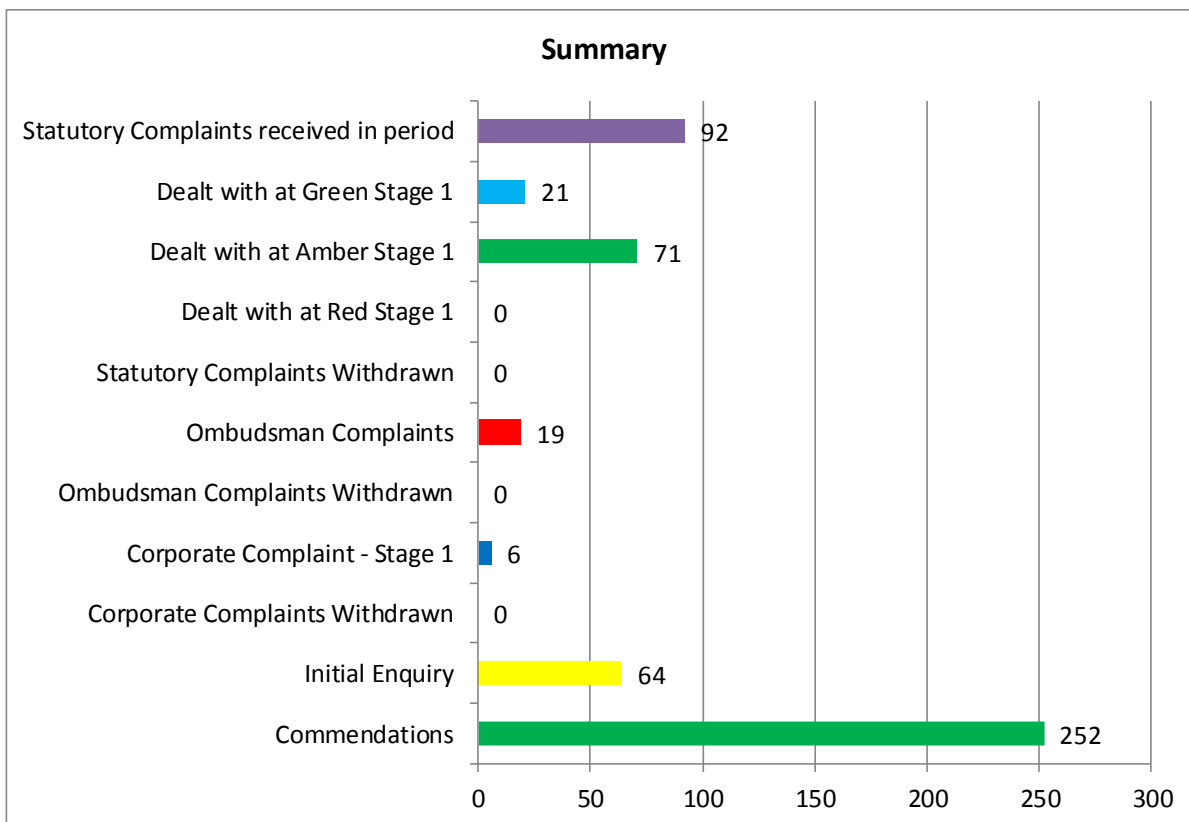
- 2.1 Details relating to the Adult Social Care complaint procedure and how to make a complaint are available on www.leicester.gov.uk (including contact details): new service users are also advised of the complaint procedure by care management staff, as part of the initial care assessment process.
- 2.2 The top 2 ways of making a complaint in 2016/17 were by email (49 %) and by letter (18%).
- 2.3 Complaint information signposts individuals to advocacy organisations for support but in practice most service users, relatives or carers make approaches directly. The percentage of complaints received via advocacy services was 11%, with other main sources of complaints being from relatives - 62% and from service users directly - 24%.



- 2.4 Complaints received concerning ASC services and other partner agencies, such as the NHS, University Hospitals Leicester, Leicestershire Partnership Trust and Leicestershire County Council are responded to under the same statutory complaint regulations. A local and jointly agreed protocol is in place to help the experience run more efficiently and effectively for the complainant. Two complaints were managed under these arrangements during the year 2016/17 (three complaints for the previous year).

3. 2016/17 complaint contacts

3.1 All contacts recorded in relation to complaints and commendations **received** during 2016/17 are highlighted in the graph as follows:



To explain further:

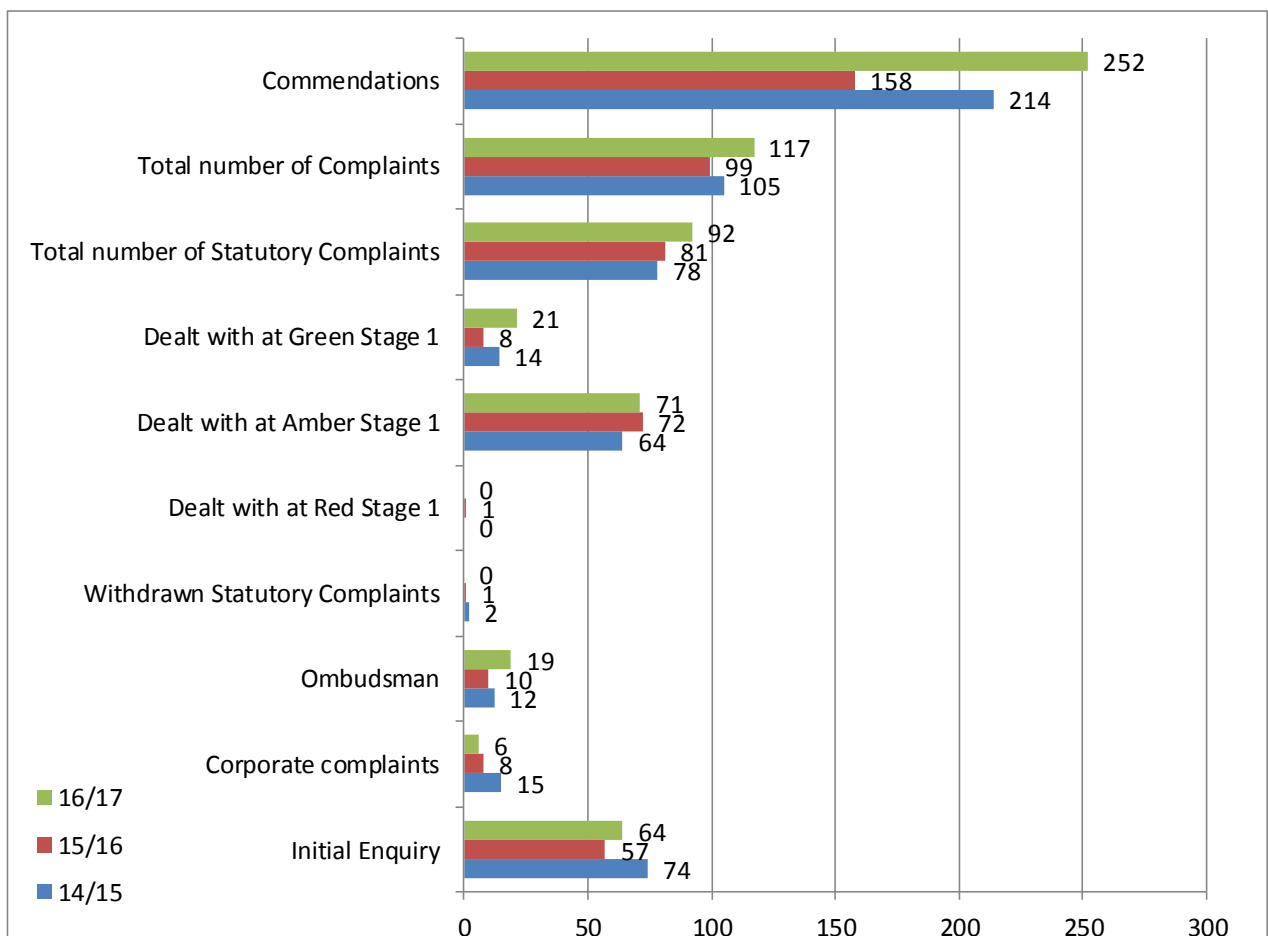
- 3.2 All contacts received were formally recorded during the reporting period, either as an 'Initial Enquiry'¹ or as a complaint. Ninety-two new statutory complaints were acknowledged during 2016/17 in total.
- 3.3 A substantial number of complaints (21) were reviewed and addressed within a revised 'green' timescale. The 'green' timescale was extended from 5 to 10 working days during 2016/17, allowing for a greater number of matters with less complex issues at heart to be addressed more swiftly. A further 71 contacts were determined as 'Amber' Stage 1 complaints and were allocated a 20 working day response timescale. No complaints were addressed under the more extensive 'Red Stage 1' timescale.
- 3.4 Out of the 92 statutory Stage 1 complaints recorded, 17 were upheld and 22 were partially upheld.
- 3.5 Six complaints were logged under the Corporate Complaint Procedure in 2016/17 and these required either a formal response or some further action to be taken. Two of these complaints were upheld; 1 partially and 3 not at all. One complaint was progressed by the complainant to the LGO but this was concluded with no further action.

¹ An Initial Enquiry is a contact that falls outside the definition of a statutory complaint as it has been resolved within one working day. Additionally, a concern may be classed as an Initial Enquiry when clarification is pending as to whether the complaint procedure is the appropriate route for addressing the matter further.

- 3.6 During 2016/17, the Local Government Ombudsman (LGO) directed 19 contacts relating to ASC services to the City Council. Thirteen of these contacts were subject to more formal findings by the LGO within 2016/17. Six LGO complaints were carried forward and are likely be concluded with 2017/18's figures.
- 3.7 Regular contact is maintained with complainants and wherever appropriate a flexible approach is employed to address the issues being raised. On occasion open communication between the complainant and the Council encourages the situation to be resolved earlier on in the complaint process.
- 3.8 During the year ASC undertook 12 'alternate dispute resolution' actions (in the form of meeting with complainants directly) to try and resolve matters at a local level. Three of these contacts progressed to the Local Government Ombudsman: two were recorded as 'Not Upheld; no maladministration', the third complaint outcome is presently awaited.
- 3.9 Positively, there has been a 59% increase noted in the number of commendations received in 2016/17: **252** compared to 158 the previous year. The importance of reporting commendations has been encouraged by the Complaints Team throughout the year. All commendations received are highlighted in the Department's 'Just ASC' newsletter with significant customer feedback further acknowledged by the Strategic Director, to the individual member of staff concerned.

4. Comparison to previous years

To provide some general information about the nature of all contacts received over the past 3 years, a snapshot of the type of contacts recorded by the Complaints Team appears as follows:



5. Profile information in relation to 2016/17's complainants

- 5.1 Each complaint received by Adult Social Care is considered on an individual basis and in relation to the specific concerns being raised. Any resolution actions for individual complaints are usually addressed at the point of providing a full response to the complainant.
- 5.2 All complaints are subsequently analysed further, to identify any wider lessons and to identify any themes or common issues arising across the board. Although the overall number of complaints received is only representative of a small percentage of ASC service users, further analysis has been undertaken in terms of complainants' profiles, as recorded below, to ensure that the complaint procedure remains accessible and fair to all.

Complaints in relation to ethnicity

- 5.3 From available data (4883 service users were noted to be in receipt of long term support at the end of March 2017), 60% of cases were identified to be in relation to white service users and black and minority ethnic groups accounted for 39.9%.
- 5.4 The number of statutory complaints received concerning service users from black and minority ethnic (BME) groups increased in 2016/17 from 31 to 44 (an increase from 39% to 48%).
- 5.5 The following complaint outcomes were noted as follows:

Outcome	BME	White	All complainants
Not Upheld	29 (66%)	24 (52%)	53 (59%)
Partially Upheld	8 (18%)	14 (31%)	22 (24%)
Upheld	7 (16%)	8 (17%)	15 (17%)
Total	44	46	90*

** 92 complaints received in total - data for 2 complainants unknown*

- 5.6 The top 2 complaint reasons identified for upheld complaints from BME and white groups were found to be the same and were as follows:
- Challenging practice decision
 - Staff attitude/behaviour
- 5.7 The top primary service reasons for individuals from BME and white groups were also noted to be the same and were recorded as physical disability, mental health and frail/temporary illness.

Profile information according to age

- 5.8 The highest number of statutory complaints were received in relation to adults aged 25-50 (a total of 29) in 2016/17. The top 3 primary service reasons for this age group were identified to be Mental Health, Physical Disability & Learning Disability.
- 5.9 Twenty-one complaints concerned individuals aged between 51-64. The top primary service reasons for this age group were Physical Disability, Frail/Temporary Illness and Mental Health.
- 5.10 For those individuals in the age range of 75-84, the primary service reasons are Frail/Temporary Illness, Physical Disability and Dementia.

The complaint outcomes determined by age range groups for 2016/17 were as follows:

Outcome	18-24	25-50	51-64	65-74	75-84 ²	85-94	95 +	All complainants
Not Upheld	3 (75%)	20 (69%)	15 (72%)	3 (33.3%)	6 (43%)	5 (46%)	1 (25%)	53 (58%)
Partially Upheld	1 (25%)	7 (24%)	3 (14%)	3 (33.3%)	4 (28.5%)	4 (36%)	0 (0%)	22 (24%)
Upheld	0 (0%)	2 (7%)	3 (14%)	3 (33.3%)	4 (28.5%)	2 (18%)	3 (75%)	17 (18%)
Total	4	29	21	9	14	11	4	92 (100%)

According to gender

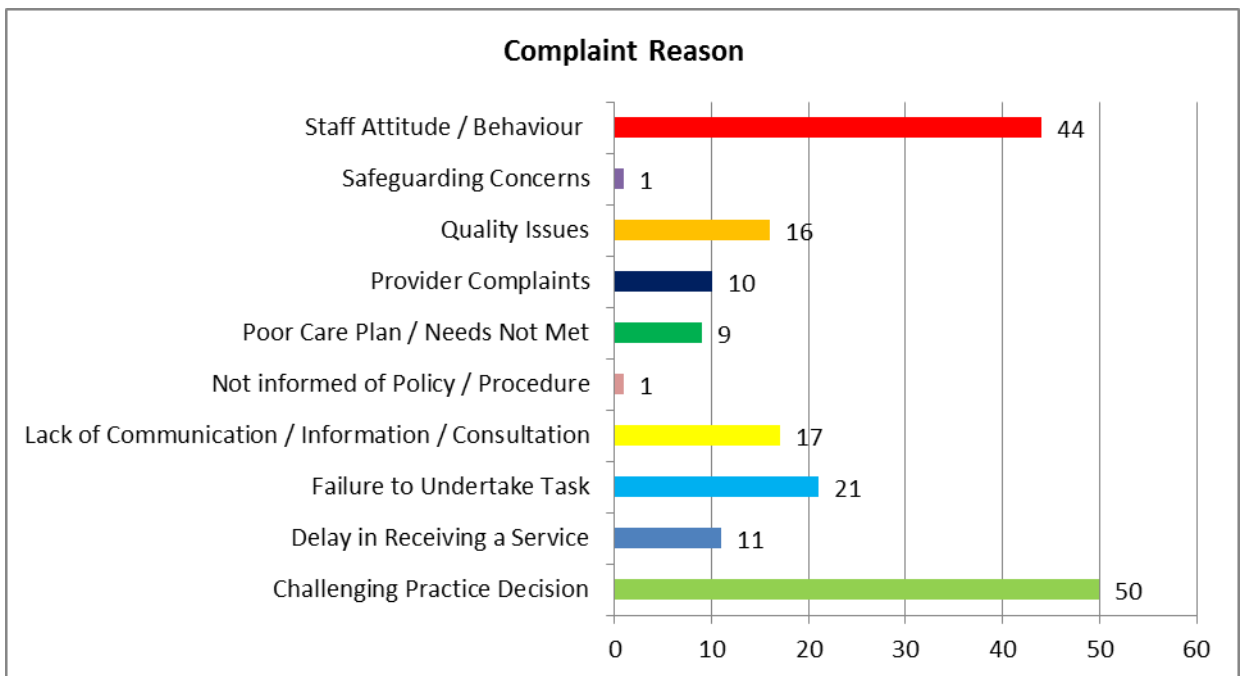
- 5.11 In 2016/17, 49 statutory complaints concerned female service users and 44 complaints concerned male service users. One complaint was raised jointly in relation to a male and female couple. The leading primary service reason recorded for female complainants was physical disability and for males, both mental health and physical disability.

6. Complaint reasons

- 6.1 Adult Social Care's statutory complaint database currently highlights 10 possible reasons for making a complaint. The principle reasons behind a complaint are identified at the point of receipt, by the Complaints Team. More than one reason may be identified per complaint.
- 6.2 During 2016/17 the number of complaint reasons was reduced from 14 to 10 in order to streamline reporting information further.

The chart below shows a more detailed breakdown of the key complaint reasons identified during the last year:

² One complaint relates to two service users (both within the age range of 75-84)



For the top 3 reasons of complaint, the percentage of complaints upheld or partially upheld were as follows:

	Upheld	Partially Upheld
Challenging Practice Decision	12%	12%
Staff Attitude / Behaviour	20%	16%
Failure to Undertake a Task	38%	19%

7. Learning from complaints

- 7.1 It is expected that appropriate actions are undertaken locally at the point where they arose and in a timely way, to remedy matters as part of the complaint process. The investigating Head of Service is responsible for identifying and overseeing such action. Further to an investigation that highlights any specific findings of failure or error, the Head of Service is asked to follow up and provide an update on the actions that have been taken within their service; demonstrating how changes have been implemented as a result of complaint feedback.
- 7.2 All complaints received are also reviewed by the Complaint Team, in order to establish whether there are any common trends arising across the Department and to see if any previously identified themes are being repeated. This wholesale review of complaints is intended to provide the Department with a broader awareness of the issues arising for its services, to help identify the impact our actions are having on service users and to help identify any wider improvements that may need to be taken into account.
- 7.3 Key issues identified by complaints are now being considered in relation to other departmental sources of customer feedback, in order to capture any evident, shared themes. Progression of these issues will then be raised and discussed further for action, through other Departmental improvement mechanisms such as the Professional Standards and Governance Board or the First Line Supervisor's Forum.

7.4 The following points highlight some of the more common issues identified by theme, arising from complaints received during 2016/17. This information has been presented to Adult Social Care's Leadership Management Team during the course of the year and will be considered further in the context of 7.3 above.

8. Complaint themes in 2016/17

8.1 Some of the key themes emerging from complaints received in 2016/17 are considered to be around the following:

- Ensuring referrals are progressed and not overlooked
- Recording
 - Ensuring we record who we have communicated with and the context of the contact
 - Ensuring any specific actions/advice given are recorded with the case notes
 - Ensuring actions are recorded when completed (or not if significant)
 - Quality of recording – to consider the value of the recording in terms of other readers or future review
 - Ensuring that actions are followed up and appropriately recorded
- Ensuring that financial implications are fully discussed, appropriate information shared or signposting to other advice sources provided (and action noted).
- Managing the approach to communication if long term support is ending
- Maintaining a consistent approach to notice periods when reducing/stopping services
- Managing the service user or family members' understanding of who does what in the Department
- Managing difficult conversations and customer expectations
- Ensuring care placement and associated agreements paperwork are fully completed
- That additional consideration is given to balancing communication when there is a nominated NOK (not family) but when other family members are also involved too

9. Contact with the Local Government Ombudsman (LGO)

9.1 The total number of Ombudsman complaints determined for the **entire** City Council in **2015/16** was 104. Contacts recorded in relation to Adult Social Care services for Leicester City Council made-up a 16% share of this total. This percentage is reflective of the LGO's

national workload, where 16% of LGO complaints were noted to be against Adult Care Services in the 'Annual Report & Accounts 2015/16: Equipped for the future'.³

9.2 The LGO receives a number of contacts in relation to Leicester City Council and although reflected with their own statistics, not all of these contacts are directed to the Authority for further attention. Consequently, there is usually a difference in the data recorded around the number of enquiries by the LGO and the Local Authority for the year.

9.3 According to Adult Social Care's records, the Department recorded 19 new contacts from the LGO during 2016/17 (no complaints were brought forward from 2015/16). Thirteen of these contacts were concluded in 2016/17 as follows:

Complaint closed after initial enquiries, no further action	3
Complaint not upheld, no maladministration	5
Upheld, maladministration, no injustice	1
Upheld, maladministration and injustice	2
Premature complaint (subsequently addressed as stage 1 complaints)	2

9.4 Six outstanding complaints/contacts have been carried forward to 2017/18 for determination: three of these are being investigated by the Joint Working Team (the Team that works on behalf of the Parliamentary Health Service Ombudsman and the Local Government Ombudsman looking into matters that have joint Social Care and Health involvements).

9.5 The two complaints upheld with maladministration and injustice resulted in recommendations for follow-up actions, described below, to remedy the matters:

Complaint reference: 16 000 798

- The Council was asked to provide an apology to the complainant for the failures and the distress this caused; and
- To organise a meeting with the complainant to discuss these failures.

Complaint reference: 16 011 922

- The Council was asked to ensure that care providers know to seek advice when residents regularly refuse medication; and
- To make a payment of £300 to the complainant in recognition that the care provider acting on its behalf failed to comply with the service user's care plan.

9.6 One further complaint was also upheld with maladministration but without injustice. No recommendations arose from this complaint (*complaint reference: 16 002 611*).

9.7 The number of complaints upheld by the LGO with a maladministration finding reduced from 8 (2016/16) to 3 in 2016/17.

9.8 In 2016/17 the Complaints Team took on more of a leading role with the preparation of responses to LGO enquiries. It is considered that this action has been of benefit to the Department, providing additional support to services areas that would otherwise be involved in potentially time-consuming enquiries. It has also allowed for a further

³ Information for 2016/17 not available from the LGO at the time of reporting.

'independent' overview of complaint issues to take place, prior to any response being returned to the LGO, as well as more timely responses being provided.

10. Report contacts

For more information relating to this report please contact:

Joanne Tansey, Customer Feedback & Complaints Manager or Paul Gardner, Complaints Admin & Business Support Officer

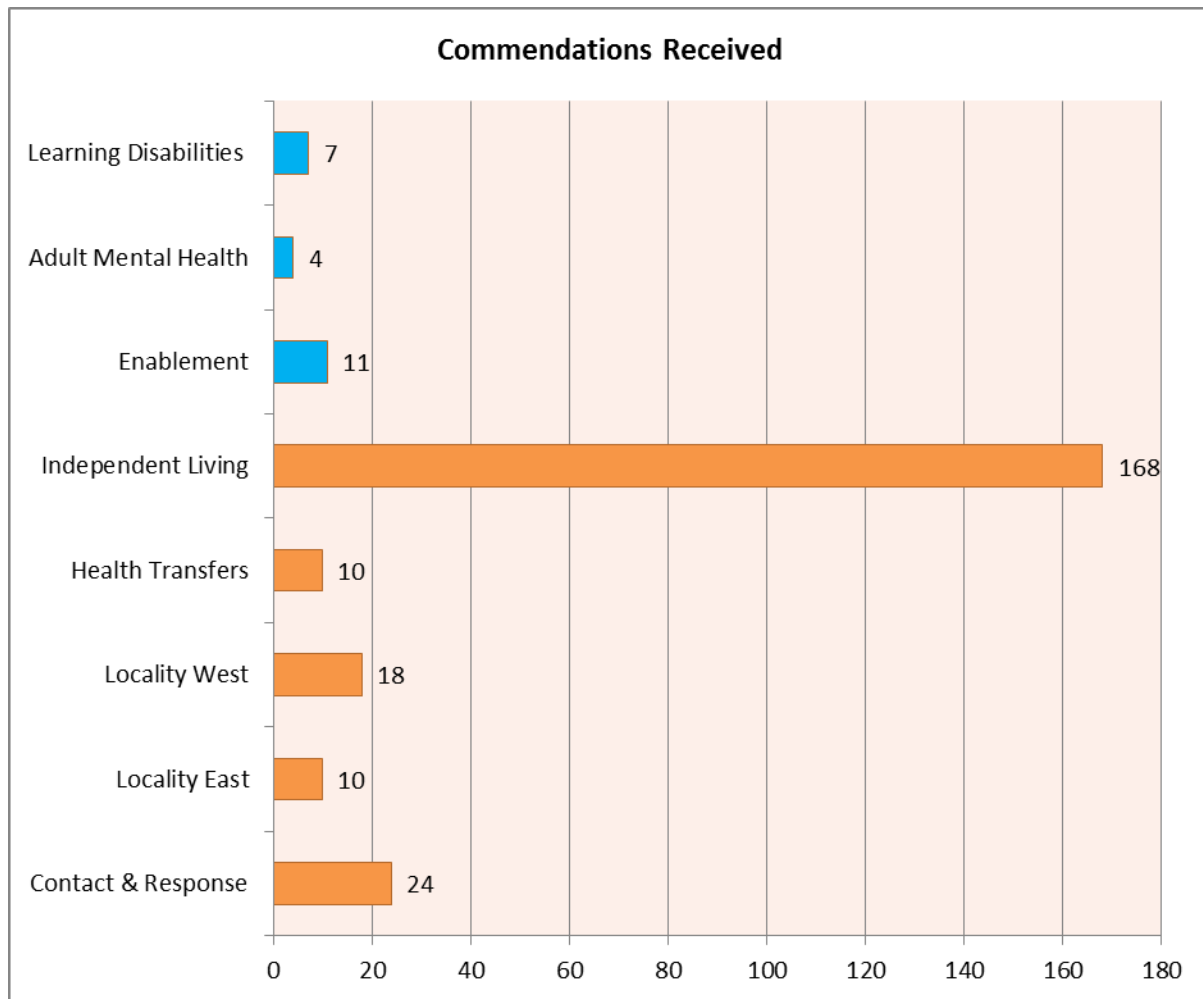
Safeguarding and Professional Standards
Adult Social Care
Bosworth House, 9-15 Princess Road West
Leicester
LE1 6TH

Email: Adultsocialcare-complaints@leicester.gov.uk

Tel: 0116 454 2470

APPENDIX 1

Commendations by service area



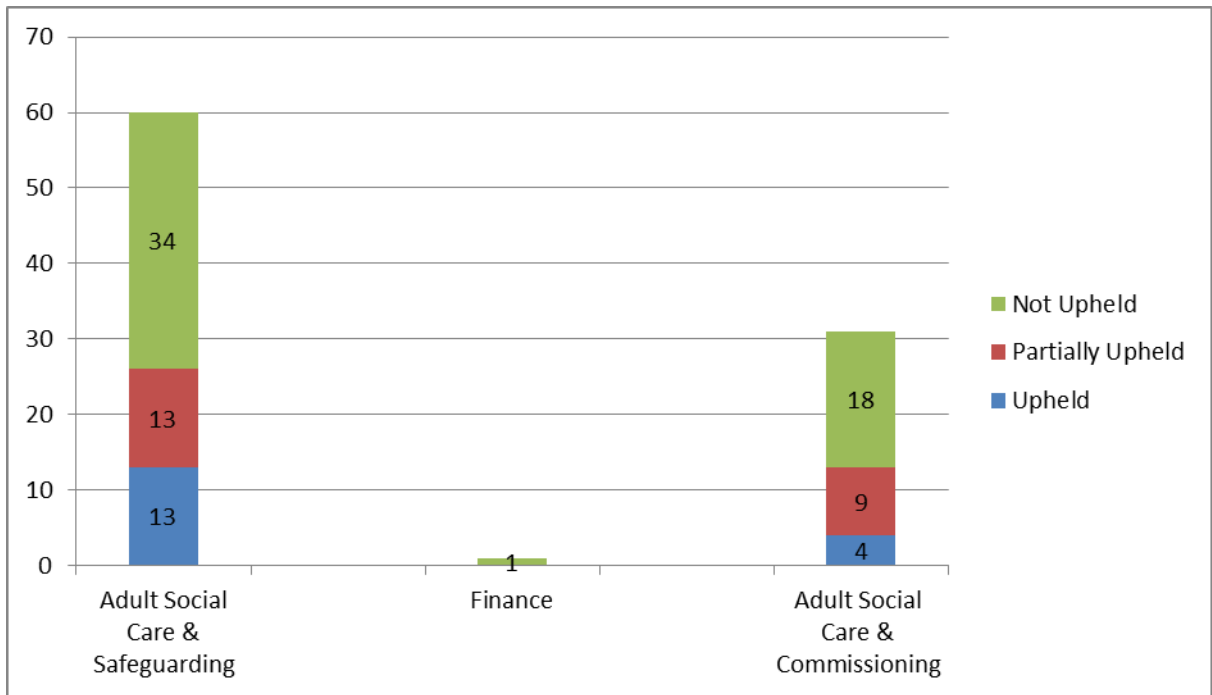
Breakdown of complaint information received across the Department

It is perhaps worth noting that teams receiving a higher number of complaints are not necessarily ones providing a poorer service than others. Higher numbers of complaints may indicate that staff are aware of their responsibilities in terms of recording and formally reporting matters, helping to ensure that the procedure remains open and accessible to all.

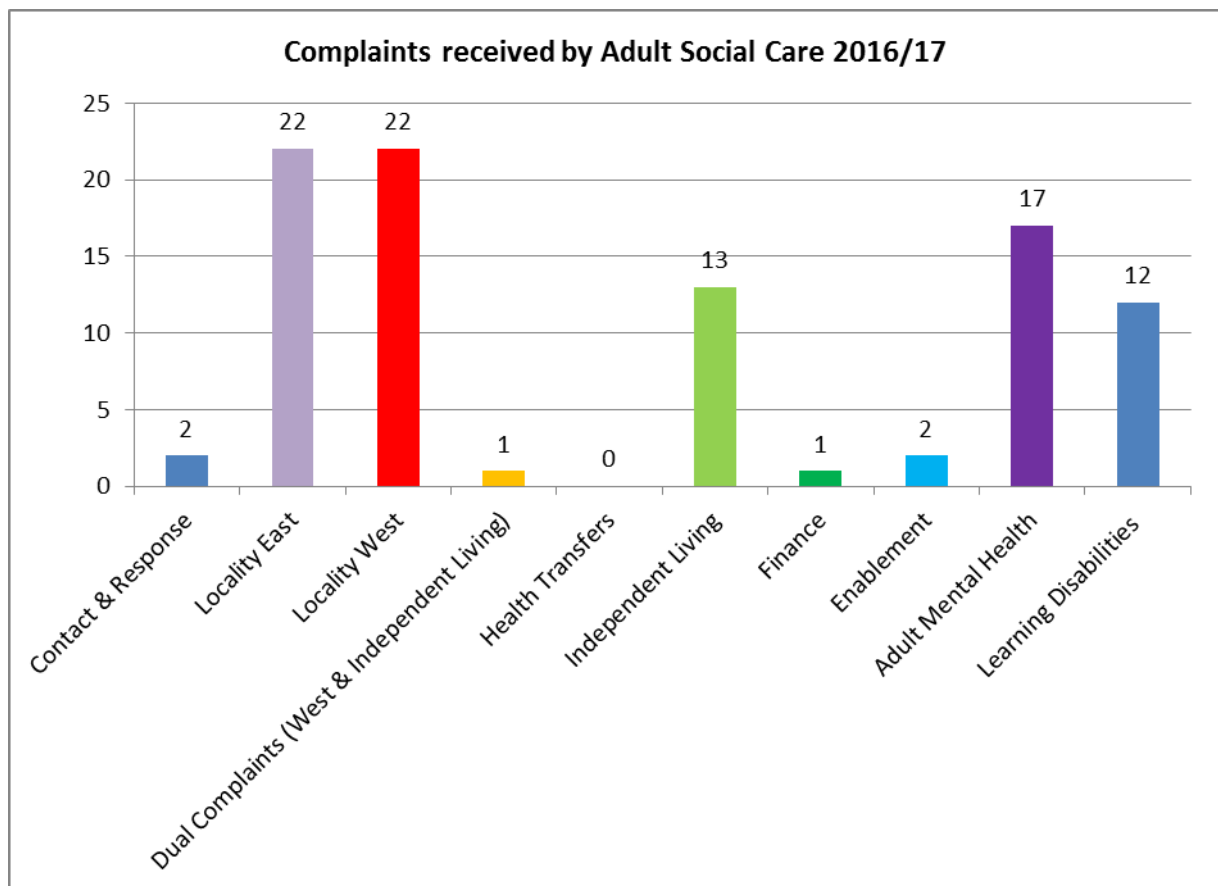
The distribution of Stage 1 complaints received in 2016/17 across ASC was as follows.⁴

⁴ One complaint was a dual complaint between Locality West & Independent Living

By division:

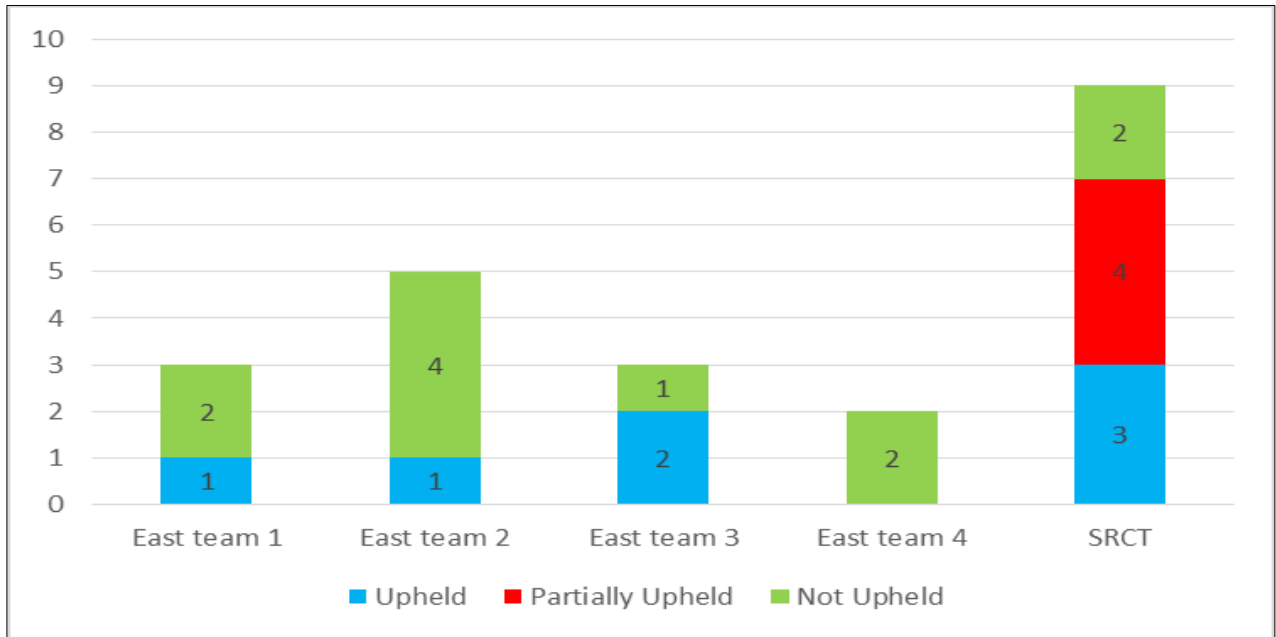


By service area:



Adult Social Care & Safeguarding

Locality East Teams & SRCT

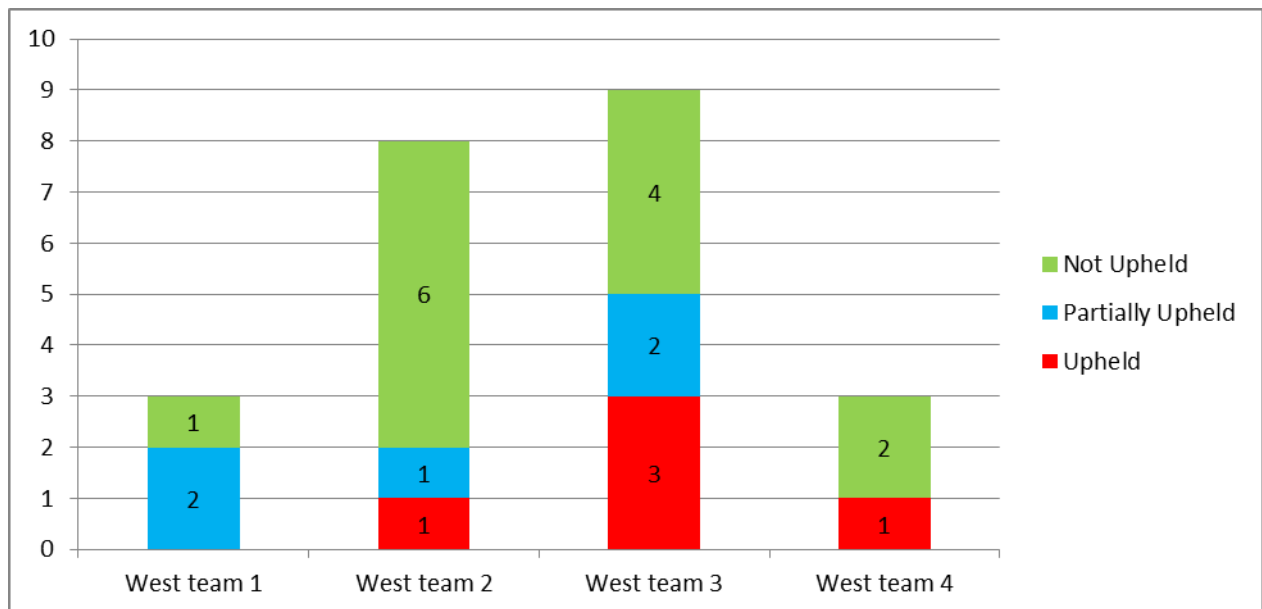


Locality East Teams (including SRCT) received a total of 22 complaints.

All 22 complaints were responded to within the agreed timescale.

In total 4 complaints out of 20 were partially upheld and 7 were upheld.

Locality West



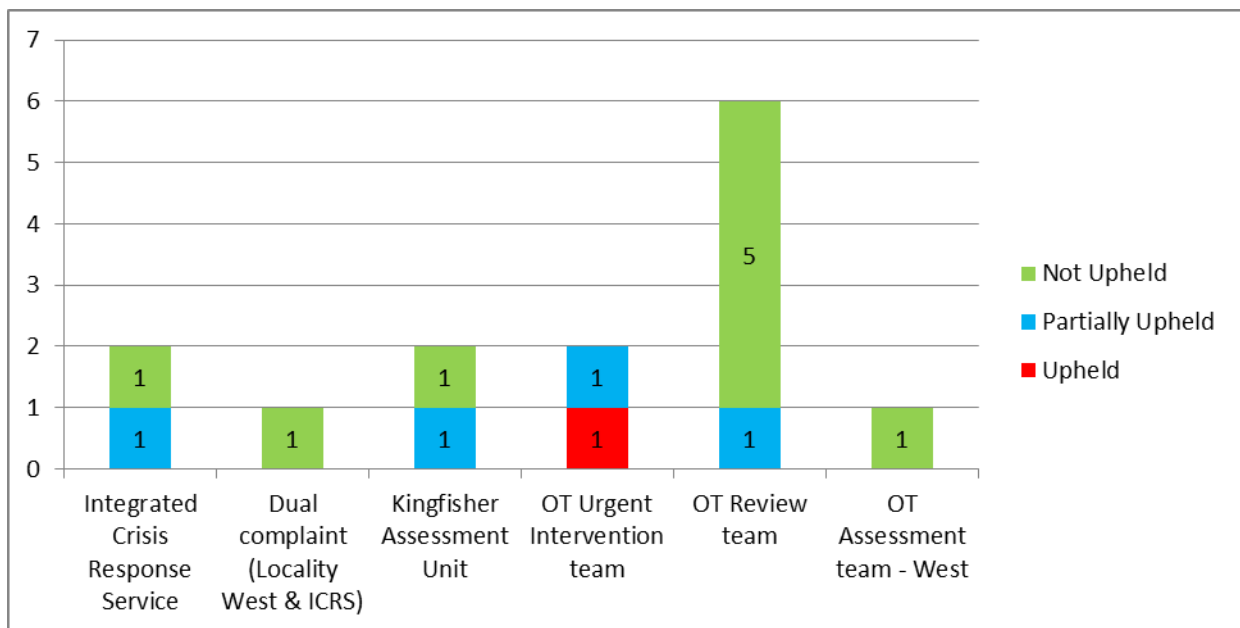
Locality West recorded a total of 23⁵ complaints.

22 out of 23 complaints were responded to within the agreed timescale.

In total 5 complaints were partially upheld and 5 were upheld.

⁵ One complaint was a dual complaint with Independent Living

Independent Living



Independent Living received a total of 14⁶ complaints in relation to its services .

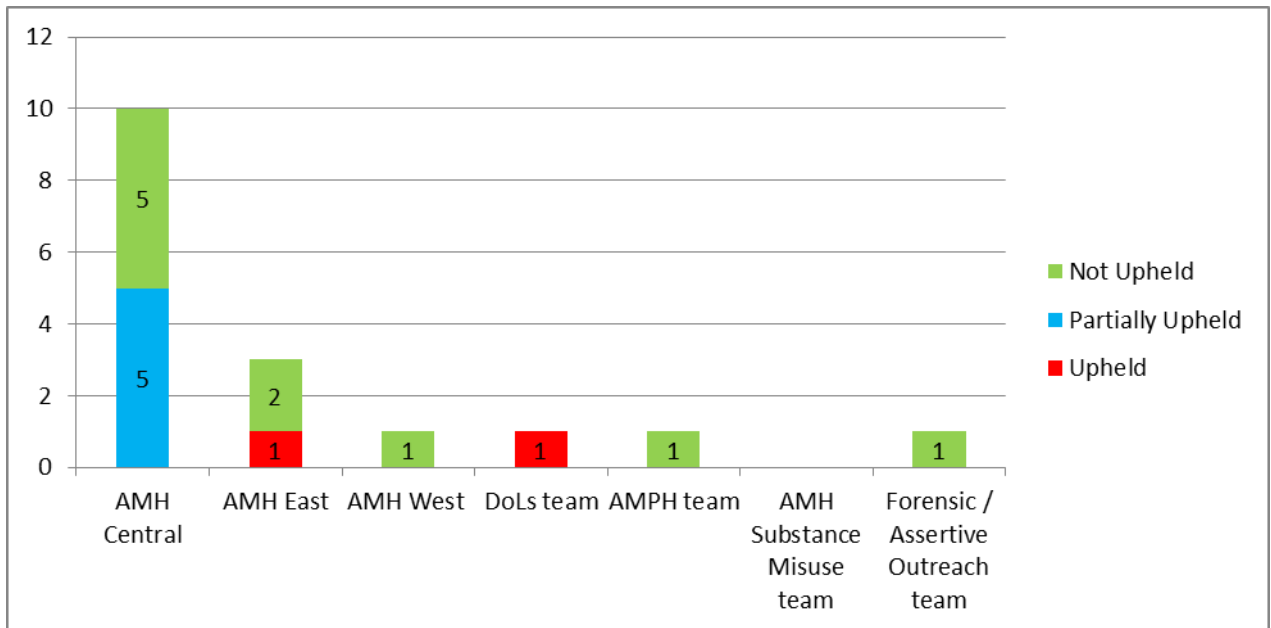
13 of the 14 complaints were responded to within the agreed timescales.

In total, 4 complaints out of 14 were partially upheld and one was upheld.

⁶ One complaint was a dual complaint with Locality West

Adult Social Care and Commissioning

Adult Mental Health

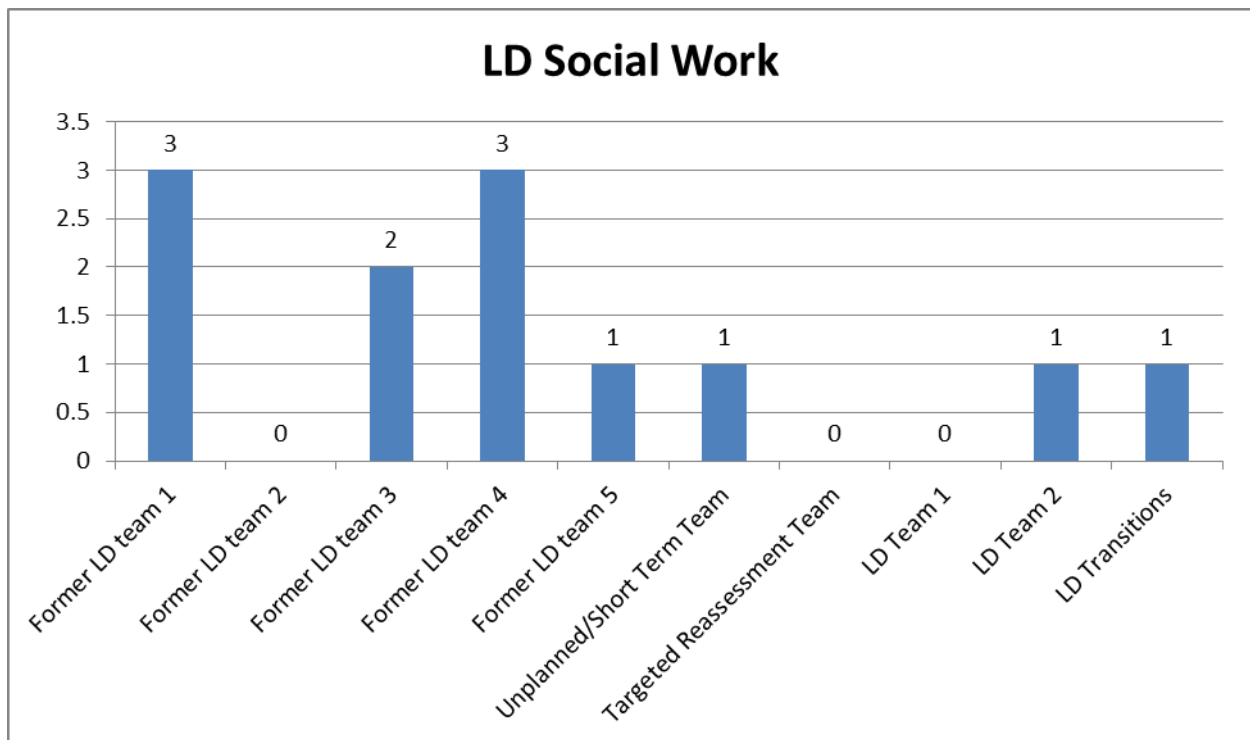


Adult Mental Health Services received 17 complaints.

All 17 complaints were responded to within the agreed timescale.

In total, 5 complaints out of 17 were partially upheld and 2 were upheld.

Learning Disabilities



Learning Disabilities received 12 complaints. 10 complaints were responded to within the agreed timescale.

In total, 3 complaints out of 12 were partially upheld and 1 was upheld.

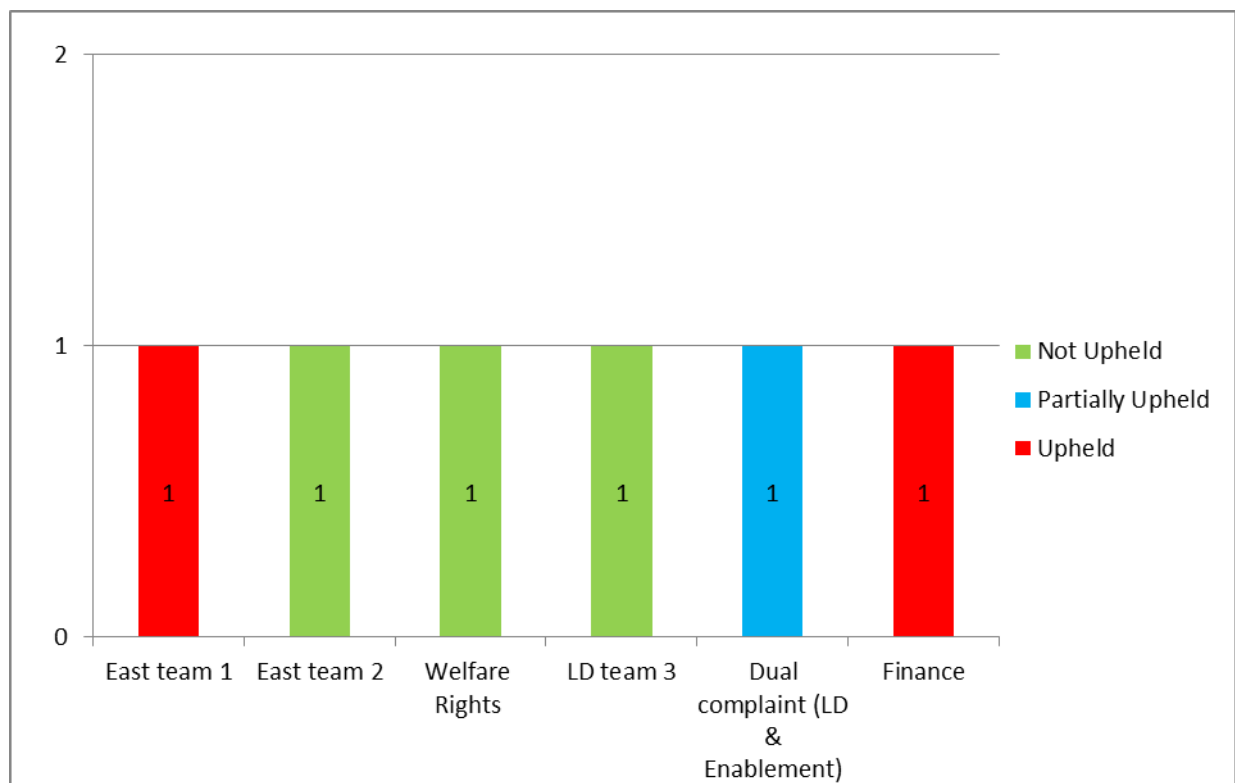
(Note – the graph accounts for the restructuring of teams within LD during 2016/17)

Social Care - Finance

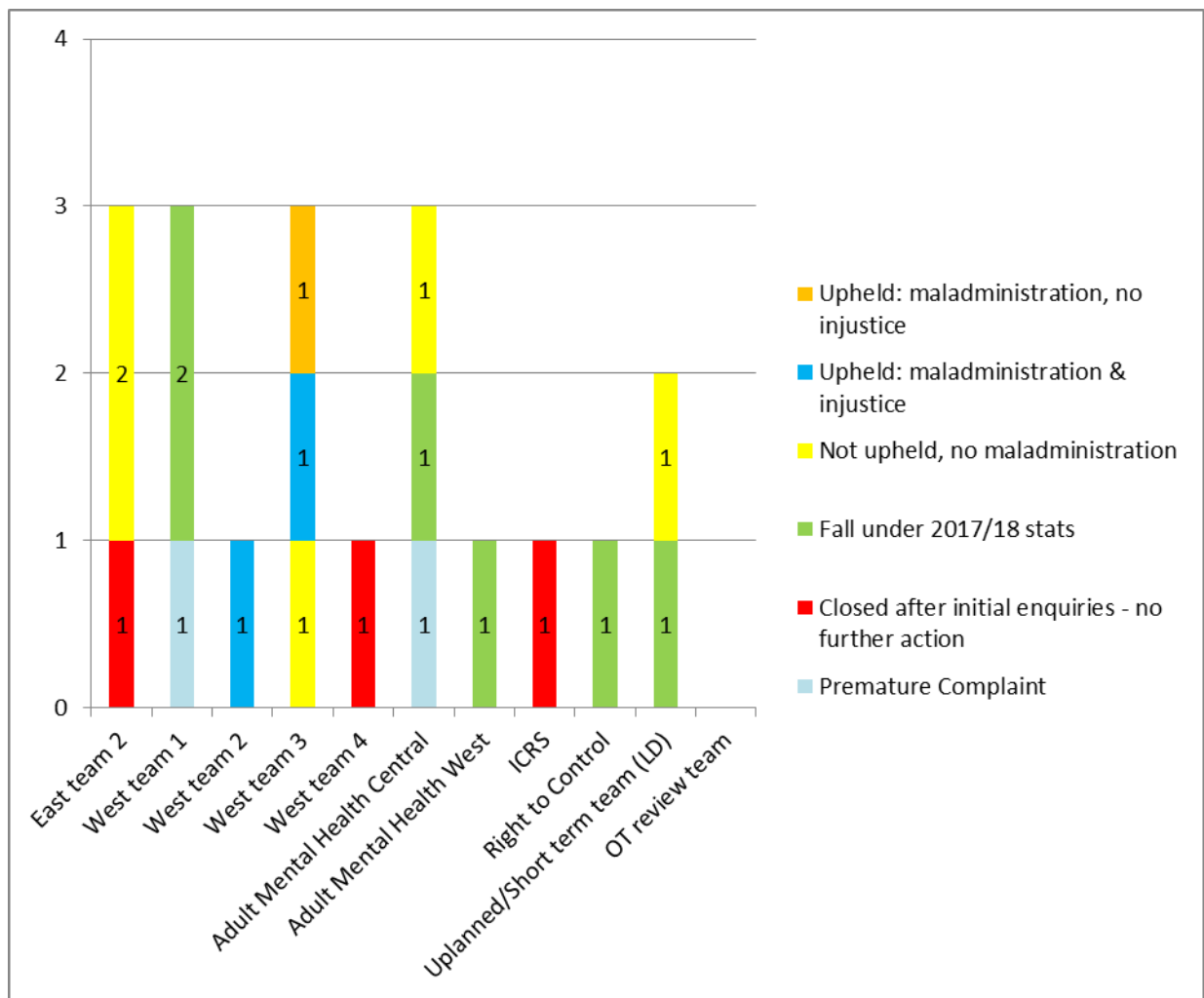
One statutory complaint was progressed in 2016/17 solely in relation to the Finance Team's actions. However, 7 complaints did concern financial aspects that had arisen subsequent to Care Management's involvement. Input from the relevant Finance Team was requested when responding to these complaints.

Corporate complaints

The following graph highlights the spread of corporate complaints that were received and addressed throughout the year.



LGO complaints received by teams



APPENDIX 2

Performance indicators relating to the management of statutory complaints

INDICATOR	2015/16	2016/17	Target for 2017/18
% Acknowledge Stage 1 complaints (combined) within 72 hours	99%	100%↑	100%
% Allocate Stage 1 complaints (combined) to investigating officer within 72 hours	100%	100%=	100%
Green % Completion of Stage 1 complaints within 10 working days	75 ⁷ %	100%↑	100%
Green % Completion of Stage 1 complaints within agreed timescale extension	88%	N/A	100%
Amber % Stage 1 complaints completed within initial timescale of 20 working days (25 for joint protocol complaints)	82%	86%↑	90%
% Stage 1 complaints completed between 21-25 working days	10%	11%↑	-
% Stage 1 complaints completed between 26-35 working days	4%	1.5%↓	-
% Stage 1 complaints completed at 36 working days or over	4%	1.5%↓	-
% Completion of Amber Stage 1 complaints within agreed timescale extension	100%	100%=	100%
Red % Acknowledge Stage 1 complaints within 72 hours	100%	N/A	100%
% Allocating Stage 1 complaints to investigator within 72 hours	100%	N/A	100%

⁷ Completed within 5 working days – timescales have changed to 10 working days in 2016/17

APPENDIX 3

Outcomes for 2016/17 action plan

Action identified	Action required	Anticipated Outcome	Timescale	Outcome
Review the number and categories of complaint reasons identified as part of current information gathering processes	Reduce the number of reasons recorded	Provision of more focused management information	30 th June 2016	Achieved – the list of outcome options reduced from 14 to 10.
Workshop with Heads of Service on evidencing learning from complaints	Arrange Workshop	To reach an agreement on how learning is evidenced in the future and implement monitoring processes as appropriate	31 st July 2016	Alternative approach taken as a number of learning events were running with the PSW throughout the year. Individual meetings offered/ held with Heads of Service on a quarterly basis to identify any lessons. Visit to Locality Away Days to discuss complaints and learning.
Evaluate effectiveness of complaint feedback processes	Consider alternative methods for seeking feedback from customers	Receive more targeted and effective feedback from customers to inform efficiency of complaint process	30 th September 2016	Topic considered in conjunction with colleagues from the regional complaint officers group: conclusion drawn that requests do not generate useful feedback (if supplied at all) or add value to learning about the complainant management process. In line with other LA's actions, feedback around complaint handling processes is no longer requested.
Improvement in complaint response timescales	85% target set for 2016/17 stage 1 (Amber) complaints to	Performance improvement evidenced	30 th September	Timescale met for 2016/17 and performance improvement noted. Revised target for 2017/18 in

	meet 20 working days timescale		2016	place.
Less repetition of complaint themes emerging.	Run an information comparator exercise against existing information	Links to evidencing learning	31 st March 2017	Complaint Team continues to identify learning points, through quarterly reports to Leadership Team Meetings and through capturing and advising on emerging themes. Increased offers to Heads of Service to support work on this, from the Complaints Team.
Reduction in the number of complaints progressing to formal investigation, upheld by the LGO.	Run an information comparator exercise against existing information	Links to evidencing learning	31 st March 2017	The overall number of enquiries going to the LGO remains difficult to influence, but a reduction in the number of LGO complaints upheld with maladministration during 2016/17 was noted. Further input into complaint responses have been undertaken by the ASC Complaints Team to ensure full, considered responses are being provided. Emphasis continues to be placed on encouraging proactive complaint resolution processes.

APPENDIX 4

2017/18 Action Plan

Action identified	Action required	Anticipated Outcome	Timescale
Encouraging better communication with complainants	HoS to ensure contact with complainants at the start of the investigation process to discuss concerns being raised directly.	Gaining an improved understanding around issues of concern being raised and fostering an improved customer relationship.	Review actions quarterly - August 2017
To encourage direct resolution actions	Options to be considered for further addressing complaints when it is apparent that matters remain unresolved for complainant.	To ensure that all options for resolving the complaint have been fully considered for each complaint.	Review actions quarterly with HoS – August 2017
Improvement in complaint response timescales	90% set for 2017/18 stage 1 complaints to meet 20 working days timescale	Performance improvement evidenced.	Review at 31 st March 2018
Less repetition of complaint themes emerging.	Run an information comparator exercise against existing information	Links to evidencing learning	Review at 30 th September 2017 and 31 st March 2018
Reduction in the number of complaints progressing to formal investigation, upheld by the LGO.	Run an information comparator exercise against existing information	Links to evidencing learning	Review at 31 st March 2018