



Notice of a public meeting of

Audit and Governance Committee

To:	Councillors Pavlovic (Chair), Fisher (Vice-Chair), Daubeney, Lomas, Mason, Wann and Webb
Date:	Monday, 30 November 2020
Time:	5.30 pm
Venue:	Remote Meeting

AGENDA

1. **Declarations of Interest**

At this point in the meeting, Members are asked to declare:

- any personal interests not included on the Register of Interests
- any prejudicial interests or
- any disclosable pecuniary interests

which they may have in respect of business on this agenda.

2. **Public Participation**

At this point in the meeting members of the public who have registered to speak can do so. Members of the public may speak on agenda items or on matters within the remit of the committee.

Please note that our registration deadlines have changed to 2 working days before the meeting, in order to facilitate the management of public participation at remote meetings. The deadline for registering at this meeting is at **5.00pm** on **Thursday, 26 November 2020**.

To register to speak please visit www.york.gov.uk/AttendCouncilMeetings to fill in an online registration form. If you have any questions about the registration form or the meeting please contact Democratic Services. Contact details can be found at the foot of the agenda.

Webcasting of Remote Public Meetings

Please note that, subject to available resources, this remote public meeting will be webcast including any registered public speakers who have given their permission. The remote public meeting can be viewed live and on demand at www.york.gov.uk/webcasts.

During coronavirus, we've made some changes to how we're running council meetings. See our coronavirus updates (www.york.gov.uk/COVIDDemocracy) for more information on meetings and decisions.

3. Risk Management of the York Central Project (Pages 1 - 30)

This report presents an overview of risk management arrangements for the council as part of the York Central Partnership (YCP), together with the most recent up to date versions of the risk registers used to track and manage risk.

4. Information Governance and Complaints (Pages 31 - 48)

This report provides an update on the council's performance in respect of information governance, Information Commissioner's Office (ICO) decision notices, publishing of the decision log, and Local Government and Social Care Ombudsman (LGSCO) complaints received since 5 February 2020.

5. Annual Complaints Report (Pages 49 - 108)

This report presents highlights from the Annual Complaints Report March 2019 to April 2020, which is attached in full at Annex 1.

6. Corporate Complaints and Feedback Proposals (Pages 109 - 198)

This report and annexes presents proposals for a revised and refreshed Corporate Complaints and Feedback policy and procedures, as part of the council's review of the governance of complaints and feedback handling.

7. Urgent Business

Any other business which the Chair considers urgent under the Local Government Act 1972.

Democratic Services contact:

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For more information about any of the following please contact the Democracy Officer responsible for servicing this meeting:

- Registering to speak
- Business of the meeting
- Any special arrangements
- Copies of reports

Contact details are set out above.

This information can be provided in your own language.

我們也用您們的語言提供這個信息 (Cantonese)

এই তথ্য আপনার নিজের ভাষায় দেয়া যেতে পারে। (Bengali)

Ta informacja może być dostarczona w twoim własnym języku. (Polish)

Bu bilgiyi kendi dilinizde almanız mümkündür. (Turkish)

یہ معلومات آپ کی اپنی زبان (بولی) میں بھی مہیا کی جا سکتی ہیں۔ (Urdu)

 (01904) 551550

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Audit and Governance Committee**30 November 2020**

Report of the Interim Director of Place

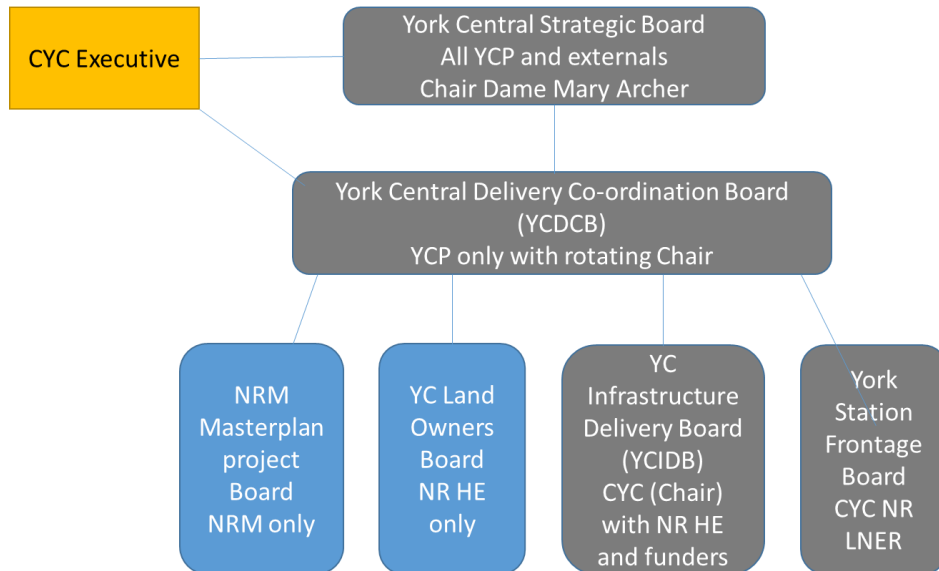
Risk Management of the York Central Project**Summary**

1. The July 23rd Executive decision to release further funding to enable the commencement of early, preparatory infrastructure works for York Central was called in by Councillors Myers, K Taylor and Wells. The decision was considered by the Customer & Corporate Services Scrutiny Management Committee (Calling-in) on 13 August 2020. The committee decided that the original decisions should not be referred back to the Executive for reconsideration.
2. The committee also suggested that they would like the Audit & Governance Committee to examine in depth the Key Corporate Risks (KCRs) relating to capital projects, subsequently the Chair of Audit and Governance has requested that this report be brought forward with any issues arising to be reported to Customer & Corporate Services Scrutiny Management Committee (CCSMC).
3. This report therefore presents an overview of risk management arrangements for the council as part of the York Central Partnership (YCP) and attaches the most recent up to date versions of the risk registers used to track and manage risk.

Background

4. The York Central project is possibly the most complex project ever facilitated by CYC. It is large scale, multi-faceted, strategically essential and requires the effective collaboration of 4 public sector land owners and is funded from multiple inter-related funding sources which requires CYC to exercise a significant amount of influence as the Council does not directly control the project.
5. Delivery requires effective project management of the individual strands of work, to ensure the achievement of the required outputs, but also requires a comprehensive and holistic approach to programme management to deliver the expected outcomes. The programme governance has evolved as the

YCP has matured. Executive have agreed that CYC are content with all governance arrangements proposed by the partnership with the current arrangements agreed by Executive in November 2018 set out in the diagram below.



6. This is predicated on the strategic oversight being undertaken by the York Central Strategic Board, where CYC is represented by the Leader of the Council and the Chief Operating Officer.
7. Programme co-ordination between all partner activities achieved through the York Central Delivery Coordination Board (YCDCB). This board has a rotating chair and monitors the master programme, budget and benefits realisation, making sure that all contributing projects are aligned and that the critical path can be delivered. CYC is represented by the Interim Director of Place. The YCDCB is not a decision making board but acts as a conduit back through each partner's respective decision making processes. All CYC decisions come to the Executive for approval.
8. There are 4 projects feeding in to the YCDCB and CYC leads the York Central Infrastructure Delivery Board (YCIDB) with representatives of YCP and Network Rail (NR) and both Local Economic Partnerships (LEPs) as key funders in attendance. This board is chaired by the Corporate Director of Place.
9. The Station Frontage project is a separate corporate project undertaken in partnership with NR, but is indicated in the YC governance arrangements due to the clear links between, and need to coordinate, work to both sides of the railway station and WYCA grant funding.

10. The two remaining project boards are operated by YCP partners with the NRM leading on the delivery of their masterplan and the majority landowners Network Rail and Homes England leading the Developer Board. The council are not party to the risk registers from these boards.
11. Risk is managed at a programme level via the YCDCB and at a project level via each project. The programme risk log is reviewed at the monthly board meetings and is attached at Annex 1. YCIDB has its own risk register which is also regularly reviewed by the board and is attached at Annex 2. The board activity is supplemented by risk workshops, with project partner representatives, to review changes to risk profiles and identify new or emerging risks. The risk registers attached to this report have now been reviewed by all partners to ensure that an un-redacted version can be considered by A&G in public. The risks were updated but also for a small number of risks the descriptions have been amended so that they still accurately describe the risk but do not breach commercial confidentiality which in itself would create a delivery risk.
12. The Project Assurance function is essential to the success of York Central due to the complexity and inter-related projects with many dependencies. This function has been commissioned externally to ensure that there is robust and independent, programming and assurance services applied to the overall programme and that this is integrated into the Infrastructure Delivery Programme. This service has been commissioned from Avison Young.
13. Progress with the project has been reported to Executive at every stage and Executive and Full Council have made numerous decisions to progress the project.
14. In August 2020 the council were informed that their application for funding to the Ministry for Housing, Communities and Local Government (MHCLG) for £77.1m to contribute to the infrastructure funding package had been agreed but that it would be awarded to the major landowners, NR and Homes England (HE).
15. The previous assumption was that the council would deliver the second infrastructure package (IP2) and this was predicated upon the council being the recipient of the grant funding from York North Yorkshire LEP (YNY LEP) and West Yorkshire Combined Authority (WYCA) and the MHCLG funding and providing borrowing capacity through the York Central Enterprise Zone arrangements. The change to funding allocation has given rise to a need to review the existing delivery strategy, the various funding agreements and the governance framework. This work is still underway across the YCP.

16. The different delivery and funding arrangements create different risk profiles and would potentially reallocate risks from one partner to another. Whilst these arrangements are being developed the council have developed a further interim risk register to identify risks not captured by the YCDCB and YCIDB risk registers. This is presented at Annex 3 in the format used by the council for recording key corporate risks.
17. The shift in funding could reduce the council's financial risk exposure. Where we are not in receipt of the funding and if we do not deliver the infrastructure we do not directly own the risk of cost over-run. However we will have less influence on the delivery programme and therefore the risk that the scheme is not delivered in a timely way is potentially increased. Delay risk will need to be considered in relation to future council decisions regarding the commitment of the £35m Enterprise Zone funding. These decisions are not yet made.
18. As the governance and delivery arrangements are reviewed the risk registers will also be reviewed. This is expected to take place in the next quarter.

Contact Details

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Interim Director of Place

Neil Ferris

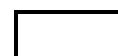
Corporate Director of Economy and Place

Report Approved



Date 19 November
2020

Wards Affected: Holgate, Micklegate



For further information please contact the author of the report

Background Papers:

Annex 1: YCP Delivery Co-ordination Board Risk Register Nov 2020
Annex 2: YCP Infrastructure Delivery Board Risk Register Nov 2020
Annex 3: CYC York Central Key Corporate Risks October 2020

Glossary

CYC - City of York Council
EIF – Economic Infrastructure Fund

EZ – Enterprise Zone
HE – Homes England
HIF - Housing Infrastructure Fund
IP – Infrastructure Package
LCR - Leeds City Region
LEP - Local Economic Partnership
LGF – Local Growth Fund
MHCLG –Ministry of Housing Communities and Local Government
NR – Network Rail
NRM - National Railway Museum
OPA – Outline Planning Application
RMA – Reserved Matters Application
WYCA – West Yorkshire Combined Authority
WYTF – West Yorkshire Transport Fund
YC - York Central
YCP - York Central Partnership
YNY LEP – York, North Yorkshire Local Economic Partnership

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DCB Risk Number	Risk Title	Risk Detail	Implications (Consequence)	Risk/ Owner Champion	YCP Category	CYC Category	Imminence/ status Current/ Future/ Closed	Pre-mitigation * CYC Scoring Matrix				Management Strategy/ Progress	Controls / Management Actions Planned	Action Owner	Action Completion Date (or associated milestone)	Actions On Target	Post-mitigation * CYC Scoring Matrix			
								Likelihood	Impact	Gross Score	Gross Rating						Likelihood	Impact	Net Score	Net Rating
DCB 1	Development Funding	Inability to secure all/ some identified infrastructure funding due to: a) Delivery timescales b) Business case assessment	Scheme does not proceed Delayed and/ or disjointed development of the site. Increased costs attributed wider funding streams. Critical infrastructure becomes undeliverable in envelope of available funding. Reduced site viability Full benefits not realised Extended timescales for site delivery.	NR (SH) HE (MK) CYC (TC)	Cost/ Funding	Financial & Efficiency	Current	3	5	23	VH	On-going	(1) £77.1m announced in Govt March Budget. Will not be HIF but will be funds from MHCLG. (2) Funding conditions to be confirmed.	NR / HE (IG/SH) CYC (TC)	18-Dec-20	Y	3	4	19	H
DCB 2	Development market interest (B)a office led component)	There is a risk the YC does not present a clear and compelling delivery and marketing strategy and fails to attract Development market interest.	Failure to attract development market interest. Full benefits not realised or delayed. Risk to returns on some funding streams (LEP and EZ)	NR (SH) HE (MK) CYC (TC)	Feasibility/ Viability	Financial & Efficiency	Current	3	4	19	H	On-going	(1) Project Team in regular conversations with a number of interested investors and occupiers. (2) Detail of funding terms awaited (3) CYC to identify target sectors in context of wider Economic Strategy (following on from the CYC occupier strategy). (4) Work with LEPs, Make It York and Department for International Trade to identify occupiers. (5) Potential for CYC to underwrite risk to allow more speculative schemes to proceed. (6) Creation of Development Delivery team under Project Director to ensure clear direction re strategy (7) Market facing Delivery Strategy in place which Project Team are delivering under direction of Landowners Board. (8) Central Government Levelling Up Agenda and suggestion of relocations from Whitehall has increased interest in York Central (Summer 2020). (9) Timing - short term Covid-19 impact is expected to have subsided by the time the first phase of commercial occupation is planned. (10) Develop a procurement approach to bring the right level of compulsion on development partners to build. (11) Strategy to secure occupier pre-lets. (12) Consideration of how different components of the scheme could come forward without others in order to avoid the whole scheme being slowed.	NR / HE (IG/SH) CYC (TC)	28-Feb-27	Y	2	4	18	H
DCB 2 Cont'd	DCB 4 Cont'd	DCB 4 Cont'd	DCB 4 Cont'd	NR (SH) HE (MK) CYC (TC)	Feasibility/ Viability	Financial & Efficiency	Current	3	4	19	H	On-going	(13) Monitor and respond to Rail Sector forecasting - as of September 2020 LNER are forecasting the network being back to full capacity by Spring 2022. (14) City Investment Strategy development and targeting of key occupiers. (15) Expansion of the Strategic Partnership to create a business ambassador - national and international. (16) Working with local partners who have an immediate need for space. (17) Assistance from CYC and NRM with occupier strategy.	NR / HE (IG/SH) CYC (TC)	28-Feb-27	Y	2	4	18	H
DCB 3	Economic / Property Cycles	Uncertainty/ downturns in the economic or property cycles lead to lack of progress/reduced pace of delivery of new commercial and residential floorspace / occupier demand. Macroeconomic change and impact on short/ medium/ long term growth.	Delayed delivery of development and benefits. EZ business rates delayed. Investor/ occupier confidence reduced. Residential considered to be resilient in York however Commercial, despite the quality of the scheme, occupiers, investors and developers are more likely to defer decisions on new space until they feel the market is coming back.	NR (SH) HE (MK) CYC (TC) NRM (CC)	Feasibility/ Viability	Financial & Efficiency	Current	4	4	20	H	On-going	(1) Ongoing research and monitoring of market sentiment. (2) Maintain relationships with market specialists/contacts to maintain insight at a local/national/international level. (3) Secure focussed consultancy support to advise on strategy. (4) Consider that the Masterplan and OPA Parameter plans allow for plot development that is able to respond to the demands of the market over the lifetime of the development. There is also ability to flex the relative proportions of commercial and residential plots and their scale.	HE (IG) NR (SH) HE (MK) CYC (TC) NRM (CC)	18-Dec-35	Y	3	4	19	H
DCB 4	ORR consent to new Level Crossings over NRM Rail Link	Failure to establish agreed Method of Work for NRM rail crossing to satisfaction of ORR.	Loss of certainty regarding key land plot availability. Comprehensive development of the site disrupted.	NRM (CC)	Feasibility/ Viability	Stakeholder	Current	3	3	14	M	On-going	(1) NRM developing MoW to be discussed with ORR in November - complete. (2) NRM have a risk assessment from TSP and are continuing dialogue with ORR. (3) ORR application submission target date prior to 31st January 2020. - Complete. (4) ORR has given approval in principle to pedestrian & cycle crossings: a further application is required for the road level crossing. (5) Ciara Wells at NRM leading work with Systra to submit detailed application for road level crossing in Autumn 2020. (6) Ensure NRM liaison with CYC Highways. (7) Respond to ORR comments on design solution.	NRM (CC)	28-Jan-21	Y	2	3	13	M
DCB 5	License Condition 17 Consent (42 Acres)	Replacement rail route into NRM South Yard is not achievable as cannot secure ORR consent to NRM siding over highway crossings.	NR land cannot all be included in the development. Comprehensive development of the site disrupted.	NR (SH)	Feasibility/ Viability	Stakeholder	Current	2	3	13	M	On-going	(1) LC17 condition to be satisfied re satisfactory rail access to NRM South Yard. (2) NRM developing MoW to be discussed with ORR in November - complete. (3) Highway Authority will require a Highway Management Plan or equivalent. (4) NRM have a risk assessment from TSP and are continuing dialogue with ORR - Timescales for sign off are to be (5) Risk to be resolved once NRM have submitted [level crossing] applications to ORR. (6) ORR has given approval in principle to pedestrian & cycle crossings: a further application is required for the road level crossing. (7) NR to consider contingency plan for YC development if Licence 17 condition not met.	NRM (TD) NR (RS)	28-Jan-21	Y	2	3	13	M

DCB Risk Number	Risk Title	Risk Detail	Implications (Consequence)	Risk/ Owner Champion	YCP Category	CYC Category	Imminence/ status Current/ Future/ Closed	Pre-mitigation * CYC Scoring Matrix				Management Strategy/ Progress	Controls / Management Actions Planned	Action Owner	Action Completion Date (or associated milestone)	Actions On Target	Post-mitigation * CYC Scoring Matrix			
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DCB 6	Vacant Possession programme	Failure to secure vacant possession of the necessary land to deliver the York Central Project .	Vacant possession plans not aligning with phasing plan for development. Delivery sequencing/ phasing having to change.	NR (SH) HE (MK)	Programme	Stakeholder	Current	3	3	14	M	On-going	(1) NR and HE managing property assets to ensure no effect on programme.	NR / HE (IG/SH/RS)	Ongoing	Y	2	3	13	M
DCB 7	Vacant Possession – NRM Land Approvals	Delay or difficulty in taking the agreed IP1/IP2 design (including NRM fundamental/functional requirements and use of NRM land, whether for the road, rights of way, permissive paths or disposal for development) through Science Museum Group Board of Trustees for approval, DCMS approval, and (almost certainly) HM Treasury approval.	Delay to vacant possession for the start of the infrastructure works. (approval process is estimated as 3-4 months from having the 'agreed design' in place).	NRM (CC)	Programme	Stakeholder	Current	2	4	18	H	On-going	(1) Timely conclusion of the design pack basis for the commencement of the PSC (ECI) process to arrive at a pack of information on which NRM can base their approvals processes - Complete. (2) NRM interim review of ECI opportunities presented and their potential impact on NRM. (3) NRM attendance at IDB meetings and coordination of design elements as necessary in order to support NRM review/sign off process. (4) Approvals process to be completed between 1st March and 30th June 2020. (5) CYC decision July 2020 to only seek IP1 consents at this stage so limited to Concrete Works car park licence for NRM.	CYC (MH) NRM (TD/CC)	09-Nov-20	Y	1	3	6	L
DCB 8	Poor ongoing community and stakeholder engagement (YCP / Master Programme)	Perceived lack of transparency in York Central Delivery strategy triggers scheme opposition.	Full benefits not realised. Delay to delivery phase and potential loss of funding.	NR (SH) HE (MK) CYC (TC) NRM (CC)	Stakeholder	Stakeholder	Current	3	4	19	H	On-going	(1) Project Team are engaged with local community groups and Members. (2) Work underway to identify potential community projects e.g. Community led Housing, archaeological dig, engagement with young people. (3) Agreement of coordinated comms strategy with Partners and supporting resources.	NR / HE (IG/SH)	18-Dec-20	Y	2	4	18	H
DCB 9	Members engagement	Lack of engagement and progress updates leads to loss of Members support.	Members do not support proposals put forward under the RMA. Delay in planning application submission, prolongation of determination and potential failure to gain planning permission. Heightened risk of challenge during JR period. Full benefits not realised. Delay to delivery phase and potential loss of funding.	NR (SH) HE (MK) CYC (TC) NRM (CC)	Stakeholder	Stakeholder	Current	2	4	18	H	On-going	(1) Member briefings to be established in the approach to the next decision point around delivery of infrastructure (RMA submission and commitment of spend). (2) Benefit of Leader and Deputy Leader of CYC seat on Strategic Delivery Board to be considered as part of this process. (3) Project Director to maintain dialogue with Members	NR / HE (IG/SH) CYC (TC/ GW/ DW) NRM (CC)	18-Dec-20	Y	2	3	13	M
DCB 10	Risk Management	Inadequate risk register and management activity and poor awareness of risks across the wider project team. One coordinated risk register, relevant and up-to-date version not available.	Poor risk management will impact project momentum, prevent timely management of risk and identification/ implementation mitigation action. Project cost plan and contingency allowances will be inadequate leading to cost increase.	NR (SH) HE (MK)	Management	Governance & Management	Current	2	3	13	M	On-going	(1) Overarching Risk Register for DCB to be managed by York Central Project Team.	NR / HE (IG/SH)	Ongoing	Y	2	3	13	M
DCB 11	Operation and Management of Square and open spaces (public realm)	Inability to confirm long term ownership/ management responsibility for the square.	Potential impact on masterplan workstream and planning process and the long term management of these spaces.	NR (SH) HE (MK) CYC (TC) NRM (CC)	Feasibility/ Viability	Governance & Management	Current	3	2	9	L	On-going	(1) Consideration of impact on the delivery strategy of the project and future RMA submissions. (2) Dialogue between IG/SH (YCP) and LA/CC (NRM) on going re Museum Square (3) Project Team developing strategy for the management, maintenance and funding of open spaces throughout development	NR / HE (IG/SH) NRM (CC)	05-Jul-21	Y	3	2	9	L
DCB 12	Design quality - Public Realm	Risk that design quality benchmarks required by City Planners and controlled by the OPA and Design Guide are not met by development through future RMAs.	Potential to delay planning application, prolonging determination periods and threaten securing planning approval(s)	NR (SH) HE (MK)	Feasibility/ Viability	Financial & Efficiency	Current	3	4	19	H	On-going	(1) Design Guide agreed as part of the OPA. (2) Each RMA submitted will be required to be accompanied with a Design Guide Compliance Statement. (3) Linkage to and consideration of budget is to be maintained throughout - nothing contained in any compliance statement is to be unaffordable. (4) Design Review Panel to be appointed. (5) To be considered as part of all relevant IP packages and development plots.	NR / HE (IG/SH)	Ongoing	Y	2	2	8	L
DCB 13	Design quality - Buildings	Risk that design quality benchmarks required by City Planners and controlled by the OPA and Design Guide are not met by development through future RMAs.	Potential to delay planning application, prolonging determination period and threaten securing planning approval.	NR (SH) HE (MK)	Feasibility/ Viability	Financial & Efficiency	Current	3	4	19	H	On-going	(1) Design Guide agreed as part of the OPA. (2) Each RMA submitted will be required to be accompanied with a Design Guide Compliance Statement. (3) Linkage to and consideration of budget is to be maintained throughout - nothing contained in any compliance statement is to be unaffordable. (4) Design Review Panel to be appointed. (5) To be considered as part of all development plots.	NR / HE (IG/SH)	Ongoing	Y	2	2	8	L
DCB 14	Site utilities	Risk that the information available around utilities across the site is not sufficiently coordinated through the design process and future strategy for plot development.	Delay to programme, submission dates and funding milestones.	NR (SH) HE (MK) CYC (TC) NRM (CC)	Site	Stakeholder	Current	1	4	12	M	On-going	(1) Utilities workshops used as forum for confirming proposals for existing and proposed utilities. (2) Any outstanding survey work and actions with utility companies to be confirmed with actions to be implemented accordingly.	NR / HE (IG/SH)	30-Nov-20	Y	1	4	12	M
DCB 15	Sustainability Approach inconsistencies	Risk that the sustainability aspirations of the scheme driven by CYC are not met - exemplar sustainability aspirations not sufficient	Further to the submission of the OPA which provides control by through the Design Guide through future RMAs, potential changes due to revised thinking from the new administration and increased/revived scrutiny. Full Council Member identifying needs/demands which are not met. Prolongation of period leading up to submission of RMA, prolonged determination period and threat to securing RMA planning approval.	NR (SH) HE (MK) CYC (TC) NRM (CC)	Feasibility/ Viability	Financial & Efficiency	Current	1	5	17	H	On-going	(1) Continue regular dialogue of CYC Planners to understand requirements. (2) Ensure Project Board have visibility of progress and emerging issues. (3) Outline Planning and Design Guide define sustainability measures. Further measures above considerable commitments in planning consent and s106 may be implemented if financially viable or funded by grant.	NR / HE (IG/SH)	Ongoing	Y	3	3	14	M

DCB Risk Number	Risk Title	Risk Detail	Implications (Consequence)	Risk/ Owner Champion	YCP Category	CYC Category	Imminence/ status Current/ Future/ Closed	Pre-mitigation * CYC Scoring Matrix				Management Strategy/ Progress	Controls / Management Actions Planned	Action Owner	Action Completion Date (or associated milestone)	Actions On Target	Post-mitigation * CYC Scoring Matrix			
								Likelihood	Impact	Gross Score	Gross Rating						Likelihood	Impact	Net Score	Net Rating
DCB 16	Dependencies on Station and Western Access / Network Rail approval for Station Western Entrance	Dependencies on ownership of station and western access. Rail industry consent for access to west of station. Car park and works to cinder lane area. / Risk that station change approval is not secured from the rail industry due to NR not providing resources to approve designs in a timely fashion.	Programme delay should consent not be provided prior to construction works Lack of progress on site infrastructure Failure in place-making	NR (SH)	Planning/ Consents	Legal & Regulatory	Current	2	3	13	M	On-going	(1) Early design work on station dependent on securing design work funding. (2) Station Change discussions with Station Facility Owner and Beneficiaries to commence once sufficient design detail available. (3) Delivery is within control of two parties leading on delivery of the development so, other than funding, planning etc risk is minimal (4) Impact of no entrance will be catastrophic for new Business District as this is the entrance to this area that will attract occupiers. (5) Network Rail engaged to determine information required for securing approval dependent on securing design work funding. (6) Detailed design of proposed upgrades to tunnel to be undertaken in consultation with NR and rail industry stakeholders to commence once sufficient design detail available. (7) Early feasibility work on layout completed by A&M. (8) Standard Network Rail approval process to be followed (9) Issues to be escalated through YCP and NR governance structures as required.	NR (RS)	01-Jul-23	Y	3	3	14	M
DCB 17	Diversion of Cinder Lane.	Public right of way on Cinder Lane to be diverted to new alignment through site	Failure to develop out plots in agreed alignment.	NR (SH) HE (MK)	Planning/ Consents	Legal & Regulatory	Current	3	3	14	M	On-going	(1) Ensure diversion forms an element of Outline Planning Application - Complete. (2) Resolution to Grant OPA secure subject to s106 agreement and conditions - Alignment of road secured under the parameter plans. (3) Application to divert the PROW to be made. (4) To be concluded before start on site with Phase 1 commercial	NR / HE (IG/SH)	01-Oct-23	Y	3	3	14	M
DCB 18	HS2/TFN Challenge (Bridge Footprint/Track Alignment)	Risk of challenge from HS2 or TFN in connection with proposed new bridge alignment and future access plans to train stabling (York Yard North)	Prolongation of determination of planning applications.	NR (SH)	Stakeholder	Stakeholder	Current	1	5	17	H	On-going	(1) Agreed strategy in place regarding capacity and land for platforms. (2) Risk (likelihood) is minimal. (3) Bridge design includes passive provision for 4 lines	NR (RS)	Ongoing	Y	1	5	17	H
DCB 19	ORR General Consent for bridge spans (ECML, Severus Bridge and Wilton Rise Bridge)	Risk that Regulatory Consent for construction of new bridge spans over railway not obtained	Programme delay should consent not be provided; knock-on impact on completion of Bridge Agreement between Network Rail and CYC.	NR (SH)	Planning/ Consents	Legal & Regulatory	Current	1	3	6	L	On-going	(1) Bridge easements are a General Consent under Licence Condition 17. Simple process once know no impediment to proposed designs being implemented so determining factor is design of bridge and approvals. (2) Bridge design (detailed) to be agreed before LC17 Consent is applied for. (3) NR to seek advice on timing of application for ORR consent.	NR (RS)	28-Jan-21	Y	1	3	6	L
DCB 20	EA, Highway Authority & Network Rail approval for Holgate Beck re-culverting	Risk that consent for re-culverting of Holgate Beck becomes protracted	Programme delay should consent not be provided prior to construction works	NR (SH) HE (MK) CYC (TC) NRM (CC)	Planning/ Consents	Legal & Regulatory	Current	3	4	19	H	On-going	(1) Engage with Network Rails engineers at design stage and seek necessary Network Rail approvals (2) Seek necessary Environment Agency approvals (3) Transfer of ownership of culvert to CYC to be explored	CYC (MH)	28-Jan-21	Y	2	3	13	M
DCB 21	Network Rail approval for works to Leeman Road Tunnel	Risk that consent for works to the Leeman Road Tunnel, as a Network Rail bridge asset, is not obtained	Programme delay should consent not be provided prior to construction works	NR (SH)	Planning/ Consents	Legal & Regulatory	Current	2	2	8	L	On-going	(1) Standard Network Rail approval process to be followed (2) Engage with Network Rails engineers at design stage	NR (RS)	31-Dec-21	Y	2	2	8	L
DCB 22	Car parking provision (interim)	Risk that sufficient car parking is not available for railway station and NRM usage	Revenue risk to both Network Rail and NRM due to decreased patronage and visitor numbers; potential breach of station franchise agreement	NR (SH) HE (MK) NRM (CC)	Site	Financial & Efficiency	Current	3	2	9	L	On-going	(1) Temporary car parking proposals to be developed and temporary planning consent secured through detailed/RMA planning application(s). (2) Temporary car parking arrangements and phasing to be agreed with HE/NR with Contractor once programme known.	NR / HE (IG/SH/RS) NRM (CC)	26-Mar-21	Y	2	2	8	L
DCB 29	Stopping up of Leeman Road	Risk that the Stopping Order is not approved by Dec 2021 to enable delivery of IP2+ alternative provision and availability of Leeman Road for Central Hall start on site of November 2022	The Stopping Up Order is integral to the delivery of the York Central scheme. If the Stopping Up order is not made, the York Central scheme would not be able to be developed in accordance with the current planning permission.	NR (SH) HE (MK) NRM (CC)	Planning/ Consents	Legal & Regulatory	Current	5	4	#N/A	#N/A	On-going	(1) Appointment of specialist consultant to provide/prepare a clear strategy and to manage the process to a successful conclusion. SCP appointed. (2) Outline Planning Application to consider principle of Leeman Road stopping up. Outline consent granted 24th Dec 2019. (3) Early engagement with DfT on the York Central scheme and to understand DfT requirements for any application. Action completed. (4) Delivery of alternative highway infrastructure de-coupled from new ECML bridge programme to give best chance of delivery of highway by Oct 2022. (5) SUO application made in Feb 2020 and DfT consultation held in June-July 2020. 420 objections received, subsequently a number of objections have been withdrawn. (6) Continue engaging with objectors to understand and address concerns where possible. (7) SUO legal advisers being appointed by NRM with duty of care to HE and NWR. (8) Due to remaining objections DfT to progress application an Inquiry into SUO application.	NR / HE (IG/SH/RS) NRM (TD)	31-Dec-21	Y	3	4	#N/A	H
DCB 24	GSMR mast relocation	Risk of not securing vacant possession of land within alignment of new ECML bridge	Effect on programme for ECML road bridge construction. (Infrastructure works may be delayed however IDB would not be responsible)	NR (SH)	Programme	Stakeholder	Current	3	3	14	M	On-going	(1) New mast site to be established - identified - final report due to be circulated. - Completed (2) Programme to be prepared for relocation once mast site established. - Programmed for Dec 20 for Option 1 site. (3) Option 2 site under consideration as alternative - Programmed for July 21 (4) Ground investigations required to confirm relocation of mast. (5) Effect on programme for ground improvement works and ease of bridge construction to be agreed.	NR (RS)	28-Feb-21	Y	2	2	8	L

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DCB 25	Brexit Risk	Risk that increased in tariffs and supply chain pressure/limitation affects the cost and supply of materials for the project.	Increased costs and availability/programme challenges/timescales	NR (SH) HE (MK) CYC (TC)	Site	Financial & Efficiency	Current	3	3	14	M	On-going	(1) Consideration of bidding contractors views on acceptance or sharing of Brexit related tariff and supply chain risks in the contract terms - completed as part of Stage 1 tender process. (2) Adapt contract clauses to suit reasonable risk apportionment - Completed as part of Stage 2 tender process - acceptance of tariff increases as a client risk on an open book basis. (3) Construction Cost Manager to continually monitor tender market to track any materials / equipment which may be subject to increased tariffs or lead in delays.	CYC (CM)	01-May-23	Y	3	2	9	L
DCB 26	Availability of critical personnel	Risk that critical personnel are unavailable/unable to support the project (including Michael Howard, Ian Gray, Stephanie Hiscott, Mike Stancliffe and Will Nightingale.)	Loss of project momentum. Short to medium terms milestone are not achieved. Programme delay. Abortive and re-engagement costs.	NR (SH) HE (MK) CYC (TC) NRM (CC)	Management	Governance & Management	Current	2	3	13	M	On-going	(1) Continuity plan from each organisation if a critical person was temporarily or longer term unavailable to the Project.	NR / HE (IG/SH/RS) CYC (DW/MH) NRM (CC)	Ongoing	Y	1	2	2	VL
DCB 27	Covid-19 Risk	Risk of disruption to the project due to restricted working patterns, availability of services and resources. Risk of change to masterplan/parameter plans due to changing ways of working post Covid.	Loss of project momentum due to restrictions on working patterns pre and post contract, both on and off site. Short to medium term milestone are not achieved. Programme delay. Abortive and re-engagement costs.	NR (SH) HE (MK) CYC (TC) NRM (CC)	Management	Governance & Management	Current	5	3	16	H	On-going	(1) The Masterplan and OPA Parameter plans allow for plot development that is able to respond to the demands of the market over the lifetime of the development. There is also ability to flex the relative proportions of commercial and residential plots and their scale. (2) Current market sentiment is that there will continue to be demand for commercial space in the future, but its scale (per occupier) and design may be different. (3) The nature and extent of the infrastructure has been designed to support this flexibility and therefore does not need to change. (4) Monitor and respond to latest Government guidance and maintain communication throughout governance structures in order to make the best progress possible. (5) IP1 & IP2: Covid-19 related working arrangements will form part of the risk assessments, method statements and overall site management arrangements prepared by the contractor, and for CYC/Design Team/Principal Designer (IP1), and Landowners advisor team (IP2) to review and sign off prior to commencement.	HE (IG/SH) NR (RS) CYC (DW/MH) NRM (CC)	01-Dec-21	Y	4	3	15	M
DCB 28	Off plot Infrastructure Costs / Scheme Viability	Phase 1 off plot infrastructure costs are unaffordable on the basis of the £155m budget.	Phase 1 infrastructure costs unaffordable following final pricing and pressuring £155m budget. Construction cost inflation, leading to failure of value engineering, and failure to fund all elements of Infrastructure plan. Development (or elements thereof) does not come forward.	NR (SH) HE (MK) CYC (TC)	Feasibility/ Viability	Financial & Efficiency	Current	3	4	19	H	On-going	(1) Stage 4 design to be developed in accordance with funding budget. (2) DCB monitoring of IDB reporting of IP1 & IP2 packages beyond the outcomes and decision making following the ECI process. (3) Monthly review of cost certainty, scope and contingency levels T&T Cost Plan) (4) Pursuit and conclusion of VE/Cost reduction opportunities identified and decided up on following the ECI process and potential savings on previous cost estimates. (5) Careful consideration of any scope/cost changes (change control) which may counter potential savings/cost reduction elements identified. (6) Scheme shown at this stage to be viable by actions of parties in progressing to Phase 1 infrastructure and progress by Project Delivery team. (7) DCB to consider position: If Phase 1 infrastructure costs become unaffordable then DCB will have to review if feasible to progress.	CYC (MH)	Ongoing	Y	3	3	14	M
DCB 29	YCP DCB Project resource and management & Project Management	Inadequate time commitment / Resources leading to poor project management/ project performance. Insufficient resource from each organisation (NR / HE) to provide sufficient support/engagement. Poor management of overall project delivery. Poor Technical Team performance (in future teams) due to lack of strategic leadership and management	Poor/ inefficient/ inconsistent 'Client' performance. Poor management of the Project. Lack of direction/ instruction to Technical Team leading to cost increases and project delay. Loss of Project Board confidence. Project fails Failure to hit financial spend targets Failure to deliver scheme outputs Reputational risk Potential for claw back of grant award for non delivery Cost overruns	NR (SH) HE (MK)	Management	Governance & Management	Current	2	4	18	H	On-going	(1) Homes England, Network Rail (and NRM) have increased their resource for the project. Homes England Project Director and Senior Development Manager appointed and in post. (2) Homes England and Network Rail to resource respective future workstreams appropriately. (3) Governance, roles and responsibilities to be reviewed and 're-established'. (4) Project Team supported by external consultant team to ensure they have sufficient capacity (5) Project Team performance monitored by Landowners Board to ensure that objectives are on target and delivered (6) PMO to be established for Project Team to include Programme Management and Risk Management with risk register regularly updated. (7) Technical Team will work closely with York Central Project Team (8) Project Team will be selected for their ability to deliver complex development projects (9) KPIs to be set (10) Consultant team managed and monitored by Project Team and Landowner Board.	NR / HE (IG/SH/RS)	Ongoing	Y	1	4	12	M
DCB 30	FOI	There is risk of a FOI request and subsequent challenge.	Time commitment required to respond to FOI requests.	NR (SH) HE (MK) CYC (TC)	Stakeholder	Stakeholder	Current	3	3	14	M	On-going	(1) Respond to FOIs within statutory time period and in consultation with relevant Parties.	NR / HE (IG/SH/RS) DW (CYC)	Ongoing	Y	3	3	14	M

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DCB 31	Project Governance & Leadership	Risk of confusion across the team in connection with the decision making process, it's effectiveness and validity. Project leadership, roles & responsibilities are not widely understood, particularly during the period of transition to delivery phase.	Poor understanding of the project across the team, potential for different assumptions and conclusions, ultimately hindering project progress and efficient delivery. Risk of multiple, conflicting priorities remaining unresolved with no clear direction/ decision making on which to move forward. Risk of decisions being made in principle at workstream level to then be over-ruled some time later following review at Board level	NR (SH) HE (MK)	Stakeholder	Stakeholder	Current	3	3	14	M	On-going	(1) Clear governance structures to be in place for the York Central Project at all levels (Strategic Board, Delivery Coordination Board and Core Working Group). (2) Terms of Reference to be made available (3) Clear roles and responsibilities in place.	NR / HE (IG/SH)	Ongoing	Y	3	3	14	M
DCB 32	Strategic Leadership - DCB and IDB	Lack of engagement/ positive and constructive interaction between technical team (s) and YCP Board.	Technical team have less exposure to Board and vice versa. Technical information shared with Board by Project Team.	NR (SH) HE (MK)	Management	Governance & Management	Current	3	3	14	M	On-going	(1) Project Team to be the interface between technical consultants and Board. (2) Technical Team to attend Board meetings as required.	NR / HE (IG/SH)	Ongoing	Y	2	2	8	L
DCB 33	Project Viability	Design Guide requirements, significant Section 106 contributions, and market conditions results in compromised development viability	Lack of market interest Failure to bring scheme forward within the necessary timescales Reputational damage Stalled development	NR (SH) HE (MK)	Management	Governance & Management	Current	3	5	23	VH	On-going	(1) Monitor financial "asks" on the project (2) Keep apprised of property market costs and values (3) Engage developer partners/investors at an early stage	NR / HE (IG/SH/RS)	Ongoing	Y	3	4	19	H
DCB 34	Infrastructure delay/non delivery	Failure to deliver strategic infrastructure by target dates	Potential for clawback of grant, delay in delivering development plots	NR (SH) HE (MK)	Site	Financial & Efficiency	Current	3	5	23	VH	On-going	(1) Regular monitoring/reporting (2) Dealing promptly with issues arising from site (3) Working in partnership with stakeholders and project partners (4) Effective management of Contractors	NR / HE (IG/SH/RS)	31-Mar-24	Y	2	5	22	VH
DCB 35	Ground conditions/archaeology Construction/delivery - Site wide (IP2)	Unforeseen issues with ground conditions/archaeological finds delay project delivery	Delay to development Possible requirement for archaeological dig which delays programme and threatens funding milestones Non delivery Increased costs Loss of market interest	NR (SH) HE (MK)	Site	Governance & Management	Current	4	5	24	VH	On-going	(1) Early site investigations (2) comprehensive review of investigations undertaken to date (3) Seek appropriate technical advice (4) Monitor during delivery phase and engage directly with CYC and Historic England as necessary. (5) Develop and implement strategy to mitigate archaeology risk in coordination with the conditions of the OPA/RMA. (6) Ensure CYC Archaeology representative is continually engaged with the delivery team.	NR / HE (IG/SH/RS)	ongoing	Y	4	4	20	H
DCB 36	Phase 1 commercial and residential	Delay in bringing forward phase 1 commercial and residential	Lack of momentum, reputational risk	NR (SH) HE (MK)	Management	Governance & Management	Current	3	4	19	H	On-going	(1) Soft market testing (2) Early procurement of developer/investor partner (3) Sharing risk on due diligence (4) Engagement with potential anchor tenants and occupiers	NR / HE (IG/SH/RS)	31-Mar-24	Y	3	3	14	M
DCB 37	Planning consents	Risk of delays to determinations/judicial reviews impact on delivery	Impact on development delivery Increased costs Increased uncertainty	NR (SH) HE (MK)	Planning/ Consents	Legal and Regulatory	Current	4	4	20	H	On-going	(1) Engage planning consultants (2) Preapplication discussions with key stakeholders (3) Regular dialogue with case officer and Head of Planning	NR / HE (IG/SH/RS)	ongoing	Y	3	3	14	M
DCB 38	Infrastructure contractor(s) failure	Contractor insolvency	Increased costs to deliver works Need to appoint new contractor (also results in increased costs and delays) Potential issues with warranties etc	NR (SH) HE (MK)	Management	External	Current	2	4	18	H	On-going	(1) Rigorous due diligence e.g. D&B Assessment (2) Regular communication with contractor management team	NR / HE (IG/SH/RS)	ongoing	Y	2	4	18	H

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IDB 1	IP2 feasibility (Millennium Green Land)	Not completing the works within Millennium Green as agreed with MGT prior to IP2 works commencing.	Potential clash of workforce on site at same time Loss of confidence with MGT and subsequently the community	CYC (JG)	Stakeholder	Stakeholder	Current	2	2	8	L	On-going	(1) Seek direction from the Landowner in connection with the necessary works bring planned and undertaken in coordination with the latest master programme and project start on site date for IP2, including the IP2 related MG works (2) Consideration of incorporation of works in the IP1 contract by agreement of the Landowner. (3) Ongoing communication of activity and progress and notification of issues/delays to the project team, and escalated where necessary to IDB and Landowner for direction. (4) Ongoing communication with MGT's in coordination with the Landowner. (5) Ongoing consideration of the MG conditional agreement and associated timescales.	CYC (MH/AD)	30-Apr-21	Y	2	2	8	L
IDB 2	IP2 Technical feasibility	The proposed infrastructure to access the site is deemed too technically complex and costly.	The preferred access solution cannot be delivered. Unmanageable funding gap. Project fails and vision not realised. Planning and funding to deliver are triggers to serve notice on MG trustees which must be in place in accordance with MG Conditional Agreement.	CYC (JG)	Feasibility/ Viability	Financial & Efficiency	Current	2	4	18	H	On-going	(1) Ensure working with preferred contractor to work to bring the scheme in within the required budget. (design stage 4) (2) Engage with technical representatives to ensure bridge fabrication and installation methods mitigate rail disruption risk as far as possible with minimum possessions. (3) Reassurance that ground conditions and method of construction for the bridge are appropriate. (4) Review of design and buildability advice by Sisk during the ECI period and reflecting it within the design development process. (5) Complete design and procurement processes ready for review and validation by Landowner appointed advisor team.	CYC (MH/AD) Arup (RB)	29-Jan-21	Y	1	4	12	M
IDB 3	EZ - Infrastructure funding and appetite	Inability to secure required level of infrastructure funding - Level of risk and/ or return not acceptable for planned investment. Delay to delivery programme diminishes EZ revenues.	Delayed and/ or disjointed development of the site leading to reduced funding availability and risk that scheme does not proceed. Increased costs attributed to wider funding streams. Critical infrastructure becomes undeliverable in envelope of available funding. Reduced site viability if required for critical infrastructure. Full benefits not realised. Extended timescales for site delivery.	CYC (JG)	Cost/ Funding	Financial & Efficiency	Current	3	5	23	VH	On-going	(1) Principle of EZ borrowing has been established (December 2018). (2) Borrowing remains part of budget which is dependant on MHCLG funding (previously HIF) which is therefore to be monitored. (3) Resolution to borrow is secure subject to resolution of MHCLG funding (previously HIF) conditions. (4) In the event of challenges around MHCLG funding conditions explore opportunities to retain borrowing facility. (5) CYC to manage centrally and keep Boards/Landowners advised. (6) Note: Works funded from sources CYC is accountable for will only proceed if the scheme progresses on the instruction of the Landowners.	CYC (DW / BM)	29-Jan-21	Y	3	4	19	H
IDB 4	WYCA & WY+TF- Infrastructure funding and appetite	Inability to secure identified level of infrastructure funding due to business case assessment.	Scheme may not proceed. Delayed and/ or disjointed development of the site. Increased costs attributed to wider funding streams. Reduced site viability. Full benefits not realised. Extended timescales for site delivery. All identified transport infrastructure and benefits may not be realised	CYC (JG)	Cost/ Funding	Financial & Efficiency	Current	3	5	23	VH	On-going	(1) Resolution to make funding available is secure subject to MHCLG [HIF] funding conditions. (2) Modelling methodology proposed and agreed with WYCA. (3) Agreement with WYCA to separate front of station elements from York Central elements given differing programmes. (4) CYC to coordinate with Landowners in engagement with WYCA. (5) Note: Works funded from sources CYC is accountable for will only proceed if the scheme progresses on the instruction of the Landowners.	CYC (DW / BM)	29-Jan-21	Y	3	4	19	H
IDB 5	Poor ongoing community/stakeholder engagement. (Delivery of IP1)	Perceived lack of transparency triggers scheme opposition.	Prolongation of determination and potential failure to gain planning permission (IP2 RMA). Heightened risk of challenge during JR period (IP2 RMA). Full benefits not realised. Delay to delivery phase and potential loss of funding.	CYC (JG)	Stakeholder	Stakeholder	Current	2	3	13	M	On-going	(1) RMA comms/engagement strategy to be developed by mutual agreement between Partners. (2) RMA engagement to meet principles/ charter as set out in YCP Engagement Framework. (3) Coordination with Landowner to ensure coordinated messaging. (4) Coordinated comms strategy to be progressed and deployed around IP1.	CYC (GW/DW) HE (IG)	18-Dec-20	Y	2	2	8	L
IDB 6	Historic England and Civic Trust Engagement	Lack of support for scheme from Historic England and Civic Trust in response to the proposals under the Infrastructure RMA.	Historic England do not support the scheme and it is not possible to agree satisfactory solution to reach a decision in connection with the RMA.	CYC (JG)	Stakeholder	Stakeholder	Current	1	3	6	L	On-going	(1) As joint applicants with the Landowners, engage and continue to engage with Historic England and Civic Trust in order to develop mutually acceptable RMA to enable permission to be granted. (2) RMA, by definition, must comply with the OPA, and is limited to fine detail. (3) Consider and respond to objections in consultation with LPA.	AY (CJ/DS)	12-Nov-20	Y	1	3	6	L
IDB 7	Project Management (Infrastructure Delivery (IP1))	Inadequate IP1 delivery programme development, team engagement opportunities and ongoing management.	Poor programme visibility across the project team. Lack of coordinated programme and links/reporting/accountability to Landowners. Team not aware of key workstream and client milestone dates. Poor visibility of YC approval process/ key dates. Risk of missed deadlines, poor project team performance, programme prolongation and additional fee claims.	CYC (NF)	Programme	Stakeholder	Current	2	4	18	H	On-going	(1) Structure and working practices applied and maintained across Infrastructure Delivery Board level. To be maintained for IP1 delivery and completion of procurement processes for IP2. (2) Moving to delivery of IP2 as roles and responsibilities move to the Landowners - IDB structure and working practices to be maintained through transition period to provide consistency of approach. (3) CYC to ensure that the appropriate resources and structures are in place in order to support delivery of IP1 and IP2 transition.	CYC (MH/AD) AY (BC/WN)	09-Nov-20	Y	1	3	6	L

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IDB 8	Main Contractor Insolvency	Risk that once appointed the contractor goes into administration	The tender process requires re-starting/negotiating	CYC (MH)	Stakeholder	Financial & Efficiency	Current	1	4	12	M	On-going	(1) Robust financial checks to be carried out on tendering/successful Infrastructure contractor. Performance Bond and Parent Company Guarantee to be in place before start on site (IP1). (2) Coordination with Landowners re review and validation of contract terms as part of transition process.	CYC (MH/AD) CYC (CM)	09-Nov-20	Y	1	4	12	M
IDB 9	Exceptionally adverse weather delays programme	Risk that once on site works are delayed by exceptionally adverse weather	Delay to programme and costs incurred by client for main contractor delay	CYC (MH)	Site	Financial & Efficiency	Current	2	2	8	L	On-going	(1) Robust drafting of contract terms and conditions to place risk of weather with Contractor - complete in Stage 1 tender documents remains relevant to subsequent price refinement processes and the final contract documents.	CYC (MH/AD) CYC (CM)	09-Nov-20	Y	2	2	8	L
IDB 10	Industrial action	Risk that industrial action is called by a union whilst works on site	Delay to programme and costs incurred by client for main contractor delay	CYC (MH)	Site	Financial & Efficiency	Current	1	2	2	VL	On-going	(1) Robust drafting of contract terms and conditions particularly around industrial action risks and passing the risk to the main contractor - complete in Stage 1 tender documents and remains relevant to subsequent price refinement processes and the final contract documents.	CYC (MH/AD) CYC (CM)	09-Nov-20	Y	1	2	2	VL
IDB 11	Resource/labour not available	Risk that insufficient resources are available for the contractor to deliver the works	Delay to programme and funding spend profile	CYC (MH)	Site	Financial & Efficiency	Current	2	3	13	M	On-going	(1) Robust drafting of contract terms and conditions particularly around resourcing and planning - complete in Stage 1 tender documents and remains relevant to subsequent price refinement processes and the final contract documents.	CYC (MH/AD) Arup (RB) CYC (CM)	09-Nov-20	Y	1	3	6	L
IDB 12	Failure of tender/price refinement process	Risk that selected contractor fails to perform with the given procurement stage triggering the need to recast the project and re-procure.	Delay to programme and funding spend profile	CYC (MH)	Site	Financial & Efficiency	Current	2	3	13	M	On-going	(1) Ensure contractors are engaged with and aware of timescales of the tender process. Early contractor engagement/discussions - Complete (2) Stage1 tender process complete and Sisk PSC/ECI process completed. (3) Ongoing engagement with Sisk underway to support the stage 4 design process and Infrastructure RMA, price refinement exercise for IP1 and price refinement process for IP2 prior to review and validation process with the Landowner.	CYC (MH/AD)	09-Nov-20	Y	1	3	6	L
IDB 13	YorCivils Lot 4 Value Threshold	Risk that the total value of works intended to be delivered through Lot 4 exceeds the maximum allowable value.	Procurement/programme delay, reduction of intended infrastructure scope, potential impact on funding business cases.	CYC (MH)	Management	Legal & Regulatory	Current	3	3	14	M	On-going	(1) Review and update of cost plan on the basis of package intent across IP0, IP1, IP2 & IP2+ in order to validate total works value against Lot 4 value and seek assurances from CYC procurement and YorCivils team - Complete and ongoing. (2) Monitor against final price refinement sums returned from the contractor - Stage 1 tender complete and within tolerance. Monitored through PSC/ECI process with cost reductions identified for pursuit. (3) To be monitored through Stage 2 price refinement process on IP1 and IP2. (4) Engage with Landowners advisor team in connection with review and validation process.	CYC (MH/AD) T&T (JM/ES)	29-Jan-21	Y	2	2	8	L
IDB 14	Major consultancy supplier insolvency	Risk that a major consultancy supplier becomes insolvent.	Loss of project momentum. Short to medium terms milestone are not achieved. Programme delay. Abortive and re-engagement costs.	CYC (MH)	Management	Governance & Management	Current	2	3	13	M	On-going	(1) Monitoring of performance as part of ongoing day to day contract management. (2) Periodic financial performance health checks by CYC procurement.	CYC (MH)	30-Apr-21	Y	1	3	6	L
IDB 15	Availability of critical personnel	Risk that critical personnel are unavailable/unable to support the project.	Loss of project momentum. Short to medium terms milestone are not achieved. Programme delay. Abortive and re-engagement costs.	CYC (NF)	Management	Governance & Management	Current	1	3	6	L	On-going	(1) Continuity plans established to manage absence of critical team member on a short or long term basis.	CYC (JG) CYC (MH/AD) CYC (DW)	30-Apr-21	Y	1	3	6	L
IDB 16	Covid-19 Risk	Risk of disruption to the project due to restricted working patterns, availability of services and resources. Risk of change to masterplan/parameter plans due to changing ways of working post Covid.	Loss of project momentum due to restrictions on working patterns pre and post contract, both on and off site. Short to medium term milestone are not achieved. Programme delay. Accommodation Cost Increases Abortive and re-engagement costs.	CYC (JG)	Management	Governance & Management	Current	5	3	16	H	On-going	(1) IP1 & IP2: Covid-19 related working arrangements will form part of the risk assessments, method statements and overall site management arrangements for IP1 and will be the responsibility of Sisk to prepare, and for CYC/Design Team/Principal Designer to review and sign off prior to commencement. (2) Monitor and respond to latest Government guidance and maintain communication throughout governance structures in order to make the best progress possible.	CYC (MH/AD)	30-Apr-21	Y	3	3	14	M
IDB 17	Procurement of CYC Delivery Support Team (IP1)	Risk that critical technical consultant support is not in place or unavailable/unable to support the project in order to ensure that a structure is in place for effective delivery management	Reduced and overloaded internal team. Loss of project momentum. Short to medium term milestone are not achieved. Programme delay.	CYC (JG)	Management	Governance & Management	Current	1	3	6	L	On-going	(1) Act on procurement plan to secure necessary technical resources for the delivery phase	CYC (DW/MH)	09-Nov-20	Y	1	3	6	L

IDB Risk Number	Risk Title	Risk Detail	Implications (Consequence)	Risk/ Owner Champion	YCP Category	CYC Category	Imminence/ status Current/ Future/ Closed	Pre-mitigation * CYC Scoring Matrix				Risk Management					Post-mitigation * CYC Scoring Matrix			
								Likelihood	Impact	Gross Score	Gross Rating	Management Strategy/ Progress	Controls / Management Actions Planned	Action Owner	Action Completion Date (or associated milestone)	Actions On Target	Likelihood	Impact	Net Score	Net Rating
IDB 18	MHCLG Funding Route Risk	Risk that the confirmed funding MHCLG funding route via the Network Rail - Homes England 'Joint Venture' (rather than CYC as the original HIF applicant) disrupts current delivery programme and linked funding arrangements.	Delay to programme to due to time needed to review (and amend) governance arrangements, undertake due diligence. Impact on CYC risk profile (as funding body through prudential borrowing and EZ business rates retention.)	CYC (NF)	Management	Governance & Management	Current	5	4	21	VH	On-going	(1) Consideration of initial priority matters between CYC and Landowners in order to confirm position and gain a clear, mutual understanding of the way forward: (1.1) Continuation with Infrastructure RMA process as currently in progress. (1.2) The nature of the NR/HE JV and potential impact on linked funding, tax liabilities etc. (1.3) Commitment to and progress with IP0 works by NR. (1.4) Commitment to and progress with IP1 works. (1.5) Confirmation of the contractual 'Employer' for the purposes of the IP2 contract. (1.6) Joint discussion amongst funding agencies to ensure coordination and understanding. (1.7) Review and agreement of clear and robust funding decision processes.	CYC (NF)	29-Jan-21	Y	1	4	12	M

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ANNEX 3

Excerpt from CYC KEY CORPORATE RISK REGISTER AT OCTOBER 2020 – York Central

KCR : York Central Project [1]: Delivery Risk - Infrastructure Works Cost Overrun.
 The project has an agreed baseline budget of £155m which must be operated within. Ownership of risks associated with exceeding this baseline must be clearly understood.

Risk Detail (cause)	Implications (consequence)	Gross Likelihood	Gross Impact	Controls	Net Likelihood	Net Impact	Direction of Travel	Risk Owner and Actions
<p>Cost of 'Phase 1 Infrastructure' works as a whole when fully designed and procured is in excess of the allowances made.</p> <p>Construction cost inflation and other market variables.</p>	<p>Phase 1 infrastructure costs unaffordable following final pricing and pressurising the agreed budget.</p> <p>In ability to fund all elements of Infrastructure plan.</p> <p>Development (or elements thereof) does not come forward.</p>	Possible	Major (19)	<p>Robust analysis of Infrastructure project costs appropriate to each respective design stage, and rationalisation against cost plan.</p> <p>Application and management of risk an optimism bias within cost plan.</p> <p>Monitoring of procurement/pricing exercises.</p> <p>Careful consideration of any scope/cost changes (change control)</p> <p>No risk to be taken by CYC on cost overrun beyond risk an optimism bias allowances – this will rest with the Landowners as the delivery organization.</p> <p>Possible agreement of a cap on cost overrun with CYC.</p> <p>Acceptance of cost overruns around management of the contract, excluding matters outside the control of CYC (e.g. ground conditions etc.).</p>	Possible	Moderate (14)	No change	<p>Ongoing Action – Coordination with Landowner through agreed governance arrangements. (James Gilchrist & Tracy Carter).</p> <p>Primary current action to conclude the IP2 price refinement process, report through CYC and Landowner governance structures and seek direction. (James Gilchrist) (28/01/2021).</p> <p>Ongoing monitoring of controls at CMT.</p>

ANNEX 3

Excerpt from CYC KEY CORPORATE RISK REGISTER AT OCTOBER 2020 – York Central

KCR: York Central Project [2]: Funding Risk - Retained Funding:
 CYC funding for the development has a dependency on EZ borrowing based on projected recovery levels.

Risk Detail (cause)	Implications (consequence)	Gross Likelihood	Gross Impact	Controls	Net Likelihood	Net Impact	Direction of Travel	Risk Owner and Actions
<p>Non-delivery or delay of outcomes.</p> <p>Level of risk and/ or return not acceptable for planned investment.</p> <p>Delay to delivery programme diminishes EZ revenue.</p>	<p>Risk may increase due to changing dates for delivery.</p> <p>Risk is that the EZ borrowing is not recovered.</p> <p>Delayed and/ or disjointed development of the site leading to reduced funding availability and risk that scheme does not proceed.</p> <p>Increased costs attributed to wider funding streams.</p> <p>Critical infrastructure becomes undeliverable in envelope of available funding.</p> <p>Reduced site viability if required for critical infrastructure.</p> <p>Full benefits not realised.</p> <p>Extended timescales for site delivery.</p>	Possible	Catastrophic (23)	<p>Landowner funding terms to be agreed to guard against this risk.</p> <p>Risk assessment, reporting and decision making at CYC Exec to be considered.</p> <p>Liaison with BIZ around delivery timescales and impact of Covid-19 on delivery timescales and to request an appropriate extension.</p>	Possible	Major (19)	No change	<p>Coordination with Landowner through agreed governance arrangements – development of an agreed funding approach. (Neil Ferris).</p> <p>Ongoing monitoring of controls at CMT.</p>

ANNEX 3

Excerpt from CYC KEY CORPORATE RISK REGISTER AT OCTOBER 2020 – York Central

KCR ??: York Central Project [3]: Funding Risk - Retained Funding:
 In February 2019 West Yorkshire Combined Authority (WYCA) Investment Committee approved the business case for West Yorkshire Transport Fund (WYTF+) funding (subject to conditions) and work towards a Full Business Case plus (FBC+) continues.

Risk Detail (cause)	Implications (consequence)	Gross Likelihood	Gross Impact	Controls	Net Likelihood	Net Impact	Direction of Travel	Risk Owner and Actions
Inability to secure identified level of infrastructure funding.	WYCA don't agree to fund Homes England directly and CYC have responsibility for the associated costs. Conditionality cannot be met	Possible	Catastrophic (23)	<p>Transfer / back to back of obligations from WYCA to Homes England.</p> <p>Consultation with Treasury to ensure proposed plan is sensible and achievable.</p> <p>IG/NF meeting with WYCA representatives - all parties wish to agree a single set of conditions that CYC/Homes England/WYCA are all party to.</p> <p>CYC to pass on back to back risk of delivery - CYC will not be holding the risk of delay etc. as this will pass through to Homes England. Preference to be set out for this risk to be passed straight to Homes England.</p>	Possible	Major (19)	No change.	<p>Coordination with Landowner through agreed governance arrangements – development of an agreed funding approach. (Neil Ferris).</p> <p>Ongoing monitoring of controls at CMT.</p>

ANNEX 3

Excerpt from CYC KEY CORPORATE RISK REGISTER AT OCTOBER 2020 – York Central

KCR ??: York Central Project [4]: Contractual Risk - Millennium Green Land:
 Temporary use of land essential to the successful delivery of the first phase of infrastructure works.

Risk Detail (cause)	Implications (consequence)	Gross Likelihood	Gross Impact	Controls	Net Likelihood	Net Impact	Direction of Travel	Risk Owner and Actions
Obligations of the conditional agreement are not met in part due to dependencies on action/progress by the Landowner	<p>Compensatory payment of £300k made to Millennium Green Trustees on the basis of the Infrastructure works proceeding within a given timeframe allowed for in the agreement.</p> <p>Works do not proceed as planned, conditions of the agreement are not met, wider delays and complexity.</p> <p>Loss of confidence, reputational impact.</p>	Unlikely	Minor (8)	<p>Back to back funding agreement or conditional arrangement with Homes England to be agreed which provides for compensation of CYC if the project fails to deliver and to satisfy the Millennium Green conditional agreement.</p> <p>Alternative option to enter into a license on the adjacent CYC land which contains the back to back arrangements on the £300k payment.</p> <p>Consideration of the £300k payment being made on account into escrow.</p> <p>Back to back arrangements with Homes England also to be applied to associated works costs.</p>	Unlikely	Minor (8)	No change	<p>Ongoing communication with MG Trustees in coordination with CYC. (David Warburton)</p> <p>Ongoing consideration of the MG conditional agreement and associated timescales. (David Warburton)</p> <p>Ongoing Action – Coordination with Landowner through agreed governance arrangements. (James Gilchrist & Tracy Carter).</p> <p>Ongoing monitoring of controls at CMT.</p>

ANNEX 3

Excerpt from CYC KEY CORPORATE RISK REGISTER AT OCTOBER 2020 – York Central

KCR ??: York Central Project [5]: Contractual Risk - CYC Reserved Land in Millennium Green:
 Temporary use of land essential to the successful delivery of the first phase of infrastructure works.

Risk Detail (cause)	Implications (consequence)	Gross Likelihood	Gross Impact	Controls	Net Likelihood	Net Impact	Direction of Travel	Risk Owner and Actions
Obligations of the [reserved land] agreement are not met in part due to dependencies on action/progress by the Landowner.	Works do not proceed as planned; conditions of the agreement are not met. Loss of confidence, reputational impact.	Unlikely	Minor (8)	Use of the land for the delivery of the infrastructure works is to be managed under license and associated conditions.	Unlikely	Minor (8)	No change	Ongoing Action – Coordination with Landowner through agreed governance arrangements. (James Gilchrist & Tracy Carter). Ongoing monitoring of controls at CMT.

ANNEX 3

Excerpt from CYC KEY CORPORATE RISK REGISTER AT OCTOBER 2020 – York Central

KCR ??: York Central Project [6]: Contractual Risk - Poyner Land:
 Land essential to the successful delivery of the project and the objectives of CYC and Partners must be developed to its potential.

Risk Detail (cause)	Implications (consequence)	Gross Likelihood	Gross Impact	Controls	Net Likelihood	Net Impact	Direction of Travel	Risk Owner and Actions
Risk that the use of the land (landlocked by Homes England Land) is not optimised.	Full use value of land is not realised	Unlikely	Minor (8)	Outline Planning Permission in place which sets obligations on development and future Reserved Matters Applications. Partner objectives for the scheme are aligned and should be maintained.	Unlikely	Minor (8)	No change	Ongoing Action – Coordination with Landowner through agreed governance arrangements. (James Gilchrist & Tracy Carter). Ongoing monitoring of controls at CMT.

ANNEX 3

Excerpt from CYC KEY CORPORATE RISK REGISTER AT OCTOBER 2020 – York Central

KCR ??: York Central Project [7]: Communication and Engagement:

Messaging and communication is essential in maintaining relationships with key stakeholders, community groups and public.

Risk Detail (cause)	Implications (consequence)	Gross Likelihood	Gross Impact	Controls	Net Likelihood	Net Impact	Direction of Travel	Risk Owner and Actions
<p>Poor ongoing community/stakeholder engagement. (Delivery of IP1 and IP2)</p> <p>Perceived lack of transparency triggers scheme opposition.</p>	<p>Prolongation of determination and potential failure to gain planning permission (IP2 RMA).</p> <p>Heightened risk of challenge during JR period (IP2 RMA).</p> <p>Full benefits not realised.</p> <p>Delay to delivery phase and potential loss of funding.</p>	Unlikely	Moderate (13)	<p>RMA comms/engagement strategy to be developed and deployed by mutual agreement between Partners (led my Homes England)</p> <p>RMA engagement to meet principles/ charter as set out in YCP Engagement Framework.</p> <p>Coordination with between Partners to ensure coordinated messaging.</p> <p>Nomination of appropriate representation on Landowners Design Review Board.</p>	Unlikely	Minor (8)	No change.	<p>Ongoing Action – Coordination with Landowner through agreed governance arrangements. (James Gilchrist & Tracy Carter).</p> <p>Ongoing monitoring of controls at CMT.</p>

ANNEX 3

Excerpt from CYC KEY CORPORATE RISK REGISTER AT OCTOBER 2020 – York Central

KCR ??: York Central Project [8]: Development Outcomes:
 The success of the York Central Project is determined by the achievement of a series of interlinked, mutually dependent objectives.

Risk Detail (cause)	Implications (consequence)	Gross Likelihood	Gross Impact	Controls	Net Likelihood	Net Impact	Direction of Travel	Risk Owner and Actions
<p>The development does not achieve the outcomes and benefits it set out to achieve.</p> <p>Risk that Landowners seek to vary the Outline Planning permission in place.</p>	<p>Key objectives of the Council Plan not realised in York Central;</p> <ul style="list-style-type: none"> Well-paid jobs and an inclusive economy. A greener and cleaner city Getting around sustainably Good health and wellbeing Safe communities and culture for all Creating homes and world-class infrastructure 	Unlikely	Moderate (13)	<p>Outline Planning Permission provides control over height and massing, quality and scale and provides sound mitigation of this risk.</p> <p>WYCA bid sets out a series of objectives on which the associated funding is predicated.</p> <p>CYC General housing scheme.</p> <p>Conditional outcomes from £35m funding [WYCA]</p> <p>York Central Strategic Board Objectives</p> <p>Design Review Board objectives.</p>	Unlikely	Minor (8)	No change.	<p>Ongoing Action – Coordination with Landowner through agreed governance arrangements. (James Gilchrist & Tracy Carter).</p> <p>Ongoing monitoring of controls at CMT</p>

ANNEX 3

Excerpt from CYC KEY CORPORATE RISK REGISTER AT OCTOBER 2020 – York Central

KCR: York Central Project [9]: Statutory Approvals - Planning.
 The project must comply with the requirements of CYC Highways, Planning and other CYC/Non CYC Statutory Authorities.
 The initial infrastructure works, together with subsequent infrastructure packages and development plots must be brought forward in compliance with the Outline Planning Permission in place.

Risk Detail (cause)	Implications (consequence)	Gross Likelihood	Gross Impact	Controls	Net Likelihood	Net Impact	Direction of Travel	Risk Owner and Actions
CYC Planning Authority Risk that the Landowners fail to comply with Planning requirements/permissions.	Additional cost to the project. Cost and time associated with LPA compliance enforcement. Heightened risk of challenge during subsequent RMA JR periods for infrastructure and development plots. Full benefits not realised. Delay to delivery phase and potential loss of funding.	Possible	Major (19)	Apply normal Local Planning Authority controls to ensure compliance and delivery against applications.	Unlikely	Minor (8)	No change	Ongoing Action – Coordination with Landowner through agreed governance arrangements. (James Gilchrist & Tracy Carter). Ongoing monitoring of controls at CMT

ANNEX 3

Excerpt from CYC KEY CORPORATE RISK REGISTER AT OCTOBER 2020 – York Central

KCR : York Central Project [10]: Statutory Approvals - Highways:

The project must comply with the requirements of CYC Highways, Planning and other CYC/Non CYC Statutory Authorities.
 Homes England, as the delivery organisation, will be required to secure Highways approval from CYC for the IP2 infrastructure works.
 [It was previously intended that CYC would be the delivery organisation]

Risk Detail (cause)	Implications (consequence)	Gross Likelihood	Gross Impact	Controls	Net Likelihood	Net Impact	Direction of Travel	Risk Owner and Actions
<p>Separation of delivery organisation and statutory authority – Homes England leading delivery rather than CYC.</p> <p>Risk that the works do not comply with Highways requirements.</p>	<p>Adding a statutory process (adoption) that could lead to delay.</p> <p>Additional cost to the project.</p> <p>Lack of integration around delivery and inspection by CYC Highways – additional associated cost.</p> <p>Risk of an extended delivery period as more inspections required.</p>	Possible	Moderate (14)	Close Partnership working and agreement of appropriate fees.	Unlikely	Moderate (13)	No change.	<p>Ongoing Action – Coordination with Landowner through agreed governance arrangements. (James Gilchrist & Tracy Carter).</p> <p>Ongoing monitoring of controls at CMT</p>

ANNEX 3

Excerpt from CYC KEY CORPORATE RISK REGISTER AT OCTOBER 2020 – York Central

KCR : York Central Project [11]: Statutory Approvals - Office of Rail and Road:
 The project must comply with the requirements of CYC Highways, Planning and other CYC/Non CYC Statutory Authorities.
 A key area of infrastructure in the scheme design features a level crossing where the new Leeman Road Spur meets the NRM running line and connection to the East Coast Main Line.

Risk Detail (cause)	Implications (consequence)	Gross Likelihood	Gross Impact	Controls	Net Likelihood	Net Impact	Direction of Travel	Risk Owner and Actions
Failure to establish agreed Method of Work for NRM rail crossing to satisfaction of ORR.	Loss of certainty regarding key land plot availability. Comprehensive development of the site disrupted.	Possible	Moderate (14)	Risk is beyond CYC experience and control. ORR approval required - this is Homes England risk to be resolved before acceptance as a highway.	Unlikely	Moderate (13)	No change	Ongoing Action – Coordination with Landowner through agreed governance arrangements. (James Gilchrist & Tracy Carter). Ongoing monitoring of controls at CMT

ANNEX 3

Excerpt from CYC KEY CORPORATE RISK REGISTER AT OCTOBER 2020 – York Central

KCR : York Central Project [12]: Infrastructure Delivery Risks (detailed) - Summary:
 There are a series of detailed risks associated with the delivery of Infrastructure Works by CYC. These are actively managed by Infrastructure delivery Board.

Risk Detail (cause)	Implications (consequence)	Gross Likelihood	Gross Impact	Controls	Net Likelihood	Net Impact	Direction of Travel	Risk Owner and Actions
A series of delivery focused risks categorized under; External Stakeholder Financial & Efficiency Governance & Management Legal & Regulatory Risks include matters around funding, land, communications/ engagement, procurement, resource/supplier management and statutory approvals.	Various	(Median) Unlikely	(Median) Major (18)	Various.	(Median) Unlikely	(Median) Moderate (13)	No change	Ongoing Action – Active management and reporting of risks at IDB level of (James Gilchrist). Ongoing monitoring of controls at CMT.

ANNEX 3

Excerpt from CYC KEY CORPORATE RISK REGISTER AT OCTOBER 2020 – York Central

KCR : York Central Project [13]: IDB & DCB (Landowner) Transitional Risks (detailed) - Summary:
 There are a series of detailed risks associated with the delivery of Infrastructure Works with the ultimate responsibility of the Landowner. These risks are being managed between CYC Infrastructure Delivery Board and Landowner through the current governance transition period.

Risk Detail (cause)	Implications (consequence)	Gross Likelihood	Gross Impact	Controls	Net Likelihood	Net Impact	Direction of Travel	Risk Owner and Actions
<p><i>A series of delivery focused risks categorized under;</i></p> <p><i>Stakeholder</i> <i>Financial & Efficiency</i> <i>Governance & Management</i> <i>Legal & Regulator</i></p> <p><i>Risks include matters around procurement, land, resource management, design and approvals.</i></p>	<p><i>Various.</i></p>	<p><i>(Median) Unlikely</i></p>	<p><i>(Median) Moderate (13)</i></p>	<p><i>Various.</i></p>	<p><i>(Median) Remote</i></p>	<p><i>(Median) Minor (2)</i></p>	<p><i>No change</i></p>	<p><i>Ongoing Action – Coordination with Landowner through agreed governance arrangements. (James Gilchrist & Tracy Carter).</i></p> <p><i>Ongoing Action – Active management and reporting of risks at IDB level of (James Gilchrist).</i></p> <p><i>Ongoing monitoring of controls at CMT.</i></p>

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Audit and Governance Committee**30 November 2020**

Report of the Director of Governance

Information Governance and Complaints**1. Summary**

1.1 This report provides Members with updates in respect of:

- Information governance performance
- ICO decision notices
- Publishing of disclosure log
- LGSCO Complaints from last report February 2020 to date of this report

1.2 There is a separate report covering the Annual Complaints Report and the proposals for customer complaints and feedback toolkit, policy and procedures including how this can be delivered

2. Information Governance Performance

2.1 The council publishes performance data on timeliness for responding to requests made under Freedom of Information Act (FOI), Environmental Information Regulations (EIR) and Data Protection Act subject access to records requests (SARs), via the York Open Data platform via the below link.

<https://data.yorkopendata.org/group/freedom-of-information>

2.2 At Committee in December 2019, I confirmed we would work on the provision of performance reports in graphical formats and consider further comments and feedback given by Committee. These are provided at Annex 1

2.3 Work is still underway across different information governance networks and groups in the Yorkshire and Humberside region

regarding sharing of performance information that is informative and useful. However due to the diversion of work and resources across many councils, this work has not yet been completed. Therefore the graphs provided show our performance information only. I will update the Committee on the progress of the regional work when available.

- 2.4 From the start of the council's response to Covid19, we have continued to provide our service and support to both customers and to service areas across the council. However we did have to in some instances, extend the timescales for responses given that resources in some areas of the council had been diverted to provide covid19 response services. The impact of this is shown in the performance graphs at Annex 1.
- 2.5 The Information Commissioner's Office (ICO) confirmed at the start of the first national lockdown, that although they could not extend statutory timescales, they would not be penalising public authorities for prioritising other areas or adapting their usual approach during these unprecedented times. They would also tell people through their own communications channels that they may experience understandable delays when making information rights requests during the pandemic. The ICO said *"they are a reasonable and pragmatic regulator, one that does not operate in isolation from matters of serious public concern. Regarding compliance with information rights work when assessing a complaint brought to us during this period, we will take into account the compelling public interest in the current health emergency"*.

3. ICO decision notices

- 3.1 If someone is unhappy with the response they receive in relation to an FOI, EIR or SAR request, or if they want to raise a complaint under data protection legislation in relation to the rights of individuals, there is an opportunity to seek an internal review and then to complain to the ICO. The ICO publishes their decision notices and their full reports at

<https://icosearch.ico.org.uk/s/search.html?collection=ico-meta&profile=decisions&query>

- 3.2 Since the last report in February which included ICO decision notices up to 17 January 2020, the ICO has published three decision notices for the council and the summaries of these are available at Annex 2.
- 3.3 Where the decision notices upheld the complaint, this was because we had not responded to the requester in the timescales set out in legislation. However these were requests made when the council had diverted resources to respond to covid19 and so in some instances, we were not able to respond in time to all requests.
- 3.4 Where the complaints to the ICO involved the council's use of exemptions to withhold information, these were not upheld (which means the council used the exemption correctly) and partly upheld.

4. Publishing the disclosure log

- 4.1 Following the introduction of new regulations in 2018, known as '[Public Sector Bodies Websites and Mobile Applications \(No. 2\) Accessibility Regulations](#)', our websites must achieve level 'AA' of the [W3C's Website Content Accessibility Guidelines \(WCAG 2.1\)](#)
- 4.2 As a result of these Accessibility Regulations all responses hosted on the council's website were reviewed including the use and nature of PDF documents which meant there was a high risk of breaching the accessibility guidelines.
- 4.3 We now publish an adequate 'disclosure log' online in 'plain text'. This approach is being monitored to better understand customer appetite and demand. The disclosure log complements the existing online form, which allows customers an easy online method to request information

5. Complaints

- 5.1 Local Government and Social Care Ombudsman (LGSCO) cases from the last report to Committee in February, to the date of this report are shown at Annex 3.

5.2 The annex details the decisions and actions recommended by the LGSCO.

5.3 There were a total of 19 cases determined by the LGSCO in the time period of 17/02/2020 to date of this report. Of those 10 were closed after their initial enquiries; 5 were not upheld and 4 were upheld.

5.4 The information governance and complaint team continue to work with the Corporate Management Team, Directorate Management Teams as well as with individual service areas to identify areas for improvement or shared learning opportunities. These have also been used to inform the proposals for an up to date corporate complaints and feedback toolkit for which there is a separate report to Committee.

6. Consultation

Not relevant for the purpose of this report.

7. Options

Not relevant for the purpose of this report.

8. Analysis

Not relevant for the purpose of this report.

9. Council Plan

9.1 The council's information governance framework offers assurance to its customers, employees, contractors, partners and other stakeholders that all information, including confidential and personal information, is dealt with in accordance with legislation and regulations and its confidentiality, integrity and availability is appropriately protected.

10. Legal Implications

The Council has a duty to comply with the various aspects of information governance related legislation.

11. Risk Management

The council may face financial and reputational risks if the information it holds is not managed and protected effectively. For example, the ICO can currently impose civil monetary penalties up to 20million euros for serious data security breaches. The failure to identify and manage information risks may diminish the council's overall effectiveness and damage its reputation. Individual(s) may be at risk of committing criminal offences.

12. Recommendations

Members are asked:

- To note the details contained in this report.

Contact Details

Author: Lorraine Lunt
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Chief Officer Responsible
for the report: Janie Berry,
Director of Governance

Report
Approved



Date 7 November
2020

Wards Affected: List wards or tick box to indicate all

All

For further information please contact the author of the report

Annexes

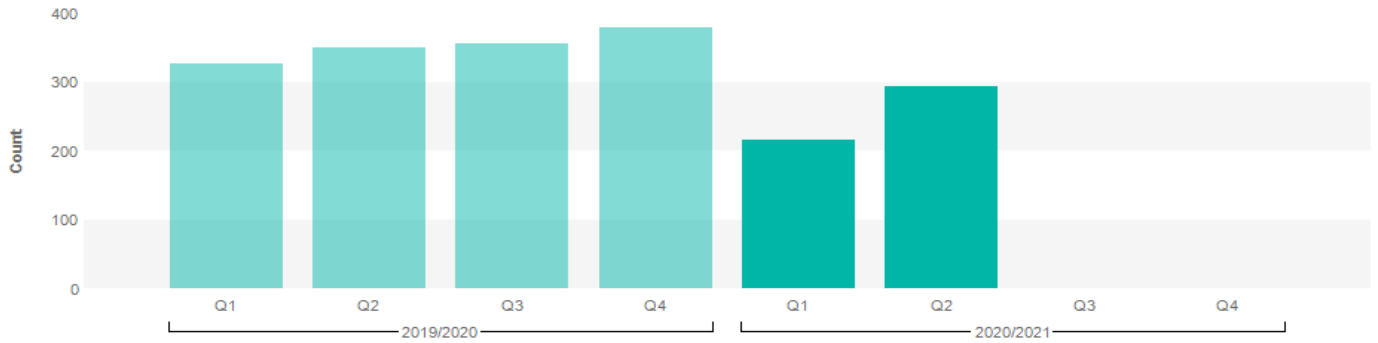
Annex 1 – FOI/EIR/SAR performance
Annex 2 – ICO decision notices summaries
Annex 3 – LGSCO cases

Background Information

Not applicable

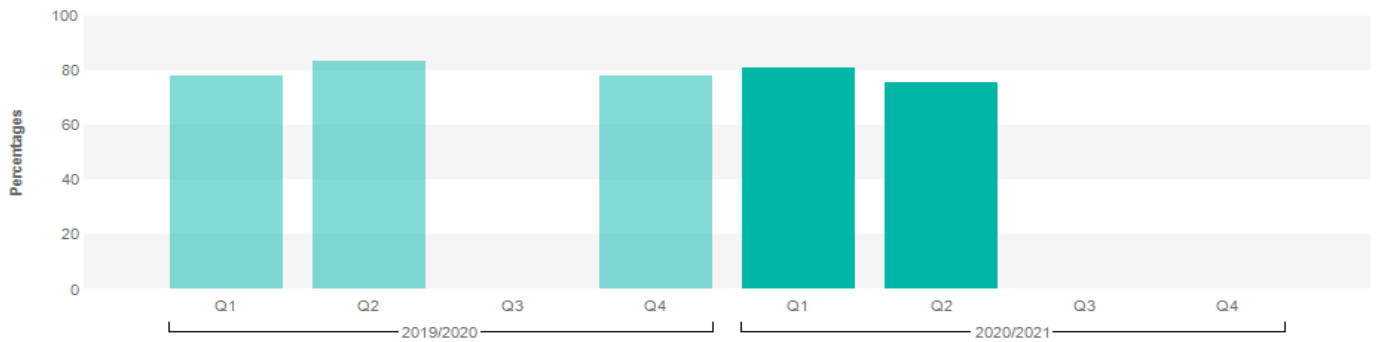
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FOI (Freedom of Information) - Total Received (by Quarter) - Historic



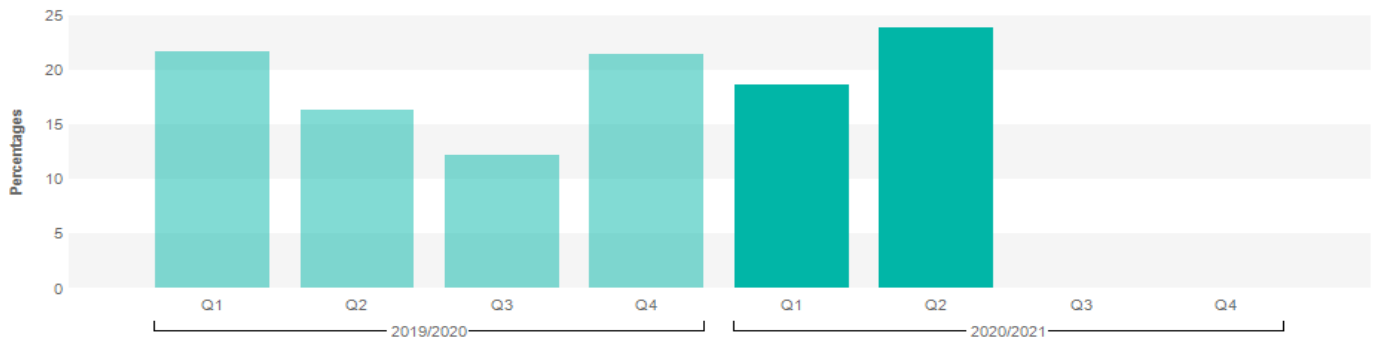
	Count			
	Quarter 1	Quarter 2	Quarter 3	Quarter 4
2019/2020	330	352	359	381
2020/2021	219	296		

FOI (Freedom of Information) - % In time (by Quarter) - Historic



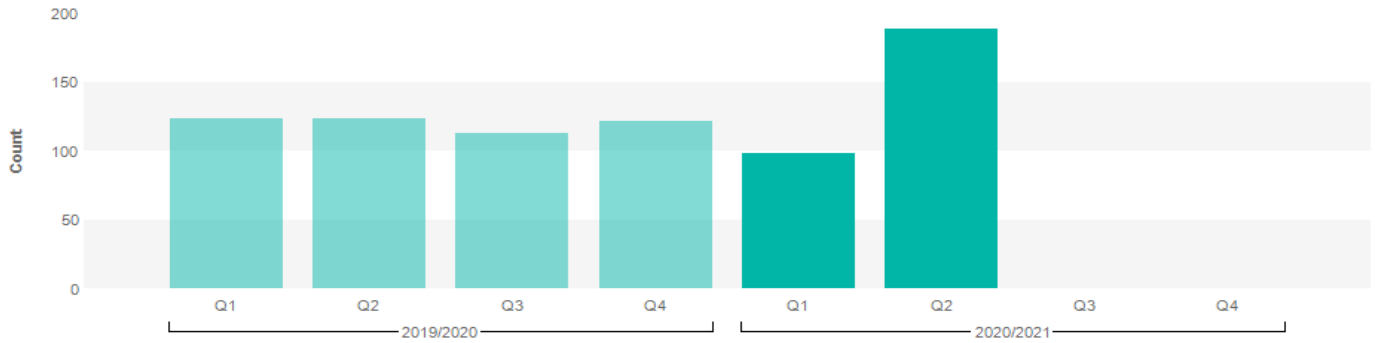
	Percentages			
	Quarter 1	Quarter 2	Quarter 3	Quarter 4
2019/2020	78.20%	83.52%	78.48%	78.48%
2020/2021	81.28%	76.01%		

FOI (Freedom of Information) - % Out of time (by Quarter) - Historic



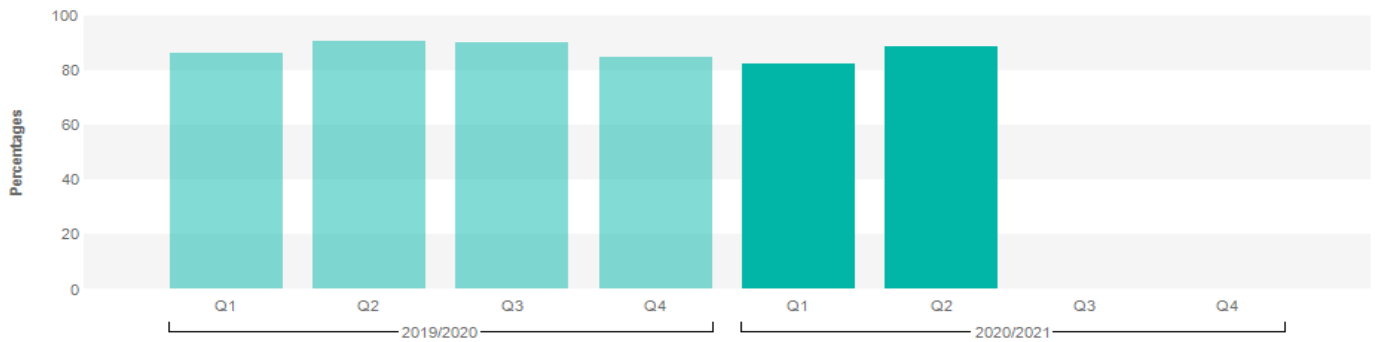
	Percentages			
	Quarter 1	Quarter 2	Quarter 3	Quarter 4
2019/2020	21.80%	16.48%	12.26%	21.52%
2020/2021	18.72%	23.99%		

EIR (Environmental Information Regulations) - Total Received (by Quarter) - Historic



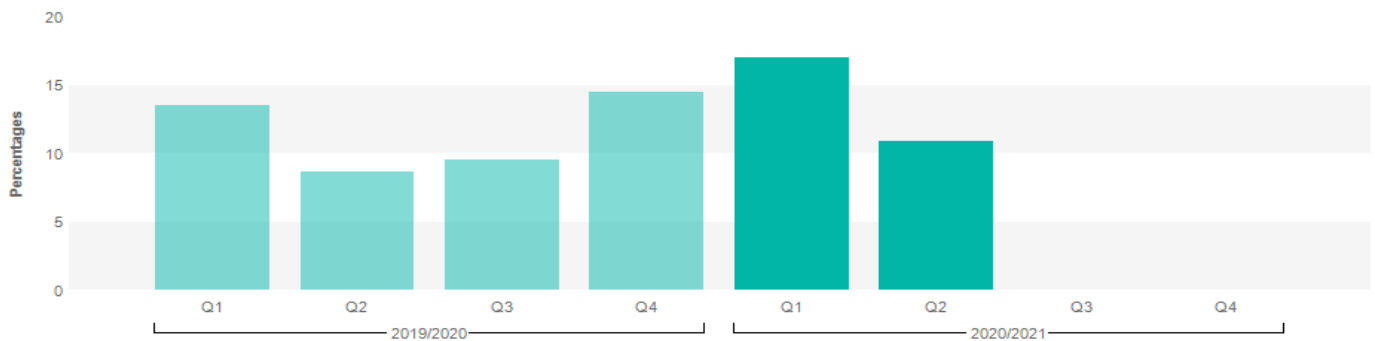
	Count			
	Quarter 1	Quarter 2	Quarter 3	Quarter 4
2019/2020	125	125	114	123
2020/2021	99	190		

EIR (Environmental Information Regulations) - % In time (by Quarter) - Historic



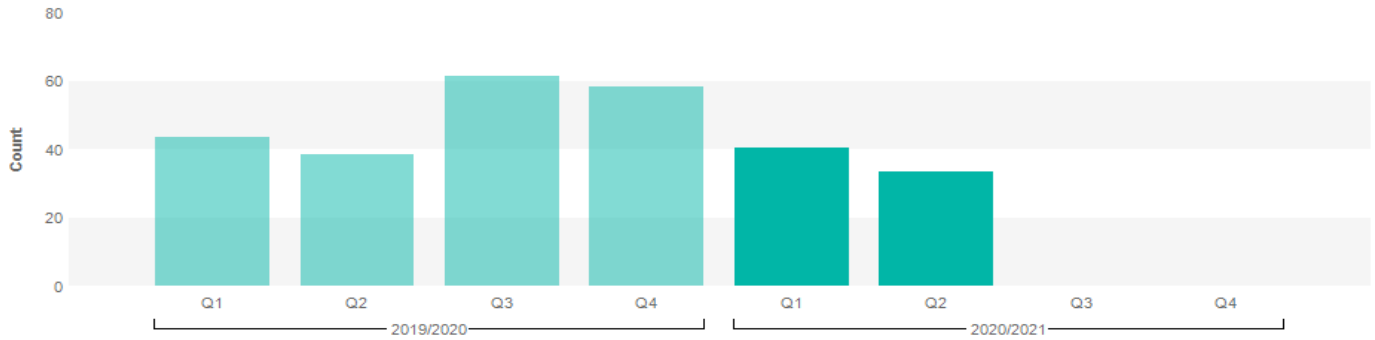
	Percentages			
	Quarter 1	Quarter 2	Quarter 3	Quarter 4
2019/2020	86.40%	91.20%	90.35%	85.36%
2020/2021	82.83%	88.95%		

EIR (Environmental Information Regulations) - % Out of time (by Quarter) - Historic



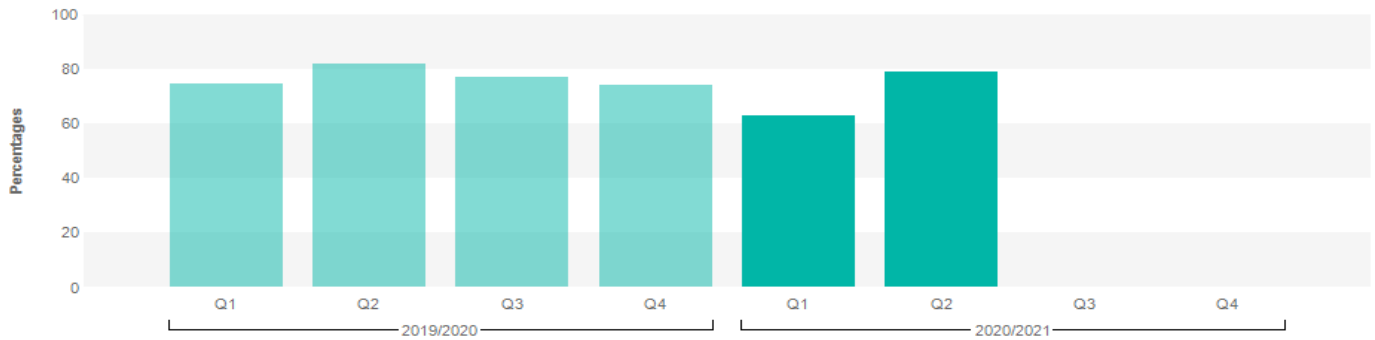
	Percentages			
	Quarter 1	Quarter 2	Quarter 3	Quarter 4
2019/2020	13.60%	8.80%	9.65%	14.63%
2020/2021	17.17%	11.05%		

DP (Data Protection Act) / SAR (Subject Access Request) - Total Received (by Quarter) - Historic



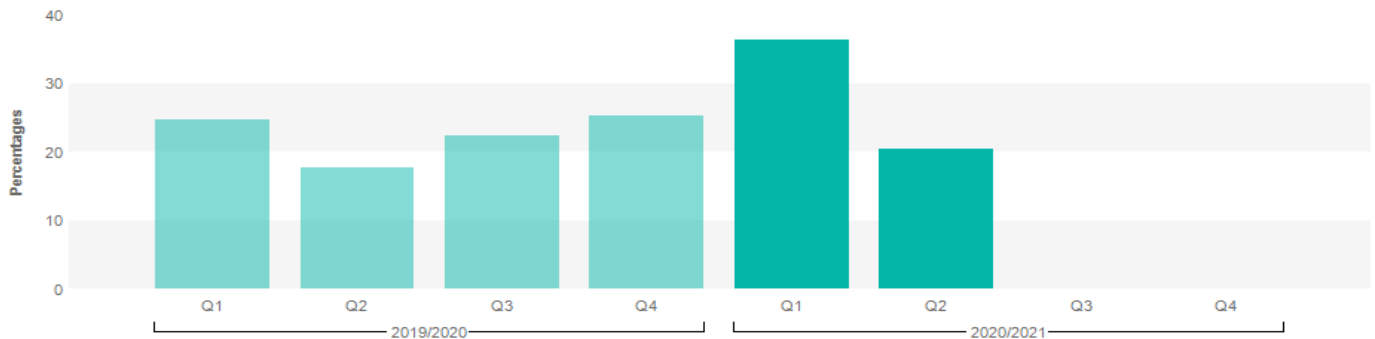
	Count			
	Quarter 1	Quarter 2	Quarter 3	Quarter 4
2019/2020	44	39	62	59
2020/2021	41	34		

DP (Data Protection Act) / SAR (Subject Access Request) - % In time (by Quarter) - Historic



	Percentages			
	Quarter 1	Quarter 2	Quarter 3	Quarter 4
2019/2020	75%	82.05%	77.42%	74.58%
2020/2021	63.41%	79.41%		

DP (Data Protection Act) / SAR (Subject Access Request) - % Out of time (by Quarter) - Historic



	Percentages			
	Quarter 1	Quarter 2	Quarter 3	Quarter 4
2019/2020	25%	17.95%	22.58%	25.42%
2020/2021	36.59%	20.59%		

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ICO published decision notices for City Of York Council**15 Oct 2020**

The complainant requested from the City of York Council (“the Council”) information relating to the Council’s compliance with section 65 of the 1992 Local Government Act. By the date of this notice the Council had not issued a substantive response to the complainant’s request. The Commissioner’s decision is that the Council has failed to respond to the request within 20 working days and has therefore breached section 10 of the FOIA. The Commissioner requires the Council to take the following steps to ensure compliance with the legislation. The Council must issue a substantive response to the request in accordance with its obligations under the FOIA. The Council must take these steps within 35 calendar days of the date of this decision notice. Failure to comply may result in the Commissioner making written certification of this fact to the High Court pursuant to section 54 of the Act and may be dealt with as a contempt of court.

FOI section 10: Complaint upheld**2 Sep 2020**

The complainant has requested information on the council’s process for reporting decisions of the ICO, planning committee and the Local Government and Social Care Ombudsman (the LGSCO) to its councillors and committees. The council said that there was no set process that could be disclosed but provided a number of links to the websites of the ICO and the LGSCO where relevant information could be accessed. It applied section 21 on the basis that the information was already available to the complainant via these means. On review it provided a link to the records of its planning committee meetings and to its Audit and Governance committee. The Commissioner’s decision is that the council was correct to apply section 21 to refuse the request for information included within the links which were already available to the complainant. She has however decided that the council was not correct to rely on section 21 regarding information falling within the scope of the request about its Scrutiny and Executive Committee. She has also decided that the council did not comply with the requirements of section 10(1) in that it did not provide access links to all of the information requested within 20 working days. The Commissioner requires the public

authority to take the following steps to ensure compliance with the legislation. To issue a fresh response, specifically regarding information falling within the scope of the request which has been reported to the Scrutiny and Executive Committee. The council should not seek to rely upon section 21 again to refuse this part of the request in its new response.

FOI section 21: Complaint partly upheld

FOI section 10: Complaint upheld

31 Jan 2020

The complainant has requested information from the City of York Council (“the Council”) regarding the professional qualifications of its Flood Risk Management and Conservation Officers. The Council withheld the information under section 40(2) of the FOIA. The Commissioner’s decision is that the Council has correctly applied section 40(2) of the FOIA to withhold the information. The Commissioner does not require any further steps to be taken in respect of this request.

FOI section 40(2): Complaint not upheld

LGSCO Ref	Service Area	Directorate	Summary of Final Decision	Actions	Date of Final Decision	Actions Complete	Actions completed in time Y/N	Decision
19017252	Highways	EAP	The Ombudsman will not investigate Mr R's complaint about falling over on an uneven pavement. This is because it would be reasonable to expect Mr R to pursue his claim for compensation through the courts.	Case closed	21/02/2020	N/A	N/A	Closed after initial enquiries - Outside of jurisdiction.
19020241	Planning and Environment	EAP	The Ombudsman will not investigate Mr X's complaint about the Council's handling of his application to discharge planning conditions. This is because it would have been reasonable for Mr X to appeal.	Case closed	09/04/2020	n/a	N/A	Closed after initial enquiries - No further action
19019280	Finance	CCS	The Ombudsman will not investigate Mrs X's complaint that the Council failed to properly consider the law and guidance when deciding Mrs X deliberately deprived herself of capital to avoid care charges. This is because there is insufficient evidence of fault by the Council to warrant an investigation.	Case closed	31/03/2020	N/A	N/A	Closed after initial enquiries - No further action
19019915	Children's safeguarding	CSS	The Ombudsman will not investigate Ms B's complaint about a referral that was made by her daughter's school to the Council. This is because the Information Commissioner's Office is the body better placed to consider her complaints.	Case closed	27/03/2020	N/A	N/A	Closed after initial enquiries - outside of jurisdiction.
19019856	Council Tax	CCS	The Ombudsman will not investigate this complaint about costs for council tax arrears. This is because there is insufficient evidence of fault by the Council and because the costs have been confirmed in court.	Case closed	06/04/2020	NA	NA	Closed after initial enquiries - No further action
19019078	Council Tax	CCS	The Ombudsman will not investigate Mrs X's complaint the Council would not apply a single person discount to her property. This is because it would be reasonable for Mrs X to use her appeal right to the Valuation Tribunal.	Case closed	14/05/2020	NA	N/A	Closed after initial enquiries - No further action

201908506	Housing Repairs	HHASC	The complaint is regarding the landlord's handling of: Repairs required to the property. Issues with the electrics and the resident's request for compensation for loss and damage of personal items due to the electrical issues.	The following orders: The landlord should pay the resident £75 within the next 4 weeks, in respect of its handling of the repairs due to its poor record keeping on the issues. The landlord should arrange an inspection of the resident's kitchen to assess the situation with the cooker and decide the appropriate action to undertake regarding the placement of the cooker, if it finds that further action is required. The landlord should arrange an inspection of the resident's bathroom to ascertain whether the bath panel has been replaced and undertake the replacement if this remains outstanding.	14/05/2020	ongoing	ongoing	Upheld: Malad & Injustice
19016125	EAP	Highways	Mr X complains the Council incorrectly claims to have adopted a private road, including an area of his private property. He wants the Council to remove the road from its list of streets and for the Ombudsman to require the Council to adhere to highway legislation. The Ombudsman has discontinued this investigation because the	NA	30/06/2020	NA	NA	Not upheld: No further action
19019589	HHASC	Adult Social Care	Mrs C complains about the way in which the Council managed her son's transition from children's social care services into adult social care services. Mrs C says the Council's fault left her son without any support between January and July 2019. The Ombudsman found fault with regards to the Council's actions. The	Issue £600 x3. Share learning with teams	29/09/2020	Y	Y	Upheld: Malad & Injustice

			Council has agreed to pay Mr X for the temporary loss of his support services and pay him and his mother for the distress this caused them.					
19001392	EAP	Planning	The Council did not respond clearly regarding Mr X's report about noise from a nearby development. The Ombudsman does not find that this caused injustice to Mr X.	NA	31/07/2020	NA	NA	Not Upheld: No injustice
19010325	HHASC	Adult Social Care	Ms X complains on behalf of her mother, Mrs Y about the Council's decision not to award the 12 week property disregard. She also complains about the Council's decision to place her in an independent living community which caused her health to deteriorate. The Ombudsman finds the Council acted without fault.	NA	18/08/2020	NA	NA	Not Upheld: No Injustice
19007749	HHASC	Finance	Mr X's legal representative complained the Council, acting as Mr X's Appointee, failed to safeguard Mr X's finances. He says that Mr X's care debts therefore increased. We found the Council appropriately considered Mr X's situation when acting as his Appointee. It decided to prioritise clearing past debts and there is no evidence of fault in how it made this decision.	NA	10/09/2020	NA	NA	Not Upheld, no injustice
19003025	CCS	Legal & Governance	Mr X complained about interference by a councillor and the Chief Executive into a tender contract. While the Council started an investigation into the Chief Executive, it did not investigate the complaint against the councillor. The Council was at fault for not following its procedure for complaints about councillor conduct; it will apologise to Mr X.	Issue an apology within 1 month - due 17/8/2020	17/07/2020	17/08/2020	Y	Upheld: Malad & Injustice
19001385	EAP	Planning	The Council failed to respond clearly to Mr X's complaints that a developer breached planning conditions regarding waste collection at his home. The Council should remedy	• Consider the matter and write to Mr X with an update on the action it may or may not decide to take, explaining its	14/09/2020	14/09/2020	Y	Upheld: Malda & injustice

			this by apologising and giving details how it has considered the report of a planning breach.	reasons. • Apologise to Mr X for its failure to respond and to update him. 11/09/2020				
20001590	EAP	Highways		NA	07/08/2020	NA	NA	closed after initial enquires out of jurisdiction
19007394	HHASC	Safeguarding	There was a five week delay by the Council before a safeguarding complaint was forwarded to the correct Council. This did not affect the outcome of the safeguarding investigation, as this took a further 6 months and found no evidence of abuse or neglect. An apology and review of procedures to ensure this does not happen again remedies the injustice caused by the delay and lack of explanation at a distressing time.	* Apology * Review procedures	24/09/2020	06/11/2020	Y	Upheld: Malad & Injustice
20003536	EAP	Planning	Mr X complains the Council allowed alterations to a housing development to be dealt with as non-material amendments rather than requiring a full planning application. The Ombudsman will not investigate the complaint because it is unlikely we will find evidence of fault.	NA	05/10/2020	NA	NA	Closed after initial enquiries - No further action
20004543	CCS	Council Tax	Mr X complains that the Council unreasonably issued a large backdated council tax bill as a result of their own error. The Ombudsman will not investigate this complaint because he did not dispute the bill and the sum has been paid. Any remaining injustice does not warrant investigation.	NA	19/10/2020	NA	NA	Closed after initial enquiries - no further action
19012604	EAP	planning enforcement	Summary: Mr X complains about an unauthorised use of land near his home. While the Council agrees there has been a material change of use that breaches planning control, it decided not to take enforcement action. Enforcement action is discretionary, and the Ombudsman	NA	02/11/2020	NA	NA	Not Upheld: No injustice

		found no fault in how the Council reached its decision not to act against the planning breach reported by Mr X.					
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Audit and Governance Committee**30 November 2020**

Report of the Director of Governance

Covering report for Annual Complaints Report March 2019 to April 2020**1. Summary**

- 1.1 This covering report provides Members with highlights from the Annual Complaints Report March 2019 to April 2020 which is shown in full at Annex 1.

2. Background

- 2.1 The council produces and publishes the annual report covering

- Complaints about adults (including Public Health) and children's social care services which are dealt with under two separate pieces of legislation
- Complaints about other council services dealt with under the council's Corporate Complaints and Feedback procedures
- Ombudsmen cases – both the Local Government and Social Care Ombudsman (LGSCO) and the Housing Ombudsman Service (HOS)
- Other feedback including compliments received.

3. Adults Social Care overview

- 3.1 Whilst the council's complaints team receive copies of compliments received by this service area, we know that many more are received that are either not recorded or passed on. However below are some examples of those that have been recorded:

- *Thank you for calling an ambulance in time and saving customers life.*

- *Thank you for the time and effort with a relatives move into a care home*
- *Worker was professional and treated customer with dignity.*
- *Worker went above and beyond in end of life arrangements*

3.2 In adults social care complaints, we have to use the Department of Health's tool for grading or assessing the seriousness of complaints and to decide the relevant action. This is shown on pages 25 and 26 of Annex 1.

3.3 There was an increase in the number of complaints in 19/20 compared to the previous year dealt with under the legislative adult's social care complaints requirement – it rose from 21 to 53.

3.4 However there was a decrease in those complaints dealt with under the corporate policy from 12 to 4.

3.5 It is important to note though that receiving larger numbers of complaints is not always a negative, because it can also reflect that the procedures we have in place are accessible and that customers are supported to make complaints which provide invaluable feedback.

3.6 Feedback from complaints especially where there are related themes, provides the service area with invaluable information to review and improve the services they provide. In this annual report concerns about the increase in the number of complaints about a lack of action and arrangements for care provision for young people moving into adult services were identified and the complaints team continue to work with senior managers to ensure any lessons are identified and service improvements made where necessary. Examples of where this happened are:

- Review of support for people receiving Direct payments
- Further Monitoring and auditing of the service, to analyse in greater detail any safeguarding, accidents and incidents which occur, and learn lessons from these.
- Reminder to staff of the importance of contacting a GP rather than a nurse where appropriate
- Reminder to staff of the importance of recognising families comments about what their relatives need.

3.7 It is important to remember that the legislation and guidance for adults social care complaints does not prescribe actual timescales for responses. However we manage and monitor performance in this area using best practice across the different complaints legislation and guidance.

3.8 Across the three grades of complaints (Green, Amber, Red) it is significant to note that the timeliness of responses fall within the shortest timescale:

- 73% of Green graded complaints were responded to within 10 days
- 57% of Amber graded complaints were responded to within 25 days
- 50% of Red graded complaints were responded to within 25 days

4. Children's Social Care overview

4.1 Similar as in Adults Social Care, we are aware that not all compliments received are recorded. However some examples recorded are:

- *... delivered with respect, politeness and professionalism*
- *... staff at Mash are taking the time to listen & share.*
- *Social Worker always professional, nothing too much trouble and made the family feel valued.*

4.2 In Children's social care complaints, the complaints team conduct an assessment of the issues raised including severity, complexity, risk to the customer and other customers, risk to the authority, history of similar complaints and likelihood of future similar complaints to grade the complaint into Stage 1, 2 or 3. Other considerations include, the outcomes wanted to resolve the complaint, who is best placed to consider and effectively respond to the complaint and the complainant's views of how the complaint should be dealt with.

4.3 There was an increase in complaints under the children's social care procedure during 19/20 compared to the number received the previous year. It rose from 44 to 91.

- 4.4 There was also an increase in complaints dealt with through the corporate policy from 4 in the previous year, to 12 in 19/20
- 4.5 It is important to note though that receiving larger numbers of complaints is not always a negative, because it can also reflect that the procedures we have in place are accessible and that customers are supported to make complaints which is especially important for children and young people.
- 4.6 From work undertaken to understand this increase, we determined there were a number of factors involved. These include a significant period of change within the service area and resource challenges and also the actions we took as a council and in the service area, following the public maladministration report from the LGSCO in the previous year. Part of this was providing a programme of staff training and awareness sessions to increase their understanding of the procedure and how they can ensure children and young people are aware of and can be supported, to make complaints.
- 4.7 Feedback from complaints especially where there are related themes, provides the service area with invaluable information to review and improve the services they provide. In this annual report, the main theme concerned a lack of action, predominantly related to delays with communication and updating family members and delays in progressing work.
- 4.8 Work has already been undertaken to improve this area of concern including work by the Assistant Director and managers to improve communication and keeping customers up to date.
- 4.9 The legislation prescribes the timescales for dealing with complaints at each of the three stages and whilst there is room for improvements in this area, it is important to remember that this area of complaints are often complex, with a number of elements as well as the need to arrange advocates for the complainant(s) and appointments with both staff and complainants, particularly at an adjudication stage. The complaints team ensures that complainants are kept updated in these circumstances.
- 4.10 A significant area of sustained improvement is that there have been no cases where responses were not sent at Stage 2 for the last two years. This demonstrates the ongoing commitment from senior managers to deal with complaints effectively and use the

feedback to learn lessons and improve their services. Other examples of improvements made are:

- Strengthened care reviews
- Improved timeliness of sharing documents.
- Making sure copied of reports are included on files
- Review services for Special Guardianship cases
- Management of cases completed by qualified rather than unqualified workers
- Improved communication

6. Corporate Complaints Overview

6.1 The corporate complaint policy and procedures is used for all complaints about council services where there is no statutory procedure or legal/appeal process.

6.2 We record compliments received across these council services and areas and although as in Adults and Children's social care, we know not all are recorded, some examples are:

- *Thank you for your help at a difficult time, your assistance, help & kindness was appreciated.*
- *Praise regarding assistance provided with application, following inspection.*
- *Thank you to gardeners for work on customer's house.*
- *Thank you for work on kitchens at Schools.*
- *Officer is knowledgeable, answering questions and dealing with our application.*

6.3 There are three stages in the corporate policy and the complaints team assess the appropriate stage taking account of issues such as:

- risk to the customer and the authority
- severity of the risk
- whether the issues in question are a one off, are a reoccurrence and likelihood of reoccurrence.

6.4 All directorates respond in time to the majority of complaints at stages 1, 2 and 3. However where this is not the case, it is

important to note that that directorate/service areas provides a service to every household in York weekly and is probably the most highly visible council service.

6.5 Corporate complaints provide senior managers with useful information in respect of the way that services are delivered and examples of improvements made are:

- Road markings were reinstated
- Additional quality checks and monitoring
- Improved communication and updates

7. LGSCO overview

7.1 The LGSCO provides an annual review letter about the council covering April to March each year to help us assess our performance in handling complaints.

7.2 The LGSCO dealt with 68 cases about the council in April 2019 to March 2020 with 61 cases being concluded within this time period. (This therefore includes cases which were received but not concluded in the previous reporting period).

7.3 In 100% of cases the LGSCO were satisfied that the council had successfully implemented their recommendations. This compares to an average of 99% in similar authorities, and sees an improvement on the previous year.

7.4 In 17% of upheld cases the LGSCO found the council had provided a satisfactory remedy before the complaint reached them. This compares to an average of 11% in similar authorities. In practice this means that although the LGSCO found there had been fault, the council had already acknowledged this and provided an appropriate remedy.

7.5 The complaints team are currently reviewing the way it works as well as reviewing the corporate complaints policy and procedures

with the aim of having an up to date, robust and effective complaints toolkit for use across the council and for customers.

8. Consultation

Not relevant for the purpose of this report.

9. Options

Not relevant for the purpose of this report.

10. Analysis

Not relevant for the purpose of this report.

11. Council Plan

11.1 The council's information governance framework offers assurance to its customers, employees, contractors, partners and other stakeholders that all information, including confidential and personal information, is dealt with in accordance with legislation and regulations and its confidentiality, integrity and availability is appropriately protected.

12. Legal Implications

The Council has a duty to comply with the various aspects of information governance related legislation.

13. Risk Management

The council may face financial and reputational risks if the information it holds is not managed and protected effectively. For example, the ICO can currently impose civil monetary penalties up to 20million euros for serious data security breaches. The failure to identify and manage information risks may diminish the council's overall effectiveness and damage its reputation. Individual(s) may be at risk of committing criminal offences.

14. Recommendations

Members are asked:

- To note the details contained in this report.

Contact Details

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Chief Officer Responsible
for the report: Janie Berry,
Director of Governance

Report
Approved



Date: 12 November
2020

Wards Affected: List wards or tick box to indicate all

All

For further information please contact the author of the report

Annexes

Annex 1 – Annual Complaints Report April 2019 to March 2020

Background Information

Not applicable



City of York Council Annual Complaints Report April 2019 – March 2020

Janie Berry
Director of Governance and Monitoring Officer
Cath Murray
Complaints and Feedback Manager

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1 Introduction

Complaints and Feedback are managed for all council areas through the Complaints and Feedback Team (CFT) to ensure that comments, complaints, concerns and compliments are dealt with in an independent and consistent way across the council.

Complaints about adult and children's social care services are dealt with under two separate pieces of legislation:

- The Children Act 1989 Representations Procedure (England) Regulations 2006
- The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009

Complaints about other council services are dealt with under the council's Corporate Complaints and Feedback procedures and these have been designed using the guidance and good practice specified in the statutory procedures and by the Local Government and Social Care Ombudsman (LGSCO).

It is essential that all teams delivering services (including the contractors or providers of services on our behalf) formally capture and record complaints. It is only by doing so that complaints can be tracked and where things have gone wrong, managers can ensure that matters are put right. Senior managers and the CFT therefore regularly encourage teams to recognise complaints and report these to the CFT.

It is important to note the impact of Covid19 in this reporting period. As for all services, this has resulted in the provision of the complaints and feedback services being provided remotely with officers and investigators, as well as service area managers and staff working from home.

As a result of this, the team and the independent agency, along with staff and managers in service areas, have reviewed the ways of working and have adapted this to ensure the complaints and feedback service can continue to be provided effectively. It is considered these changes have had a positive impact on service provision, with staff and investigators being able to speak to customers and key staff and managers, at a time convenient to them, without needing to find a quiet space for phone calls or arrange times for a meeting room.

It has given team members and senior managers the ability to work more closely to respond to and resolve complaints, with the complaints team providing advice to managers about appropriate remedies and responses for managers to then consider and agree or amend.

This has resulted in the ability to provide responses to the complainants' satisfaction more quickly and to provide thorough responses and explanations to explain the council's actions regardless of whether the complaint is upheld or not.

2 Ombudsman Investigations and Annual Review Letter

The LGSCO is the council's regulator and following the conclusion of the relevant complaints procedure, is able to investigate complaints about council services.

The exception to this is that the Housing Ombudsman Service (HOS) is the regulator for most housing related services and the Information Commissioner's Office (ICO) is the regulator for all information governance complaints, including complaints about data breaches, and responses to requests under the Data Protection Act, General Data Protection Regulation, Freedom of Information Act and Environmental Information Regulations.

The LGSCO provides an annual review letter about the council covering April to March each year. This includes tables presenting the number of complaints and enquiries received about the council and the decisions the LGSCO has made during the reporting period. This is to help us assess our performance in handling complaints. It includes the number of cases where the LGSCO's recommendations remedied the fault and the number of cases where they decided we had had offered a satisfactory remedy during our local complaints process. In these latter cases the LGSCO provides reassurance that we had satisfactorily attempted to resolve the complaint before the person went to them.

The LGSCO dealt with 68 cases about the council in April 2019 to March 2020 with 61 cases being concluded within this time period. (This therefore includes cases which were received but not concluded in the previous reporting period). The decisions are summarised below:

LGSCO decision	How many?	%* rounded down to whole number
Closed after initial enquiries	24	39%
Referred back for local resolution	15	25%
Advice given	2	3%
Incomplete/invalid	4	7%
Not upheld	4	7%
Upheld	12	19%
Total	61	100%

The LGSCO's 12 upheld decisions had the following remedies

Remedy	Number
Apology	1
Apology, Financial redress: Avoidable distress/time and trouble	1
Apology, Financial redress: Avoidable distress/time and trouble, New appeal/review or reconsidered decision, Procedure or policy change/review	1
Apology, Financial redress: Avoidable distress/time and trouble, Procedure or policy change/review, Provide services	1
Apology, Financial Redress: Quantifiable Loss, Provide training and/or guidance	1
Financial redress: Avoidable distress/time and trouble	1
Financial redress: Avoidable distress/time and trouble, Provide services	1
Financial redress: Loss of service, Apology, Provide services	1
New appeal/review or reconsidered decision	1
Procedure or policy change/review	1
Null	2

The details of the 12 upheld cases are shown at Annex 1 at the end of this report. The points of particular importance in the Ombudsman's annual letter from this year are:

- 75% of cases investigated were upheld. This compares to an average of 56% in similar authorities.
- In 100% of cases the Ombudsman were satisfied that the authority has successfully implemented their recommendations. This compares to an average of 99% in similar authorities, and sees an improvement on the previous year.
- In 17% of upheld cases the Ombudsman found the authority had provided a satisfactory remedy before the complaint reached the Ombudsman. This compares to an average of 11% in similar authorities. In practice this means that although the Ombudsman found there had been fault, the authority had already acknowledged this and provided an appropriate remedy. The complaints team is currently reviewing the way it works with an aim to being

able to increase the ability to identify and offer appropriate remedies where fault has occurred.

Further details from the Ombudsman's annual report with the breakdown of cases they dealt with and the outcomes found for this reporting period are included at annex 1.

3 What is a Complaint?

A complaint is an expression of dissatisfaction or disquiet however made, about the actions, decisions, or apparent failings of a local authority's social services provision, and/or the level or nature of a council service or policy, which requires a response. If it is possible to resolve the complaint immediately this does not need to be logged through the complaints procedure.

A complaint is not a request for a service that is made for the first time. For example, if a customer complains that a streetlight is not working, we will treat it as a service request that we aim to fulfil by repairing it within the service level agreement. If we then fail to repair it within that timescale, and the customer is still unhappy, it should then be defined and treated as a complaint

4 Effectiveness of the Procedures

The CFT offer and proactively encourage all staff and managers to participate in regular training and awareness raising, about the complaints and feedback procedures. There were a number of sessions held across the council including with directorate management teams, service area and team meetings.

In addition to this, guidance is provided to assist managers with completing thorough investigations and comprehensive responses including on a case by case basis. We have worked with the providers of our independent investigators, who have knowledge and experience of complaints across a number of authorities to ensure our practice and guidance is effective and appropriate to fulfil our obligations and ensure best practice in complaints handling.

When managers have provided a response to a complaint, they are asked to record what will be done to resolve it, what lessons have been learnt and what action will be taken to improve services and avoid problems being repeated. The CFT proactively monitor the completion of both action plans and lessons learned.

A summary of the information received regarding the lessons learnt and action taken is included in this report.

5 Themes

The main themes this year are about lack of action however as in other years, this is most often related to communication issues in all areas, including involving all parties fully in assessments and care planning, in a timely way, keeping people up to date and explaining decisions and any changes fully and clearly.

Communication issues continue to be a key theme discussed with staff in the training and awareness raising sessions offered and provided by the CFT, which assists staff in understanding how to improve customer experience and avoid unnecessary or the escalation of complaints.

6 Cost of delivering the complaints procedure including the corporate procedure:

There are ongoing costs attached to delivering an efficient and effective complaints service. These costs should be seen against the inherent costs of not providing this service. These may include customer dissatisfaction escalating, an increase in number of and amount of financial remedies being recommended by the LGSCO, increased judicial reviews and non-compliance with legislation.

The total actual spend for the full service including the Information Governance provision, salary and on-costs was £353,979.

The financial remedies payments made as part of the three different complaints procedures are provided at sections 21, 36 and 48 later of this report.

The council also has to provide investigating officers and independent people for social care complaints where required and the costs for this in this reporting period was £60720.88. This includes the core costs for the service provision and this year also includes the 2 stage three panels. It is noted there has been a significant increase in the costs since last year. This is predominantly due to the increase in the complexity of cases, with a number being related to care provisions of young people moving from children's to adult services, which on occasions involves children, adult and education services.

The complaints team has however working with the agency to better understand and manage these costs without impacting on the thoroughness or independence of the investigation. This has included looking at improving the efficiency around provision of information and arrangements for interviews with staff.

It has been noted by the investigators that conducting interviews and receiving information remotely through a secure portal, during the working from home arrangements, has significantly improved the efficiency and effectiveness for this.

They have been able to receive information quickly and prior to interviews with staff, so they can structure questions more effectively and interview staff and speak to complainants remotely at a mutually convenient time. They are able to arrange for follow up questions and interviews where new points come up, or further clarity is needed, without the need to arrange several appointments to attend the office or try to fit everything for complex cases into one day, when more time is needed.

It is considered this will have a positive impact on the efficiency of the investigations and is likely to have a cost saving as well.

Annual Children's Social Care Complaints and Representations Report April 2019 – March 2020

7 Context

The following information relates to complaints made during the twelve months between 1st April 2019 and 31st March 2020 for children under the Children Act 1989 Representations Procedure (England) Regulations 2006.

All timescales contained within this report are for working days.

In addition, the numbers of compliments are also recorded and these are:

12/13	13/14	14/15	15/16	16/17	17/18	18/19	19/20
6	8	3	23	6	17	22	22

The CFT are aware that many more compliments are received and actively work to encourage staff and teams to forward these to ensure they are recorded. This is to ensure we are able to provide an accurate picture of our customers' experiences of the services they receive.

The compliments received include:

- National Minimum Standards for Foster Carers delivered with respect, politeness and professionalism
- Comments from health visitors & nurses, staff at Mash are taking the time to listen & share.
- Social Worker always professional, nothing too much trouble and made the family feel valued.
- Social Worker and Service Manager prepared very well for meetings, always professional and well prepared, and knew the history of the case and took time to understand the family.

The legislation makes it clear that people should be able to provide feedback and have this responded to, without this being seen as a complaint. Therefore concerns, comments and requests are also logged.

The number of concerns, comments and requests received in this period were:

12/13	13/14	14/15	15/16	16/17	17/18	18/19	19/20
12	13	6	14	11	26	20	33

A concern is logged when someone wants to tell us about a problem, without wanting this to be considered as a complaint.

A comment or request is logged when someone makes a suggestion, or request, or is making the council aware of a problem for the first time. This is then passed to the appropriate person to respond to the issues being raised. If a person remains dissatisfied after receiving a response, this would then be logged as a complaint.

8 Who can make a Complaint?

- Any child or young person (or a parent, or someone who has parental responsibility) who is being looked after by the local authority or is not looked after by them, but is in need.
- Any local authority foster carer (including those caring for children placed through independent fostering agencies).
- Children leaving care
- Special Guardians
- A child or young person (or parent) to whom a Special Guardian order is in place.
- Any person who has applied for an assessment under section 14F (3) or (4).
- Any child or young person who may be adopted, their parents and guardians.
- Persons wishing to adopt a child.
- Any other person whom arrangements for the provision of adoption services extend.
- Adopted persons, their parents, natural parents and former guardians and such other person as the local authority consider has sufficient interest in the child or young person's welfare to warrant their representations being considered by them.

Where a complaint is received from a representative on behalf of a child or young person, we will, where possible, confirm that the child or young person is happy for this to happen and that the complaint received reflects their views.

The complaints manager in consultation with relevant operational managers will decide whether the person is suitable to act in this capacity and has sufficient interest in the child's welfare. If it is decided that a person is not suitable to act as a representative for a child, they will be informed of the decision in writing by the complaints manager. The complaint will then fall outside the statutory procedure. They will however be able to complain through the corporate complaints procedure.

Complaints may also be made by adults relating to a child or young person, but are not being made on their behalf. The complaints manager in consultation with operational managers will decide whether the person has sufficient interest in the child's welfare for the complaint to be considered. The child may also be consulted as part of the decision making process.

9 Grading of Complaints

Complaints are graded following an assessment of issues including severity, complexity, risk to the customer and other customers, risk to the authority, history of similar complaints and likelihood of future similar complaints. Other considerations include, the outcomes wanted to resolve the complaint, who is best placed to consider and effectively respond to the complaint and the complainant's views of how the complaint should be dealt with.

Stage One.

Is dealt with by line managers of the service area the complaint concerns, this includes where the service is being provided on behalf of the council by an external contractor. The expectation is that the managers will have the knowledge and understanding of the issues and delegated responsibility to be able to resolve complaints at this stage quickly, without the need for an in depth formal investigation.

The legislation requires complaints at stage one to be responded to within 10 working days. This can be extended for a further 10 working days in some circumstances, for example where further time is needed to arrange an advocate, or where staff may be away from work. This can only be extended with the agreement of the complainant.

Stage Two.

This stage is implemented where the complainant is dissatisfied with the findings of stage one, or where it is assessed as being appropriate to be considered and responded to at this stage, due to issues including the severity, complexity or risk. Stage two requires an investigation conducted by either an internal manager who has not had any previous involvement in the complaint and has no line management responsibility for the area being complained about, or an external investigating officer. The Assistant Director for children's social care services acts adjudicates on the findings of the investigation, although on occasions, this can be completed by another senior manager with an understanding of children's social care, where the Assistant Director for children's social care services is not available.

The council must offer an advocate to assist children and young people in making a complaint and appoint an independent person to oversee the investigation process at this stage. Stage two complaints falling within the social services statutory complaints procedures should be dealt with in 25 days, although in certain cases this can be extended to 65 days.

Stage Three.

The third stage of the complaints process is the review panel. Where complainants wish to proceed with complaints about statutory social service functions, the council is required to establish a complaints review panel. The panel makes recommendations to the Director of children's social care services, who then makes a decision and provides a written response on the complaint and any action to be taken.

Complaints review panels must be made up of 3 independent panellists. There are various timescales relating to stage three complaints. These are:

- setting up the panel within 30 working days;
- producing the panel's report within 5 working days of the panel; and
- producing the local authority's response within 15 days following receipt of the report.

A further option for complainants is the LGSCO who is empowered to investigate where it appears that a council's own investigations have not resolved the complaint. Complainants can refer their complaint to the LGSCO at any time, although the Ombudsman normally refers the complaint back to the council, unless the council has been given sufficient opportunity to consider and respond to the complaint. The council will usually agree to a complaint being considered by the Ombudsman without the third stage of the internal process having been completed, where it is considered there has been sufficient opportunity to consider and respond to the complaint at stage 2 and further consideration is unlikely to lead to a substantially different outcome.

10 Activity

The CFT recorded 91 complaints under the children's social care procedure during the year, compared with a total of 44 last year.

An additional 12 complaints were received through the corporate complaints procedure, compared to 4 in the previous year.

11 Total complaints made:

Of the 91 complaints dealt with:

- 72 were investigated at stage one of the social care procedures,
- 9 progressed to stage two
- 17 complaints in total heard at stage two with 8 of these being moved straight to stage 2, due to their complexity and or severity.
- 2 complaints were heard at stage 3

12 Comparison with the preceding year

The numbers of complaints being received are small in number and typically fluctuate each year and this is typical of social care complaints received across Yorkshire and Humberside. The figures show an increase of 52% for this reporting period, which is a higher than average increase and the reasons for this are noted in the following information.

13 Complaint outcomes – total

	2015-2016	2016-2017	2017-2018	2018-2019	2019 - 2020
Upheld	3	0	4	6	19
Partly upheld	15	9	10	19	27
Not upheld	8	14	20	14	12
Not proved	0	0	0	0	2
Not pursued	4	3	2	5	14
No response	0	1	2	-	16
Ongoing	4	1	2	0	1
Total	34	28	40	44	91

14 Response Times

A key requirement of complaints procedures is to ensure that individuals are informed of the outcome of their complaints, in an appropriate time frame.

The timescales in working days for children's social care complaints as set out in the regulation are:

- 10 days at Stage 1 (with a further 10 days for more complex complaints or additional time if an advocate is required);
- 25 days at Stage 2 (with maximum extension to 65 days);
- 20 days for the complainant to request a Review Panel;
- 30 days to convene and hold the Review Panel at Stage 3;
- 5 days for the Panel to issue its findings; and
- 15 days for the local authority to respond to the findings.

Details of Complaints by stage

15 Stage One Complaints

There were 72 stage one complaints compared to 34 last year.

It is note this is a significant increase to previous years and it is considered there are a number of reasons for this. These include the fact that there was a

significant period of change within the department with a number of staff shortages. In addition to this there had been a public maladministration report from the Ombudsman in the previous reporting period and training sessions delivered to staff to increase their understanding of the procedure and be more able to ensure customers are aware of and supported to be able to make complaints.

It is not considered receiving larger numbers of complaints is always a negative, because this can show that the procedure is accessible and customers are supported to make complaints which provide invaluable feedback.

It is however a concern when there are a number of complaints with related themes and the council is aware that there was an increase in the number of complaints about a lack of action. These were predominantly related to delays with communication and updating family members and delays in progressing work.

Whilst these were during a period of staff vacancies, it is also noted that the Assistant Director has worked with managers in the Directorate and the Complaints and Feedback team to improve communication and ensure customers are kept up to date, importantly even where there may not be anything new to report, to ensure people are still told this. It is believed the improvements in this will be evidenced in future reports.

These have been categorised as follows:

Stage One - Nature of complaint

	2016 - 2017	2017 - 2018	2018 -2019	2019 -20
Attitude of staff	2	1		-
Disagree with Policy	1	1	1	-
Disagree with Assessment	4	10	9	13
Discrimination	0	0	1	-
Inappropriate Action	12	13	12	32
Lack of Action	6	3	6	22
Quality of Advice/ Communication	1	2	5	5
TOTAL	26	30	34	72

You will note that inappropriate action remains the highest number of complaints this year, with lack of action becoming the next highest theme.

Stage One - Responding in time performance

	2016 - 2017	%*	2017 - 2018	%*	2018 - 2019	%*	2019 - 2020	%*
Within 10 days	19	73%	24	80%	17	50%	31	43%
Within 20 days	2	8%	5	17%	12	34%	8	11%
Over 20 days	2	8%	0	-	1	2%	20	28%
Not Pursued	3	11%	1	3%	4	11%	13	18%
TOTAL	26		30		34		72	

*% figures are rounded to the nearest whole number

You will note that there has been a significant increase in the numbers of complaints where there was no response at stage 1 and it is noted this resulted in more complaints progressing to stage 2. This was during a period of a number of staff changes and shortages within the service area and the Assistant Director has worked with managers in the Directorate and the Complaints and Feedback team to improve this. This will be evidenced in future reports.

Stage One - Outcomes

	2016 - 2017	%*	2017 - 2018	%*	2018 - 2019	%*	2019 - 2020	%*
Upheld	0	-	3	10%	3	8%	16	22%
Partially Upheld	7	27%	7	23%	14	41%	15	21%
Not Upheld	15	58%	16	53%	13	38%	10	14%
Not Proven	0	-	0	-	0	-	2	3%
Not Pursued	3	11%	2	7%	4	11%	13	18%
No response	1	4%	2	7%	-	-	16	22%
TOTAL	26		30		34		72	

*% figures are rounded to the nearest whole number

16 Stage Two Complaints

Stage Two - Nature of Complaint

	2016 -2017	2017 -2018	2018 -2019	2019 - 2020
Attitude of staff	-	-	-	-
Disagree with Policy	-	-	-	-
Disagree with Assessment	-	1	3	6
Discrimination	-	-	-	-
Inappropriate Action	3	4	3	6
Lack of Action	1	3	4	4
Quality of Advice/ Communication	1	2	-	1
TOTAL	4	10	10	17

It is noted there has been an increase in the number of complaints received at this stage, for the reasons noted in the information at stage one related to both the lack of response at stage one. It also noted that it is likely to result in an increase of complaints at this stage in the next reporting period, due to the time periods of escalations from stage one to stage two.

Stage Two – Responding in time performance

	2016 - 2017	%*	2017 - 2018	%*	2018 - 2019	%*	2019 - 2020	%*
Within 25days	1	25%	6	60%	1	10%	3	17%
Within 65 days	2	50%	0	-	2	20%	3	17%
Over timescale	1	25%	4	40%	6	60%	9	51%
Not Pursued	-	-	0	-	1	10%	1	6%
Ongoing	-	-	0	-	-	-	1	6%
TOTAL	4		10		10		17	

It is noted the majority of responses at this stage were “over the timescale”. It is important to remember complaints at this stage are often complex, with a number of elements of complaint and the timescales may also be related to the need to arrange advocates and appointments with both staff and complainants, particularly at adjudication. The CFT ensure that complainants are kept updated in these cases.

Stage Two Outcomes

	2015 - 2016	%*	2016 - 2017	%*	2017 - 2018	%*	2017 - 2018	%*	2019 - 2020	%*
Upheld	1	10%	-	-	-		3	30%	2	12%
Partially Upheld	4	40%	2	50%	3	30%	5	50%	11	65%
Not Upheld	-	-	-	-	3	30%	1	10%	2	12%
Not Pursued	1	10%	-	-	2	20%	1	30%	1	6%
No response sent	-	-	1	25%	2	20%	-	-	-	-
Ongoing	4	40%	1	25%	-		-	-	1	6%
TOTAL	10		4		10		10		17	

We are pleased to be able to report that there have not been any cases where responses have not been sent at this stage for the last two years, which indicates the commitment from the Assistant Director to take complaints seriously and use the feedback to learn lessons and improve services.

17 Stage Three Complaints

There were 2 children's stage three complaints, which is the first time for several years that complaints have progressed to this stage, although in previous years a number of complaint progressed from stage 2 straight to the Ombudsman.

The process at stage three of the Children's Social Care Complaints Procedure is an independent review panel that will consider whether the investigation, findings and recommendations at stage two, were thorough, logical and fair. The Panel then provides a report to the Director of Children's Services with their conclusions and any recommendations considered appropriate. The Director would then respond confirming whether they agree with the conclusions and any recommendations made.

Stage Three - Nature of Complaint

	2018 -2019	2019 - 2020
Attitude of staff	-	-
Disagree with Policy	-	-
Disagree with Assessment	-	-
Discrimination	-	-
Inappropriate Action	-	-
Lack of Action	-	2
Quality of Advice/ Communication	-	-
TOTAL	-	-

Stage Three - Responding in time performance

	2018 -	%*	2019 -	%*
	2019		2020	
Within 15 days	-	-	1	50%
Over 15 days	-	-	1	50%
TOTAL	-	-	2	

It is noted that the delay in responding at this stage was due to Covid19

Stage Three Outcomes

	2018 -	%*	2019 -	%*
	2019		2020	
Upheld	-	-	1	50%
Partially Upheld	-	-	1	50%
Not Upheld	-	-	-	
Not Pursued	-	-	-	
No response sent	-	-	-	
Ongoing	-	-	-	
TOTAL	-	-	2	

In addition to the information given above for complaints made through the children's' social care complaints procedure, ten complaints were received as a corporate stage one. One of these complaints were escalated within the corporate complaints procedure and a further complaint at this stage had previously been considered as a request. Complaints are dealt with under the corporate procedure when the complainant is not complaining with the consent of the customer, or it is considered they are not complaining in the customer's best interest.

18 Percentage escalation

The following table indicates how many complaints in children's services have been escalated. By measuring these figures as a percentage, we are able to gauge the implied customer satisfaction levels.

	Number	% escalated to next stage	% implied customer satisfaction
Stage 1 to Stage 2	9 of 72	12.5%	87.5%
Stage 2 to Stage 3	2 of 17	12%	88%

19 Equalities Monitoring Information

Following the guidance produced by the Department of Health and the Department for Education and Skills, we have to seek to identify who is making complaints to get a greater understanding of them. The following information was provided:

Gender

	2015 - 2016	2016 - 2017	2017 - 2018	2018 – 2019	2019 -2020
Male	5	11	10	15	17
Female	29	16	25	26	64
Male & Female	-	3	5	3	0
Not stated	-	-	-	44	0

Age

- For the those complaints made by an advocate or young person, 2 were aged under 16 and 2 between the ages of 16 and 24.

20 Who made the complaints

- 8 complaints were made by a child or young person via an advocate.
- 3 complaints were made direct by a child or young person.
- 11 complaints were made by family or friends on behalf of a child or young person.
- 69 complaints were made by adults about the service provided to them.

The Complaints Manager is aware the majority of complaints about Children's Services are not made by children or young people receiving a service. To ensure that children are aware of and are supported to use the complaints and feedback procedure, the team works closely with the Children's Rights team and where appropriate, other support and advocacy services and others making a complaint on behalf of a child or young person.

The council has a statutory obligation to offer advocacy support to any child or young person making a complaint and the Children's Rights team make people aware of the options available for raising comments, concerns, complaints and compliments and provide advocacy support to assist with this where requested.

The CFT are also available to attend meetings with staff members, children and young people and on occasions foster carers to raise awareness of and understanding about how people can use the procedure.

21 Costs and Payments

The council has an obligation to ensure independence in the children's social care complaints procedure. This includes a requirement for:

- A person independent of the council to oversee all complaints at stage two made by children and young people.
- To ensure the investigator at stage two has not had any involvement in the complaint or line management responsibility for the services being complained about.
- To have a panel of 3 independent people at stage three.

The costs of this in this reporting period are included in the section 6.

In addition to this the council provides financial recompense if, after a complaint has been investigated or as part of an LGSCO's investigation, it is concluded that:

- the LGSCO would find that there has been maladministration by the council causing injustice to the complainant; and
- the LGSCO would recommend that financial recompense should therefore be paid to the complainant.

Details of payments:

£1,526.42	Recalculation of SGO allowance
£5,626.74	Recalculation of SGO allowance
£1,028.05	Reimbursement of loss of earnings and court costs.
£600	LGSCO Recommendation Part contribution towards legal fees in recognition of the delay and timeliness of CYC communication.
£400	LGSCO Recommendation Recognition for upset, frustration and avoidable time and trouble.
£3,485.64	Loss of earnings
£300	Distress, plus time and trouble.
£12,966.85	Total

22 Alternative Dispute Resolution

It is important to note that the Department for Education and Skills Guidance makes it clear that nothing in the procedure should preclude Alternative Dispute

Resolution and that if agreed by both complainant and the Complaints Manager the council should explore this option.

Possible alternatives which may be considered by the Complaints Manager include mediation, the opportunity to meet with senior managers, or the possibility of contributing to the review of policies and procedures.

23 Learning Lessons/Practice Improvements

The council is always happy to consider appropriate ways of resolving a customer's complaint. Some of the types of action the council has undertaken to resolve complaints have been issuing apologies, meeting with customers to hear their concerns and suggestions for improvements and putting these improvements into place. This has been particularly relevant in the case of communicating effectively with customers and putting strategies into place to ensure that people are kept up to date. The council also offers a re-assessment of needs where possible, to ensure that nothing has been missed or that circumstances have not changed.

Complaints provide senior managers with useful information in respect of the way that services are delivered. The consideration of complaints has included the agreement to undertake the following actions, in addition to apologies and financial recompense:

- Strengthened care reviews
- Improved timeliness of sharing documents.
- Making sure copied of reports are included on files
- Review services for Special Guardianship cases
- Management of cases completed by qualified rather than unqualified workers
- Improved communication

Annual Adult Social Care Complaints Report April 2019 to March 2020

24 Context

This report provides information about complaints made during the twelve months between 1st April 2019 and 31st March 2020 for adults under the Local Authority Social Services and National Health Service Complaints (England) Regulations 2009.

All timescales contained within this report are for working days.

The structures for reporting have changed and are reflected in the reporting for adult service as shown in the below tables.

In addition the numbers of compliments are also recorded were:

	16/17	17/18		18/19	19/20
Adult services	19	49	Be Independent		1
Occupational therapy	-	-	Commissioning & Contract Management	1	-
Commissioning and Purchasing (C&P)	-	1	Commissioning Provision	7	-
Mental health	28	2	Joint Commissioning		
Learning disability services	4	0	Assessment	16	10
Public health	-	1	Care Homes	9	6
			Community Provision		22
			Mental health Safeguarding & DOLS	4	3

The CFT are aware that many more compliments are received and actively work to encourage staff and teams to forward these to ensure they are recorded. This is to ensure that we are able to provide a true picture of our customers' experiences of the services they receive.

The compliments received included:

- Thank you for calling an ambulance in time and saving customers life.
- Thank you for the time and effort with a relatives move into a care home
- Thank you for a gardening job well done
- Fantastic job supporting my relative and helping family navigate challenging care situations.

- Worker was professional and treated customer with dignity.
- Occupational therapist showed care, kindness, respect while fitting stair lift.
- Worker went above and beyond in end of life arrangements

The legislation makes it clear that people should be able to provide feedback and have this responded to without this being seen as a complaint. Therefore concerns, comments and requests are also logged.

The number of concerns, comments and requests received in this period were:

	16/17	17/18		18/19	19/20
Adult services	6	7	Be Independent	-	1
Occupational therapy		-	Commissioning & Contract Management	4	2
Commissioning and Purchasing (C&P) and mental health	5	-	Commissioning Provision	-	-
Learning disability services		-	Joint Commissioning	-	-
Public health	3	-	Assessment	3	10
			Care Homes	5	3
			Community Provision	8	8
			Mental health Safeguarding & DOLS	11	9

25 Who can make a Complaint?

Someone who:

- The local authority has a power or duty to provide or secure the provision of a social service for him/her and
- His/her need for such a service has (by whatever means) come to the attention of the Authority.

This definition also applies to a person acting on behalf of someone who meets the above requirements.

A complaint can be made by a representative where the Complaints Manager receives permission from the eligible person, usually in writing, giving their permission for the representative to make the complaint on their behalf. A representative will also be able to make a complaint where the eligible person is not capable of making the complaint themselves, this includes when they have died.

The Complaints Manager will decide if a person is suitable to act as a representative, if it is decided they are not acting in the eligible person's best interests, they will inform them in writing of the reasons for this.

If a customer is not eligible under the terms of the Act, they will always be able to have their complaint looked at under the council's corporate complaints procedure.

26 Grading of Complaints

The department of health designed the following tool to assess the seriousness of complaints and decide the relevant action:

Step 1: Decide how serious the issue is

Seriousness	Description
Low	<p>Unsatisfactory service or experience not directly related to care. No impact or risk to provision of care.</p> <p>OR</p> <p>Unsatisfactory service or experience related to care, usually a single resolvable issue. Minimal impact and relative minimal risk to the provision of care or the service. No real risk of litigation.</p>
Medium	<p>Service or experience below reasonable expectations in several ways, but not causing lasting problems. Has potential to impact on service provision. Some potential for litigation.</p>
High	<p>Significant issues regarding standards, quality of care and safeguarding of or denial of rights. Complaints with clear quality assurance or risk management issues that may cause lasting problems for the organisation, and so require investigation. Possibility of litigation and adverse local publicity.</p> <p>OR</p> <p>Serious issues that may cause long-term damage, such as grossly substandard care, professional misconduct or death. Will require immediate and in-depth investigation. May involve serious safety issues. A high probability of litigation and strong possibility of adverse national publicity.</p>

Step 2: Decide how likely the issue is to recur

Likelihood	Description
Rare	Isolated or 'one off' – slight or vague connection to service provision.
Unlikely	Rare – unusual but may have happened before.
Possible	Happens from time to time – not frequently or regularly.
Likely	Will probably occur several times a year.
Almost certain	Recurring and frequent, predictable.

Step 3: How to categorise the risk

Seriousness	Likelihood of recurrence				
	Rare	Unlikely	Possible	Likely	Almost Certain
Low	Low				
		Moderate			
Medium					
			High		
High				Extreme	

The CFT grades the complaints as:

- Low = Green - Can be resolved locally
- Medium = Amber - Needs a response from the Director
- High = Red - Needs a response from the Director

Complainants are contacted by the CFT to design a complaints plan and agree an appropriate response timescale. This is often done through an acknowledgment letter requesting the complainant to confirm the council's understanding of the complaint and the timescale for response.

Following the response, a complainant can ask the Local Government and Social care Ombudsman (LGSCO) to investigate if they remain dissatisfied.

27 Activity

The CFT recorded 53 complaints under the adult social care procedure during the year 2019 – 2020, compared with a total of 21 the previous year.

An additional 4 complaints were received about adult social care services under the corporate complaints procedure, compared to 12 the previous year.

28 Comparison with the preceding year

The figures show an increase in the number of complaints received in 2019 – 2020 through the adults social care procedures.

29 Outcomes of complaints:

	2016 - 2017	2017 - 2018	2018 - 2019	2019 - 2020
Upheld	9	4	4	15
Partly upheld	12	8	11	12
Not upheld	26	6	5	16
Not proved	2	1	0	1
Not pursued	1	1	1	3
No response	0	1	0	6
Ongoing	0	0	0	0
Total	50	21	21	53

30 Response Times

A key requirement of the reform of complaints procedures is the importance of informing service users of the outcome of their complaints, in an appropriate time frame.

The Department of Health guidance on deciding how long it should take to respond to a complaint states:

“If someone makes a complaint, your organisation has to acknowledge it within three working days. The person making the complaint will want to know what is being done – and when. However, accurately gauging how long an issue may take to resolve can be difficult, especially if it is a complex matter involving more than one person or organisation. To help judge how long a complaint might take to resolve, it is important to:

- *address the concerns raised as quickly as possible*
- *stay in regular contact with whoever has complained to update them on progress*
- *stick to any agreements you make – and, if for any reason you can’t, explain why.*

It is good practice to review any case lasting more than six months, to ensure everything is being done to resolve it.”

Details of Complaints

31 Green Complaints

There were 44 complaints graded as Green in adult services compared to 16 last year. It is noted this is a significant increase

It is not considered receiving larger numbers of complaints is always a negative, because this can show that the procedure is accessible and customers are supported to make complaints which provide invaluable feedback.

It is however a concern when there are a number of complaints with related themes and the council is aware that there was an increase in the number of complaints about a lack of action. The majority of these were about delays either in completing assessments or arranging the support identified.

It is also noted there has been an increase in complaints about the arrangements for care provision for young people moving into adult services. Senior managers have been made aware of and been involved in providing the response for these complaints to ensure any lessons can be identified and service improvements made were necessary.

Complaints graded at this level were categorised as follows:

BI	= Be Independent
CCM	= Commissioning & Contract Management
Commis Provision	= Commissioning Provision
JC	= Joint Commissioning
A	= Assessment
CH	= Care Homes
Com Provision	= Community Provision
MH/S/DOLS	= Mental health Safeguarding & DOLS

Green Nature of complaint

	BI	CCM	Commis Provision	JC	A	CH	Com Provision	MH S DOLS	Total
Attitude of staff	-	1	-	-	-	-	-	-	1
Disagree with Policy	-	-	-	-	1	-	-	-	1
Disagree with Assessment	-	-	-	-	4	-	2	3	9
Discrimination	-	-	-	-	-	-	-	-	-
Inappropriate Action	-	-	-	-	8	-	3	3	14
Lack of Action	-	3	-	-	2	1	2	4	12
Quality of Advice/ Communication	-	1	-	-	3	1	1	1	7
TOTAL	-	5	-	-	18	2	8	11	44

It is not uncommon for disagree with assessment and inappropriate action to be the categories receiving the most complaints. It is also noted there are a similar volume of complaints about lack of action in this reporting period and the majority of these were about delays either in completing assessments or arranging the support identified.

It is however noted that 5 complaints did not receive any response and this is something which will continue to be brought to the attention of senior managers to assist with improving this for future complaints.

Green Response Times

	BI	CCM	Commis Provision	JC	A	CH	Com Provision	MH S DOLS	Total
Within 10 days	-	4	-	-	13	2	5	8	32
Within 25 days	-	1	-	-	1	-	2	1	5
Over 25 days	-	-	-	-	2	-	1	2	5
Not Pursued	-	-	-	-	2	-	-	-	2
TOTAL	-	5	-	-	18	2	8	11	44

It is important to remember that the legislation and guidance for adults does not prescribe actual timescales for responses. However we do manage and monitor performance in this area using best practice across the different complaints legislation and guidance. The above table highlights that we are responding to complaints at this stage within the shortest timescale.

Green Outcomes

	BI	CCM	Commis Provision	JC	A	CH	Com Provision	MH S DOLS	Total
Upheld	-	-	-	-	6	-	4	2	12
Partially Upheld	-	2	-	-	5	-	1	2	10
Not Upheld	-	2	-	-	3	2	2	5	14
No Response	-	-	-	-	2	-	1	2	5
Not Pursued	-	1	-	-	2	-	-	-	3
TOTAL	-	5	-	-	18	2	8	11	44

32 Amber Complaints

There were 7 complaints graded as Amber in adult services compared to 5 in the last year.

Amber Nature of Complaint

	BI	CCM	Commis Provision	JC	A	CH	Com Provision	MH S DOLS	Total
Attitude of staff	-	-	-	-	-	-	-	-	-
Disagree with Policy	-	-	-	-	-	-	-	-	-
Disagree with Assessment	-	-	-	-	2	-	-	-	2
Discrimination	-	-	-	-	-	-	-	-	-
Inappropriate Action	-	-	-	-	-	1	-	1	2
Lack of Action	-	-	-	-	2	-	-	1	3
Quality of Advice/ Communication	-	-	-	-	-	-	-	-	-
TOTAL	-	-	-	-	4	1	-	2	7

Amber Response Times

	BI	CCM	Commis Provision	JC	A	CH	Com Provision	MH S DOLS	Total
Within 25days	-	-	-	-	2	-	-	2	4
Within 65 days	-	-	-	-	-	1	-	-	1
Over timescale	-	-	-	-	2	-	-	-	2
Not Pursued	-	-	-	-	-	-	-	-	-
TOTAL	-	-	-	-	4	1	-	2	7

Amber Outcomes

	BI	CCM	Commis Provision	JC	A	CH	Com Provision	MH S DOLS	Total
Upheld	-	-	-	-	1	1	-	1	3
Partially Upheld	-	-	-	-	1	-	-	1	2
Not Upheld	-	-	-	-	2	-	-	-	2
No Response	-	-	-	-	-	-	-	-	-
Not Pursued	-	-	-	-	-	-	-	-	-
TOTAL	-	-	-	-	4	1	-	2	7

33 Red Complaints

There were 2 complaints graded as Red in adult services.

Red Nature of Complaint

	BI	CCM	Commis Provision	JC	A	CH	Com Provision	MH S DOLS	Total
Attitude of staff	-	-	-	-	-	-	-	-	-
Disagree with Policy	-	-	-	-	-	-	-	-	-
Disagree with Assessment	-	-	-	-	1	-	-	-	1
Discrimination	-	-	-	-	-	-	-	-	-
Inappropriate Action	-	-	-	-	1	-	-	-	1
Lack of Action	-	-	-	-	-	-	-	-	-
Quality of Advice/ Communication	-	-	-	-	-	-	-	-	-
TOTAL	-	-	-	-	2	-	-	-	2

Red Response Times

	BI	CCM	Commis Provision	JC	A	CH	Com Provision	MH S DOLS	Total
Within 25days	-	-	-	-	1	-	-	-	1
Within 65 days	-	-	-	-	-	-	-	-	-
Over timescale	-	-	-	-	-	-	-	-	-
Not Pursued	-	-	-	-	1	-	-	-	1
TOTAL	-	-	-	-	2	-	-	-	2

Red Outcomes

	BI	CCM	Commis Provision	JC	A	CH	Com Provision	MH S DOLS	Total
Upheld	-	-	-	-	-	-	-	-	-
Partially Upheld	-	-	-	-	-	-	-	-	-
Not Upheld	-	-	-	-	-	-	-	-	-
Not proven	-	-	-	-	1	-	-	-	1
No Response	-	-	-	-	-	-	-	-	1
Not Pursued	-	-	-	-	1	-	-	-	-
TOTAL	-	-	-	-	2	-	-	-	2

In addition to the above, there were 3 complaints about adult social care services made under the corporate complaints procedure at stage one. None of them progressed further.

Complaints are dealt with under the corporate procedure when the complainant is not complaining with the consent of the customer, or it may be considered they are not complaining in the customer's best interest.

34 Equalities Monitoring Information

Following the guidance and best practice, it is important to understand who is making complaints and so we seek to identify who is making complaints. Only the following information was provided:

Gender

Male: 16

Female: 37

35 Who made the complaints

- 25 complaints were received directly from a customer
- 23 complaints were made by a family member
- 3 complaints were made by an advocate
- 2 complaints were made by other professionals on behalf of a customer

36 Payments

The council provides financial recompense if, after a complaint has been investigated or as part of an LGSCO's investigation, it is concluded that the LGSCO would find that there has been maladministration by the council causing injustice to the complainant with a recommendation that financial recompense should therefore be paid to the complainant.

Detail of payments made:

£403.68	Refund of social care element of self funder admin charge
£1,000	Distress, plus time and trouble.
£1,588.06	Reimbursement of incorrect warden charges.
£2,991.74	Total

37 Alternative Dispute Resolution

It is important to note that the complaints regulations and guidance for adult social care complaints are that a plan needs to be agreed between the complainant and the Complaints Manager about how the complaint will be dealt with and responded to, what outcomes are wanted and what can be realistically achieved.

Possible alternatives which may be considered by the Complaints Manager include mediation, the opportunity to meet with senior managers, or the possibility of contributing to the review of policies and procedures.

38 Complaints dealt with by the local authority and NHS Bodies

The CFT works with contracted agencies and statutory agencies to identify the main themes concerned in a complaint. Informal agreements are in place to provide the customer with a co-ordinated response with the agency responsible for the provision of the main areas of complaint taking the lead with co-operation from the other agencies as required.

39 Learning Lessons/Practice Improvements

The council is always happy to consider appropriate ways of resolving a customer's complaint including meeting with customers to hear their concerns and suggestions for improvements and putting these improvements into place.

This has been particularly relevant in the case of communicating effectively with customers and putting strategies into place to ensure that people are kept up to date. The council also offers a re-assessment of needs where possible, to ensure that nothing has been missed or that circumstances have not changed.

Complaints provide senior managers with useful information in respect of the way that services are delivered. The consideration of complaints has resulted in agreement to undertake the following actions, in addition to apologies and financial recompense:

- Review of support for people receiving Direct payments
- Further Monitoring and auditing of the service, to analyse in greater detail any safeguarding, accidents and incidents which occur, and learn lessons from these.
- Reminder to staff of the importance of contacting a GP rather than a nurse where appropriate
- Reminder to staff of the importance of recognising families comments about what their relatives need.

40 Public Health

Complaints about services related to the functions of Public Health also fall under the legislation “Local Authority Social Services and National Health Service Complaints (England) Regulations 2009” and are therefore dealt with in the same way as those for adult social care services.

There have been no complaints reported about the functions of Public Health in this reporting period and similarly no compliments. There were however 5 comments all of which were received in the period January – March 2020 and related to comments and questions about Covid19.

Annual Corporate Complaints Procedure Report April 2019 to March 2020

41 Context

This is the fourth year we have produced an annual report for complaints considered under the Corporate Complaints Procedure. This procedure covers all complaints about services provided by the council where no statutory procedure exists.

All timescales contained within this report are for working days.

In addition the numbers of compliments are also recorded and these are shown below for the directorates as they were known during the reporting period.

Directorate	Number of compliments
CCS	51
CEC	10
EAP	82
HHASC	63
TOTAL	206

The CFT are aware that many more compliments are received and actively work to encourage staff and teams to forward these to ensure they are recorded. This is to ensure we are able to provide a true picture of our customers' experiences of the services they receive.

The compliments received included thanks for:

- Thank you for your help at a difficult time, your assistance, help & kindness was appreciated.
- Excellent job upgrading the boiler.
- Praise regarding assistance provided with application, following inspection.
- Thank you to gardeners for work on customer's house.
- Thank you to team for work on garden at address.
- Thank you for work on kitchens at Schools.
- Thank you to NEO for prompt removal of fly-tipped carpet on the river bank.
- Time, effort and hard work to keep school ticking over good workmanship.
- Thank you for your help & support and providing a lift, so I can stay in my own home.
- Officer is knowledgeable, answering questions and dealing with our application.
- Thanks for the help to facilitate a swap of properties

- Thank you for all your help & support for fitting the lift. It means I can stay in my own home.
- Thank you to Pete Morley, Rob Burnett & Gabriel in heating and repairs.

The good practice from the statutory processes is clear that people should be able to provide feedback and have this responded to without this being seen as a complaint. Therefore concerns, comments and requests are also logged in the corporate procedure and these are shown below:

Directorate	Number of concerns, comments and requests
CCS	179
CEC	19
EAP	559
HHASC	252
TOTAL	1,009

42 Who can make a Complaint?

The council's corporate complaint policy and procedures states we will accept complaints from

- a member of public or anyone acting on behalf of a customer with the proper authority and consent,

And using any of the following contact methods:

- in person
- by phone
- by letter
- by email
- through our website. www.york.gov.uk

43 Grading of Complaints

The CFT assess the appropriate stage to investigate a complaint or referral to the relevant Ombudsman, taking account of issues such as:

- risk to the customer and the authority
- severity of the risk
- whether the issues in question are a one off, are a reoccurrence and likelihood of reoccurrence.

44 Response Times

It is considered good practice that a key requirement of a complaints procedure is the importance of informing service users of the outcome of their complaints in an appropriate time frame.

It is however recognised that these timescales are shorter in all cases than those set out in legislation. The council is currently reviewing ways of ensuring a more thorough investigation at an earlier stage to provide appropriate resolutions for an increased number of complaints. This review will consider how complaints are investigated and the grading and timescales for this.

The time limits for the council's corporate complaints procedure are:

- Stage One 5 working days
- Stage Two 15 working days
- Stage Three 20 working days

Details of complaints

45 Stage One Complaints

Primary theme by directorate

	Staff attitude	Disagree with assessment	Disagree with policy	Discrimination	Inappropriate action	Lack of action	Quality of advice, communication/work	TOTAL
CCS	1	25	7	0	66	22	13	134
CEC	0	0	0	0	2	4	2	8
EAP	6	31	69	0	271	540	27	944
HHASC	5	15	6	0	64	77	9	176
Total	12	71	82	0	403	643	51	1262

Outcome by directorate

	upheld	Not upheld	Partly upheld	Not pursued	No response	Not proven	TOTAL
CCS	38	55	26	4	8	3	134
CEC	4	1	0	1	1	1	8
EAP	521	165	132	14	90	22	944
HHASC	38	67	27	7	20	17	176
Total	601	288	185	26	119	43	1262

Responding in time performance by directorate

	In time	Out of time	Not pursued	TOTAL
CCS	109	21	4	134
CEC	4	3	1	8
EAP	632	298	14	944
HHASC	109	60	7	176
Total	854	382	26	1262

46 Stage Two Complaints

It is noted that a number of complaints for the CEC directorate included complaints about the provision of educational support and included elements of the complaint relating to the transition of support from children into adult services. Some of the complaints relating to housing services also included elements relating to transition arrangements and education and the housing elements were around adaptation to properties.

Primary theme by directorate

	Staff attitude	Disagree with assessment	Disagree with policy	Discrimination	Inappropriate action	Lack of action	Quality of advice, communication/ work	TOTAL
CCS	0	5	2	0	13	3	0	23
CEC	0	1	1	0	1	1	1	5
EAP	1	6	5	0	53	136	4	205
HHASC	1	7	0	0	9	21	1	39
TOTAL	2	19	8	0	76	161	6	272

Outcome by directorate

	Upheld	Not upheld	Partly upheld	Not pursued	No response	Not proven	TOTAL
CCS	1	16	4	1	1	0	23
CEC	1	2	1	0	1	0	5
EAP	117	17	23	5	41	2	205
HHASC	11	10	5	3	10	0	39
Total	130	45	33	9	53	2	272

Responding in time performance by directorate

	In time	Out of time	Not pursued	TOTAL
CCS	13	9	1	23
CEC	3	2	0	5
EAP	86	114	5	205
HHASC	21	15	3	39
Total	123	140	9	272

47 Stage Three Complaints**Primary theme by directorate**

	Staff attitude	Disagree with assessment	Disagree with policy	Discrimination	Inappropriate action	Lack of action	Quality of advice, communication/work	TOTAL
CCS	0	2	0	0	1	0	0	3
CEC	0	1	0	0	0	0	0	1
EAP	0	2	1	0	0	8	0	11
HHASC	0	0	1	0	4	1	0	6
CEX	0	0	0	0	1	0	0	1
TOTAL	0	5	2	0	6	9	0	22

Outcome by directorate

	Upheld	Not upheld	Partly upheld	Not pursued	No response	Not proven	Ongoing	TOTAL
CCS	0	3	0	0	0	0	0	3
CEC	0	0	0	0	0	0	1	1
EAP	3	4	1	2	0	0	1	11
HHASC	1	3	1	1	0	0	0	6
CEX	0	1	0	0	0	0	0	1
TOTAL	4	11	2	3	0	0	2	22

The complaints which are ongoing were received at stage one between 1 April 2019 and 31 March 2020, but progressed to stage 3 following the 31st March 2020.

Responding in time performance by directorate

	In time	Out of time	Not pursued	Ongoing	TOTAL
CCS	3	0	0	0	3
CEC	0	0	0	1	1
EAP	1	7	2	1	11
HHASC	5	0	1	0	6
CEX	1	0	0	0	1
TOTAL	10	7	3	2	22

As the council is committed to transparency and where there is no conflict or risk to the complainant's interest or could compromise their anonymity, we have included the summary details of the LGSCO findings at Annex 1.

This is similar to how the LGSCO determines which decisions to publish. For the decisions they do publish, they do not use real names. You can search the LGSCO's published decisions on the following link:

<http://www.lgo.org.uk/decisions>

48 Payments

The council provides financial recompense if, after a complaint has been investigated or as part of an LGSCO's investigation, it is concluded that the LGSCO would find that there has been maladministration by the council causing injustice to the complainant; and would recommend that financial recompense should therefore be paid to the complainant.

Details of payments were made:

£100	Time and trouble repeated missed assisted collections
£65	Removal of council tax charges.
£44	Refund of bulky waste collections.
£21.20	Recompense for incorrect parking charge.
£10	Recompense for broken plant pot.
£860.61	Reimbursement of rent charge.
£146	Reimbursement of planning charge.
£250	LGSCO Recommendation. Payment in recognition of avoidable distress
£100	Housing Ombudsman order. Compensation for not investigating complaint to landlord about neighbours CCTV.
£1,597	Total

49 Alternative Dispute Resolution

Based on the good practice guidance in the statutory complaints procedures, the council also considers whether there would be an appropriate alternative way of resolving complaints, in the corporate procedure, rather than completing an investigation.

Possible alternatives which may be considered by the Complaints Manager include mediation, the opportunity to meet with senior managers, or the possibility of contributing to the review of policies and procedures.

50 Learning Lessons/Practice Improvements

The council is always happy to consider appropriate ways of resolving a customer's complaint and this has meeting with customers to hear their concerns and suggestions for improvements and putting these improvements into place.

This has been particularly relevant in the case of communicating effectively with customers and putting strategies into place to ensure that people are kept up to date.

Complaints provide senior managers with useful information in respect of the way that services are delivered. The consideration of complaints has resulted in agreement to undertake the following actions, in addition to apologies and financial recompense:

- Road markings were reinstated
- Additional quality checks and monitoring
- Improved communication and updates

Annex 1

Complaints received by the Ombudsman

Category	Received
Adult Care Services	30 May 2019
Adult Care Services	14 Jun 2019
Adult Care Services	02 Aug 2019
Adult Care Services	07 Aug 2019
Adult Care Services	12 Sep 2019
Adult Care Services	18 Sep 2019
Adult Care Services	18 Oct 2019
Adult Care Services	18 Feb 2020
Adult Care Services	22 Jan 2020

Adult Care Services	06 Feb 2020
Adult Care Services	17 Feb 2020
Adult Care Services	04 Mar 2020
Adult Care Services	20 Feb 2020
Adult Care Services	21 Feb 2020
Benefits & Tax	20 Jun 2019
Benefits & Tax	23 Jul 2019
Benefits & Tax	28 Aug 2019
Benefits & Tax	11 Sep 2019
Benefits & Tax	13 Feb 2020
Benefits & Tax	03 Mar 2020
Benefits & Tax	03 Mar 2020
Corporate & Other Services	11 Apr 2019
Corporate & Other Services	09 May 2019
Corporate & Other Services	24 May 2019
Corporate & Other Services	31 Oct 2019
Corporate & Other Services	20 Dec 2019
Corporate & Other Services	17 Feb 2020
Education & Childrens Services	02 Apr 2019
Education & Childrens Services	03 Dec 2019
Education & Childrens Services	30 Sep 2019
Education & Childrens Services	15 Nov 2019
Education & Childrens Services	03 Jan 2020
Education & Childrens Services	27 Jan 2020
Education & Childrens Services	11 Feb 2020

Category	Received
Education & Childrens Services	26 Feb 2020
Environmental Services & Public Protection & Regulation	28 May 2019
Environmental Services & Public Protection & Regulation	21 Jun 2019
Environmental Services & Public Protection & Regulation	20 Jun 2019
Environmental Services & Public Protection & Regulation	23 Jul 2019
Environmental Services & Public Protection & Regulation	30 Sep 2019
Environmental Services & Public Protection & Regulation	02 Oct 2019
Environmental Services & Public Protection & Regulation	21 Oct 2019
Environmental Services & Public Protection & Regulation	31 Oct 2019
Highways & Transport	28 May 2019
Highways & Transport	02 Aug 2019
Highways & Transport	25 Sep 2019
Highways & Transport	01 Oct 2019

Highways & Transport	30 Oct 2019
Highways & Transport	07 Nov 2019
Highways & Transport	23 Dec 2019
Highways & Transport	16 Jan 2020
Housing	09 Oct 2019
Housing	16 May 2019
Housing	04 Jun 2019
Null	10 Sep 2019
Null	17 Jan 2020
Planning & Development	06 Jun 2019
Planning & Development	26 Apr 2019
Planning & Development	26 Apr 2019
Planning & Development	26 Apr 2019
Planning & Development	16 Jul 2019
Planning & Development	16 May 2019
Planning & Development	26 Jun 2019
Planning & Development	02 Sep 2019
Planning & Development	05 Dec 2019
Planning & Development	07 Jan 2020
Planning & Development	03 Mar 2020
Planning & Development	30 Mar 2020

Complaints Decided By The Ombudsman

Category	Decided	Decision	Decison Reason	Remedy	Service improvement recommendations
Planning & Development	24/07/2019	Advice given	Previously considered and decided		

Education & Childrens Services	06/02/2020	Upheld	mal & inj	Apology,Financial Redress: Quantifiable Loss,Provide training and/or guidance	The Council will: Remind officers of the importance of responding promptly to communication from parents and their representatives. Ensure decision letters following the post-maintained education panel are clear that placements are based on need, not affordability. Ensure it has a process for notifying families when officers assigned to their case change. Remind officers overseeing annual reviews of the need to issue a decision in writing within four weeks of the review confirming if the Council will maintain, amend or cease to maintain a plan.Officers will also be reminded of the timescales in the code for completing reviews for young people moving between post-16 institutions.
Education & Childrens Services	25/07/2019	Upheld	mal & inj	Apology,Financial redress: Avoidable distress/time and trouble	
Adult Care Services	01/05/2019	Closed after initial enquiries	26B(2) not made in 12 months		
Highways & Transport	09/05/2019	Upheld	mal & inj	Apology,Financial redress: Avoidable distress/time and trouble,Procedure or policy change/review,Provide services	To Council agreed to review the service it provides for handling applications for definitive map modification orders with the aim of reducing the backlog of applications.
Planning & Development	24/04/2019	Upheld	mal & inj - no further action, BinJ already remedied		
Adult Care Services	09/08/2019	Not Upheld	no mal		

Education & Childrens Services	06/11/2019	Upheld	mal & inj	Apology,Financial redress: Avoidable distress/time and trouble,New appeal/review or reconsidered decision,Procedur e or policy change/review	The Council has agreed to develop a joint action plan between adult and children's services to explain how it will improve its practice to plan ahead for transitions from children to adult services support. It will also ensure, as part of this review, it keeps adequate records of when it sends key documents (for example assessments and care plans) to person's concerned. The Council will provide the action plan to the Ombudsman.
Highways & Transport	05/04/2019	Closed after initial enquiries	26(6)(c) Court remedy		
Benefits & Tax	10/06/2019	Closed after initial enquiries	Not warranted by alleged injustice		
Education & Childrens Services	02/04/2019	Referred back for local resolution	Premature Decision - referred to BinJ		
Environmental Services & Public Protection & Regulation	29/04/2019	Upheld	Injustice remedied during LGO consideration	Financial redress: Loss of service,Apology,P rovide services	
Planning & Development	04/06/2019	Closed after initial enquiries	Not warranted by alleged injustice		
Adult Care Services	23/09/2019	Upheld	mal & inj	Apology	
Environmental Services & Public Protection & Regulation	16/08/2019	Upheld	mal & inj	Financial redress: Avoidable distress/time and trouble	
Adult Care Services	08/11/2019	Upheld	mal & inj	Procedure or policy change/review	The Council has agreed to review its procedures to ensure that where the Council commissions services to replace those that have been privately arranged, it:1. holds a contract or service level agreement that clearly states the services that are being provided; and2. a review of those commissioned services is carried out as soon as practicable to ensure they are being delivered appropriately and according to the contract or service level

					agreement.
Corporate & Other Services	23/05/2019	Referred back for local resolution	Premature Decision - referred to BinJ		
Corporate & Other Services	05/06/2019	Referred back for local resolution	Premature Decision - referred to BinJ		
Planning & Development	10/09/2019	Closed after initial enquiries	Not warranted by alleged mal/service failure		
Housing	16/05/2019	Advice given	Signpost - go to complaint handling		
Planning & Development	16/05/2019	Referred back for local resolution	Premature Decision - advice given		
Environmental Services & Public Protection & Regulation	12/12/2019	Incomplete/Invalid	Insufficient information to proceed and PA advised		
Adult Care Services	22/07/2019	Closed after initial enquiries	Not warranted by alleged mal/service failure		
Highways & Transport	17/07/2019	Closed after initial enquiries	Not warranted by alleged injustice		
Housing	09/07/2019	Closed after initial enquiries	Not warranted by alleged mal/service failure		
Adult Care Services	15/10/2019	Upheld	mal & inj	New appeal/review or reconsidered decision	
Environmental Services & Public Protection & Regulation	03/12/2019	Not Upheld	no mal		
Benefits & Tax	20/08/2019	Closed after initial enquiries	26(6)(a) tribunal HB		

Environmental Services & Public Protection & Regulation	18/11/2019	Upheld	mal & inj - no further action, BinJ already remedied		
Planning & Development	25/10/2019	Not Upheld	no mal		
Education & Childrens Services	09/01/2020	Closed after initial enquiries	Not warranted by alleged mal/service failure		
Environmental Services & Public Protection & Regulation	09/09/2019	Referred back for local resolution	Premature Decision - referred to BinJ		
Benefits & Tax	11/09/2019	Closed after initial enquiries	Sec 26(7) - all or most		
Highways & Transport	28/08/2019	Closed after initial enquiries	No worthwhile outcome achievable by investigation		
Benefits & Tax	18/10/2019	Closed after initial enquiries	Not warranted by alleged mal/service failure		
Planning & Development	14/10/2019	Closed after initial enquiries	No worthwhile outcome achievable by investigation		
Adult Care Services	07/11/2019	Closed after initial enquiries	Not warranted by alleged mal/service failure		
Null	10/09/2019	Incomplete/Invalid	Insufficient information to proceed and PA advised		
Benefits & Tax	10/02/2020	Not Upheld	no mal		
Highways & Transport	22/11/2019	Closed after initial enquiries	Not warranted by alleged mal/service failure		
Environmental Services & Public Protection & Regulation	10/02/2020	Upheld	mal & inj	Financial redress: Avoidable distress/time and trouble, Provide services	
Education & Childrens Services	20/11/2019	Referred back for local resolution	Premature Decision - referred to BinJ		
Environmental Services & Public Protection & Regulation	02/10/2019	Referred back for local resolution	Premature Decision - advice given		
Adult Care Services	16/12/2019	Closed after initial enquiries	Not warranted by alleged mal/service failure		

Environmental Services & Public Protection & Regulation	18/12/2019	Referred back for local resolution	Premature Decision - referred to BinJ		
Highways & Transport	14/01/2020	Referred back for local resolution	Premature Decision - referred to BinJ		
Environmental Services & Public Protection & Regulation	31/10/2019	Referred back for local resolution	Premature Decision - advice given		
Corporate & Other Services	14/01/2020	Closed after initial enquiries	26B(2) not made in 12 months		
Highways & Transport	17/01/2020	Closed after initial enquiries	Not warranted by alleged mal/service failure		
Education & Childrens Services	15/11/2019	Referred back for local resolution	Premature Decision - advice given		
Highways & Transport	06/01/2020	Closed after initial enquiries	26(6)(c) Court remedy		
Highways & Transport	20/02/2020	Closed after initial enquiries	26(6)(c) Court remedy		
Null	17/01/2020	Incomplete/Invalid	Insufficient information to proceed and PA advised		
Adult Care Services	05/03/2020	Closed after initial enquiries	Sch 5.4 personnel		
Adult Care Services	06/02/2020	Referred back for local resolution	Premature Decision - advice given		
Education & Childrens Services	11/02/2020	Referred back for local resolution	Premature Decision - advice given		
Adult Care Services	31/03/2020	Closed after initial enquiries	Not warranted by alleged mal/service failure		
Corporate & Other Services	19/02/2020	Incomplete/Invalid	Insufficient information to proceed and PA advised		
Adult Care Services	21/02/2020	Referred back for local resolution	Premature Decision - referred to BinJ		
Education & Childrens Services	27/03/2020	Closed after initial enquiries	Other Agency better placed		
Benefits & Tax	03/03/2020	Referred back for local resolution	Premature Decision - advice given		

Compliance with Agreed Remedies

Category	Decided	Remedy	Remedy Target Date	Remedy Achieved Date	Satisfaction with Compliance
Education & Childrens Services	06-Feb-20	Apology Financial Redress: Quantifiable Loss Provide training and/or guidance	05-Mar-20	25-Feb-20	Remedy complete and satisfied
Education & Childrens Services	28-Feb-19	Financial redress: Avoidable distress/time and trouble Financial redress: Loss of service	23-May-19	14-May-19	Remedy complete and satisfied
Education & Childrens Services	25-Jul-19	Apology Financial redress: Avoidable distress/time and trouble	27-Aug-19	15-Aug-19	Remedy complete and satisfied
Highways & Transport	09-May-19	Apology Financial redress: Avoidable distress/time and trouble Procedure or policy change/review Provide services	09-Sep-19	22-Jul-19	Remedy complete and satisfied
Education & Childrens Services	06-Nov-19	Apology Financial redress: Avoidable distress/time and trouble New appeal/review or reconsidered decision Procedure or policy change/review	21-Feb-20	11-Feb-20	Remedy completed late
Environmental Services & Public Protection & Regulation	29-Apr-19	Financial redress: Loss of service Apology Provide services	31-May-19	31-May-19	Remedy complete and satisfied
Adult Care Services	23-Sep-19	Apology	21-Oct-19	09-Oct-19	Remedy complete and satisfied
Environmental Services & Public Protection & Regulation	16-Aug-19	Financial redress: Avoidable distress/time and trouble	16-Sep-19	03-Sep-19	Remedy complete and satisfied
Adult Care Services	08-Nov-19	Procedure or policy change/review	06-Dec-19	27-Nov-19	Remedy complete and satisfied
Adult Care Services	15-Oct-19	New appeal/review or reconsidered decision	12-Nov-19	31-Oct-19	Remedy complete and satisfied

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Audit and Governance Committee**30 November 2020**

Report of the Director of Governance

Corporate Complaints and Feedback proposals**1. Summary**

- 1.1 This report and annexes provides Members with the proposals for the revised and refreshed Corporate Complaints and Feedback policy and procedures, as part of the council's review of the governance of complaints and feedback handling.

2. Background

- 2.1 The current corporate policy and procedures were first introduced in late 2007 and it was necessary to review these to ensure they were still fit for purpose, met customers' expectations and complied with guidance from the various regulators e.g. Local Government and Social Care Ombudsman (LGSCO).
- 2.2 These proposals do not cover where there are legislative complaints handling requirements set out for adults and children's social care or other appeal processes.
- 2.3 Annex 2 provides an "at a glance" view of the proposed changes. However the main change being proposed is to move from a hierarchical and rigid three stage process, which is increasingly being criticised, to a more effective process that is responsive to both the nature of the complaint and to individual complainants needs.

3. Review

- 3.1 The review took account of:
- the increasing challenges both internally and externally from the rising number and complexity of cases managed through the current corporate policy and procedures.

- the public criticism from the LGSCO including criticism for delays in providing information and failure to promptly implement agreed actions to resolve complaints.
- failing to meet our own performance standards for responding to complainants at stage one in between 20% and 30% of cases
- current feedback mechanisms do not work effectively so we are missing opportunities to identify lessons learned from complaints to secure service improvements either with a particular area or corporately
- the increasing duplication of effort and resources as some services are keeping records of complaints to monitor and manage them in their area.
- the current corporate procedure does not allow for any independent oversight of a complaint as provided for by the statutory processes used in social care complaints. This may hinder a timely outcome being achieved and may lead to more cases than ought to be, being escalated to the next level.
- to mirror other legislative complaints handling requirements and LGSCO guidance to replace the current hierarchical stages approach with a robust and consistent assessment with two grades being undertaken by independent and impartial investigation.

3.2 It is an opportunity to maximise the benefits and improvements we have seen since the start of Covid 19 where the complaints team are providing the end to end provision of complaints investigating and responses for some service areas.

4. Review outcomes and proposals

4.1 The proposed new corporate complaint and feedback policy and procedures can be found in full at Annex 1. There is also an “At a glance - what the changes being proposed” are at Annex 2. The main change is to move from a hierarchical and rigid three stage process, which is increasingly being criticised, to a more effective process that is responsive to both the nature of the complaint and to individual complainant’s needs.

4.2 The proposals will ensure that whereas *“Most authorities use complaints as a barometer of external opinion and as an early warning of problems that might otherwise stay unseen”* that we take this further and use complaints and feedback to *“drive a sophisticated culture of learning, reflection and improvement”* (quotes from the LGSCO’s – Effective complaint handling for local authorities) see Annex 3 or

<https://www.lgo.org.uk/information-centre/reports/guidance-notes/guidance-on-effective-complaint-handling-for-local-authorities>

- 4.3 The proposals meet the LGSCO's complaints standards and principles of effective complaint handling which are:
- **Getting it right:** do the simple things well, by complying with the law and following our own policies.
 - **Being customer focused:** Make our complaints process easy to find and use, and keep complainants informed.
 - **Being open and accountable:** there should be no surprises. Our processes should be transparent, and be honest when things have gone wrong.
 - **Putting things right:** If we have done something wrong, apologise and take steps to put right any injustice caused.
 - **Acting fairly and proportionately:** Base our decisions on sound evidence, and explain clearly why they were made.
 - **Seeking continuous improvement:** complaints are a great learning tool and systems will be in place to capture the lessons, which will help improve our services.
- 4.4 The proposals are tailored so that we can determine each complaint on its own merits, and be flexible to the complaint and the complainant. It also provides the ability to conduct independent and impartial to service, investigations that are proportionate and pragmatic. It will help us to identify and act on learning opportunities from complaints, ensuring the lessons reach people in the council who can effect change.
- 4.5 The LGSCO states in its guidance that "*There is no right or wrong number of stages to a non-statutory complaint process, what matters most is you investigate the complaint robustly and consider your findings properly*" and the proposal to move to a two grades approach with independent and impartial to service, investigations does not limit or restrict the access to our complaints process or reduce a complainant's right to express dissatisfaction and/ or seek redress.
- 4.6 The proposals ensure that we still direct any complainant to the relevant Ombudsman even where this may not be at the end of our complaint process, but when we are satisfied there is no merit in further consideration and we have reached our final decision.
- 4.7 The proposals also ensure we have in place the five key elements for a robust and effective handling process. These are:

- Identifying and accepting a complaint
- Defining a complaint
- Investigating a complaint
- Making and communicating the decision
- Putting things right

4.8 We will be able to measure and report on the effectiveness of the proposed policy and procedures and this will focus on the learning from complaints and on implementing the recommendations for improvements that help prevent the same thing going wrong again for our customers. This will be done on a regular basis including a more informative annual report.

5. The role of Councillors

5.1 Councillors have an important dual role signposting and pursuing complaints on the behalf of members of the public, and scrutinising the delivery of local services.

5.2 We currently report regularly to Audit and Governance Committee and the proposals will open up further key lines of enquiry for Councillors' in their scrutiny role which also takes account of the LGSCO's published subject specific questions on their website.

<https://www.lgo.org.uk/information-centre/reports/scrutiny-questions>

6. Consultation

6.1 Direct consultation took place with Corporate Management Team, Directorate Management Teams, Governance, Risk and Assurance Group, and feedback was sought from HR and internal audit / Veritau.

6.2 Also revisited the extensive customer consultation and feedback from previous reviews of the policy and procedures, and outcomes from complaints where the customer was dissatisfied with the complaints process.

7. Options

7.1 To make no changes to the current policy and procedures

7.2 To adopt the proposed policy and procedures as set out in full at Annex 1.

7.3 To make comments and provide feedback on the proposed policy and procedures and direct us to bring back an amended version to this meeting/ Committee

8. Analysis

8.1 Set out in sections above.

9. Council Plan

9.1 The council's complaints and feedback governance framework offers assurance to its customers, employees, contractors, partners and other stakeholders that all complaints and feedback are dealt with in accordance with any relevant legislation and regulations.

10. Legal Implications

10.1 The Council has a duty to comply with the various aspects of guidance and decisions by the relevant regulators in regards to corporate complaints handling.

11. Equalities

11.1 There are no equalities implications at this time, however, we will take regard of and keep under review, our public sector equality duties.

12. Risk Management

12.1 The council may face financial and reputational risks if it does not manage and monitor complaints and feedback effectively. The failure to identify and manage complaints may diminish the council's overall effectiveness and damage its reputation.

12.2 This is a key area of council's governance and compliance framework and so there is the potential for a high level of public interest in this.

13. Recommendations

Members are asked:

13.1 To agree Option 2 at point 7.2 above

Or if not,

13.2 To provide feedback and comments on the proposals.

Contact Details

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Chief Officer Responsible
for the report: Janie Berry,
Director of Governance

Report
Approved

Date 17 November
2020

Wards Affected: List wards or tick box to indicate all

All

For further information please contact the author of the report

Annexes

Annex 1 – Proposed Corporate Complaints and Feedback policy and procedures

Annex 2 – At a glance – what changes are being proposed

Annex 3 - LGSCO Effective complaint handling for local authorities

Background Information

LGSCO – Effective complaint handling for local authorities

LGSCO – Principles of good administrative practice



Complaints, Concerns, Comments and Compliments (The 4Cs) Corporate Policy and Procedures

Current Document Status			
Version		Approving body	Audit and Governance Committee PHCMT
Date	17 th November 2020	Date of formal approval	
Responsible officer	Lorraine Lunt/ Janie Berry	Review date	
Location	www.york.gov.uk		
Version History			
Date	Version	Owner	Comments
May 2020	V0.1	Lorraine Lunt	First draft for comment – JB and CM
August 2020	V0.2	Lorraine Lunt	Second draft for comment – CM and LL
August 2020	V0.3	Lorraine Lunt	Third draft for comment – GRAG and CCS DMT
September 2020	V0.4	Lorraine Lunt	Updated from comments / feedback received from HR, internal audit/Veritau (<i>general policy good practice guidance and also considered the policy against the Local Government and Social Care Ombudsman's (LGSCO) 'Guidance on Running a Complaints System' and information on ISO 10002:2018 - Quality management — Customer satisfaction — Guidelines for Complaints Handling in Organizations</i>)
October 2020	V0.5 & v0.6 & v0.7	Lorraine Lunt	Further comments and feedback Inserted team name
November 2020	V0.87	Lorraine Lunt	Draft flow charts
Document retention			
Document retention period			

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For information

Where there are parts highlighted in yellow, these are to be added when the document is approved or they are for up to date information eg website links to be added ahead of any implementation.

DRAFT

CONTENTS – to be inserted

Section	Description	Page
1.		
2.		
3.		
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APPENDICES – to be inserted

Appendix	Description	Page
1		
2		
3		
4		

INTRODUCTION

City Of York Council (“the council”) has produced this revised corporate procedure for dealing with comments, compliments, concerns and complaints (“the 4Cs”) and this document sets out the procedure for dealing with them and provides some of the tools to help with this work.

We expect all colleagues at the council to follow this approach and we hope you will see the 4Cs, both positive and negative, as an opportunity for us to improve our services.

WHY HAVE A POLICY AND PROCEDURE?

The Local Government and Social Care Ombudsman (LGSCO) sets out the reason for having a procedure and also provides “*Guidance on running a complaints system*” that we have used for this policy and procedure.

<https://www.lgo.org.uk/information-centre/reports/guidance-notes/guidance-on-running-a-complaints-system>

“A good ...system is an opportunity for a council to show that it wants to be open and honest; that it cares about providing a good service; and that it genuinely values feedback on whether there are any problems which need attention. So colleagues who handle complaints need to be positive, understanding, open-minded and helpful; and they should let it be seen that the council takes complaints seriously and deals with them sympathetically.”

We’re aiming to achieve this with our corporate policy and procedure.

It’s important that colleagues implementing this corporate policy and procedure apply them in the spirit in which they are intended, and are informed by the overall customer focused approach at the council. This corporate policy and procedure is intended to help us to address issues to reach a satisfactory outcome and continuously improve our services.

The aim of this procedure is to ensure that the 4Cs are welcomed, responded to and learned from, according to the values of the council.

<https://www.york.gov.uk/council/key-values/1>

This policy and procedure is for customers who live, work, visit or travel within the City of York and who receive one of our services (directly or through another organisation).

Any of the 4Cs can be made by phone, email, letter, fax, social media, online, or in person at a council building or office.

There is a separate system for handling enquiries from Councillors. Guidance on this is available on the council's website and intranet – [to insert links to customer services process](#)

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SECTION 1: WHAT IS A COMPLAINT, CONCERN, COMMENT OR COMPLIMENT?

A complaint is an expression of dissatisfaction where a response is required, however made, which may include any of the following:

- Our quality of service
- Our timeliness of service
- Our failure to respond to a previous complaint.

We will not treat the following as a complaint:

- A request for a service that is made for the first time (sometimes called a missed service request or single service failure) or an issue that the council could not reasonably have been expected to have been aware of before. For example, impacts of a decision on an individual, being reported for the first time or a customer reports that a streetlight is not working. If we then fail to resolve the issues to the customer's satisfaction, the issues will then be defined and treated as a complaint.
- A request for information or an explanation of a council policy or practice
- A complaint that has already been considered through another appropriate route such as an insurance claim, a court or tribunal, or a complaint where there is another more appropriate route of independent scrutiny.
- Any issue which has separate provision for or specific procedures governing complaints and appeals (whether this be statutory or not). This includes but is not limited to the following issues:
 - Appeals against refusal of planning permission or against conditions placed on a grant of planning permission.
 - A complaint about social care services (children and adults).
 - A school admission or exclusion appeal.
 - A complaint about a school.
 - A complaint from a council employee about an employment matter.
 - A complaint about a council employee, contractor or partner's conduct or behaviour
 - A complaint about councillor's or parish councillor's conduct
 - External complaints about Recruitment and Selection
 - An appeal against the issue of a penalty charge notice by the parking enforcement team and the recovery process which follows.
 - Dispute a fixed penalty for environmental crimes (including dog-fouling).
 - Dispute a penalty charge notice for Bus Lane Contravention.
 - Any appeal against the exercise of a police power.
 - A complaint about the refusal of disabled badges for parking exemption.

- A complaint about the independent Rent Officer.
 - To report Anti-Social Behaviour.
 - Appeals regarding Resident Parking Permits
- Where the circumstances of a complaint have been known for more than 12 months and have not been raised during that time to the council. However the information governance, complaints and feedback team (IGCFteam) will assess :-
 - Whether the complaint could have been made sooner
 - Whether there is sufficient knowledge and/or evidence still available to be able to complete an investigation and reach a conclusion
 - Whether there is a realistic ability to provide an appropriate resolution

Where this is not the case, the complainant will be informed and advised where appropriate of other routes for progressing their concerns.

- Issues which are outside the responsibility of the council.

A concern has the same definition as a complaint, but enables people who are uncomfortable with or do not want to use the term complaint to express their concerns to the authority and have them responded to. The aim is to ensure that the council can monitor the quality of service provision and learn lessons from negative feedback, where the customer does not want to make a complaint.

A comment is an idea for making changes/improvements to any part of our service. Comments can be statements that express:

- Facts
- Personal opinions
- Beliefs

A compliment is any expression of satisfaction, pleasure or gratitude about the quality of service provided or about staff, contractors or other providers delivering a service on the council's behalf.

We will provide the customer with contact details if their contact falls into one of the above categories. **See ****

Customers may often make an observation on our service without explicitly defining their remarks or concerns as one of the 4Cs. Remarks and concerns should not be overlooked because they do not use our wording and categories. However, nothing in this policy and procedures should prevent staff from continuing to work with customers to provide excellent customer service and respond to their queries, suggestions and resolve any difficulties before they become complaints.

If a customer raises the issue verbally, and you're not certain how their remark should be treated, please contact the IGCFteam. If you receive written correspondence and aren't sure how to treat it, and you are not able to check with the customer, please raise it with the IGCFteam

If a customer wishes to raise any of the 4Cs, it must be sent to the IGCFteam to record and address as set out in this procedure. Any of the 4Cs can be made verbally and do not necessarily need to be in writing.

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SECTION 2: Who 'owns' a complaint, concern, comment or compliment?

Ownership is about taking responsibility for a complaint. If you've received a complaint and don't know who 'owns' it, the answer is that **you do** until it has been successfully handed over to the IGCFteam.

4Cs can be accepted verbally. Customers making any of the 4Cs in person or by phone must not be told that they have to write in or complete a form. However you can use the form on the council website – insert link to capture all the information needed and send it onto the IGCFteam.

If a customer makes you aware of any of the 4Cs verbally and you can't access the website form, note down their comments:

- Tell the customer your name and provide the contact details for IGCFteam
- Acknowledge the concerns the customer has and how they feel without agreeing with or challenging their views
- Identify what the problem is
- Identify what outcome the customer would like to see – but do not commit the council to achieving it at this stage;
- Tell the customer that you will pass on the details to the IGCFteam and they will get back to you.

Once you've finished the conversation pass the information onto the IGCFteam who will email/contact the customer to acknowledge receipt of their 4C where appropriate. If you receive a written 4C then send it to the IGCFteam at haveyoursay@york.gov.uk as soon as possible.

SECTION 3: HOW TO DEAL WITH COMPLAINTS, CONCERNS, COMMENTS AND COMPLIMENTS

Where any of the 4Cs has been made on a person's behalf by their representative, then the IGCFteam will consider whether the individual has appropriate authority and independence to act on the person's behalf. If written consent is required the IGCFteam will assist with this. When either appropriate authority or consent cannot be provided, the IGCFteam will assess the most appropriate way to progress the issues being raised and will discuss this with relevant staff and managers where required.

Where timescales are noted in terms of days, these are working days unless otherwise stated; timescales noted on the flowcharts are the latest dates to meet the target timescales and ideally the tasks should be completed before the deadlines given.

All progress or correspondence, either internal or external, will be recorded on the IGCFteam monitoring system.

All correspondence relating to a specific complaint should include the monitoring system reference, so developments can be noted down against the customer reference details.

Where learning or service improvements are identified, the IFCFteam will request evidence these have been implemented or completed.

Ownership of multiple complaints – See ***

When contact about the same issue from the same customer is received through more than one route, it will be logged on the IGCFteam monitoring system, allocated for investigation and a single response will be provided by the IGCFteam, in accordance with these procedures, advising that they will be providing a single council response on behalf of all recipients at the council.

SECTION 4: How we respond to compliments

It's important we understand when customers think we get things right. This allows colleagues to know they're appreciated and ensures all parts of the council can learn from the areas identified for good practice.

When we receive compliments, including 'thank you' cards, we will only contact the customer to thank them within **10 working days** if **they have requested that we do so**. The IGCFteam will notify any council colleague or service to which the compliment refers **within 20 working days**. We will use compliments to maintain or improve our standard of service as well understand what customers value about the services the council provides.

Commendations are compliments awarded to staff for work above and beyond their usual duties and responsibilities. This may come to the attention of the council through a letter or comment from a customer or member of the public, or may be brought to the attention of a senior manager through a team leader or line manager.

A commendation for example may be achieved by a member of staff completing a piece of work which would not normally be within their remit or grade. This may be to resolve a problem quickly, or to support colleagues when a team is short staffed or has a heavy work load. This will not normally be for additional work that has been taken on where the member of staff has received additional money for this.

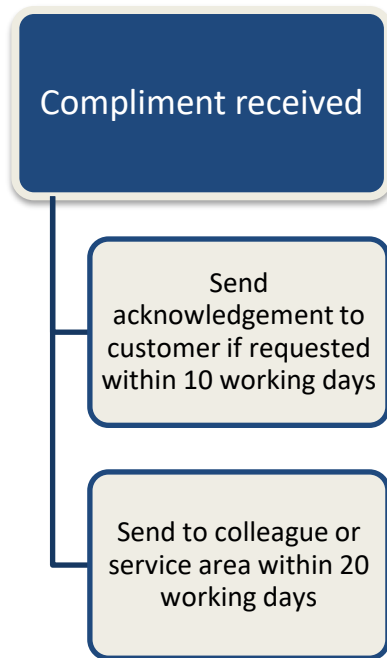
Commendations should be brought to the attention of the IGCFteam as soon as possible and where there is any doubt about whether this should be logged as a commendation or a compliment, the IGCFteam will discuss this with the appropriate Corporate Director/Director/Assistant Director

Where it is agreed that a commendation for a member of staff is appropriate, the Corporate Director/Director/Assistant Director will, where appropriate, write to the customer or member of public and thank them for bringing this to their attention and will write to the member of staff thanking them for their work.

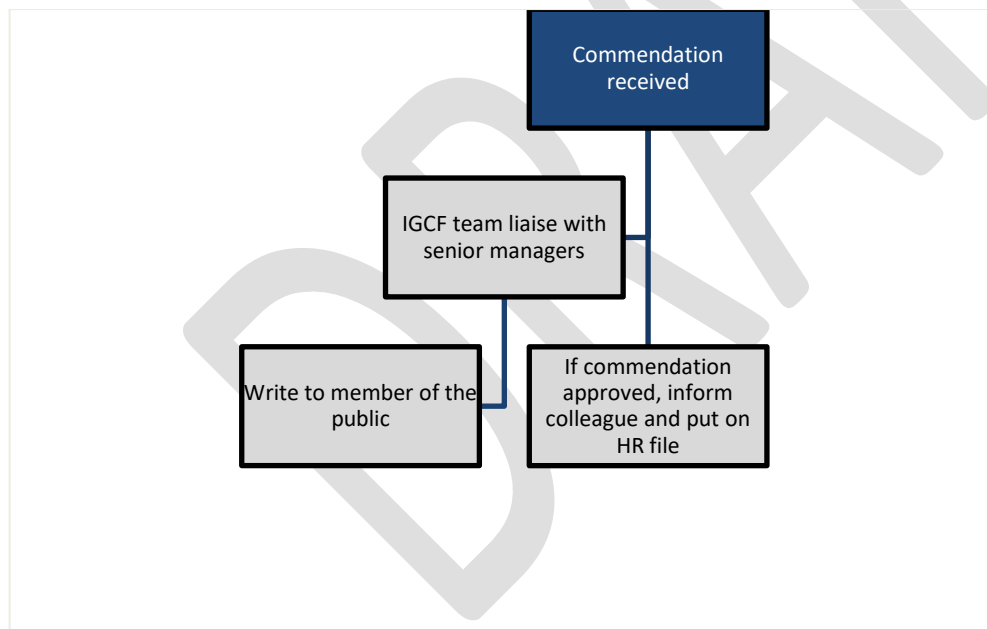
The IGCFteam will:

- Make a record of the commendation including copies of letters
- Send a note about the commendation and copies of letters to human resources to be kept on the member of staff's personal file.

COMPLIMENTS FLOWCHART



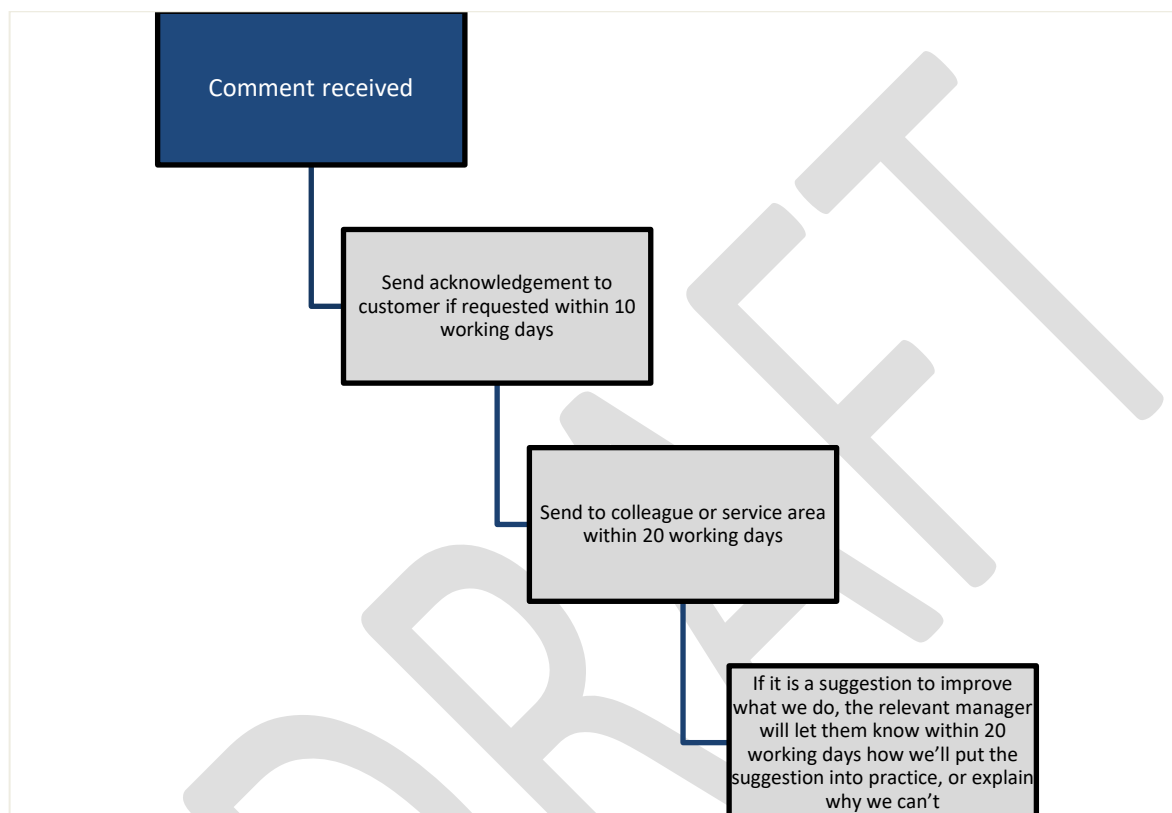
COMMENDATIONS FLOWCHART



SECTION 5: How we respond to comments

When we receive a comment, the IGCFteam will contact the customer to thank them within **10 working days** if they have requested that we do so and pass onto the relevant manager/officer. If it is a suggestion to improve what we do, the relevant manager will let them know within **20 working days** how we'll put the suggestion into practice, or explain why we can't.

COMMENTS FLOWCHART



SECTION 6: How we respond to complaints and concerns

We have a two grade approach to address complaints. This is set out below and on the following flow charts. The LGSCO in its “*Guidance on running a complaints system*” says

“We believe that two stages will normally be appropriate to deal with most complaints”

Our target is to carry out all pending actions relating to complaints, as soon as possible. Deadlines specified in this procedure are the latest date by which action should occur.

At any grade, if we agree with the complaint, we will do one or more of the following:

- Apologise and explain what went wrong;
- Arrange for the customer to receive the service they were entitled to receive, as far as possible;
- Change our process, where relevant, so that the mistake is not repeated;
- Provide the appropriate and proportionate outcomes based on the LGSCO guidance <https://www.lgo.org.uk/information-centre/reports/guidance-notes>

If the complaint is about

- a policy that cannot be changed or
- it is considered that the council has had sufficient opportunities to resolve the issues and a further investigation would not lead to a significantly different outcome, or
- the outcomes wanted cannot be achieved through this policy and procedures

then the council reserves the right not to escalate the complaint to grade 2. We will advise the customer of this decision **within 10 working days** including their right to contact the relevant Ombudsman or where appropriate to seek their own legal advice.

Grade 1 and Grade 2 – what we will do

A complaint may be dealt with at either Grade 1 or Grade 2 following an assessment by the IGCFTeam:-

- If the customer is unhappy with the outcome of their complaint at Grade 1
- If there has been an unreasonable delay at Grade 1 or
- It is assessed that it is appropriate to go to Grade 2 due the nature and complexity of the issues being raised.

The IGCFteam will assess the nature and complexity of the complaint and allocate it to be dealt with by an adviser in the IGCFteam who provide an independent to service, and impartial investigation role.

As soon as possible and at the latest **within 5 working days of receipt**, we will let the customer know in their preferred method of communication, that we have registered their complaint and will provide the outcome of the assessment by the IGCFteam on how their complaint will be dealt with. We will also provide the name, phone number and position of the person who is dealing with the complaint and the reference number.

It will usually be appropriate to speak to the complainant directly to ensure that their experiences, outcomes wanted and any background information, is clearly understood. We may offer to meet the customer by appointment to try and resolve their complaint.

The IGCFteam will write a report of their investigation findings including the decision on the complaint (upheld, partially upheld, not upheld or unproven) along with any recommendations, actions or areas for improvement for the service area(s). This will be sent to the relevant manager in the service area to consider the findings and outcomes, as well as any recommendations, actions or areas for improvements.

If the service area agrees with the report recommendations, actions or areas for improvement, it will then be sent to the customer, stating that the recommendations, actions or areas for improvement have been agreed and the timescales for them.

If the service area disagrees with the report recommendations, actions or areas for improvement, the report will be sent to the customer stating that the recommendations, actions or areas for improvement have been sent to the relevant manager who will respond to the customer further with their decisions **within the 10 working days**

The IGCFteam will monitor the progress of any recommendations, actions or areas for improvement with the service area(s) and report on this through the appropriate council routes including to relevant Committees.

If the customer remains unhappy with our response, or if they feel the delay in receiving a full response is unreasonable they will be advised that they can go to the relevant Ombudsman and given the contact details for this.

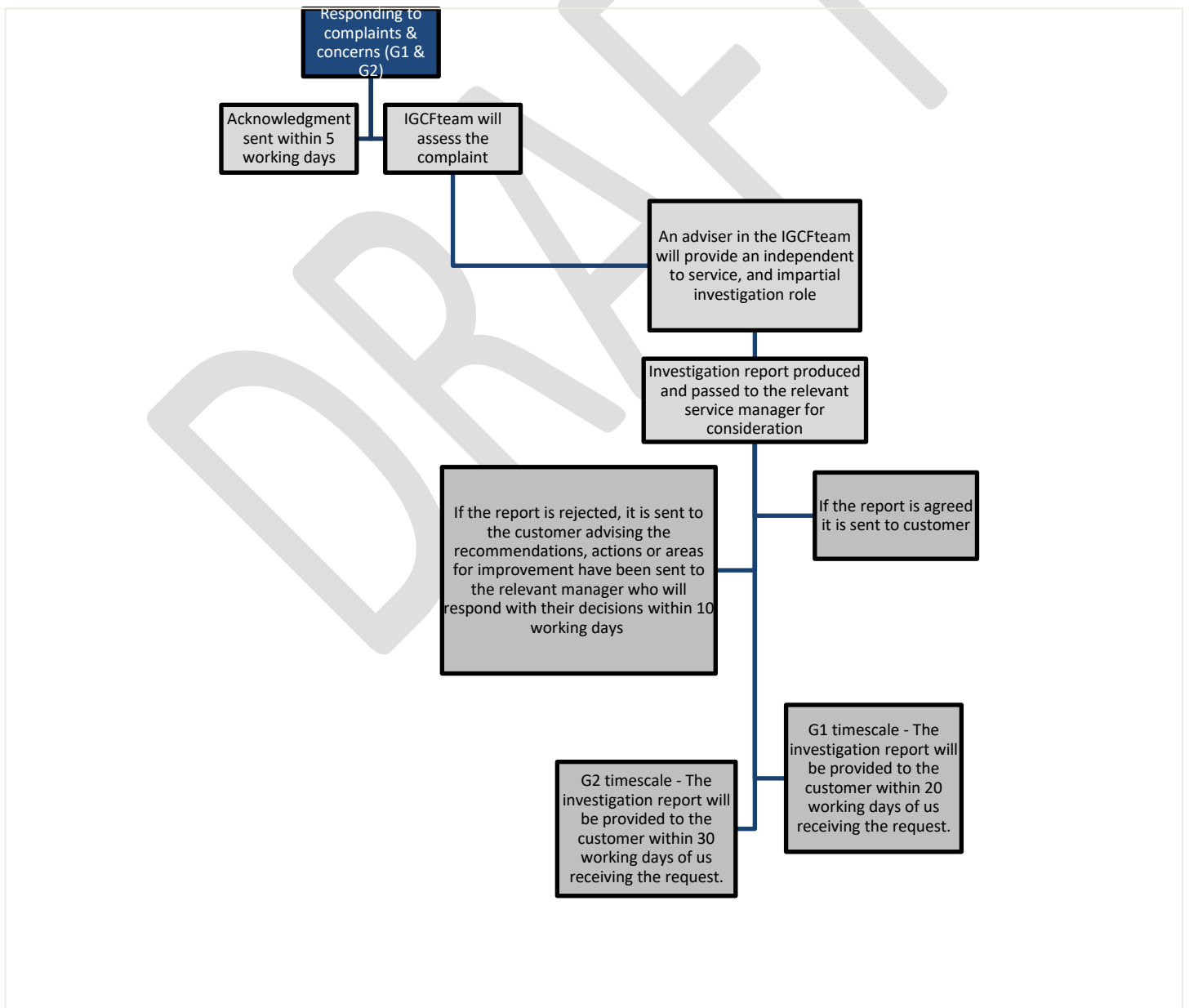
Grade 1 – timescale

The investigation report will be provided to the customer **within 20 working days** of us receiving the request. If we are unable to meet this timescale, the adviser in the IGCFTeam will explain why there is a delay and advise the customer when they can expect a full response.

Grade 2 – timescale

The investigation report will be provided to the customer **within 30 working days** of us receiving the request. If we are unable to meet this timescale, we will contact the customer and advise them when they can expect a full response. This will be no longer than **3 calendar months**.

COMPLAINTS and CONCERNS FLOWCHART



SECTION 7: How we will assess grade of complaint and escalation

Assessment of the complaint Grade will be completed by the IGCFteam taking account of the issues raised and the following factors:

- severity
- complexity
- risk to the customer and other customers
- risk to the council
- history of similar complaints
- likelihood of future similar complaints.

Other considerations will include:

- the outcomes wanted to resolve the complaint,
- who is best placed to effectively respond to the complaint
- the complainant's views of how the complaint should be dealt with

An escalation of a Grade 1 complaint to Grade 2 will be where the complainant is dissatisfied with the findings of Grade 1, or where it is assessed as being appropriate to be considered and responded to at Grade 2, due to issues including the severity, complexity or risk.

The assessment and escalation is based on best practice, guidance and other complaints legislation and a brief guide to the steps is set out below.

Step 1: Assess the seriousness

Seriousness	Description
Low	Unsatisfactory service or experience not directly related to care. No impact or risk to provision of care. OR Unsatisfactory service or experience related to care, usually a single resolvable issue. Minimal impact and relative minimal risk to the provision of care or the service. No real risk of litigation.
Medium	Service or experience below reasonable expectations in several ways, but not causing lasting problems. Has potential to impact on service provision. Some potential for litigation.
High	Significant issues regarding standards, quality of care and safeguarding of or denial of rights. Complaints with clear quality assurance or risk management issues that may cause lasting problems for the organisation, and so require investigation. Possibility of litigation and adverse local publicity. OR Serious issues that may cause long-term damage, such as grossly substandard care, professional misconduct or death. Will require immediate and in-depth investigation. May involve serious safety issues. A high probability of litigation and strong possibility of adverse national publicity.

Step 2: Determine how likely the issue is to recur

Likelihood	Description
Rare	Isolated or 'one off' – slight or vague connection to service provision.
Unlikely	Rare – unusual but may have happened before.
Possible	Happens from time to time – not frequently or regularly.
Likely	Will probably occur several times a year.
Almost certain	Recurring and frequent, predictable.

Step 3: Categorise the risk

Seriousness	Likelihood of recurrence				
	Rare	Unlikely	Possible	Likely	Almost Certain
Low	Low				
		Moderate			
Medium					
			High		
High				Extreme	

Step 4: Determine the Grade or escalation

Grade 1
Grade 1
Grade 2
Grade 2

Section 8: The relevant Ombudsmen e.g. The Local Government and Social Care Ombudsman and the Housing Ombudsman Service

If, having followed this procedure, the customer is still not happy with how their complaint has been dealt with; they may have the right to have the matter reviewed by relevant Ombudsman e.g. The Local Government and Social Care Ombudsman (LGSCO) or by the Housing Ombudsman Service (HOS).

The exact nature of an investigation by the LGSCO or the HOS will depend on the circumstances of the complaint but the following gives some guidance as to what may happen.

During the investigation, an investigator, acting on behalf of the Ombudsman, will usually examine our records. They will at times want to talk to the customer, colleagues, or Councillors who were involved with the complaint or who can explain the council's policies and procedures. The LGSCO and HOS have powers similar to those of the High Courts to obtain evidence.

Points to note are:

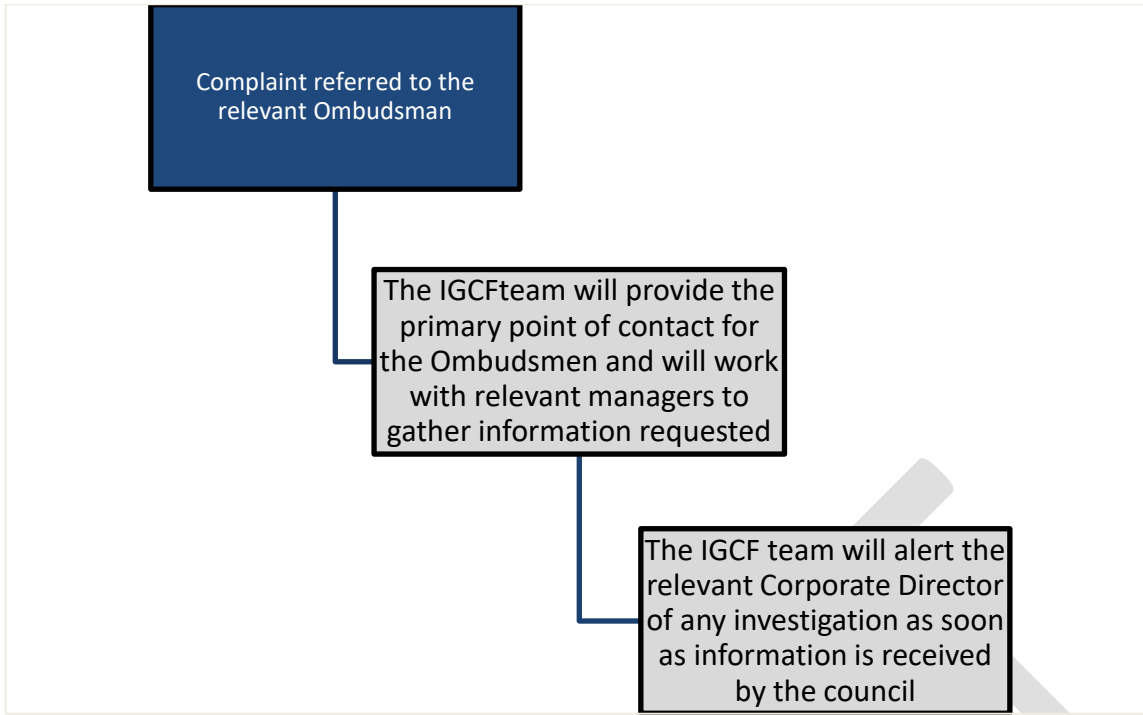
- During an interview a person being interviewed can have someone present to support them but not to give evidence;
- The files will be available so it is a good idea for colleagues to refresh their memory before the interview;
- Any notes made at the time of the events under investigation are likely to be required by the Ombudsman's investigator;
- Interviews are formal and on the record – anything said may be noted by the investigator and passed to the Ombudsman; and
- Interviews are in private. Colleagues should not talk about the complaint or the interview except in consideration of questions or recommendations made by the Ombudsman, until a final report has been issued by the Ombudsman.

It's important that full notes and records are kept as complaints progress so that we can demonstrate that the proper procedure has been consistently and fairly applied.

The IGCFTam will provide the primary point of contact for the LGSCO and HOS and will work with relevant managers etc. to gather information requested. Where appropriate, statements from the council to an Ombudsman will be shared with managers prior to submission. The IGCFTeam will alert the relevant Corporate Director of any investigation as soon as information is received by the council.

****insert parliamentary /health service ombudsman details****

Ombudsmen FLOWCHART



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SECTION 9: How the 4Cs will improve and change services

All of the 4Cs from customers provide invaluable feedback on our services. The IGCFteam will ensure that the 4Cs provide a positive influence on performance by linking the results of the analysis of 4Cs to service delivery.

The IGCFteam will keep information on the 4Cs and will report this information as required. These will show:

- *the type of 4Cs /volume/by service area;*
- *what the 4Cs are about (e.g. delay in service, poor service, colleagues, etc.);*
- *quality of response;*
- *recommendations for any improvements to service delivery based on the trends in 4Cs*

An annual report to the relevant Committee(s) will include examples of learning and improvements as a result of the 4Cs. **See Appendix *****

SERVICE IMPROVEMENT FLOWCHART – to be inserted

SECTION 10: OUTCOME OF COMPLAINTS

This section sets out the different ways that the council will respond to a complaint.

A complaint may be

- upheld in full,
- partially upheld,
- not upheld, or
- not proven

It is important that the complainant is explicitly informed of the outcome of **each element** of their complaint and the reasons for that outcome.

Where complaints are upheld or upheld in part, the resolution and remedy needs to be appropriate to the complaint. During the process of investigating, we will have identified with the customer how they would like things put right and alongside the Ombudsman's remedies guidance, we will identify the appropriate resolution and remedies.

Resolution and remedies may include one or more of the following:

- An apology;
- An explanation as to what went wrong, of policy or procedures, of the way we have handled the matter or of remedial action;
- A commitment to review processes to avoid the same thing happening again. This may include a change in working practices or a review of policy or procedures;
- Feedback to the customer on how their complaint has been used to improve/change future service; or
- Appropriate actions, good will gesture or recompense based on the Ombudsman's remedies guidance. Where recompensing for out of pocket expenses, we will require evidence of these. **See Appendix *****

Saying we are sorry

Often, all that is needed is a timely and genuine apology with clear actions about how we will avoid similar problems in future. Most people accept that occasionally mistakes will be made. What often annoys them, is the failure to acknowledge that something has gone wrong, or to treat them as an individual.

Even if a complaint has not been upheld, it is often appropriate to acknowledge their experiences e.g.

“I am sorry that you are unhappy about [*add summary of complaint*]. Colleagues at City Of York Council work hard to deliver a good service and I apologise that on this occasion we have not met with your expectations.”

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SECTION 11: Improving our service

If we are able to, we should give an assurance that the situation which gave rise to the complaint will not be repeated. It may be possible to change practices, systems or procedures to prevent a recurrence of an error. Without going into complexities, we should let the customer know of the action taken and the timescale for this. A demonstration that something has happened as a result of the complaint may win support and will also help us to improve our service.

Customer feedback, not just that coming through this policy and procedure, should be used to identify areas for improvement in services and be used for continuous improvement.

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SECTION 12: HANDLING CLAIMS FOR PERSONAL INJURY OR FINANCIAL LOSS/INSURANCE CLAIMS

If the circumstances could give rise to a claim for damages for personal injury or for financial loss, the Corporate Finance and Commercial Procurement Manager, who is responsible for Insurance and Risk Management, should be informed of the details at the earliest opportunity. To avoid prejudicing the council's position, no correspondence relating to the claim should be sent other than to acknowledge the correspondence and inform the individual of what we are doing.

If there are issues raised in addition to the compensation claim which need to be addressed under the council's 4Cs procedure, the IGCFteam will work closely with the Corporate Finance and Commercial Procurement Manager, to ensure there is no prejudice to the claim investigation.

Ex Gratia Payments/Good will

There may be times when it is appropriate to make a payment, without admitting liability, for example in acknowledgement of poor customer service, which hasn't resulted in a loss for the person concerned. In such circumstances it may be appropriate to make an ex-gratia / good will payment.

Important considerations when making such a payment:

- What will be the impact of making such a payment in terms of reputation, precedent and potential future claims?
- What is an appropriate level and form of any such payment? This should balance the severity of any failure of the council with the need to justify the cost to the public purse.
- Any letter should make it clear that the payment is ex-gratia: that it is done without recognition of any legal need to make the payment. Advice can be sought from the IGCFteam and the Insurance and Risk Management Team, if there is any concern.
- Any such payment should generally be in the form of a one-off payment or gift voucher. It should not take the form of reducing outstanding bills that an individual has with the council, as this can lead to processing difficulties which may exacerbate the original issue.
- Any such payment should be approved by the appropriate budget manager, who should ensure the payment can be made within their overall budget. They should satisfy themselves that such a payment represents value for money for the council and can justify the reason for making it.
- Any payments made will be recorded on the IGCFteam monitoring system, including a summary of key learning and issues raised; value for money reasons for making the payment; the amount paid and what budget code it was charged to.

When compensation is not appropriate

There may be times when a complainant has specifically requested compensation but it is not possible or appropriate for the council to pay it.

When considering financial remedies it is important to note that the council receives and is responsible for public money and as such must make sure that all funds are used appropriately. Financial remedies must only be considered where another alternative is not available or appropriate. Where recompensing for out of pocket expenses, we will require evidence of these.

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SECTION 13: UNREASONABLE AND UNREASONABLY PERSISTENT COMPLAINANTS

The LGSCO's guidance states that *“unreasonable and unreasonably persistent complainants are those complainants who, because of the nature or frequency of their contacts with an organisation, hinder the organisation's consideration of their or other people's, complaints”*.

This section of the corporate policy and procedure is designed to assist the council to deal with complainants, when nothing further can reasonably be done to rectify a real or perceived problem, and should be implemented only in exceptional circumstances.

Whilst the council is committed to considering all complaints and learning lessons to improve services, it recognises that in doing this, it will on occasions come into contact with people who may be both angry and distressed, and who may have difficulties with communication, disabilities or illnesses which make their contact with the council at these times persistent, strained or even hostile.

It is important at these times to consider the reasons for this behaviour and to ensure that support is available to both the complainant and staff, to enable the complaint to be heard and dealt with in a fair and equitable manner.

Some examples of unreasonable and unreasonably persistent behaviours are:

- Repeatedly making the same complaint with minor differences or insisting the differences make it a “new” complaint.
- Refusing to accept the decision; repeatedly arguing points with no new evidence
- Changing aspects or the basis of the complaint or continues to add to the complaint, hindering the investigation.
- Regularly breaks appointments or will not allow appointments with staff which would progress the complaints process.
- Repeated contact with staff in different departments, using different routes, e.g. letters, faxes, phone calls, MP, councillor and media enquiries. This can include pursuing parallel complaints on the same issue with a variety of organisations.
- Contact is frequent, lengthy, complicated and stressful for staff and repeats the same themes. This includes making excessive demands on the time and resources of staff with lengthy phone calls, emails to numerous council staff, or detailed letters every few days, and expecting immediate responses or raising numerous, detailed but unimportant questions; insisting they are all answered
- Making unjustified complaints about staff who are trying to deal with the issues, and seeking to have them replaced
- Refusing to co-operate with the complaints investigation process or to accept that certain issues are not within the scope of the corporate complaints procedure.

- Insisting on the complaint being dealt with in ways which are incompatible with the relevant procedure or with good practice
- Refusing to specify the grounds of a complaint, despite offers of assistance
- Not allowing the complaint to progress to the next stage, but continues to express dissatisfaction
- Introducing trivial or irrelevant new information at a later stage
- Being abusive, making inappropriate or personal comments or threats, or uses aggressive behaviour including shouting or swearing at staff.
- Denying or changing statements he or she made at an earlier stage or submitting falsified documents from themselves or others
- Covertly recording meetings and conversations

Where unreasonable or unreasonably persistent types of behaviour are present, the IGCFteam will attempt to identify reasons for this and strategies to resolve any difficulties, by talking to the person and members of staff and may choose to hold a planning meeting or complete a risk assessment.

If appropriate and not already in place, the possibility of an advocate or other support will be considered to enable the person to express and pursue their complaint and understand what action is being taken.

Where appropriate the IGCFteam will write to the person to explain:

- what behaviour they are using which is unreasonable or unreasonably persistent
- Advise the person of strategies to reduce the unreasonable or unreasonably persistent behaviour so that the complaint can be pursued. Examples may be :
 - Requesting they provide clarification of the complaint and their desired outcomes.
 - Reminding them that the council cannot enter into discussions about outcomes which have already been reached, unless they allow this to be moved to the next stage.
 - Requesting that they do not use inappropriate or abusive comments, shout or swear at staff, make threats, or use aggressive behaviour.
 - Agreeing times and frequency of contact.
 - Who to contact including offering to work with an advocate or support person where appropriate
 - Stopping contact with the customer either in person, by phone, by fax, by letter or any combination of these, provided that one form of contact is maintained.
 - temporarily suspend all contact with the complainant or investigation of a complaint whilst seeking legal advice or guidance;

If the unreasonable or unreasonably persistent behaviour continues, it may become necessary for the council to stop the investigation of the complaint and stop their contact with the person about it. This decision will be made in consultation with senior managers, where required, by the IGCFteam who must be satisfied that:

- the rest of the corporate policy and procedure has been followed as far as is possible; and
- no material element of a complaint has been overlooked or inadequately addressed
- status as a former unreasonable or unreasonably persistent complainant does not prejudice the investigation of a new, valid complaint
- that previous attempts at resolving matters have failed
- That this approach does not present an unacceptable level of risk for the person or the council.

When this decision has been reached, the IGCFteam will contact (where the risk assessment allows) the person to confirm this and will include any relevant points from the below list:

- An explanation of the reasons for this decision and where appropriate, when it will be reviewed.
- That further contacts about the complaint, will not be acknowledged or answered;
- how they can contact the teams providing services to them, to discuss any day to day issues which arise and how to request new services if this becomes necessary.
- Inform the customer that in certain circumstances the council reserves the right to pass unreasonable or unreasonably persistent complaints to its solicitors and/or the Police for advice or consideration of enforcement options where appropriate;
- Their right to contact the Ombudsman and that any new complaints will be investigated through the normal procedure.

The IGCFteam will also communicate this decision and steps taken to relevant staff and managers.

A review of this decision must be held at least 12 months after the initial decision and depending on the circumstances, this may be extended.

Where threats or aggressive behaviour is likely to put staff at serious risk, contact will be withdrawn immediately without notification. The IGCFteam will complete the appropriate report using the health and safety incident reporting portal and in conjunction with senior managers, will identify if contact can continue and how this should be done. In these cases the option of contacting the Police and or taking legal action should always be considered.

Withdrawing ‘unreasonable or unreasonably persistent’ status

Having deemed a customer to be unreasonable or unreasonably persistent, this status may be withdrawn by the IGCFteam if for example, the customer demonstrates a more reasonable approach or if they later submit a further, new complaint for which the normal complaints procedure would appear to be appropriate.

The IGCFteam will advise the customer of the withdrawal of the unreasonable or unreasonably persistent status.

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SECTION 14: THE IGCFteam MONITORING SYSTEM

The monitoring system is on the council's secure network and is used to register, monitor and record the 4Cs. It is a tool for the IGCFteam to ensure consistency of approach in the 4Cs process throughout the organisation and ensure compliance with this corporate policy and procedure.

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SECTION 15: REPORTING INFORMATION

The IGC team will be responsible for reports to the appropriate forum on a regular basis. These will include to management teams and Committees. Reports will include recommendations for service/ policy improvements if required, based on the analysis of data obtained from the monitoring system. The following information should be included:

Quantity and Quality

- Number of “4Cs” received
- Percentage of “4Cs” responses provided within timescales
- Number of complaints dealt with at each level/stage/grade
- Percentage of complaints answered in time at each level/stage/grade
- Number of Ombudsman complaints
- Number of Ombudsman decisions by type

Type of “4Cs”

- “4Cs” by service
- Nature of concerns, compliments and comments received
- Nature of Complaints for example: delay/ poor service/ no service

Learning

- Annual reports will be published to let customers and Councillors know how the council is performing, what lessons we have learned and how 4Cs have been used to improve what we do, including the type of changes made as a result of 4Cs.

SECTION 16: ROLES AND RESPONSIBILITIES

The IGCFteam will assess, investigate and respond to complaints at grade 1 and a different member of the IGCFteam will do grade 2.

The IGCFteam are also responsible for:

- coordinating and registering 4Cs including MPs Enquiries
- determining, assessing and allocating grade
- providing the independent to service and impartial investigations into complaints at both grades.
- Sampling the 4Cs responses for quality against agreed markers – ‘dip’ testing
- Co-coordinating, processing and responding to Ombudsman enquiries
- Acting to support the 4Cs process
- Providing training and support to colleagues
- Production of reports as necessary

SECTION 17: TRAINING

Awareness training for all staff on the 4Cs and this policy and procedure, will be regularly provided. This will also be covered in the new employee induction training.

APPENDIX **:

CITY OF YORK COUNCIL– COMPLAINTS, CONCERNS, COMMENTS and COMPLIMENTS POLICY and PROCEDURES*

**this is to be used for the council's website page(s) and the intranet.*

Complaints, Concerns, Comments and Compliments

City Of York Council wants to give you the best standard of service and values your feedback on how well we do this. If you would like to have your say about our standard of service, here is our procedure.

If you have a comment

When we receive a comment, we will contact you to thank you within 10 working days if you would like us to. Where you have made a suggestion to improve what we do, a manager will let you know within 20 working days how we will put your suggestion into practice, or explain why we can't.

If you have a compliment

When we receive a compliment about the standard of service you experienced, we will contact you to thank you within 10 working days if you would like us to. The IGCfteam will notify any council employee or service to whom the compliment refers within 20 working days. We will use your compliment to maintain or improve our standard of service.

If you have a complaint or concern

A complaint or concern is a way of letting us know that you are not happy with a particular service. A complaint or concern may be about a delay, lack of response, or about the standard of service you have received. So, please let us know if:

- You think we have done something wrong;
- We have not done something that we said we would do;
- You are not satisfied with a particular service or set of services that we provide.

We have two grades for dealing with complaints. [Insert link to published policy](#)

At any point, if we agree with your complaint we will:

- Apologise and explain what went wrong;
- Provide the service you are entitled to receive and
- Change our process, where relevant, so that the mistake is not repeated.

When this procedure doesn't apply

We intend, where possible, to deal with all complaints under these procedures. The only exceptions are for an issue which has a separate or specific provision for complaints and appeals, which includes any statutory or legal reasons. These are listed at the end of this document.

Local Government and Social Care Ombudsman (LGSCO)

The council's internal 4Cs procedure ends at grade 2 and/or by assessment. If you are still not satisfied you can contact the LGSCO. The Ombudsman will not look at the merits of your complaint but may investigate how the Council has dealt with it. The contact details are on their website at: <https://www.lgo.org.uk/make-a-complaint>

Housing Ombudsman Service (HOS)

The council's internal 4Cs procedure ends at grade 2 and/or by assessment. If it is more appropriate to refer you onto the Housing Ombudsman Service rather than the LGSCO, we will let you know. The HOS will not look at the merits of your complaint but may investigate how the Council has dealt with it. The contact details are on their website at: <https://www.housing-ombudsman.org.uk/residents/make-a-complaint/>

If you find it difficult to make a complaint yourself

You may wish to ask someone you trust to help you in making a complaint. This could be a friend, relative, voluntary agency or your local councilor or MP. However in these cases you must supply written consent for this person or organisation having access to your personal information.

Reporting allegation of Fraud or 'whistle-blowing'

If you suspect that either a member of staff or a service user/member of the public is committing any kind of fraud against the council please contact

Insert whistleblowing link

<https://www.york.gov.uk/FraudPrevention>

Unreasonable or unreasonably persistent complaints

Where a complaint is deemed to be deliberately unreasonable or unreasonably persistent, we may, at any stage of the complaints procedure, review a complaint and give a decision without a formal investigation. You will be informed in writing of this.

Again, if a complaint is substantially the same complaint as has been made by the same complainant within the previous 12 months, then we may choose not to investigate. You will be informed in writing of this.

Anonymous complaints

We understand that it might be difficult for you to complain because you are worried that it could result in a poorer service to yourself or your household.

Please be assured that we treat all complaints against us in strictest confidence, and that it is your right to complain. Please note that we don't always investigate a complaint when it is made anonymously.

Conduct by Council employees, contractors or partners

Any complaint relating to the conduct or behavior of City Of York Council employees, contractors or partners will be investigated using the relevant council procedure e.g. Human Resources. We will advise you where this is the case, but we will not advise you of any outcomes.

Who can make a complaint, concern, comment or compliment?

This process is for customers who live, work, visit or travel within the City of York and you receive one of our services (directly or through another organisation). If you are making a concern, comment or complaint you will not be treated unfairly as a result.

If you work for the council, but are also a local resident or service user, you may also make a complaint, concern, comment or compliment using this procedure. You should clearly state that you are not doing so in your capacity as an employee.

How can you make a complaint, concern, comment or compliment?

- Visit our website <https://www.york.gov.uk/ComplaintsAndFeedback> and complete the online form
- Contact the team at: West Offices, Station Rise, York, YO1 6GA
or by phone: [01904 554145](tel:01904554145) or by email: haveyoursay@york.gov.uk

How we use complaints, concerns, comments and compliments to improve our standards of service

Your complaint or concern will be dealt with properly and our response will be clear, outlining what we have done and what we are unable to do. On a regular basis, we will evaluate all the 4Cs we receive. They will recommend changes in processes or service provision where the nature and level of 4Cs indicates that this is appropriate.

Councillors and Members of Parliament

This procedure is intended for individual customers. Councillors and MPs may bring a comment, compliment, complaint or concern by acting as their constituent's advocate.

When this procedure doesn't apply

We intend, where possible, to deal with all complaints under these procedures. The only exceptions are for statutory and legal reasons such as a complaint that has already been heard by a court or tribunal, or a complaint where the customer or the Council has commenced legal proceedings or has taken court action

These exceptions have specific procedures governing complaints and appeals. We will let you know what the correct process is if your complaint falls into one of the categories listed below.

- Appeals against refusal of planning permission or against conditions placed on a grant of planning permission are dealt with by *****name****:
By phone:
By email:
Online:
- A complaint about social care services (children and adults) are dealt with by the IGCFteam. Please contact:
By phone: 01904 554145
By email: haveyoursay@york.gov.uk
Online: <https://www.york.gov.uk/ComplaintsAndFeedback>
- A school admission or exclusion appeal. Please contact
By phone:
By email:
Online:
- A complaint about a school. The Local Authority is not responsible for the day to day running of schools. Therefore please contact the school's Head Teacher or Chair of Governors. See the **** insert link to schools web pages**** for details of how the school complaints procedure works.
- A complaint from a CYC employee about an employment matter. If you are a member of staff, contact your manager or your HR advisor. If you are a member of the public you can contact the service directly or the IGCFteam – see above for contact details.

- An appeal against the issue of a penalty charge notice by the parking enforcement team and the recovery process which follows. Please contact:
By phone:
By email:
Online:
- Dispute a fixed penalty for environmental crimes (including dog-fouling) Please contact:
By phone:
By email:
Online:
- Any appeal against the exercise of a police power. Please contact:
By phone:
By email:
Online: **insert NYP link**
- A complaint about the independent Rent Officer. The Rent Officer is independent of the Council, and is part of the Valuation Office Agency Please see the VOA website www.voa.gov.uk for more information on how the Rent Officer Determination works.
- A complaint about Anti-Social Behaviour. Please contact:
By phone:
By email:
Online:
- Appeals regarding Resident Permits. Please contact:
By phone:
By email:
Online:
- A complaint about a Councillor. Please contact:
By phone:
By email:
Online:
- A complaint about a Parish Councillor or Parish Council. Please contact:
By phone:
By email:
Online:

APPENDIX ** – COLLEAGUE GUIDANCE AND FAQs

We have changed the way we handle our Complaints, Concerns, Comments and Compliments – the 4Cs*

**this is to be used for staff communications and awareness*

We have introduced a revised policy and procedures and the overriding aims of the changes are that:

- colleagues should help customers and try to resolve any issues that arise quickly
- we take pride in our good practice and learn from mistakes
- we have streamlined the processes incorporating best practice and guidance from Ombudsmen

Customers can submit their 4Cs using the online form on our website.

If a customer wants to give us feedback, whether it is a complaint, concern, comment or compliment, the information should be entered through the online form. If they are confident to fill in the online form themselves, and have internet access signpost them to where they can find the website form and policy ****insert link****

If I can pass the customer to a colleague who can deal with their 4C straight away, do I still have to fill in the form?

No. If you can put the customer through to a colleague on the phone or arrange for them to speak to someone straight away, do so. The overriding aim of the policy is good service: solving any problems as quickly as possible and stopping them happening to others.

But... if the colleague isn't available straight away, then you should record the customer's 4C on the website form. This is the best way to make sure the customer gets a quick response. It is also the quickest way for you to deal with the feedback.

When do I fill in the online form?

All 4Cs should now be entered onto our online form. There are some exceptions, please see ****insert page / link to list for outside of this policy** for more details.

If a customer is with you or on the phone to you and is not confident to enter details themselves, colleagues should help by filling in the website form on their behalf. This should only take a couple of minutes.

If you have received feedback via email, letter or other means, this should be sent onto IGCFteam as soon as possible but no later than the next working day.

Who is the website form for?

The online form found on the website is for both colleagues and customers.

If you are filling in the form for a customer you should always state on it that you are doing so.

How do I fill in this form?

The form should be self-explanatory, but contact the IGCFteam if you have any queries.

You should ensure that you have filled in all the required boxes marked with an * asterisk.

What should I tell the customer?

- If a customer is confident to enter their details themselves, tell them about the internet form and policy which is on our website ****insert link****
- If they do not have access to the internet you can advise them on where their nearest public internet access point is e.g. in the customer centre at West Offices, Libraries, etc.
- If the customer is not confident to enter details themselves. Enter their details on the website form (this should only take a couple of minutes)
- Tell them what will happen next

What can the customer do if they don't get a response?

- They can phone the IGCFteam
- You can assist by contacting the IGCFteam to check they have received it
- They can fill in another online form, submitting their reference number and ticking the 'I have complained about this matter before' box.

Does this new procedure apply to all services?

All council services should use this policy and procedure. The only exceptions are for those areas noted above e.g. most complaints about social care and children's services, schools and penalty charge notices. These exceptions have specific procedures governing complaints and appeals. See Appendix **** for a full list of exceptions.**

Where can I read more about our revised policy?

****insert links ****

What resources are there to help me deal with customer feedback?

There is a detailed policy and procedures, training where appropriate and guidance is available from the IGCFteam

How should I deal with any press enquiries?

All requests from any members of the press should be referred to the council's Communications Team. No colleague should discuss issues relating to the council or particular cases with the press without first consulting the Communications Team.

How should I deal with Members'/Councillors enquiries?

There is a separate procedure for handling feedback received from Councillors through **** to get from customer services*****. Members /Councillors enquiries are not included in the 4Cs monitoring or reporting as it can include service requests, enquiries and requests for information.

How do I deal with a request from a customer to make a comment, compliment or complaint in an alternative format e.g. another language, using a signer etc.?

Translations and interpreters can be sourced through **** insert link to guidance on this *****

If any language, disability or communication preferences are identified during the course of the customer feedback, the relevant colleague should ensure these are noted on the IGCFteam monitoring system.

How do I deal with a complaint from a Member of Parliament?

If front-line colleagues receive any of the 4Cs from Members of Parliament this should be sent onto the IGCFteam within 24 hours, who will manage the response if required. Enquiries from MPs will be responded to **within 10 working days**. In all other respects, complaints from MPs should be handled using this procedure.

What should I do if I receive a complaint with allegations of discrimination or harassment?

If front line colleagues either suspect, or are certain, that a complaint has arisen due to an allegation of discrimination e.g. on the grounds of race, gender, age, sexual orientation or disability – it should be passed onto the IGCFteam as soon as possible.

What should I do if I receive a complaint about a colleague – including assault, threat, theft, inappropriate conduct?

If any colleague receives a complaint regarding inappropriate conduct by a council colleague - the complaint should be referred to the IGCFTeam, within 24 hours who will register and progress it.

How should I deal with anonymous compliments, comments, concerns or complaints?

Anonymous compliments, comments, concerns and complaints should be progressed by passing details to the IGCFTeam. The remark will be investigated and the usual time periods for this should be achieved. It is clearly impossible to respond to anonymous complaints any further than this, as we are unable to correspond with the customer. Where appropriate, amendments to policy / procedures should be fed back to customers via relevant media channels.

It is important that every attempt be made to encourage all customers to provide their identity so that that comments can be processed. An assurance that comments will be treated confidentially may help.

APPENDIX **: ADVICE FOR HANDLING COMPLIMENTS, COMMENTS, CONCERNS AND COMPLAINTS – the 4Cs VIA SOCIAL MEDIA e.g. FACEBOOK AND TWITTER*

**to be used for both website and intranet pages*

There are a number of complaints, concerns, compliments and comments coming through the City Of York Council Facebook and Twitter accounts which are passed onto the IGCFteam.

However it is possible that various departments are also dealing with social media enquiries on their specific Facebook pages i.e. parks, leisure centre, gritting team.

Guidance for colleagues using social media such as Facebook and Twitter can be found at <https://www.york.gov.uk/downloads/download/417/social-media-policy-and-process>

For all complaints which are personal to the individual – bring the complaint off line/ off social media

- Acknowledge by the end of the day and deal with off line – give the complainant the appropriate contact details for the IGCFteam and ask them to contact us this way.
- Complaints will then be dealt with as set out in the policy and procedures
- Timescales for responses are the same as those for complaints received through other channels otherwise we will have a two- tier system, with implications for equality and fairness
- We advise that an acknowledgement or a public response be made by the end of the day on social media

Social Media 4Cs monitoring

Social media routes into the council will need to be monitored by the service area(s) regularly for any 4Cs. This is because they need to be treated the same as any others received from other contact methods.

We recommend mechanisms are put in place to ensure that the IGCFteam is made aware of any 4Cs being received from customers via social media, in a timely manner so that we can become the 'learning organisation' that we want to be.

What should I do if I receive a complaint with allegations of discrimination or harassment?

If colleagues receive complaints that appear to relate to allegations of discrimination on the grounds of race, gender, age, sexual orientation, maternity or pregnancy, religion or belief, or disability, the complaint should be taken seriously, handled sensitively, logged and referred to the IGCFteam as soon as possible. If a complaint involves allegations of harassment or discrimination by non-Council employees, the customer can be provided with details from our website at <https://www.york.gov.uk/HateCrime>

It is a requirement under the Public Sector Equalities Duties that we make reasonable adjustments for disabled citizens, and take steps to ensure people are not disadvantaged for reasons relating to their race, faith, etc. In practice this means that support such as interpreters etc. may be needed in some situations which will need to be met through service area budgets, although this will not always require expenditure (for example, a meeting in person may provide an alternative to translated material).

In some cases it may be more timely or effective to arrange a meeting with the customer and a translator or other assistance, to resolve a complaint, rather than sending a series of letters or emails. The council should be sensitive to this possibility and offer it as appropriate. If any language, disability or communication preferences are identified during the course of the enquiry, the relevant colleague should ensure this is noted on the IGCFteam monitoring system.

If colleagues identify the need for specialist assistance to customers with visual or hearing impairment, guidance is available from ***** insert link*****

If you need to communicate (verbally or in writing) with a customer whose first language is one other than English you can contact the *****insert guidance link*****

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At a glance - what changes are being proposed to the corporate complaints policy and procedures?

Area/ topic	What it is currently	Proposal
“title”	Complaints and Customer Feedback Policy and Procedures	Include word “corporate” from feedback from customers and suggestions from Councillors – Have your say Comments, Compliments and Complaints Corporate Policy and Procedures
Version control, status and retention	Version only	Include all of these on front page
The 4 Cs	not included	Align to the LGSCO approach
staff conduct	not included	To include but only for logging and sending to appropriate line manager to consider any relevant HR process
English Fluency	Not included	To include as per HMG Code of Practice on the English language requirements for public sector workers
Timescale to raise a complaint	not included	To include a 12 month timescale and/or determination of special circumstances
compliments	not included	Timescale to acknowledge compliments if requested - 10 working days
	not included	Timescale to respond if requested 20 working days
Comments	not included	Timescale to acknowledge if requested - 10 working days
	not included	Timescale for response if requested - 20 working days
Complaints - stages	Informal and 3 stages	2 grades – reflects other processes such as FOI, SARs etc and legislation led complaints requirements
Complaints – timescales	Stage 1 – 5 Stage 2 – 15	5 working days for acknowledgement

	Stage 3 - 20	To do as soon as possible but timescale will be determined by the team based on nature, complexity etc of complaint Grade 1 – 20 working days Grade 2 - 30 working days But no longer than 3 calendar months If outside council remit – 10 working days
Complaints – if agree	Not included	What to do if we agree with complainant and guidance
Complaints – ownership/multiple complaints	Not included	Section on ownership and ownership of multiple complaints
LGSCO/HSO	Not included	Limited guidance on what happens during a LGSCO or HSO case
Outcomes of complaints	Not included	Guidance including saying sorry
Handling claims for personal injury or financial loss/insurance claims	Not included	Links and guidance to Corporate Finance and Commercial Procurement manager / insurance and risk management team; ex gratia payments guidance and procedures
Customer facing policy	Not included	Provided but will form website pages
Unreasonable or unreasonably persistent complaints	Part 6	Updated and best practice (from LGSCO guidance) procedures and guidance
Monitoring system	Not included	Short description provided
Reporting Information	Part 8	Updated and best practice/benchmarked with other LAs complaints managers. Removed FOI etc information as provided separately

Roles and responsibilities	Not included	Information provided
Investigating a complaint	Not included	Guidance provided outside of document/training material
Problem solving meetings	Not included	Guidance provided outside of document / training material
Responses	Not included	Guidance provided outside of document / training material for writing letters, emails, speaking to complainants on the phone and in person Sample responses for use in letters/emails including “authorisation to release information to a 3 rd party”
Where this policy / procedure does not apply	List provided	Section explaining why it does not apply and providing list with contact details
FAQs and staff guidance	Not included	Appendix provided – will form training/guidance and intranet pages – this includes why changed, how to support customers to use online form, top tips for handling customer feedback; FAQs
Handling 4Cs on social media	Not included	Appendix provided – guidance and intranet pages for staff on how these should be managed, linking into the policy and procedures
Equality/accessibility guidance	Not included	Appendix provided – guidance and intranet pages for staff and links to accessibility guidance on intranet etc

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complaint fo

tell us about your complaint – so we can
anything – or have any difficulties filling

ails

title

Effective Complaint Handling for local authorities

October 2020

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Ombudsman's foreword



Setting the standard for complaints

Having spent more than 30 years investigating complaints across a wide range of bodies in the public and private sector, I have always felt English Local Government stands out as an exemplar of good practice in listening to and acting upon public concerns. This document captures some of that rich experience, from councils and from our own investigations, and shares it with the sector for mutual benefit.

In the best authorities, complaints are never just a 'back office' customer service function. They put public concerns right at the heart of their corporate governance – where they should be – to ensure the voice of the citizen is firmly embedded in their risk management and accountability systems.

Most authorities use complaints as a barometer of external opinion and as an early warning of problems that might otherwise stay unseen. The best take that a step further and use critical feedback to drive a sophisticated culture of learning, reflection, and improvement. After all, at a time when money is tight, why spend a fortune on consultants, when the public are already providing free, first-hand intelligence about your organisation?

On an individual level, many of the most effective Council Leaders, Chief Executives, and Directors I have encountered take an active personal interest in complaints and concerns. That evidence enables them to scrutinise what they are being told internally with feedback from the frontline. And that insight equips them as leaders, to know when and where they should step-in, to cut through corporate defensiveness and bring an end to damaging disputes.



The best authorities... put public concerns right at the heart of their corporate governance ...to ensure the voice of the citizen is firmly embedded in their risk management and accountability systems.



Most importantly, the culture of listening to public concerns is fundamental to the democratic principles that define local government. That is why it is so impressive to see the work elected members do in many authorities through the scrutiny and oversight of complaints – providing the transparency and accountability that underpins continued public trust and engagement.

My office has been a part of that culture of 'Making Complaints Count' for nearly half a century – acting as the independent guarantor of citizens' rights, but also as a critical friend to local government. As part of that role, we have a statutory duty to provide guidance on complaint standards and have done so over many decades, in consultation with the sector, alongside an active programme of training to share our expertise.

This is the latest version of that guidance, rooted in the real-world experience of investigating tens of thousands of public concerns over recent years and updated to reflect the contemporary realities of local government. I hope that you find it useful in your work and in delivering our shared commitment to put the public voice at the heart of local accountability.

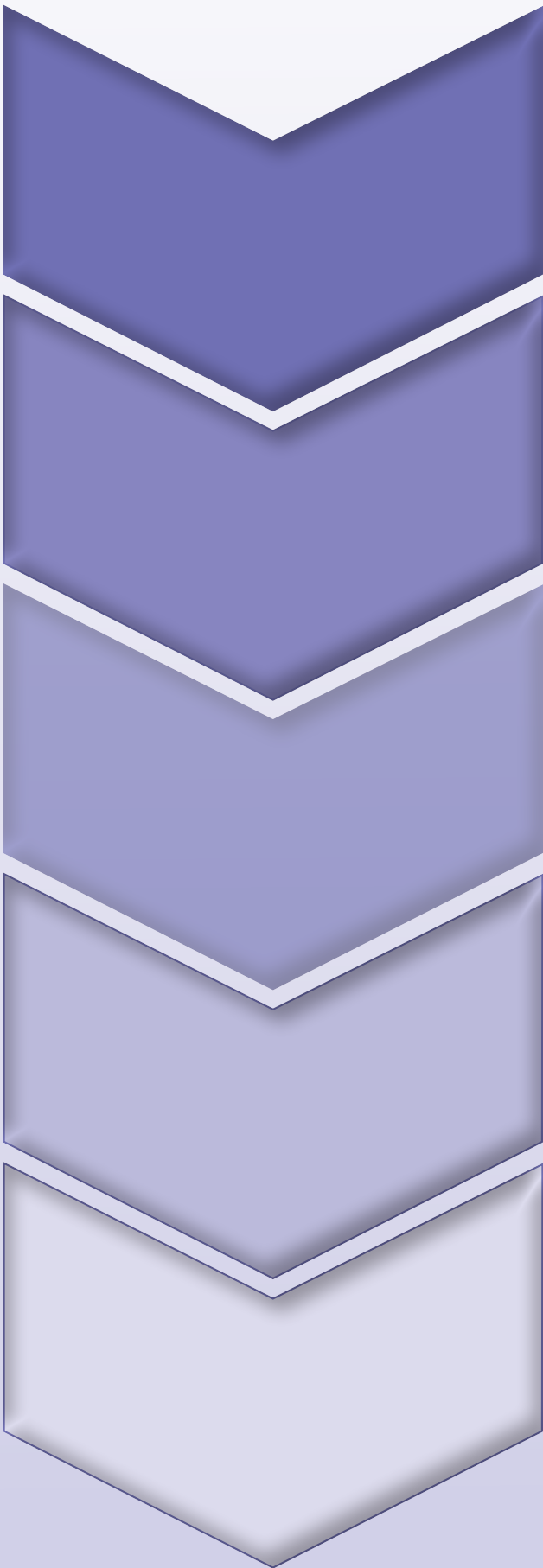


Michael King

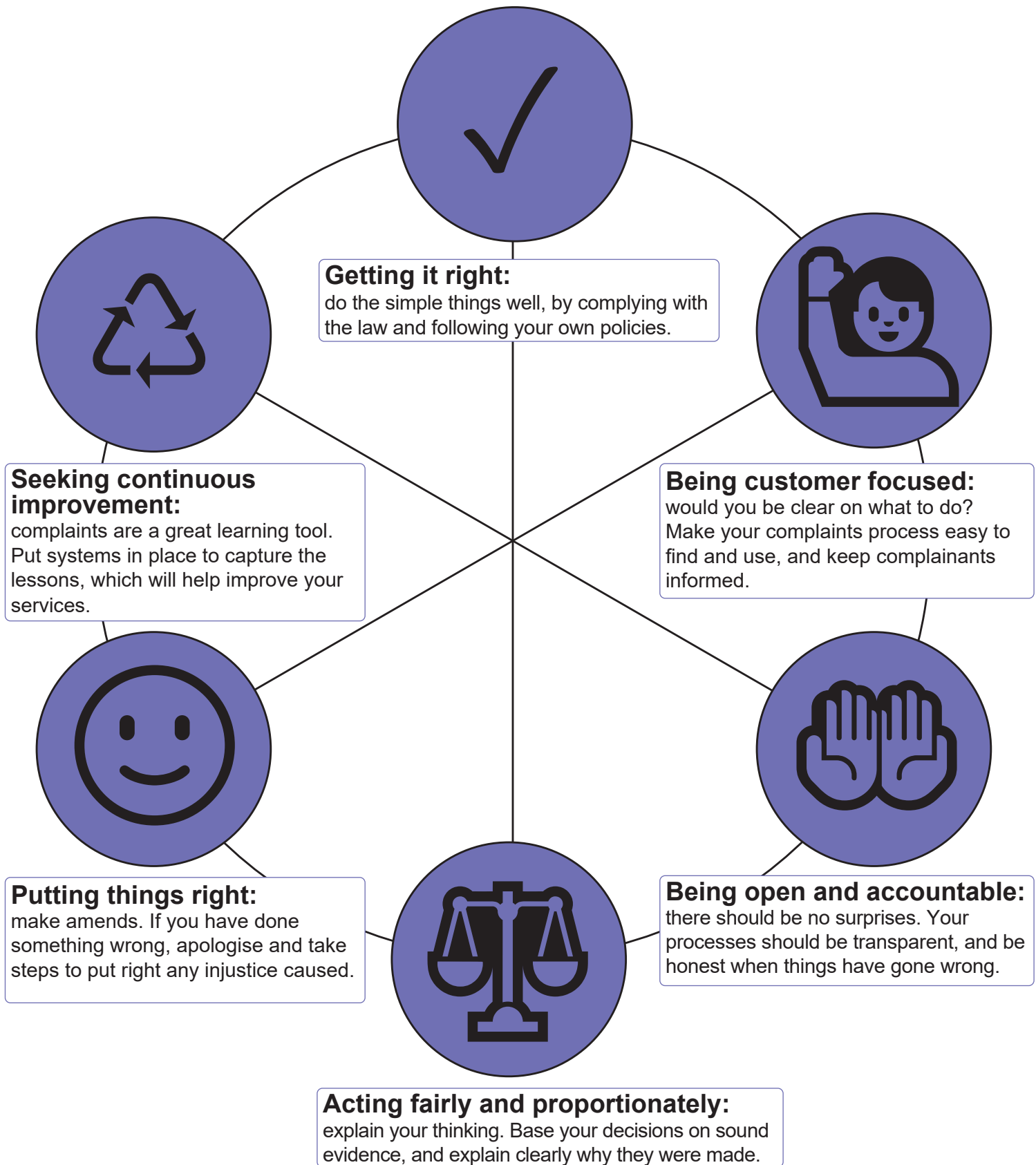
**Local Government and
Social Care Ombudsman**

October 2020

***An effective
complaints
process***



Complaints Standards - Principles of Effective Complaint Handling



Your complaints process

Your complaint process should be **tailored** to allow you to determine each complaint on its own merits. Investigations should be **proportionate** and **pragmatic**. You should be able to identify and act on learning opportunities from complaints, ensuring the lessons reach people in the council who can effect change.

Each complaint on its own merits

A good complaints process should comply with the law. In some cases the law sets out how you should handle a complaint, review or appeal, including timescales for responses. These include complaints about:

- > Children's services
- > Adult social care (including blue badge assessments)
- > School admissions, exclusions and transport
- > Housing benefit and council tax
- > Homelessness
- > Standards and member conduct
- > Parking and traffic offences.

These must be adhered to.

Example:

You have a two-stage complaint process. Mr X's complaint is completely upheld at stage one. Mr X remains unhappy and asks to progress to stage two. You are satisfied you have robustly investigated the complaint and responded appropriately. You write to Mr X explaining your reasons and direct him to the Ombudsman.

If a complaint does not fall under a statutory process then it is for you to determine how to respond to the complaint properly. We believe a good complaint process is flexible depending on the complaint and the complainant. There is no right or wrong number of stages to a non-statutory complaint process, what matters most is you investigate the complaint robustly and consider your findings properly. Once you are satisfied with your response you should direct the complainant to the Ombudsman by using the standard wording at the [end of this guide](#). This does not necessarily have to be at the end of the complaint process, but once you are satisfied there is no merit in further consideration and you have reached your final decision. The choice is yours.

Example:

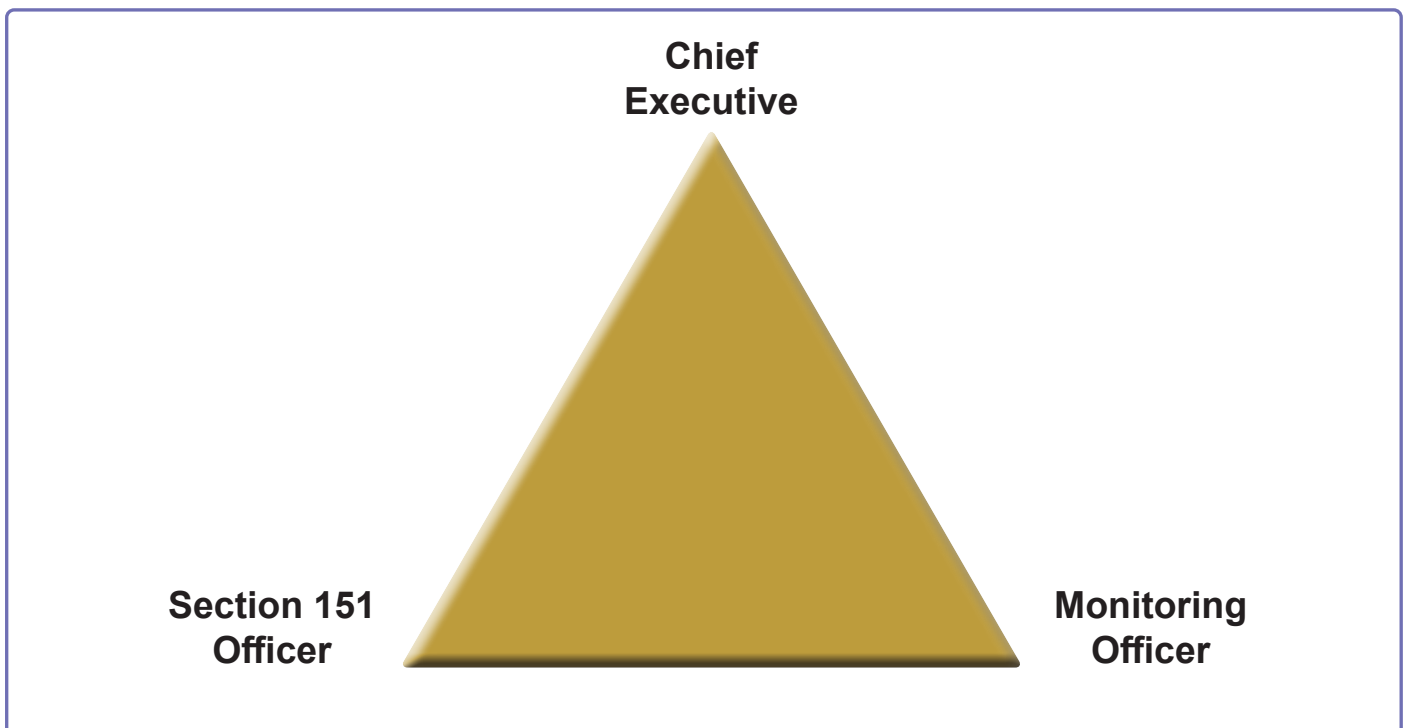
You have not upheld Miss Y's complaint at stage one or two of your process. You have directed Miss Y to the Ombudsman but she then sends you new and relevant information which she wants you to consider. We would expect you to consider this new information.

Your complaints process

The right person at the right time

For a complaints process to work properly it is vital the right people are involved and can make changes when something goes wrong. We expect robust oversight of complaint handling and any organisation who provides services on your behalf. An effective complaints process will ensure the right people are involved at the right stage.

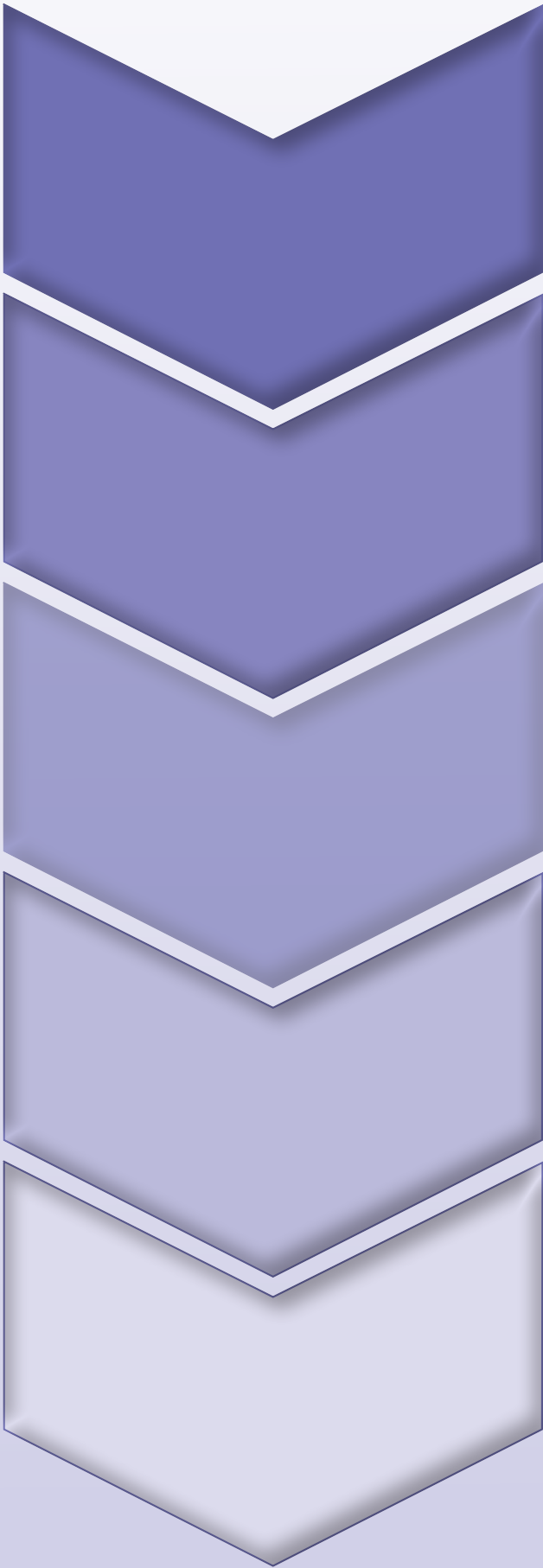
To ensure effective governance, we believe the golden triangle of statutory officers at a council should be aware and engaged with complaints, and will intervene at the right time if needed.



Learning from complaints should be at the centre of your risk management and audit function and inform your contracting arrangements. You should have effective

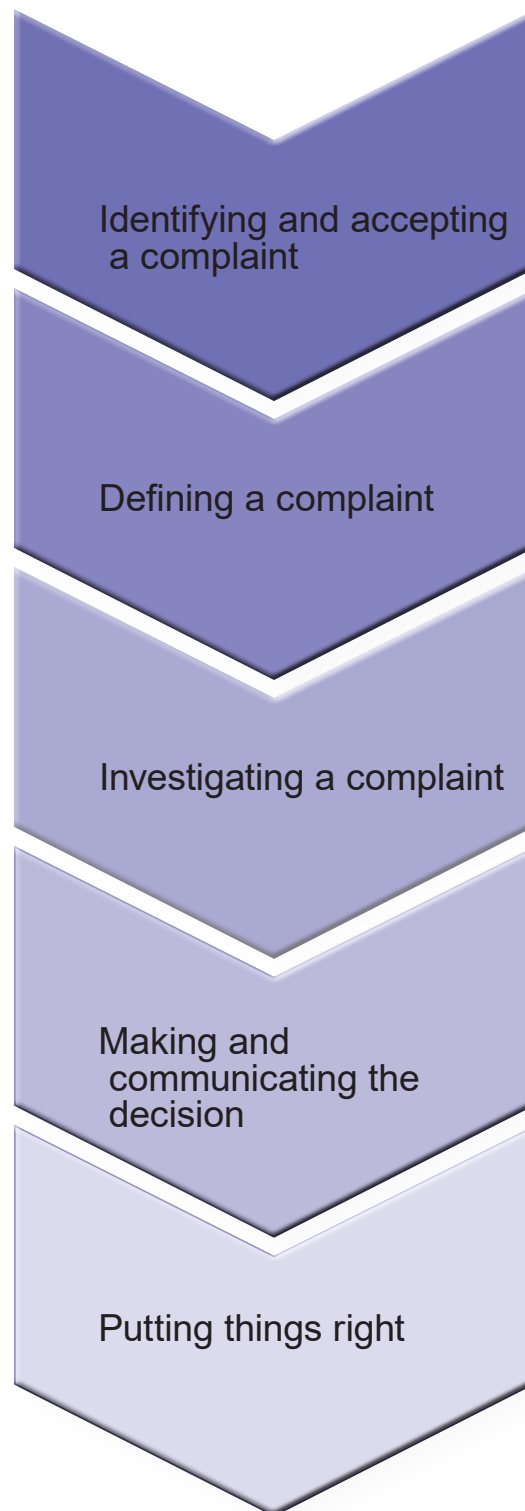
reporting mechanisms to ensure the right people hear about your complaint performance.

***A practical
guide to
effective
complaint
handling***



Effective Complaint Handling – a practical guide

There are five key elements to effective complaint handling:



Identifying and accepting a complaint

“A complaint is an expression of dissatisfaction about a council service (whether that service is provided directly by the council or by a contractor or partner) that requires a response.”

Making a complaint should be simple, accessible, clear and straightforward. We believe there is **no wrong door for complaints**. There is no difference between a ‘formal’ and an ‘informal’ complaint. While one service user may send in a letter headed ‘formal complaint’ another may tell frontline staff about something that concerns them. Both are expressions of dissatisfaction that require a response. You should have procedures in place for effectively identifying and accepting a complaint, no matter how it is raised, or with whom.

Getting it right

Make sure your complaints policy complies with the relevant law. It should be simple, clear and easy to access.

Being customer focused

Consider whether you need to make any reasonable adjustments for the complainant.

Being open and accountable

People should know they can complain and how to do it.

Acting fairly and proportionately

Offer service users support to make a complaint, if needed.

Putting things right

If you find something has gone wrong, do not wait until the complaint process has been completed to put it right.

Questions to ask on receiving a complaint:

- > Does the service user want to pursue a complaint?
They may have an outstanding request for a service that hasn't been actioned. You should be able to identify when repeated service failure becomes a complaint.
- > Does the complainant have a representative? Do they have the complainant's consent to act on their behalf, and are you satisfied they are acting in the complainant's best interests?
- > Have you already considered and responded to the complaint?
- > Is the complaint within the scope of the authority's complaints procedure?
- > If so, which procedure should the complaint be considered under, and what are the timescales?
- > Do parts of the complaint concern another public sector organisation (e.g. Health Service)?

If the complaint will require a joint investigation with another organisation, you should decide who is going to take the lead, and what information you are able to share with each other. A joint investigation should not impact the complainant's experience.

Defining a complaint

We believe the best way to accurately define a complaint is to speak to the complainant. This will allow you to:

- > Check your understanding of the issue they want you to investigate and under which complaint process you should consider it.
- > Identify opportunities to resolve the complaint at the earliest opportunity.
- > Manage the complainant's expectations and answer any questions about the process.
- > Hear the complainant's view of what has gone wrong and how they say it has affected them.

Where possible, we recommend you define the complaint from the complainant's point of view. Include details of what the complainant thinks has gone wrong and how it impacted them.

It is good practice to write to the complainant setting out your understanding of their complaint, what will happen next, and when they can expect a response. This helps reduce the likelihood of a later complaint that you have not addressed their concerns.

If the complainant disagrees with your complaint statement, and you cannot reach agreement, you should ensure you have established what is at the heart of the complaint, and what the complainant wants. You should let the complainant know you will proceed on that basis.

Being customer focused

Define what the complainant says went wrong from their point of view and the impact they say it has had on them.

Being open and accountable

Be clear on timescales, and when the complainant will hear from you again.

Seeking continuous improvement

What are people complaining about? If you are receiving multiple complaints about the same issue it can be a sign of systemic failure.

Example:

Mrs X complains the council has failed to carry out a proper assessment of her needs. She says this has resulted in her being denied services she is entitled to.

Investigating a complaint

Once you are clear what the complaint is about you will need to gather information and evidence to reach a decision. You need to use this information to decide two things:

What happened?

What should have happened?

The information you need will depend on the nature of the complaint. Below are potential useful sources.

What happened:

- > The complainant or representative
- > Members of staff
- > Third parties
- > Case records
- > Correspondence (Emails/ Phone records/ Letters).

What should have happened:

- > The law
- > Government guidance/ circulars
- > Council policies and procedures
- > Case law
- > Professional bodies
- > The Ombudsman's view.

You then need to decide what information is relevant, reliable and important to the issue being complained about.

You may want to ask yourself:

- > Who/ where/ when is the information from?
- > Is it supported by other information?
- > Are there any gaps? Do you need more information?
- > Do you have enough information to make a decision that will stand up to scrutiny?

The Ombudsman investigates fault causing injustice. When reviewing conflicting information it is sometimes useful to ask whether what happened disadvantaged the complainant.

Being open and accountable

Let the complainant know who is investigating their complaint and how they can contact them.

Being customer focused

Keep the complainant informed at all stages of your investigation, especially if there is a delay.

Getting it right

Spend time planning the investigation, deciding how you will obtain the information you need.

Making and communicating a decision

“Your complaint, our decision”

When a person asks you to consider their complaint, it is your role to investigate the issue, taking into account all the available facts and evidence. Once you have done this, it is for you to make a final decision on the matter.

It is not always possible to make a decision beyond all reasonable doubt. The Ombudsman makes decisions **on the balance of probabilities**. We believe this is preferable to making no decision at all.

We believe there are three central questions when making a decision on a complaint:

- > Was the authority or its agents at fault? Should what happened not have happened?
- > If so, how exactly has this disadvantaged the complainant?
- > If so, what does the authority need to do to put things right?

Getting it right

Be clear what your decision is, and what you will do to put things right if something has gone wrong.

Being customer focused

Consider whether the complainant needs support understanding your decision, such as a meeting to discuss the findings.

Being open and accountable

Share the information you have considered with the complainant so they can understand your findings.

Acting fairly and proportionately

Ensure the complainant knows how they can challenge the decision if they remain unhappy.

Putting things right

If something has gone wrong tell the complainant how and when you will put it right.

A good decision letter consists of:

- > The statement of complaint (agreed with the complainant at the start of the process).
- > The steps you have taken to investigate the complaint.
- > What you have taken into account.
- > Your decision and reasons for it.
- > What will happen next: if action is to be taken, how, when, and by whom?
- > Any changes you will make to processes and procedures following the complaint.
- > If the complainant disagrees, how they can challenge the decision.

Putting things right

Put the complainant back in the position they would have been, had the fault not occurred

Our [Guidance on remedies](#) explains the principles underpinning how we remedy complaints

Putting things right for the complainant

Where possible, try to put the complainant back in the position they would have been, had the fault not happened.

- > Focus less on what went wrong, and more on the consequences. The injustice.
- > Consider whether the complainant has contributed to the consequences.
- > Take account of the complainant's views, but exercise your own judgement.
- > Any remedy should be appropriate and proportionate to the harm suffered.
- > Sometimes specific actions will be required (e.g a new assessment or appeal).
- > If there is no other way to put things right, consider a financial payment in line with our [Guidance on remedies](#).
- > Assess whether the complainant has been put to a lot of time and trouble pursuing the complaint.
- > ***If there is something to apologise for, do it.***

Putting things right

If you have found something went wrong, what has been the impact on the complainant? *That is what you need to put right*

Useful further reading

- > [Scottish Public Services Ombudsman's guidance on apologies](#)
- > [Your Council's Performance - Our interactive map to find local authority performance data](#)

Seeking continuous improvement

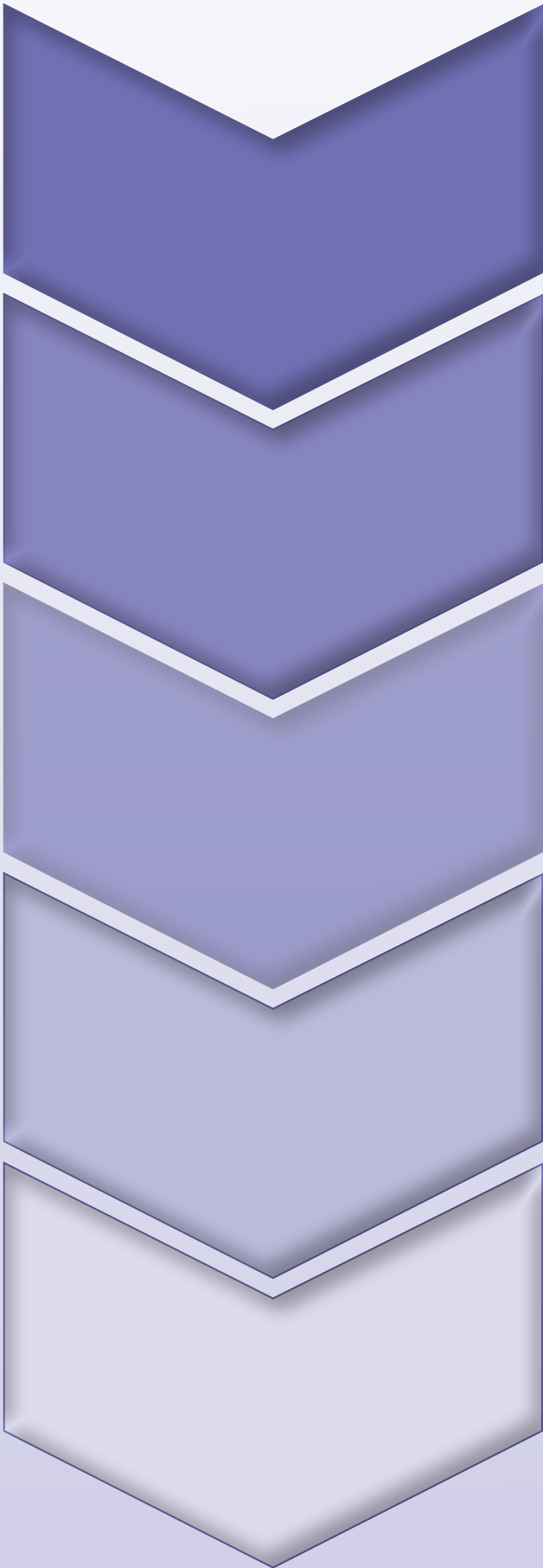
Make sure you have a mechanism in place to learn from complaints you uphold.

Making sure it doesn't happen again

Most complainants say to us they want to make sure what happened to them doesn't happen to someone else. Your complaints process should help you to find the root causes of problems and make improvements to systems and processes where they haven't worked properly. This can include changing policies and procedures, or training staff.

You can find examples of how we put things right in our [published decisions](#), and our [interactive map](#) of councils' performance, where we highlight the service improvements implemented by councils following our decisions.

Statutory complaints procedures



Children's social care complaints

The Children Act 1989 requires councils which provide children's services to set up a three stage complaints process. As a statutory procedure, the Children Act complaints process should be adhered to. People should be encouraged to give the council a chance to put things right before coming to us. And it follows that councils must make sure they administer the procedure properly and effectively, taking into account the extensive guidance available. Children, young people and their parents deserve a complaints system that ensures their voices are heard and issues are resolved fairly and swiftly.

What is covered under the statutory procedure?

The procedure covers complaints about services delivered to children and young people under Part 3 of the 1989 Act and specific functions under Parts 4 and 5 of the Act. This includes services to children in need or in care; about how the council applies to take a child into care; many complaints about fostering, special guardianship and adoption services and complaints about services to children leaving care.

The procedure exists to consider complaints not just by or on behalf of children, but from their parents, foster carers, special guardians, adopters and others who may have an interest in their wellbeing.

You can find further details about what is covered by following the link to the [regulations](#) and statutory guidance: [Getting the Best from Complaints](#).

What is excluded from the statutory procedure?

The procedure does not include complaints about child protection matters or how the council assesses families and prepares reports for the court in private proceedings (so-called Section 7 or 37 reports). These will be dealt with under the council's own complaints procedure. Councils should be clear which procedure they are using and why.

Councils may decide not to accept a complaint that is made late (i.e. over a year after the events complained of) but should not impose this restriction rigidly. It may suspend investigation of a complaint if there is ongoing court action or police investigations. If you do suspend an investigation, make sure you explain your reasons clearly to the complainant.

As with all complaints, we expect councils to assess each complaint on its own merits when deciding which process to follow.

Useful further reading

- > [Focus Report – Are we getting the best from children's social care complaints?](#)

Children's social care complaints

Early referral to the Ombudsman

'Getting the Best from Complaints' says that "*...once a complaint has entered Stage 1, the local authority is **obliged to ensure that the complaint proceeds to Stages 2 and 3 of this procedure, if that is the complainant's wish***". However, the guidance also makes it clear that someone can complain to the LGSCO at any time.

[Annex 3 of 'Getting the Best from Complaints'](#) describes the circumstances in which a council can agree to a complainant making an early referral to us. This can usually only happen if:

- > There has been a robust Stage 2 report upholding all of the complaint.
- > The majority of the complainant's desired outcomes have been met.
- > Both parties agree to the referral.

We cannot accept complaints, including early referrals, from councils. If the criteria in Annex 3 is met, and you agree to the early referral, you should write to the complainant advising them to complain to us. You should also explain what early referral criteria has been met.

We then have to decide whether to accept the early referral or insist the procedure is completed. We might agree to consider a complaint before stage three where, for example:

- > We consider the relationship between the council and complainant has broken down to the extent that the complainant has no faith in the process.
- > The complaints process cannot possibly deliver the only outcome the complainant wants (for example, the return of a child who has been taken into care or a ruling that abuse has not taken place). In this instance we may prevent further delay by making a decision on the appropriate route to seek redress.
- > The complaints process has gone so far off track (for example because of unacceptable delay) that to continue with it risks compounding the complainant's potential injustice.

Best practice

To ensure you are getting the best from the Children Act complaints procedure:

> **Follow the process**

The process is statutory so councils should follow the guidance and not depart from it without good reason. Once the process has started, the complainant has a right to have their complaint considered at each stage. It is not for the council to decide stage three is not in the person's best interests.

> **Choose the appropriate procedure**

Ensure from the outset that the complaint procedure is appropriate in the circumstances of the complaint. Explain in writing how the complaint is being dealt with and the right to approach the LGSCO if the complainant is unhappy with the outcome.

> **Don't delay**

The statutory timescales are designed to ensure complaints are handled effectively, fairly and swiftly throughout the process. Delays can happen at each of the three stages, but also moving from one stage to another. Building in additional stages, such as meetings, can also add an unnecessary delay. You should ensure any additional stages do not result in such delays.

> **Make it a seamless service**

A complaint should be progressed in as seamless a way as possible. Those complaints which involve different parts of the council should not require the complainant to make multiple complaints to different areas.

> **Look for a swift resolution**

Try to resolve a complaint at every stage, but don't allow such attempts to delay or disrupt the statutory procedure. If faults on the part of the council are realised at any stage, seek to remedy any injustice caused when they arise. Some complaints do not need to be investigated at great length, even though they have to go through the whole process – make sure that stage two investigators understand that investigations should be proportionate.

> **Early referral to the LGSCO?**

We will continue to consider complaints brought early to us on a case by case basis. We are unlikely to accept early referrals from councils except in the circumstances set out in Annex 3 of the statutory guidance.

Children's social care complaints

Learning from Children's complaints

Section 5 of Getting the Best from Complaints details the reporting requirements for children's social care complaints. Every council must formally monitor its handling of children's social care complaints. This is to ensure councils can demonstrate their compliance with the regulations and how the learning from complaints has led to service improvement and contributed to the council's future planning.

Councils must keep an ongoing record of:

- > All complaints made under the statutory procedure.
- > The outcome of each complaint.
- > Whether the statutory timescales were kept to.

The council should also compile an annual report. The report should include the above, and also:

- > The number of complaints at each stage and any that were considered by the LGSCO.
- > Which customer groups made the complaints.
- > The types of complaints made.
- > Details about advocacy services provided under these arrangements.
- > Learning and service improvement, including changes to services that have been implemented and details of any that have not been implemented. A summary of statistical data about the age, gender, disability, sexual orientation and ethnicity of complainants.

- > A review of the effectiveness of the complaints procedure.

The annual report should be presented to staff, the relevant committee and be made available to anyone who wishes to see it.

The council's reporting and monitoring procedures should allow line managers to have sight of the learning from complaints and for complaints to be a key pillar in the council's performance monitoring.

Example:

The council said there was nothing to be achieved by a stage two investigation and it did not have the child's consent to do so. It is not for the council to decide what can or cannot be achieved at stage two. If a person asks for their complaint to be considered at stage two the council must do so. The council did not need the child's consent to do this.

Example:

Ms A complained about the content of an assessment of her children carried out by a social worker. This was for a court to decide issues of residency and contact.

This complaint is not covered by the Children Act procedure and, because it relates to evidence for court, the Ombudsman cannot investigate either the report or the way the council has considered Ms A's complaint about it.

Adult Social Care complaints

Complaints about Adult Social Care services are governed by [The Local Authority Social Services and National Health Service Complaints \(England\) Regulations 2009](#). There is also accompanying guidance: [Listening, responding, improving: a guide to better customer care.](#)

These regulations say each council must:

- > Deal with complaints efficiently.
- > Properly investigate each complaint.
- > Offer assistance to complainants to enable them to understand the procedure and obtain advice if needed.
- > Respond to each complaint in a timely and appropriate way.

It is for the council and complainant to agree how the complaint will be handled, the likely duration of the investigation and when the complainant can expect to receive a response.

The regulations say the council should investigate a complaint in a manner it considers will resolve the matter speedily and efficiently, reaching a decision as soon as reasonably practicable.

It is not for the Ombudsman to determine how many stages are involved in the process. The council's framework should be clearly published, and compliant with the regulations. It should be tailored to the complaint and the needs of the individual.

The regulations also lay out how the council should report on adult social care complaints. They say the council should prepare an annual report which must show the number of complaints:

- > Received
- > Upheld
- > Referred to the Parliamentary and Health Service Ombudsman and/ or Local Government and Social Care Ombudsman.

The report should summarise the subject matter of complaints received, the way they were handled and what action has been or will be taken in response to the findings.

The council should ensure the report is available to any person on request.

Working with others

Many adult care services will be delivered in partnership with health authorities. It is vital that different organisations work together to deliver seamless services, this includes complaint handling. The complexity in which joint services are often delivered means complaining about these services can be confusing and time consuming. We have set up a joint working team, with the Parliamentary and Health Service Ombudsman, to investigate complaints spanning both sectors.

Adult Social Care complaints

Many organisations have found it useful to agree a protocol for handling joint complaints. This will identify which organisation will take the lead on the complaint and ensure:

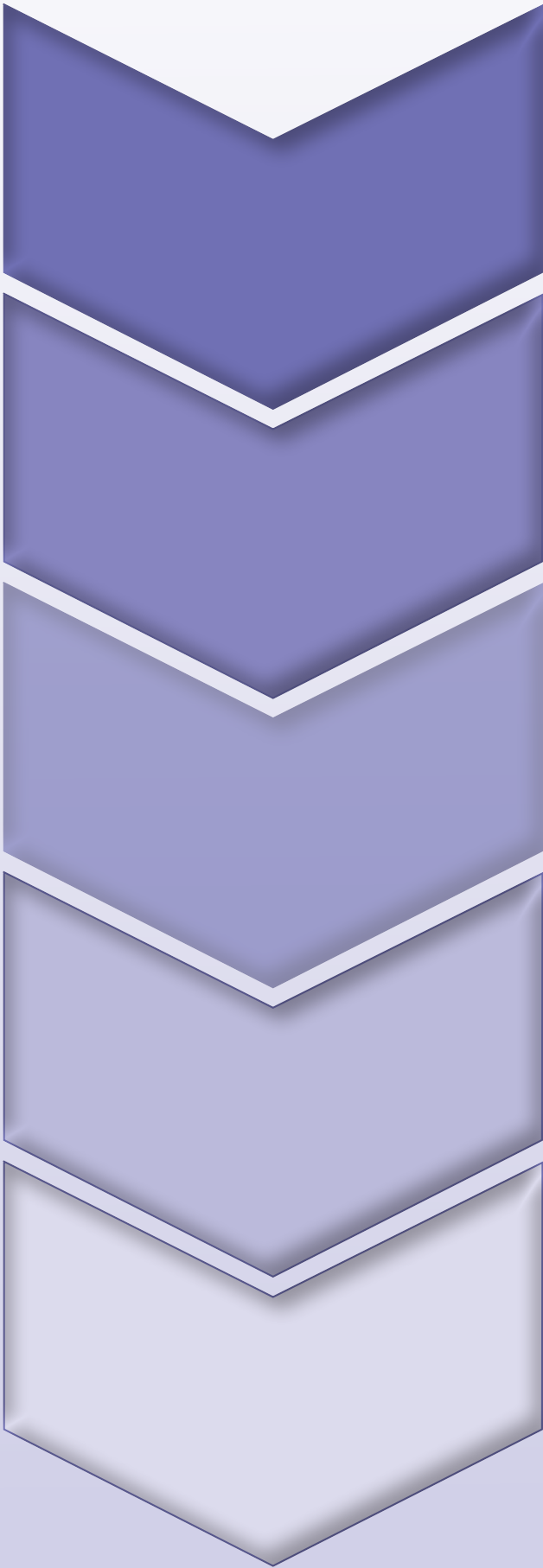
- > Each organisation knows their responsibilities.
- > A single agreed point of contact for complainants.
- > Effective communication between complaints managers from different organisations.
- > Capture learning points for each organisation.

No matter what local arrangements you have in place with health partners, the council remains responsible for the social care elements of services and complaints. Care services are often delivered by third parties on behalf of the council. You should ensure you follow the guidance in the next chapter when commissioning and monitoring these services.

Useful further reading

- > [Creating a learning culture in social care- how we can learn from local authority complaint reports.](#) – Healthwatch, August 2019
- > [Quality Matters](#)
- > [Joint Working Team Focus report](#)
- > [Joint complaint handling protocol](#)

***Monitoring
and learning
from
complaints***



Third party complaint handling

Legal and policy background

Councils frequently provide local public services by arrangement with a third party partner or external commercial provider. The law says the Ombudsman can treat the actions of third parties as if they were actions of the council, where any such third party arrangements exist (Local Government Act 1974, section 25(6) to 25(8)). This means **councils keep responsibility for third party actions**, including complaint handling, no matter what the arrangements are with that party.

Contract or other agreements

- > The processes for dealing with complaints from members of the public and disputes between the council and the provider, should be clearly differentiated.
- > Councils should include clear arrangements for complaint handling in any contract or agreement under which its partners provide public services.
- > The arrangements should:
 - Clearly agree how the council or its partner will handle complaints regardless of who receives them; who is responsible for telling citizens about the arrangements and when; who will be responsible for responding to them, and what procedure to use.
 - Be consistent with any statutory requirement (e.g. timescales for children's social care complaints).
 - Reflect the nature of the contract. For example, a large care provider may have resources to manage its own complaints procedures, but a smaller, single care home business may not.

- Be clear about when the council expects a partner to channel complaints from members of the public to a complaints procedure and when other channels are more suitable. For example:
 - Most complaints about parking or moving traffic Penalty Charge Notices would be more suitable for the statutory representations and appeal procedure.
 - Complaints about legal action are best dealt with by the court.

Handling complaints

- > Councils and their partners should agree what the complaints procedures will be.
- > Where councils agree third parties will respond to complaints on their behalf, they should agree appropriate arrangements to oversee, agree and quality check those responses. We will regard a response from the council's partner as that of the council, so you should be confident the partner is speaking with your voice.
- > Complaints about service or funding levels and policy need to be addressed by the council, not a partner.
- > If someone has completed a partner's complaints process, we would not expect them to go back through the council's complaint process. A council is responsible for a partner's actions, including complaint handling. The council will wish to know about complaints, both for monitoring the contract or agreement (see below) and so it can suggest ways to resolve them where appropriate.

Third party complaint handling

- > The agreed procedures should be easy for members of the public to understand, simple to use and in no way deter them from complaining.
- > Most complaints procedures have two or three stages. The number of stages should be minimised.
- > The procedure should make clear:
 - Who is responsible for managing each stage.
 - Who is responsible for remedying complaints, and,
 - How to signpost complainants to the next stage (including, ultimately, the Local Government and Social Care Ombudsman) if they remain unhappy.
- > Councils and their partners should ensure all their staff know the arrangements and what their role is in carrying them out.
- > Councils and their partners should ensure they learn from complaints, both about what works well and what needs improving. The arrangements between them should include a way to do this.
- > Partners may be inexperienced in complaint handling. Councils may want to train partners to ensure good quality complaint responses. The Ombudsman can support councils' arrangements with their partners through its [training in complaints handling](#).

Example of third party complaint monitoring from one council

All contracted providers must:

- > Submit a monthly return with summary information about each complaint, its outcome and the lessons learnt
- > Risk assess all complaints and notify the Council immediately of any medium or high risk complaints
- > Comply with a Quality Standards Assessment in which Adult Social Care Contracts Officers monitor complaints and compliments as a measure of performance

Monitoring and Training

- > How complaints are dealt with can be a useful measure of contractual performance.
- > Councils should decide how they oversee the effectiveness of complaints arrangements and what data collection and reporting they need. The type and frequency of information required will depend on the nature and scale of the contract or agreement. The identity of complainants should not normally be disclosed.
- > Complaint monitoring arrangements should be decided with partners at the outset.

Reporting on local complaints

You should report on your own complaint handling performance at least annually and make this information available to the public. In our view this means you should make these reports easily accessible online in the interests of openness and transparency.

Too often, the discussions around complaints centre on the simplistic notion of numbers received. We believe reporting should focus on the learning from complaints, and on implementing the recommendations for improvements that help prevent the same thing going wrong again.

Annual complaint reports should cover:

- > The learning from complaints.
 - Specific actions the council has taken in response to complaint findings (e.g service improvements).
 - Recommendations for further actions to address underlying issues.
 - > Complaints received by service area and how they were received (e.g phone, email, online, face to face).
 - > The number of upheld complaints for each service area, at each stage, and how they compare to previous years.
 - > Your council's performance against your own complaints timescales and statutory timescales for each service area.
 - > The complaints performance of third parties providing services on behalf of the council.
- > Your LGSCO annual letter and your progress against the agreed service improvements.
 - To support complaint reporting we send councils an annual letter, looking at their complaint performance for the year. We also publish council performance on our [Interactive Map](#) so you can see how you and other authorities are performing.

Reporting on Ombudsman findings

Section 5/ 5A of the Local Government and Housing Act 1989 places a requirement on every council's Monitoring Officer to prepare a formal report on all Ombudsman complaint decisions. We support a flexible approach to how councils discharge this duty as long as the intent is fulfilled in some meaningful way, and a council's performance in relation to Ombudsman investigations is properly communicated to elected members. As a guide, we suggest:

- > Where we have made findings of fault in regard to routine mistakes and service failures, and you agree to remedy the complaint by implementing our recommendations, the duty is satisfactorily discharged if the Monitoring Officer makes a periodic report to the council summarising the findings on all upheld complaints over a specific period. In a small authority this may be adequately addressed through an annual report on complaints to members, in a large County or Metropolitan authority this might need to be more frequent.
- > The Monitoring Officer should consider whether the implications of an investigation should be individually reported to members where that investigation has wider implications for council policy or exposes a more significant finding of maladministration. Examples could include:
 - The maladministration is, or has been, ongoing and therefore putting the council or authority at risk of further maladministration.
 - The large scale of the fault or injustice.
 - The reputational or financial risk arising.
 - The large number of people affected.
- > In the unlikely event that an authority is minded not to comply with the Ombudsman's recommendations following a finding of maladministration, the Monitoring Officer should report this to members under section 5 of the Local Government and Housing Act 1989. This is an exceptional and unusual course of action for any council or authority to take and should be considered at the highest tier of authority.
- > If our finding of maladministration is issued as a public interest report (under section 30(1)) of the Local Government Act 1974), there is a specific requirement for that finding to be reported to a council's or authority's members, and for a formal response to that finding to be sent to the Ombudsman. The council or authority's response must be sent to the Ombudsman within three months setting out the action that they have taken, or propose to take, in response to the report.

The role of councillors

Councillors have an important dual role signposting and pursuing complaints on the behalf of members of the public, and scrutinising the delivery of local services. Many local authorities already use our annual letters, complaints statistics and interactive map to report to scrutiny committees and other oversight functions.

Councillors may wish to consider these key lines of enquiry in their scrutiny role:

Complaint handling

- > How quickly does your authority respond to complaints?
- > How quickly does your authority look to put things right when there is evidence of fault?
- > How does your authority make sure all partners it commissions services from also have effective complaint handling processes?
- > Does your authority's complaints process clearly signpost to the Ombudsman?

Complaints upheld:

- > Does your authority uphold particularly high or low numbers of complaints in particular service areas?
- > How does your uphold rate compare to the number of complaints made to your authority?

Our decisions:

- > Do we refer a high number of complaints back to your authority to consider first? This may show that people are not being properly signposted to the local complaints process.
- > Uphold rates show the proportion of investigations in which we find some fault and can indicate problems with services. Using our [interactive map](#) you can compare your uphold rate with that of similar authorities.

Putting things right:

- > How often does your authority offer a suitable remedy for a complaint before it comes to us? This is a good sign that your authority is able to accept fault and offer appropriate ways to put things right for people.
- > Use the interactive map to look at the service improvement recommendations your authority agrees to make following our investigations. How are they being implemented, and their impact monitored?
- > What is your authority's compliance rate? This indicates our satisfaction with the evidence your authority has provided to implement a recommendation it has agreed to.

We have published a range of subject specific questions on our [website](#) that councillors could ask their local authorities on different topics when presented with a report.

The role of councillors

We have partnered with the Local Government Association on a workbook and online training for councillors on the complaints process. This training and workbook:

- > Take councillors through the complaints process and their role in it.
- > Provide an overview of the ombudsman and what type of complaints they deal with.
- > Direct councillors to sources of information for monitoring complaints.
- > Explain councillors can to use complaints to drive service improvement.
- > Signpost sources of information for complaints that are outside your council's remit.

Example:

A county council's Governance and Ethics Committee decided to scrutinise all Ombudsman complaints where we found fault to ensure the lessons were learned properly.

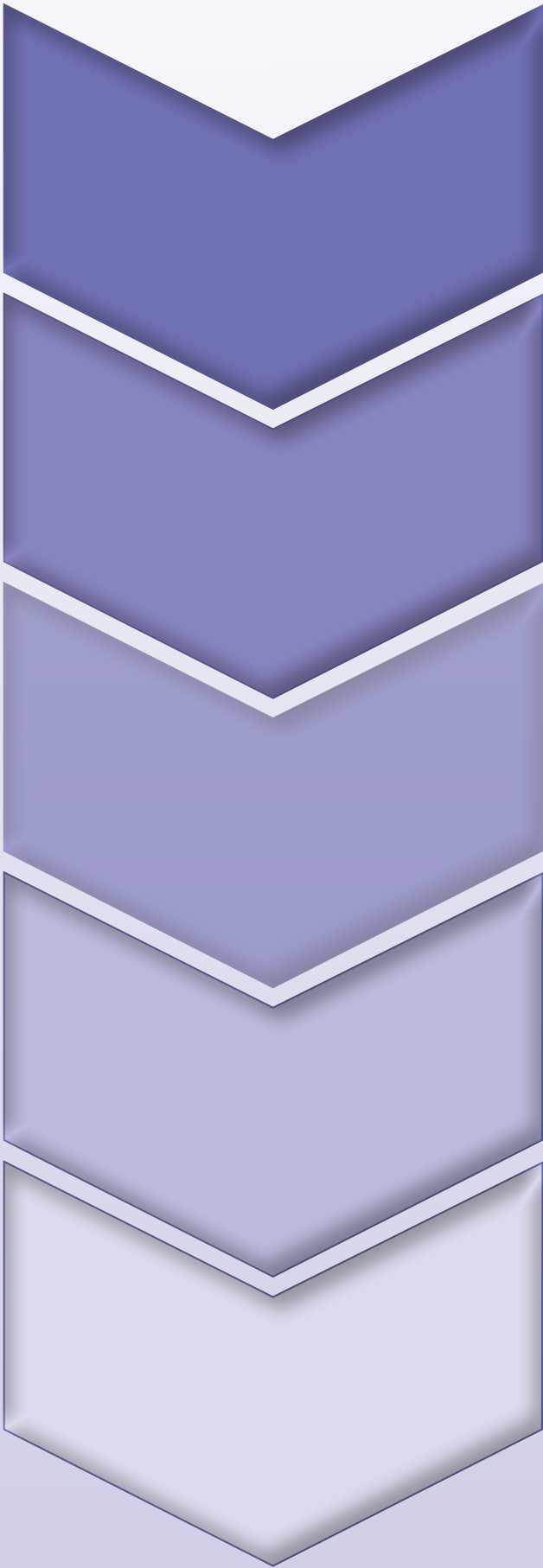
Example:

In response to an Ombudsman public report, councillors subjected the report to intensive scrutiny, recommending officers go beyond the remedies we had recommended.

Useful further reading

- > [Councillor workbook](#)
- > [Online training](#)

Appendices



Unreasonable and persistent complainants

In a minority of cases people pursue their complaints in a way that is unreasonable. They may behave unacceptably, or be unreasonably persistent in their contacts and submission of information. This can impede investigating their complaint (or complaints by others) and can consume significant amounts of resource. This can occur either while their complaint is being investigated, or once an organisation has finished the complaint investigation.

Our website contains [guidance on managing unreasonable complainant behaviour](#):

- > Have a policy – a considered, policy-led approach helps staff to understand clearly what is expected of them, what options are available, and who can authorise these actions.
- > You should be satisfied the complaint is being or has been investigated properly and any decision reached is the right one.
- > Ensure the complainant has been communicated with adequately and they are not now providing significant new information.
- > If taking action to apply restricted access, write to the complainant with a copy of your policy, explaining why the decision has been taken, how long any limits will last, and how the decision can be reviewed.
- > Keep adequate records to show when a decision has been taken, and the reasons for the decision.
- > Set a specified review date for any restrictions. You may also agree actions you expect of the complainant which you will use as a basis for the review.

Relations between organisations and complainants sometimes break down badly while complaints are under investigation and there is little prospect of achieving a satisfactory outcome. In these circumstances there may be nothing to gain from following through all stages of the organisation's complaints procedure. In these circumstances, we may, exceptionally, be prepared to consider complaints before complaints procedures have been exhausted.

A complainant who has been treated as behaving unreasonably may make a complaint to us about it. We are unlikely to be critical of the organisation's action if it can show that it acted proportionately and in accordance with its adopted policy.

Useful further reading

- > [LGSCO policy on unreasonable complainant behaviour](#)
- > [New South Wales Ombudsman manual for handling unreasonably persistent complainants](#)

How to refer people to the Ombudsman

Below are the correct contact details for referring people to the Ombudsman, and the wording we expect a council to use when referring to us:

Text for signposting someone to the Local Government and Social Care Ombudsman

Completion of local complaints process

If you have been through all stages of our complaints procedure and are still unhappy, you can ask the Local Government and Social Care Ombudsman to review your complaint.

The Ombudsman investigates complaints in a fair and independent way - it does not take sides. It is a free service.

The Ombudsman expects you to have given us chance to deal with your complaint, before you contact them. If you have not heard from us within a reasonable time, it may decide to look into your complaint anyway. This is usually up to 12 weeks but can be longer for social care complaints that follow a statutory process.

About the Ombudsman

The Local Government and Social Care Ombudsman looks at individual complaints about councils and some other organisations providing local public services. It also investigates complaints about all adult social care providers (including care homes and home care agencies) for people who self-fund their care.

Contact

Website: www.lgo.org.uk

Telephone: 0300 061 0614

Opening hours

Monday to Friday: 10am to 4pm (except public holidays)

**Local Government and Social Care
Ombudsman**

PO Box 4771

Coventry

CV4 0EH

Phone: 0300 061 0614

Web: www.lgo.org.uk

Twitter: [@LGOmbudsman](https://twitter.com/LGOmbudsman)