



BROMLEY CIVIC CENTRE, STOCKWELL CLOSE, BROMLEY BRI 3UH

TELEPHONE: 020 8464 3333

CONTACT: Jo Partridge
Joanne.Partridge@bromley.gov.uk

DIRECT LINE: 020 8461 7694

FAX: 020 8290 0608

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ADULT CARE AND HEALTH PDS INFORMATION BRIEFING

Meeting to be held on Tuesday 29 SEPTEMBER 2020

- 1 MINUTES OF THE HEALTH SCRUTINY SUB-COMMITTEE MEETING HELD ON 16TH JULY 2020 (Pages 3 - 16)**
- 2 UPDATE ON TRANSFORMATION AND GROWTH MITIGATION SAVINGS IN ADULT SERVICES (Pages 17 - 22)**
- 3 ANNUAL COMPLAINTS REPORT 2019/20 (Pages 23 - 86)**

Members and Co-opted Members have been provided with advanced copies of the Part 1 (Public) briefing via email. The Part 1 (Public) briefing is also available on the Council website at the following link: <http://cds.bromley.gov.uk/ieListMeetings.aspx?CId=559&Year=0>

Copies of the Part 1 (Public) documents referred to above can be obtained from
<http://cds.bromley.gov.uk/>

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HEALTH SCRUTINY SUB-COMMITTEE

Minutes of the meeting held at 4.00 pm on 16 July 2020

Present:

Councillor Mary Cooke (Chairman)
Councillor Robert Mcilveen (Vice-Chairman)
Councillors Gareth Allatt, Ian Dunn, Judi Ellis,
Robert Evans, David Jefferys and Keith Onslow

Mina Kakaiya and Vicki Pryde

Also Present:

Councillor Angela Page, Executive Assistant for Adult
Care and Health
and Councillor Diane Smith, Portfolio Holder for Adult
Care and Health

1 APOLOGIES FOR ABSENCE AND NOTIFICATION OF SUBSTITUTE MEMBERS

The Chairman welcomed Members to the virtual meeting of the Health Scrutiny Sub-Committee, held via Webex.

The Chairman led Members in paying tribute to all the Borough's residents who had died, either directly or indirectly, from COVID-19; those grieving for them; and all that had cared for them.

Apologies for absence were received from Justine Jones and Lynn Sellwood.

2 DECLARATIONS OF INTEREST

Councillor Jefferys declared that as a clinical volunteer he had been given an honorary NHS contract for the duration of the Coronavirus pandemic. This was currently on hold, but may be restarted.

3 QUESTIONS

No questions had been received.

4 MINUTES OF THE MEETING OF THE HEALTH SCRUTINY SUB- COMMITTEE HELD ON 28TH JANUARY 2020

RESOLVED that the minutes of the meeting held on 28th January 2020 be agreed.

5 UPDATE FROM KING'S COLLEGE HOSPITAL NHS FOUNDATION TRUST

Jonathan Lofthouse, Site Chief Executive – PRUH and South Sites (“Site Chief Executive”) and Debbie Hutchinson, Site Director of Nursing – PRUH and South Sites, provided an update on the King’s College Hospital NHS Foundation Trust.

The Site Chief Executive informed Members that in addition to the PRUH, he was also the lead for Orpington Hospital, Beckenham Beacon and the King’s College Hospital services delivered at Queen Mary’s Hospital – Sidcup.

Reflecting back to late January, early February 2020 the Site Chief Executive noted the harrowing scenes in countries around Europe, of the profound and substantial impact of COVID-19. The approach of King’s College Hospital NHS Foundation Trust in response to the threat of the pandemic was to organise services with a view as to how bad the pandemic could be. There had also been a requirement to be very robust in formalised command actions, which were taken at the highest level of a national incident. It was acknowledged that there had not been a huge amount of permission and communication outside of the organisation.

The Site Chief Executive informed Members that there were around 510 beds at the PRUH, and from the 25th February 2020 the majority of these beds had rapidly been turned over from their standard use, to be COVID-19 response bed space. COVID-19 patients that had presented at the Emergency Department, had mainly required inpatient admission into acute and general wards, but there was also a number who required higher level care in high-dependency and intensive therapy wards.

Areas of the organisation, and its partners, had needed to change rapidly as part of its response. To increase capacity, other buildings on the campus had been utilised and the day surgery unit, which was on the PRUH site, had been linked by a protective tunnel to allow bedded patients to be transferred across the car park with dignity. A number of services had also been moved out of the PRUH site, to create additional capacity and protect vulnerable patient groups. This had included moving the ophthalmology outpatient’s department to Queen Mary’s Hospital – Sidcup, to allow this space at the PRUH to be used as part of the COVID-19 response. The capacity of the site had also been enhanced for other provision, and additional temporary mortuary capacity had been housed on the PRUH site over the last few months. This was used by the organisation, as well as partners across Bromley.

The Site Chief Executive advised Members that well over 1,200 patients had presented at the PRUH and South Sites and been admitted with defined (not suspected) COVID-19. Sadly, despite all their best efforts, over 240 patients

had passed away during the pandemic. King's College Hospital NHS Foundation Trust had collectively seen more COVID-19 patients than a number of hospitals across the UK, which was largely due to the local demographics of the PRUH and Denmark Hill sites.

The Site Chief Executive stated that he was incredibly proud of all his staff, who had responded beyond expectations to this national crisis – the quality of care, bravery and compassion shown had been phenomenal. The support shown by Bromley, as a community, had been astonishing and had allowed staff to provide the best care to their patients. It had also allowed the Trust to look after its staff, either working remotely or as care givers, as wholesomely as possible, offering welfare support and psychological support, for events that they had not been used to witnessing.

As the Trust moved into a recovery phase, and a return to 'normal', they intended to mainstream some of the rapid solutions to enhance the receiving and urgent care capacity. These enhancements were currently delivering an improved emergency care 4-hour standard performance. Since late April 2020, the PRUH and South Sites' 4-hour emergency access standard had been significantly higher, and on some days had been one of the best performances across London. The current rate for the month-to-date stood at around 95.5%, which reflected the continuation of robust care opportunities, as well as the changes made to respond to the pandemic.

In response to a question from a Co-opted Member, the Site Chief Executive said that within the organisation, sadly a small number of staff had passed away during the pandemic. It was not possible for the Trust to determine if those individuals were infected with COVID-19 in a hospital or care setting.

A Member asked for more details relating to the Recovery and Reset Programme for the PRUH, particularly in relation to the priority areas of cardiology and oncology diagnostics, and the availability of outpatients' appointments. The Site Chief Executive advised that as the country entered into the first wave of the pandemic, the Trust had been issued with regular and rapid directional instructions from Public Health England (PHE) and the Department of Health and Social Care (DHSC), regarding what services should continue, and which should be paused. Those that were required to be paused included endoscopy, which was also a diagnostic for cancer patients. The issues around accessibility were therefore due to national instructions, which the Trust were required to follow. Throughout the pandemic, the PRUH had continued to provide urgent and critical care for cancer patients, either being treated on site or at the designated centre for South East London. However, a sizeable and complex backlog had developed, particularly in endoscopy, echocardiogram and CT scan services. The majority of services were now in a 'near normalised' state, and an outsourcing contract had also been agreed with a local partner, who had additional capacity for the three services mentioned. A range of other clinical options (video, telephone and face to face) would also continue to be provided, but there was a need to recover the position of the diagnostic pathway.

In response to a question regarding preparations for a second wave of the COVID-19 pandemic, the Site Chief Executive said that the Trust had taken distinct learning out of their response to the first wave. They were extremely proud of their response to the pandemic, and it was considered that they would not have done much differently. Learning had also been taken with in terms of how environments of care could be escalated; how quickly intensive therapy beds could be made available; and how many could safely be staffed. There was now also detailed modelling regarding length of stay in hospital and medical interaction with patients. There would always be a level of risk and escalation, and a second wave would be more complex if it arrived during the winter flu season. This was recognised nationally, and the Trust was already being asked to give additional capacity to stockpile the resources needed for a second wave response.

In response to a question regarding the support given to NHS staff, the Site Chief Executive informed Members that the Trust had been conscious of the need to provide an enhanced offer of on-site welfare and support. There was a safe space to which care givers could go, have time to reflect and receive psychological and therapeutical support. The feedback from staff had been extremely powerful, and the Trust had permanently established 'welfare sites' at Orpington Hospital, the PRUH and Denmark Hill. Work was underway to design a memorial garden, which had been gifted by the owners of the PRUH hospital building and would be a private space for staff which provided a holistic and reflective environment. The Trust's occupational colleagues had also been working with the Oxleas NHS Foundation Trust to look at the long-term welfare offer for staff. It was felt that the Trust had responded rapidly, and that the value of the support offered had been recognised as an organisation.

In response to questions regarding care home testing and PPE, the Site Chief Executive advised Members that the Trust had been given distinct direction from PHE as to how they should augment their response to the pandemic. The information was received rapidly and was very extensive. At the outset of the pandemic, it was noted that UK-wide, patients had not been routinely swabbed on discharge from hospital, and this was equally the case in London. At a stage during the pandemic, the guidance changed from PHE, and all patients were required to be swabbed on discharge. The Site Chief Executive agreed that following the meeting, he would provide Members with the date that this guidance had changed.

With regards to PPE, the Site Chief Executive confirmed that at no point had the Trust run out of the required PPE to care for different categories of patients, during the pandemic – for example, a standard ward required staff to wear surgical facemasks, whereas on a COVID-19 ward a FFP respirator mask was worn. There had been challenges in terms of the purchasing and provision of PPE, and at the peak of the demand reserve levels of stock had been reduced. However, the Site Chief Executive highlighted that the Trust had a significant level of stock reserve, with 4.5 million facemasks available on site for its 13,000 staff.

A Co-opted Member noted that there was still some reluctance to access outpatient appointments and services and asked what was being done to reassure patients that there were precautions in place. The Site Chief Executive agreed that this was a challenge, but as mentioned previously, the majority of services were now available and accessible to patients. However, they were finding that a number of patients were not wishing to shield prior to elective operations, or had difficulty getting the required pre-swab, and less to do with patients having a fear of coming on to the site. The Trust was responding to this by providing an embedded information leaflet with all correspondence to patients, advising of the safety precautions being taken. The number of access points on the hospital sites had been restricted. On arrival, everyone was asked to sanitise their hands, and they were provided with a surgical facemask to wear. The corridors of the hospitals were marked out with two metre distancing, and divided into left and right flow. The number of seats in waiting areas and general footfall had also been reduced substantially, and a range of telephone and video consultation options were available to patients if they were still reluctant to come to the site.

The Portfolio Holder for Adult Care and Health thanked the Site Chief Executive and all his staff for their amazing work, on behalf of the residents of Bromley. The Portfolio Holder for Adult Care and Health noted that there had been a requirement for the Local Authority to increase expenditure during the pandemic to ensure residents were supported, and enquired if the Trust felt they had received the support needed from central government; and for an update on the current financial position of the PRUH. The Site Chief Executive stated that at no point had there been any restrictions on the ability to spend money to provide the necessary response to the pandemic. The DHSC had eased financial restrictions to ensure that it was possible to provide the care needed to every patient. However, there were now some challenges with all NHS organisations moved on to a block financial position. Currently there were no concerns regarding the financial position of the PRUH and South Sites, however there was a shortfall of expenditure due to complex accounting. There was no financial hardship being experienced as a result of their response to the pandemic, and no evident financial challenge as they moved into the recovery phase.

The Chairman extended her thanks to Jonathan Lofthouse and Debbie Hutchinson for attending the virtual meeting of the Health Scrutiny Sub-Committee and providing full and honest answers in response to the questions from Members. The Chairman asked that the Site Chief Executive relay the thanks of the Sub-Committee to all his staff.

6 HELP US, HELP YOU PILOT (CCG)

Dr Angela Bhan, Borough Based Director – South East London Clinical Commissioning Group (SEL CCG) provided an update on the ‘Help Us, Help You’ pilot.

The Borough Based Director – SEL CCG informed Members that 'Help Us, Help You' was the term given to a way of using the NHS 111 service. It was noted that the service had previously been called 'Think 111', and its name was expected to change again. 'Help Us, Help You' was a new campaign by NHS England and NHS Improvement, geared around providing same day and emergency care.

As mentioned by the Site Chief Executive – PRUH and South Sites, the PRUH had recently been functioning incredibly well around the 4-hour target and there was an intention to not return to having crowded waiting rooms as this would help to manage patient flow. They were also conscious that a second wave of COVID-19 may occur at the same time as the worst winter pressures, and possibly an outbreak of flu. During this time, they would need to try and protect patients and staff and lower the potential risk of infection.

Attendances at the A&E department and the Urgent Care Centre (UCC), during the pandemic had been 35% lower than at January 2020. However, a gradual increase in attendances was starting to be seen, and there was a need to ensure that the right services were available in the right place, at the right time. The 'Help Us, Help You' campaign encouraged callers to ring 111 to be assessed by a clinician, and then directed to A&E or the UCC by appointment. It was emphasised that this service did not cover those that required help straight away, and they would need to dial 999. The 'Help Us, Help You' service was for people of low risk, assessing the right place for them to get treatment and, for those requiring it, an appointment would be booked at the site they needed to visit. For residents that were shielding, their information would be sent electronically to the UCC or A&E so they were aware if a patient was particularly vulnerable. There was also the potential to be booked to attend the Same Day Emergency Care Unit, which would offer diagnostic tests, and avoid the need to sit and wait in an A&E department. For patients experiencing a mental health crisis, there was also a pathway to improve access to mental health services. The other element of the 'Help Us, Help You' service was to book more patients in directly to appointments with their GP.

The pilot was not yet being run at the PRUH, but several pilots of the service were being run across South East London – Lewisham Hospital, King's College Hospital, Queen Elizabeth Hospital and a standalone treatment centre in Erith. It was noted that the pilots were on going, and it was likely to be an early rollout of what would be implemented. It was stressed that having direct bookings into a patient's GP surgery would help to improve access into primary care.

The Chairman thanked the Borough Based Director - SEL CCG for her update on the 'Help Us, Help You' service.

7 UPDATE FROM OXLEAS NHS FOUNDATION TRUST

The Sub-Committee received a presentation from Adrian Dorney, Associate Director – Oxleas NHS Foundation Trust (“Associate Director”) and Lorraine Regan, Service Director – Oxleas NHS Foundation Trust (“Service Director”) providing an update on the impact of the Coronavirus pandemic.

The Service Director advised Members that the Oxleas NHS Foundation Trust had very much been in ‘command mode’ during the pandemic, and an instant command centre and clinical senate had been established. The governance structure of the Trust had changed, with the executive teams taking part in daily phone calls, and the sending out of bulletins to staff three times a week. The importance of frequent communication with teams had been recognised early on, as staff were understandably anxious.

A PPE hub had been established extremely quickly. The Trust had not been in the position of supplies running out, but there had been a couple of times when stock levels had been low, and mutual aid had been provided by other London hospitals. The implementation of PPE had followed the national guidance, and a steer was given as to how it should be used in mental health settings. It was noted that the PPE experience of mental health staff was quite different – they were not used to working in an environment where PPE was usual, and they had responded remarkably well. The Service Director informed Members that there had been daily monitoring of the workforce, allowing them to have a clear idea of how many staff were off due to COVID-19, and redeployment opportunities were provided to protect vulnerable staff.

The Associate Director informed Members that in terms of community services, work had been undertaken to risk stratify caseloads. This ensured that those service users needing to be seen face to face, whilst minimising this where possible to protect them. They had also worked to maximise the use of other methods of contact, including telephone and video calls with service users. It was noted that, overall, this had been well received by services users, and the ease of access had reduced the incident of appointment ‘no shows’ during the pandemic.

Essential contacts, either via home visits or within their offices, were carried out adhering to social distancing regulations, and PPE was used in line with the guidance received. As a large number of service users were being seen remotely, fewer were visiting the offices for their appointments, which allowed a safe space to be provided. They had also been able to maintain essential clinics for those service users requiring injections and blood test monitoring. These had been managed by providing service users with timeslots at points when there was the fewest amount of people in the building, allowing them to be seen quickly, and leave.

The Associate Director advised that where possible, partial assessments had been undertaken remotely, doing as much as they were able to so that a backlog of patients did not build up. They were now in a position to just complete the face to face elements of the assessment, and this would

commence as soon as was practically possible. It was noted that at the start of the pandemic, not all the required IT set-up had been available to deliver easy remote working for staff, however the laptops and access points had subsequently become available very quickly. Home working was now established, and the Trust would be well prepared if there were to be a second peak, and the need for remote working.

With regards to inpatient and mental health liaison services, the number of beds for mental health usage had been reduced during the pandemic. This was to minimise the number of people in a close environment, as well as the risk of transmitting COVID-19. There had been system-wide thinking and releasing bed availability meant that it could be used across the local health care system. There was high level involvement in admission decisions, to ensure that the most appropriate admissions were made. Those service users that were felt able to cope at home were not admitted and were instead provided with support from the Home Treatment Team. The bravery and commitment of these staff to continue to deliver this service was highlighted.

The Mental Health Liaison Team had provided support to the A&E department and wards of the PRUH. During the pandemic, iPads had been utilised by the team to carry out remote assessments of patients on the wards, which was a new and effective approach. For those that had not been able to utilise this, PPE had been worn where necessary to undertake face to face contact. Daily senior management video calls had also been undertaken with colleagues at the PRUH regarding the A&E department and levels of demand – these would continue as they had been extremely effective. Throughout the pandemic there had been a reduction in footfall, which was thought to be an impact of the media and government warnings around not attending hospitals unless necessary. There had been a reduction in March and April, which was followed by an increase once the government guidance changed. However, it was noted that there had not been an unmanageable swell.

The Associate Director highlighted that they had utilised the 'attend anywhere' appointment platform for psychology, which allowed service users easier access to their outpatient appointments with consultants and medics. This was an offer provided as a result of the COVID-19 pandemic which would be taken forward following its success. Specialist psychology and mental health nursing had also been provided on site at the PRUH for their staff, which could also be accessed by LB Bromley staff. This had been welcomed by them and was felt to be very effective and showed the joint thinking across the partner organisations.

The Service Director emphasised that throughout the pandemic the referral pathway had continued, but at a slightly lower rate, which had allowed some of the backlog of cases to be cleared. More staff were returning to the team bases in a controlled way, with environmental and individual staff risk assessments being carried out. Most staff were working on a rota basis, with some days working from home and others in the office. It was expected that staff would remain working like this until at least the end of the year.

A Member highlighted the use of online remote psychotherapy and psychology, and asked if service users had found this beneficial, and if there was likely to be continued demand. The Service Director said that the feedback received had been really positive, and some cohorts of the service user population, particularly young men, had engaged much better through this remote service. It was noted that they were aware that this did not work for everyone, and extra safety measures were put in place for those that were not able to engage with this technology. The Associate Director said that there had been a variety of feedback, some of which had shown that older adults may have had more difficulty in engaging in this way. It would however add to, and strengthen, the choice of services on offer to patients, which was a positive outcome.

In response to a question, the Associate Director said that if a service user had issues with digital access, it would be included as part of their care plan. Due to the pandemic, it had not been possible to undertake a large-scale mapping exercise of caseloads, but learning would be taken from this period.

The Chairman led Members in thanking Adrian Dorney and Lorraine Regan for their presentation to the Sub-Committee.

8 UPDATE FROM BROMLEY HEALTHCARE

Jacqui Scott, Chief Executive Officer – Bromley Healthcare (“Chief Executive Officer”) provided an update on the COVID-19 response by Bromley Healthcare.

The Chief Executive Officer noted that she was lucky to have a fantastic team who, overnight, had risen to the challenge of providing care that they never would have expected. Around 30% of the organisation had been repurposed, with non-essential parts of the service being paused. The skills of these staff members had been looked at, to ensure best fit into a COVID-19 team, and some Care Co-ordination Centre staff had even trained as Health Care Assistants and phlebotomists. The finance team had manned the PPE stock room, and HR staff had been answering calls to the hotline. Executive staff had also been involved, undertaking swabbing and antibody testing. The feedback received from this had been extremely positive, and the cross training had allowed a greater understanding of what other team did – some staff members did not want to return to their roles and would instead retrain in the nursing arena.

The Bromley Community COVID Monitoring Service had been set up in two days and had been established in collaboration with the SEL CCG and GPA. This repurposed community matrons, respiratory nurses, consultant paediatricians and local GPs, who accepted referrals for patients with suspected COVID-19 from the 111 service. They responded within two hours to provide support and daily calls were made to the patient. At the peak of the pandemic, this team was undertaking 100 daily calls, and overall had received 3,000 referrals. The team had also recorded all the clinical information on a

daily dashboard, to display what was happening within the service. This provided a safety net, to ensure that patients received their daily calls. Over the last few weeks, the Community Matrons had contacted around 10% of patients that gone through this service to gain feedback – 95% had said they had felt supported, and some lovely comments had been received.

At the beginning of the pandemic, the main concern had been to ensure that all vulnerable patients were able to be seen. There was an increase in hospital discharges, plus a number of new team members, with a range of competencies, following their redeployment into other teams. It was therefore thought to be safer to bring forward the roll out of the Malinko Auto Scheduling Tool. This system allowed the competencies of staff to be matched with the intervention required to be undertaken. It also minimised travel time and ensured that visits happened at the right time. Nurses had been provided with laptops to view GP records during visits, and smartphones to inform patients if they were running late. The aspiration was that by the end of the financial year, patients would be provided with time slots for appointments.

The Single Point of Access (SPA) for discharge had been established with the SEL CCG and Local Authority and was run by repurposed nurses and therapists who looked after patients on a number of different discharge pathways. There was a single phone number for the hospital to call if they wanted to discharge a patient from any of their wards, and they would speak with a clinician regarding the best wrap around care. 800 discharges had been made via this service, and since the end of March 2020 there had been a reduction in the length of stay in hospital beds. It was noted that many within the Bromley Healthcare team did not feel as though they were moving into recovery as they were busier than usual with 75,000 face to face and home visits, and over 30,000 virtual appointments, being carried out. Each team lead had been using the Zoom virtual meeting platform to meet with as many of their team members as possible to reflect on the COVID-19 response. Teams had also been asked to draw up their restart and escalation plans.

The Chief Executive Officer noted that one positive to come out of the pandemic was that Bromley Healthcare had moved their transformation programme forward from twelve to three months. It was emphasised that the 0-19 service was still on track and would be mobilised from 1st October 2020.

In response to a question from a Member, the Chief Executive Officer said that Bromley Healthcare did everything it could to retain its student nurses. In March 2020, 14 nurses had joined, inductions had taken place, and they were working within the Bromley Healthcare teams. Twice a year, newly qualified Band 5 nurses undertook a 12-week face to face readiness programme to build competencies. This was an attraction, and through word of mouth there was more and more interest in this scheme.

A Member expressed his thanks and admiration to the Bromley Healthcare staff. It was noted that an extremely impressive report had been provided to the Sub-Committee, which highlighted the excellent work they had undertaken. In response to a question regarding how Bromley Healthcare

staff had worked with Local Authority social workers, the Chief Executive Officer said that the SPA was a good example of this. As patients were discharged from hospital through the SPA, they were given a care package and Bromley Healthcare therapists visited to undertake welfare checks. From this work, 30% of the checks highlighted a need for a change to the equipment provided, which the therapists were able to do.

A Co-opted Member noted that part of the information relating to the Bromley Community COVID Monitoring Service mentioned anxious patients being referred to Bromley Talk Together, and asked how long patients had to wait to access this support; the nature of the support; and how long the support had lasted. The Chief Executive Officer advised that patients calling the monitoring service were often very anxious. Their details had quickly been passed on to the Bromley Talk Together service, for which there was no waiting list for support. A staff line was also providing support. Around 10,000 consultations had been undertaken – 30% had been via Zoom, and 70% via telephone or other means. Recovery rates from the service were very good and had been at around 60% during the pandemic.

The Chairman led Members in thanking Jacqui Scott for her update regarding the work of Bromley Healthcare, and reinforced the Sub-Committee's appreciation for the work undertaken.

9 UPDATE FROM HEALTHWATCH BROMLEY

Mina Kakaiya, Operations Manager – Healthwatch Bromley provided an update to the Sub-Committee regarding their services during the Coronavirus pandemic.

The Operations Manager informed Members that during April, two part time Project Officers had been recruited by Healthwatch Bromley. In line with government guidelines and social distancing measures, the face-to face engagement model for Healthwatch services had been adapted. The core offer of patient engagement during this period had included:

- Fortnightly online Zoom sessions for the community, individuals, and local groups to share their experiences;
- Providing a Whatsapp Information and Signposting service to enhance the phone, email and website offer;
- Regular website news updates (from PHE and NHS England) and a specific COVID-19 information page had been set up;
- Increased social media platforms to share key messages, provide information and signposting and support local health and care partners in reaching wider audiences;
- Promoting the patient experience programme; and
- Promoting the Bromley COVID-19 Volunteer Hub.

Other core service functions had included work being undertaken on the Quarter 4 Monitoring and Patient Experience Report. In total 467 patient experiences had been received, but work had been halted on the 15th March

2020 due to COVID-19 pandemic. However, the Autism Care Pathway Report 18+ had been completed, and would be published shortly, as had the Healthwatch Bromley Annual Report 2019-2020.

The Enter and View Programme for Quarter 1 had been put on hold, and discussions with commissioners would take place to consider how this would be taken forward in Quarter 2. The research study on domiciliary care had also be put on hold, however a deep dive regarding adult mental health services was planned. In relation to patient experiences, the Operations Manager noted that reviews had been obtained from online platforms including relevant NHS and care home websites. For Quarter 1, 300 views had been captured, however they had not been able to meet their target of 600.

The Executive Assistant for Adult Care and Health asked for more details regarding the number of residents and charities that had engaged in the Zoom sessions. The Operations Manager advised that of the 82 participants, 21 had been residents; 42 were charity representatives; and 19 were Local Authority representatives. It was agreed that the Operations Manager would provide further breakdown of these details to the Executive Assistant for Adult Care and Health following the meeting, and a revised report would be circulated to Members.

The Executive Assistant for Adult Care and Health also asked for clarification of the number of enquiries that were made about lack of access to housing support and housing benefit and how these were taken forward. The Operations Manager advised that this feedback had come out of a Zoom session, referring to two clients with mental health issues and the barriers to accessing the online form and applications. However, more support regarding this had been provided.

The Portfolio Holder for Adult Care and Health noted that it would be helpful to receive further clarification on some of the statements made in the Healthwatch Bromley report, to put them into context. It was agreed that the Executive Assistant for Adult Care and Health would take this forward with the Operations Manager – Healthwatch Bromley.

10 WORK PROGRAMME 2020/21 AND MATTERS OUTSTANDING

Members considered the forward rolling work programme for the Health Scrutiny Sub-Committee.

A Co-opted Member asked if the Sub-Committee would be receiving an update on the Bromley Joint Mental Health and Wellbeing Strategy 2019/20-25. The Chairman noted that this sat with the Adult Care and Health Policy Development and Scrutiny Committee, but she could see no reason why a report of these discussions could not be provided to the Sub-Committee. It was agreed that this would be added to the work programme for 2020/21.

A Member asked when the work programme items marked as 'to be scheduled' would be brought to the Sub-Committee. The Chairman said that this would be discussed with partners, and proposals would be brought back at a later date.

RESOLVED that the work programme be noted.

11 ANY OTHER BUSINESS

There was no other business.

12 FUTURE MEETING DATES

4.00pm, Wednesday 21st October 2020

4.00pm, Thursday 14th January 2021

4.00pm, Tuesday 23rd March 2021

The Meeting ended at 5.49 pm

Chairman

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Report No.
ACH20-048

London Borough of Bromley

PART 1 - PUBLIC

Decision Maker: Portfolio Holder

Date: 29th September 2020

Decision Type: Non-Urgent Non-Executive Non-Key

Title: UPDATE ON TRANSFORMATION AND GROWTH MITIGATION SAVINGS IN ADULT SERVICES

Contact Officer: Nick Fripp, Transformation Manager
Tel: 020 802084617590 E-mail: nick.fripp@bromley.gov.uk

Chief Officer: Kim Carey, Interim Director of Adult Social Care Services

Ward: Borough wide

1. Reason for report

- 1.1 To provide an update on the Transformation Programme in Adult Social Care
- 1.2 To note future growth mitigation savings to deliver a balanced budget.

2. RECOMMENDATION(S)

- 2.1 The Portfolio Holder is requested to:
- 2.2 Note that the Adult Care and Health Directorate has efficiency targets to meet as part of the Transformation Programme and with regards to a range of growth mitigation actions.
- 2.3 Note that the total budgeted saving in 2020/ 2021 financial year including both transformation and growth savings is £1.856m as detailed in Appendix 1.
- 2.4 Note the update on current year targets, on future projections and on the steps that are being taken to deliver against future targets.

Corporate Policy

1. Policy Status: Existing policy. Existing Policy Context/Statements
 2. BBB Priority: Supporting Independence.
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Financial

1. Cost of proposal: N/A
 2. Ongoing costs: N/A.
 3. Budget head/performance centre:
 4. Total current budget for this head: £
 5. Source of funding:
-

Staff

1. Number of staff (current and additional): N/A
 2. If from existing staff resources, number of staff hours: N/A
-

Legal

1. Legal Requirement: Statutory requirement.
 2. Call-in: Call-in is not applicable.
-

Customer Impact

1. Estimated number of users/beneficiaries (current and projected):
-

Ward Councillor Views

1. Have Ward Councillors been asked for comments? N/A.
2. Summary of Ward Councillors comments: N/A

3. COMMENTARY

Current year targets.

- 3.1 From June 2020 both growth mitigation and transformation savings have been reported at the Adult Services Transformation Board.
- 3.2 Appendix 1 shows the position against each of the current year targets as at end July 2020.
- 3.3 The savings targets for 4 of the 9 initiatives have been reduced in the first quarter of the year by an allocation from the COVID-19 budget. These initiatives have all been hampered by restrictions on face to face working and the re deployment of resources to respond to COVID-19 which have delayed the work required.
- 3.4 Of the 9 initiatives 4 are on track as at end July and the overall position is year to date efficiencies of £244k against a revised target of £265k.
- 3.5 Whilst the position at end July 2020 is close to target, the delayed start of initiatives involving enhanced service reviews or (in the case of Shared Lives) the recruitment of new service providers creates a risk of under delivery at year end.
- 3.6 The savings in the current year are primarily about action taken by assessment and care management staff to review packages of care where there are concerns about value for money and high cost.

4. Future Projections From April 2021.

- 4.1 The current agreed Medium Term Financial Strategy (MTFS) includes the following growth mitigation and transformation targets for future years

4.2 Growth Mitigations (£000s)

Item	21/22	22/23	23/24
Controlling Memory And Cognition	-210	-420	-630
Increase Uptake In Shared Lives	-240	-480	-480
Total	-450	-900	-1,110

4.2 Transformation Savings (£000s)

Item	21/22	22/23	23/24
Additional best value targets shared between LD and assessment and care management.	0	-68	-68
Total	0	-68	-68

4.3 The Draft MTFS contains the following additional Transformation Targets (£000s).

Item	21/22	22/23	23/24
Promotion of independence for people who use domiciliary care with lower support levels		-190	-190

Promotion of independence for people who use domiciliary care with lower support levels		-516	-516
Support and care for young disabled people in the transition from school to adult life.	-150	-200	-300
Promotion of independence for people with learning disabilities in Borough	-348	-348	-348
Promotion of independence for people with learning disabilities out of Borough	-434	-434	-434
Total	-932	-1,688	-1,788

4.4 The total of growth mitigation and transformation savings in the current MTFS rises from £0.450m in 21/22 financial year to £1.178m in 23/24

4.5 The new transformation savings in the draft MTFS raise the totals to £1.382m in the 21/22 financial year rising to £2.966m in the 23/24 financial year.

5. Work in progress to support the growth mitigation and transformation savings.

- 5.1 Work is underway across the Adult Services Directorate to support transformation and growth mitigation. Some examples such as 2.12 and 2.15 and 2.16 will support specific initiatives. Others such as those outlined in 2.11 and 2.14 set out to create a sustainable context for strategic development which will support the delivery of good outcomes for residents and sustainable use of resources.
- 5.2 All work to review packages of support and care (for example assessment and support planning for young disabled people and the enhanced review work for older people and working age adults) will be supported by the development of strengths based practice which seeks to promote the independence of the people using social care support and care. This will be supported by the development of a strengths and outcomes based practice framework which is currently being supported by the Social Care Institute for Excellence. The high level framework and the first elements of associated guidance will be published in November 2020. This will be associated with learning and development opportunities for both LBB staff and providers of support and care.
- 5.3 Commissioning work is on-going to support the provision of domiciliary care in a way that better promotes independence. This will result in the recommissioning of all domiciliary care from August 2021. This includes reviewing contract terms, ensuring the specification is clear about expectations of providers and looking at payment schedules that incentivise new ways of working from providers. This work will inform the invitation to tender for domiciliary care which will be released in September 2020.
- 5.4 Work is underway to develop strategic action plans following strategic data analysis work completed in June. This work will support the realisation of strategic goals in the Ageing Well in Bromley, Learning Disability and Mental Health Strategies.
- 5.6 Transformation objectives have been shared with the Social Care Information System team working on the implementation of the new electronic care record in adult and children's services. This involves using new functionality in the system to track progress in relation to promoting individuals' independence, developing new forms and workflows that guide strengths and

outcomes based practice and supporting payment arrangements that incentivise new ways of working.

- 5.7 An officer gateway report is being finalised which proposes the purchase a tool called CareCubed¹. Subject to approval this will aid all assessment and care management staff across adult services to review cost breakdowns and the potential for NHS funding for packages of care and support. This will compliment the development of strengths based practice with a validated tool to support negotiation on cost with support and care providers.
- 5.8 Proposals have been developed to refresh agreements and develop practitioner roles in relation to Section 117, Continuing Healthcare and Joint Funding. This will help ensure that local authority resources are used appropriately, that partnership arrangements with NHS partners are clear and that there is a sustainable balance of investment across the health and social care system in Bromley.

6. SUSTAINABILITY / IMPACT ASSESSMENTS

- 6.1 The transformation savings are being brought forward to ensure a sustainable budget position.

7. POLICY CONSIDERATIONS

- 7.1 None of the transformation savings require policy change

8. COMMISSIONING & PROCUREMENT CONSIDERATIONS

- 8.1 This is an update, so there are no current procurement implications.

¹ <https://iese.org.uk/project/carecubed/>

Appendix 1.

Category	20/21 Target £000	Revised Target * £000	Revised Target YTD £000	Actual YTD £000	Projection £000	Commentary and RAG from savings owner
LD package reviews	481	361	40	53	361	Delay in starting reviews will make full achievement challenging. July update is that in year savings currently achieved total £53k (FYE £78k) New post to be embedded in team. John Harrison.
OT/ MHRA work	295	221	25	0	221	New MHRA resource in place from September will start 5 targeted reviews p. month, total 75 Reviews seeking ave. saving of £3k per annum (£57 per week) Jane Campbell
Strengths Based Reviews	166	125	14	0	125	36 cases (of total 156) identified for enhanced review. Seeking savings of ave £89 per week. Delay in starting reviews will make full achievement challenging. Tricia Wennell
Emergency Placements	74	56	6	0	42	Projection and actual based on estimate – still seeking way of tracking actuals for this target. Tricia Wennell
Preparing for adulthood support	55	55	18	49	55	Actual spending against projected growth of 617 for 2020/2021. Projections have been compared to actuals for August Board. John Harrison
Shared Lives	360	180	20	0	180	Business plan produced for service. New carers recruited. Challenges making/ changing placements and work needed to link to reductions in use of higher cost services. John Harrison
Controlling Memory and Cognition	210	210	70	70	210	Offset by growth in budgets
CCG Joint Commissioning Costs	48	48	16	16	48	In place
Workforce	167	167	56	56	167	Targets met through core staffing budgets.
Totals	1,856	1,423	265	244	1,409	

* The target has been reduced for some of these savings in the first quarter due to delays arising from COVID-19

Report No.

London Borough of Bromley

ACH20-062

PART ONE - PUBLIC

Decision Maker: **GPL COMMITTEE**

Decision Type: Non-Urgent Executive Non-Key

Title: **ANNUAL COMPLAINTS REPORT & LG&SCO LETTER 2019/20**

Contact Officer: Mark Smeed
Head of Service, Customer Engagement & Complaints

Chief Officer: Naheed Chaudhry
Assistant Director, Strategy, Performance and Corporate Transformation

Ward: Borough-wide

1. Reason for report

- 1.1 The Council produces an Annual Complaints Report each year setting out statistics on the complaints it receives. The 2019/20 Annual Report is presented in Appendix 1.
 - 1.2 The report also provides oversight of the annual Local Government & Social Care Ombudsman letter which summarises Ombudsman complaints/enquiries received, and the decisions made about, the London Borough of Bromley for the year ending 31 March 2020.
 - 1.3 Finally, this report takes the opportunity to update Members on other relevant developments including the introduction of a Habitual Contact Policy, presented in Appendix 2.
-

2. **RECOMMENDATION**

- 2.1 Members of the Committee are asked to note, consider and comment on the report.

Impact on Vulnerable Adults and Children

1. Summary of Impact: Not Applicable
-

Corporate Policy

1. Policy Status: Not Applicable
 2. BBB Priority Not Applicable:
-

Financial

1. Cost of proposal: Not Applicable
 2. Ongoing costs Not Applicable:
 3. Budget head/performance centre: Not Applicable
 4. Total current budget for this head: £Not Applicable
 5. Source of funding: Not Applicable
-

Personnel

1. Number of staff (current and additional): Not Applicable
 2. If from existing staff resources, number of staff hours: Not Applicable
-

Legal

1. Legal Requirement: Statutory Requirement
 2. Call-in: Applicable: Executive decision.
-

Procurement

1. Summary of Procurement Implications: Not Applicable
-

Customer Impact

1. Estimated number of users/beneficiaries (current and projected): Not Applicable
-

Ward Councillor Views

1. Have Ward Councillors been asked for comments? Not Applicable
2. Summary of Ward Councillors comments: Not Applicable

3. COMMENTARY

Complaints

- 3.1 The publication of annual reports on social care complaints is a statutory requirement under the Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 (for adult social care) and the Children Act 1989 Representations Procedure (England) Regulations 2006 (for children's social care).
- 3.2 Whilst legislation mainly refers to social care complaints, the Council goes further and publishes greater detail about the Council's performance across the divisions. The report at Appendix 1 provides an overview of complaints and all Local Government & Social Care Ombudsman enquiries to the Council between 1st April 2019 to 31st March 2020.
- 3.3 The Council has an ethos of continuous improvement and is committed to using feedback from a variety of sources to learn, understand and take action to improve services. Our Performance Management Frameworks recognise customer complaints as a valuable source of qualitative feedback on the performance of our services.
- 3.4 Following the restructure that created the Housing Planning & Regeneration division, the Customer Engagement & Complaints Service agreed to assume responsibility for overseeing complaints concerning the Planning and Regeneration services. The Environment & Public Protection division is now the only division retaining oversight of its own corporate complaints. This report relies on data compiled locally by that department.
- 3.5 Overall, the Council received 656 complaints during 2019/20, representing a 32% reduction on last year (868). 44% of complaints were at least partially upheld, an improvement on the 49% previous year, whilst 47% were responded to on time, steady compared to last year.

Local Government & Social Care Ombudsman

- 3.6 The Local Government & Social Care Ombudsman ('Ombudsman') acts as the final stage for complaints about local authorities, adult social care providers (including care homes and home care agencies) and some other organisations providing public services. When the Council responds to a complaint, we are required to signpost the complainant to the Ombudsman if they remain dissatisfied. The Ombudsman analyses each referral to determine firstly whether it meets their criteria and, secondly, whether it merits a full investigation.
- 3.7 The Ombudsman's annual review letter provides a breakdown of the upheld investigations and a compliance rate for implementing Ombudsman recommendations. All authorities' annual review letters are published by the Ombudsman on their own website. Their statistics will usually differ from those held by the Council as the Council is not always informed of approaches to the Ombudsman that are declined.
- 3.8 During the year 2019/20 Bromley was the subject of 149 referrals to the Ombudsman, 10 more than the previous year 2018/19. Of those 149 referrals, only 43 (29%) were the subject of an investigation by the Ombudsman. Of those 43 full investigations, 28 were upheld (65%), a 13% improvement on last year's 78%.
- 3.9 It is also noteworthy that the average upheld rate across London boroughs was 70%. Bromley's strong management of Ombudsman complaints places Bromley 7th best (65%) across London. Bromley's figures remain competitive whilst continuing to manage and mitigate escalations from a one-stage internal procedure.

- 3.10 Whilst it is the role of the Customer Engagement & Complaints Service to support, assist and advise both complainants and colleagues during the internal complaint process, when it comes to the Ombudsman their role, and in particular that of the Head of Service, is to support colleagues and defend the Council when regulatory enquiries and investigations are raised. The Head of Service has nurtured a more harmonious relationship with the Ombudsman over the past three years which not only improves the Ombudsman's perception of the borough as a whole but also provides a sound footing upon which to challenge the Ombudsman robustly if it is considered that a wrong decision has been made.
- 3.11 An example includes a case in which the Ombudsman had decided to investigate a set of circumstances where Children's Services issued care proceedings (notwithstanding the Ombudsman's own guidance that indicates that court proceedings are out of their jurisdiction). The Ombudsman ruled unfavourably against the Council. The Council's view was that this was an inappropriate and unjustifiable final decision. For only the second time in 25 years, the Council took legal advice and served a pre-action judicial review protocol letter upon the Ombudsman. Within a week the Ombudsman had withdrawn the decision against the Council and, at the time of writing, has indicated he is likely to agree to discontinue the investigation.
- 3.12 The Council has meanwhile retained a 100% compliance rate in respect of implementing the Ombudsman's recommendations on all other cases.
- 3.13 During 2019/20 the Customer Engagement & Complaints Service recorded 298 separate deadlines to the Ombudsman, of which 92% were responded to within the timescale.

Other developments

- 3.14 From time to time the Council receives excessive or unacceptable communication or conduct from customers or residents. A Habitual Contact Policy has been drafted to provide further clarity on the Council's position on such behaviour.
- 3.15 The complaints pages on the website itself have been substantially revised. At the time of writing, these pages are in a build and testing phase before go live during 2020/21.
- 3.16 Customer Engagement & Complaints Service operate a complaints system called Respond. The database was recently updated to move towards a cloud-based version in line with the Council's IT Strategy.
- 3.17 A brand new complaints training programme has been devised and was delivered by the Head of Service on a number of occasions prior to lockdown, with the possibility of it subsequently being presented remotely. The aim is for a greater understanding of complaints to lead in time to higher quality responses straightaway and thus increased timeliness, whilst greater analysis of lessons learnt from complaints may lead over time to a decrease in upheld complaints.

4. FINANCIAL IMPLICATIONS

- 4.1 None for the purposes of this report.

5. LEGAL IMPLICATIONS

- 5.1 Under regulation 18 of the Local Authority Social Services and National Health Service Complaints Regulations 2009 the Council is required to publish an Annual Complaints report.
- 5.2 Under section 5(2) of the Local Government and Housing Act 1989 the Monitoring Officer is expected to produce a periodic report to the Council summarising the findings on all upheld complaints over a specific period.

6. Supporting Documents

6.1 Appendix 1. Annual Complaints Report 2019/20

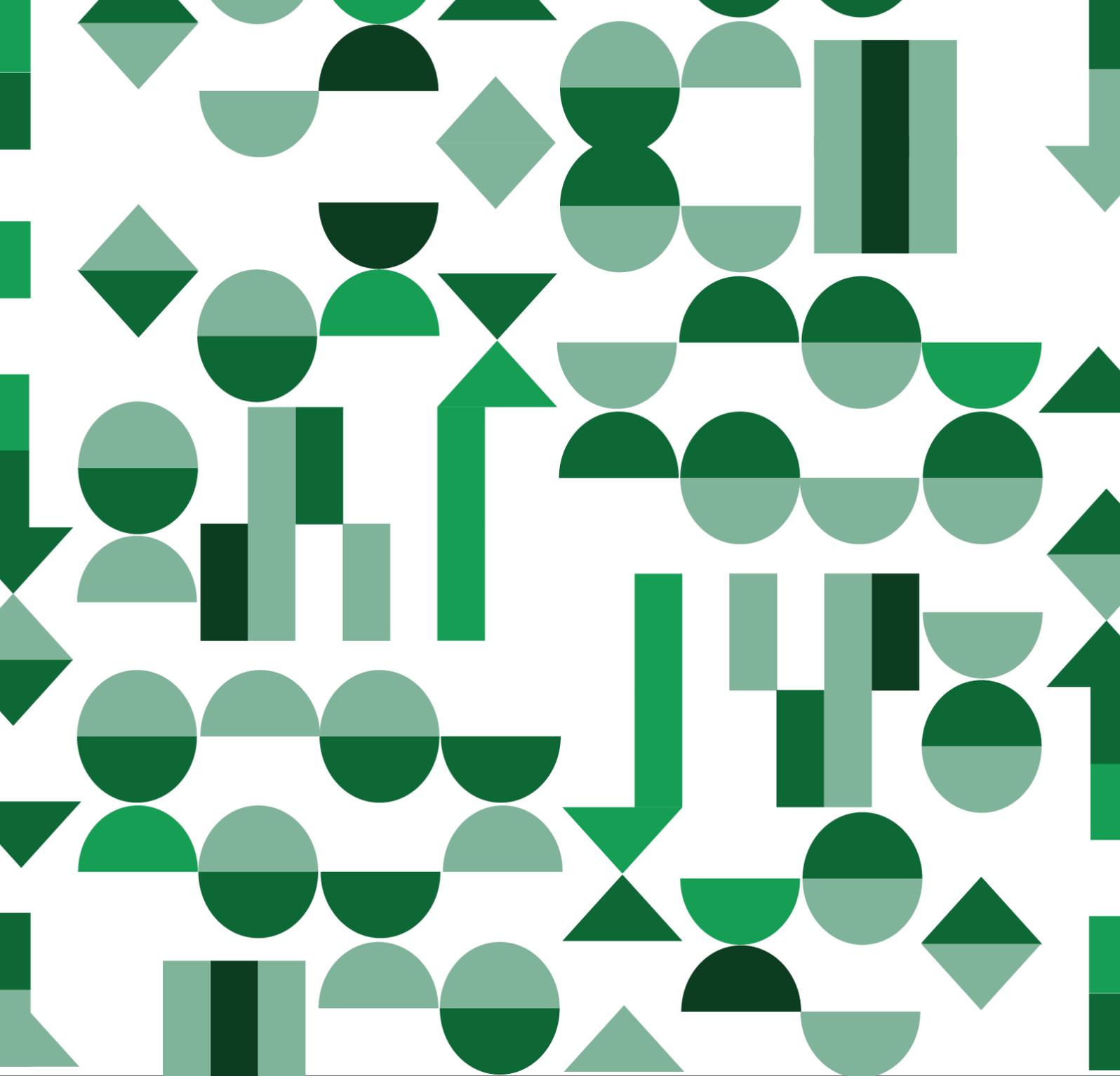
6.2 Link below to LG&SCO annual letter 2019/20

<https://www.lgo.org.uk/documents/councilperformance/2020/london%20borough%20of%20bromley.pdf>

6.3 Appendix 2. Habitual Contact Policy

Non-Applicable Sections:	Impact on Vulnerable Adults and Children, and Policy, Personnel and Procurement Implications.
Background Documents: (Access via Contact Officer)	

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Complaints & Compliments

Annual Report 2019-20



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Bromley Council comprises a number of divisions. The Customer Engagement & Complaints Service ('CE&CS') now oversees complaints received about all divisions except the Environment & Public Protection division ('EPP', formerly known as Environment & Community Services). They continue to manage their own internal complaints process, whilst adhering to the Council's overall policies. The Head of Service for CE&CS provides ad hoc support and advice on procedures, categorisation and reporting mechanisms.

Last year EPP began contributing its own reportable figures and all data reported here, save that relating to the Ombudsman, is their own. The statistics concerning cases where the Local Government & Social Care Ombudsman has considered EPP complaints are maintained by CE&CS. It is anticipated that the significant drop in recorded formal complaints is due in part to more rigour being applied to what should be logged as a complaint as opposed, for example, to a service request. Work on further aligning EPP processes and case recording will resume in due course.

In August 2019 the Council underwent a corporate restructure, including the creation of the Housing Planning & Regeneration division. This report has been realigned to reflect the structure as it now is. As of April 2020 CE&CS is overseeing corporate complaints for the Planning and Regeneration services following their integration into the new division.

The data contained in this report was sampled in June 2020.

Terminology used in this report

A **complaint** is the whole of someone's approach to the Council expressing dissatisfaction. One or more services or teams may be referenced in that complaint, and each of those is referred to as a **mention**. Each complaint may identify one or more individual parts and each of those is referred to as an **aspect**.

For instance...

Mrs Jones raises a complaint with the Council alleging that the Council Tax department have both delayed processing her application for support and disclosed her personal information when they should not have done. She also complains that the Housing Benefit team have wrongly decided she is not eligible for support.

In this example, this one complaint has given rise to three mentions (two for Council Tax and one for Housing Benefit) and three aspects – delay, data breach and a disputed decision.

01 | WHY WE REPORT ON OUR COMPLAINTS

Section 18 of The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 places a duty on the Council to prepare an annual report each year. Whilst that legislation primarily references social care complaints, the London Borough of Bromley goes further and publishes greater detail about the Council's performance. This report therefore provides an overview of complaints and our interaction with the Local Government & Social Care Ombudsman between 1st April 2019 to 31st March 2020.

The Council has an ethos of continuous improvement and is committed to using feedback from a variety of sources to learn, understand and take action to improve services. Our Performance Management Frameworks recognise customer complaints as a valuable source of qualitative feedback on the performance of our services.

We know that high-performing services use feedback to help managers and staff understand where they are doing well and where improvements can be made.

We use our complaints data and analysis to:

- ➔ Collaboratively prompt, challenge and deepen the understanding of service performance amongst the leadership group; this enables and promotes a shared understanding of the strengths and areas for development within the service
- ➔ Inform prioritisation in service improvement plans
- ➔ Commission improvement activities and training where appropriate
- ➔ Encourage individual managers to take the initiative at service/team level or with individual staff members to address areas for development and manage local improvements

02 | CONTINUOUS IMPROVEMENT PLANS

A new training programme has been devised by the Head of CE&CS and thus far delivered to more than a hundred colleagues over seven sessions at the Civic Centre and at the Waldo Road Depot. Further sessions had been organised but had to be postponed following the imposition of lockdown, but the aim is to resume that training remotely in due course, using WebEx or a similar platform.

The configuration of the database used by CE&CS was upgraded for 2019-2020 to facilitate more detailed reporting and real-time analysis for senior management. An upgrade to the new, cloud-based version of the system was recently approved and the implementation of that work should be commencing soon.

The streamlining of the ways in which residents and service users can contact us to register a complaint has been kept on hold pending the roll-out of the Council's new IT equipment. It is intended to introduce this in the foreseeable future.

Legislation

The main legislation we are governed by is the Local Authority Social Services and National Health Service Complaints (England) Regulations 2009. This duty is delivered through the Corporate Complaints Procedure. The majority of Adult Social Care complaints are considered on a statutory basis and are managed through the Corporate Complaints Procedure.

Where the matter directly involves a child (or an authorised person on their behalf) complaining about the care and support provided to that child by Children's Social Care, the relevant rules are found in the Children Act 1989 Representations Procedure (England) Regulations 2006) and this duty is delivered through the Children's Complaints Procedure.

Timescales

Under the Corporate Complaints Procedure, complaints should be acknowledged within 3 working days and formally responded to within 20 working days. Complaints are managed through the Children's Complaints Procedure as follows :-

- ➔ Stage 1 initial response within 10 (up to 20) working days
- ➔ Stage 2 investigation within 25 (up to 65) working days
- ➔ Stage 3 Review Panel within 30 working days

Where a complaint may not be responded to within the usual timescales, for whatever reason, CE&CS will keep in touch with the complainant to explain the reasons for the delay and wherever possible provide a best estimate as to when the response will be available.

The Local Government & Social Care Ombudsman

The Local Government & Social Care Ombudsman (LG&SCO) acts as the final stage for complaints about local authorities, adult social care providers (including care homes and home care agencies) and some other organisations providing public services. When the Council responds to a complaint, we are required to signpost the complainant to the Ombudsman if they remain dissatisfied. The Ombudsman analyses each referral to determine whether it meets their criteria and, if so, whether it merits a full investigation.

04 | COUNCIL OVERVIEW

Complaints received

Division	2017/18	2018/19	2019/20	% change
Adult Social Care	183	142	117	-17.6%
Children's Social Care	119	114	105	-7.9%
Housing	112	118	90	-23.7%
Education	31	44	38	-13.6%
Chief Executive's Dept.	58	66	95	43.9%
Public Health	1	0	0	n/a
Total	504	484	445	-8.1%
Environment & Public Protection	13	384	211	-45.0%

Overall, the Council received 656 complaints during 2019/20. If one excludes the EPP figures (please see the Explanatory Foreword), the total of 445 formal complaints is a creditable 8.1% reduction on last year's total.

All divisions were significantly down with the exception of the Chief Executive's department.

How complaints were received

Source	Adult	Children	Housing	Education	EPP	CED	Public Health	Total	% of total
Email	70	60	74	27	0	58	0	289	64.9%
Form	0	0	0	0	0	0	0	0	0.0%
In person	0	1	0	0	0	0	0	1	0.2%
Letter	15	1	3	0	0	5	0	24	5.4%
Telephone	19	13	2	1	0	15	0	50	11.2%
Website	13	30	11	10	0	17	0	81	18.2%
Total	117	105	90	38	0	95	0	445	

Some 83.1% of complaints were received by email or through the website, a slight increase from 82.7% last year.

Proportion upheld

	Aspects	Upheld / Partially Upheld	% 2019/20	% 2018/19
Adult Social Care	164	81	49%	56%
Children's Social Care	143	64	45%	47%
Housing	97	28	29%	44%
Education	49	27	55%	51%
Chief Executive's Dept.	117	49	42%	50%
Public Health	0	0	N/A	N/A
TOTAL	570	249	44%	49%
Environment & Public Protection	<i>Data not currently collected</i>			

Of the 445 non-EPP complaints received by the Council, 44% were at least partially upheld, compared to 49% last year, a small but positive reduction perhaps indicating services' increased confidence in their actions and decision-making.

A fall in the overall number of complaints, along with a fall in the proportion upheld, may indicate that overall the quality of the services provided by the Council is not only gradually improving, but being seen to improve by its customers.

Whilst the upheld rate remains at a noteworthy level, this reflects in part CE&CS's ongoing work to foster a realistic and honest approach on the Council's part, acknowledging fault where appropriate and seeking to put things right as far as can be achieved. Not only does that leave a better impression on those who complaint, but it should also lessen the risk of an escalation to the Ombudsman.

Causes for complaint

The most frequent causes for complaint (aspects) were those categorised as quality of service issues (25.3%), just over a third of which were upheld. Lack of action (18.7%) and staff conduct (16.7%) were the next most prevalent. Complaints about delay were the most likely to be upheld.

Complaints about staff conduct can include staff of third-party providers contracted by the Council. This year, five aspects concerned a contractor's employee, one of which was upheld.

Complaint	Adult	Children	Housing	Education	EPP	CED	Public Health	Total	% of total	% upheld
Staff conduct	21	53	10	3	-	10	0	97	16.5%	42.3%
Disputed Decision	23	18	15	9	-	12	0	77	13.1%	24.7%
Information	20	20	9	3	-	8	0	60	10.2%	43.3%
Lack of Action	21	23	25	24	-	17	0	110	18.7%	38.2%
Quality of Service	56	26	31	6	-	30	0	149	25.3%	33.6%
Service Delay	12	2	6	4	-	9	0	33	5.6%	45.5%
Behaviour of another	1	1	20	0	-	-	-	22	3.7%	13.6%
Billing / Charging	10	-	-	-	-	31	-	41	7.0%	9.8%
Total	164	143	116	49	0	117	0	589		

Responding on time

47% of all complaints were responded to within 20 working days, broadly steady compared to last year. The number of complaints may be declining but the complexity of a significant proportion continues to rise. Complaints involving contracted services can take longer to address as the Council is ultimately responsible for the quality of their services and thus reliant on their cooperation.

It is hoped that over time the complaints training will foster a greater understanding of complaints, leading to an increased quality of response and a consequential improvement in response times. An increased focus on the lessons to be learnt from complaints may also assist in lowering the upheld percentage. It should be noted that by the end of this business year the effects of the imminent lockdown were starting to be felt.

Division	On time 2017/18	On time 2018/19	On time 2019/20
Adult Social Care	49%	37%	35%
Children's Social Care	56%	43%	43%
Housing	52%	56%	63%
Education	62%	44%	45%
Environment & Public Protection	n/a	n/a	n/a
Chief Executive's Dept.	78%	70%	54%
Public Health	-	-	-
Total	58%	48%	47%

Local Government & Social Care Ombudsman cases

Service	Total	Upheld	Not Upheld	Declined	Ongoing
Adult Social Care	19	6	2	4	7
Children's Social Care	27	2	9	10	6
Housing	9	3	0	2	4
Education	10	4	2	1	3
Chief Executive's Dept.	16	3	0	11	2
Environment & Public Protection	8	1	3	3	1
OVERALL	89	19	16	31	23

'Declined' refers to where the Ombudsman has not accepted the complaint from the customer – for example, because the subject matter is out of their jurisdiction, or because the Council has not been given the opportunity to consider it through its corporate procedure.

'Not upheld' figures include those where the Ombudsman decided, having been provided with input from the Council, not to take a case any further prior to commencing a formal investigation. The figures above are taken from the data held on the Council's own systems referring to cases in which CE&CS have had some involvement. These figures may differ slightly from those produced by the Ombudsman depending on when certain stages of the process were reached.

CE&CS oversaw 298 individual Ombudsman response deadlines of which 91.5% were responded to within the timescale initially set by the Ombudsman.

Every year the Ombudsman publishes an annual review letter for each Council, accompanied by the statistics they hold. For the year 2019/20 their figures disclose the following :-

	2017 – 18	2018 - 19	2019 - 20	% on prev. year
Referrals	165	139	149	+7%
Resulting investigations	54	42	43	+2%
Proportion investigated	33%	30%	29%	-1%
Number upheld	32	33	28	-15%
Upheld rate	60%	78%	65%	-13%
London average	64%	63%	70%	+7%
London ranking	Joint 6 th	Joint 30 th	Joint 7th	

The table above shows continuing positive progress in the Council’s dealings with the Ombudsman. The slight increase in referrals is likely to be linked to the decrease in upheld complaints at the internal stage.

The Council’s statistics on reported referrals cover those cases brought to our attention by the Ombudsman. The Ombudsman’s own figure is higher, including 60 cases where the Ombudsman did not need to approach the Council before declining to accept the complaint.

The Council has no control over the numbers who approach the Ombudsman. At the initial assessment stage it may have the opportunity to seek to persuade the Ombudsman that there is insufficient merit in an investigation being commenced, so the reduction in those being taken further against an increase in referrals is welcome.

The upheld rate is a primary indicator of performance and here the Council has returned to the top ten performing London boroughs, its upheld rate being 5% below the London average. This should reflect a combination of the increased quality of the services provided to the borough’s customers, the increased attention given to complaint responses and the continuing robust defence of the Council maintained by the Head of CE&CS and his team.

Financial consequences of complaints

	Ombudsman Cases			Stage 1			TOTAL
	Comp'n	Write off	Time & trouble	Comp'n	Write off	Time & trouble	£
Adult Social Care	100.00	7,922.83	250.00	367.00	1,417.93	0.00	10,057.76
Children's Social Care	11,171.52	0.00	0.00	0.00	0.00	0.00	11,171.52
Housing	6,150.00	0.00	550.00	1,300.00	0.00	0.00	8,000.00
Education	5,632.00	0.00	300.00	0.00	0.00	0.00	5,932.00
Chief Executive's	600.00	281.39	250.00	100.00	223.00	0.00	1,454.39
Environment & Public Protection	300.00	180.00	0.00	0.00	0.00	0.00	480.00
OVERALL	23,953.52	8,384.22	1,350.00	1,767.00	1,640.93	0.00	37,095.67

Compensation figures include any cases where it was determined the Council should backdate support or allowances.

The total of £37,095.67 is a 5% increase on last year's £35,369.67. It should be borne in mind that annual totals are often skewed by one or two specific cases, when the vast majority do not result in any significant financial outlay.

Compliments

Division	2018/19	2019/20	% change
Adult Social Care	50	35	-30%
Children's Social Care	25	47	88%
Housing	146	264	81%
Education	6	5	-17%
Chief Executive's Dept.	0	3	-
Environment & Public Protection	n/k	56	-
Total	227	410	81%

05 | ADULT SOCIAL CARE

Under the Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 the majority of Adult Social Complaints are considered on a statutory basis and handled through the Council's corporate complaints procedure.

At a glance

	2017 – 18	2018 - 19	2019 - 20	% on prev. year
Complaints	183	142	117	-18%
Percentage responded to on time	49%	37%	35%	-2%
Percentage fully upheld	35%	37%	28%	-9%
Percentage partially upheld	22%	18%	21%	+3%
Ombudsman cases	19	15	9	-40%
Ombudsman cases upheld	5	3	6	+100%
Financial consequences	£18,043.73	£1,677.25	£10,057.76	

Complaints received

The Adult Social Care division was the subject of 117 complaints during 2019/20, 35% of which were responded to in a timely way. 49% of complaints were fully or partially upheld, a reduction of 6% on last year's 56%.

Those 117 complaints gave rise to 123 mentions and 164 individual aspects (please refer to the Terminology section in the Foreword).

'Contracted Services' refers to those third-party providers of residential and domiciliary care whom the Council engages to provide care to its service users, for which the Council usually remains ultimately responsible. As noted on page 8, complaints involving third party providers can often take longer to resolve and as this year Contracted Services were involved in 22% of complaint aspects, this will have contributed to the timeliness figure.

The table below sets out the individual complaint aspects for the different services and teams within Adult Social Care.

Service	Mentions this year	Aspects this year	Fully upheld	Partially upheld	Not upheld	Ongoing	Answered on time
Blue Badges	6	6	0	1	5	0	6
%	5%	4%	0%	17%	83%	0%	100%
Complex Care East	8	10	1	2	7	0	4
%	7%	6%	10%	20%	70%	0%	40%
Complex Care West	9	12	9	1	2	0	6
%	7%	7%	75%	8%	17%	0%	50%
Coordination & Review	2	6	2	0	1	3	0
%	2%	4%	33%	0%	17%	50%	0%
Duty Team	28	37	5	9	21	2	5
%	23%	23%	14%	24%	57%	5%	14%
Hospital Team	13	13	3	2	7	1	4
%	11%	8%	23%	15%	54%	8%	31%
Initial Response	8	8	4	0	4	0	3
%	7%	5%	50%	0%	50%	0%	38%
Reablement & Rehab	4	5	0	1	4	0	5
%	3%	3%	0%	20%	80%	0%	100%
Occupational Therapy	3	3	2	0	1	0	1
%	2%	2%	67%	0%	33%	0%	33%
Learning Disability	7	11	7	1	3	0	0
%	6%	7%	64%	9%	27%	0%	0%
CMHT/Oxleas	0	0	0	0	0	0	0
%	0%	0%	0%	0%	0%	0%	0%
DOLs	2	2	1	1	0	0	1
%	2%	1%	50%	50%	0%	0%	50%
Safeguarding	1	2	0	1	1	0	0
%	1%	1%	0%	50%	50%	0%	0%
Care Link	5	5	2	1	2	0	4
%	4%	3%	40%	20%	40%	0%	80%
Extra Care Housing	0	0	0	0	0	0	0
%	0%	0%	0%	0%	0%	0%	0%
LD Provider Services	0	0	0	0	0	0	0
%	0%	0%	0%	0%	0%	0%	0%
Reablement Provider Service	1	4	0	1	3	0	0
%	1%	2%	0%	25%	75%	0%	0%
Brokerage	3	4	1	1	2	0	2
%	2%	2%	25%	25%	50%	0%	50%
Contracted Services	26	36	9	13	14	0	17
%	21%	22%	25%	36%	39%	0%	47%
OVERALL	123	164	46	35	77	6	58
			28%	21%	47%	4%	35%

Nature of complaint and outcome

The majority of complaints (34%) were in relation to the quality of service received, of which 52% % were at least partially upheld.

Subject	Aspects this year	Fully upheld	Partially upheld	Not upheld	Ongoing	Answered on time
Staff conduct	21	8	4	8	1	9
%	13%	38%	19%	38%	5%	43%
Disputed decision	23	6	2	14	1	10
%	14%	26%	9%	61%	4%	43%
Information	20	4	4	12	0	3
%	12%	20%	20%	60%	0%	15%
Lack of action	21	6	6	8	1	7
%	13%	29%	29%	38%	5%	33%
Quality of service	56	13	16	24	3	21
%	34%	23%	29%	43%	5%	38%
Service Delay	12	6	2	4	0	6
%	7%	50%	17%	33%	0%	50%
Billing & Charging	10	3	1	6	0	2
%	6%	30%	10%	60%	0%	20%
Behaviour of another service user	1	0	0	1	0	0
%	1%	0%	0%	100%	0%	0%
OVERALL	164	46	35	77	6	58
		28%	21%	47%	4%	35%

Compliments

As much as we like to learn from complaints, we like to learn from compliments too. The following are examples of those received this year :-

Without the help of Bromley Council and the care from Caremark I don't know how I would have managed so I would like to thank all concerned for the care and devotion she has received.

The reason for my email today is just to say again thank you so much in helping me secure a place...I don't think I thanked you enough when you called me to tell me...I was so shocked and overwhelmed !!! Thanks once again for all your help...you are a star !!!

In all these years ,one particular professional quickly stands tall above the rest in my mind when it comes to caring and supporting my child and our family...Ever since M took over my daughter's case almost some two years ago, our lives have changed immensely for the better...She has been instrumental to initiating positive changes where no one appears to care or bother with. She treats my daughter and us as a family, not like another statistic but as humans...I could go on and on but the bottom line is that she is simply amazing and an asset to Bromley council and overall to her team.

Working with LBB care services from the initial contact through to the Complex Team West completing the process it has been a total peace of mind journey for all of us...Please share this with all involved and thanks again for a job superbly done.

I am writing to thank you for the care and professionalism that my 96 year old mother has received from Bromley Council Adult Social Care...Everyone that we have dealt with at the council have been most professional and cheerful. A big thank you...

From the bottom of our hearts we would like to thank you all for all the support, efforts and advice you have provided to Mum and to us over the last few years. Without your support, care and understanding I'm not sure where we would be now. Thank you just doesn't seem enough.

W said that she thought that the assessment situation had been handled sensitively... that the current situation was very different to what had happened in the past...the service appeared more integrated and there was good communication about G's needs. She is particularly reassured that she and G are now working together with Care Management on a plan for G's future care.

My staff member said that H is the best social worker she has ever worked with. I also would like to compliment H as in {my personal experience} he brings cases to discuss and his referral information is excellent, his ability to carry out any suggested actions is always done in a timely manner putting things in place to mitigate risk as much as possible. He shows brilliant knowledge, empathy and skills in dealing with complex cases.

Thanks so much for taking charge here. We are extremely grateful to you. You've restored my faith in the local government!

Local Government & Social Care Ombudsman cases

Adult Social Care were the subject of 19 referrals to the LG&SCO during 2019/20, of which 6 had been upheld by the time of reporting.

Ombudsman outcomes	CLOSED			NOT UPHELD		UPHELD				TOTAL	Ongoing
	NFA	No jurisdiction	Premature	NFA	No maladmin'n	NFA	Maladmin' & Injustice	Maladmin, no Injustice	Already remedied		
Blue Badges	0	0	0	0	0	0	1	0	0	1	0
Brokerage	0	0	0	0	0	0	1	0	0	1	0
CMHT/Oxleas	0	0	0	0	1	0	2	0	0	3	1
Complex Care West	0	0	0	0	0	0	0	0	0	0	2
Coord'n & Review	0	0	1	0	0	0	0	0	0	1	0
Creative Support	0	0	0	0	0	0	0	0	0	0	1
Duty Team	0	0	0	0	0	0	1	0	0	1	0
Initial Response	1	1	0	0	0	0	0	0	0	2	0
Learning Disability	0	0	0	0	0	0	1	0	0	1	0
Reablement & Rehab	0	0	0	0	0	0	0	0	0	0	1
Safeguarding	0	1	0	0	1	0	0	0	0	2	2
OVERALL	1	2	1	0	2	0	6	0	0	12	7

Financial consequences of complaints

	2017 – 18	2018 - 19	2019 - 20
Ombudsman cases			
Compensation / backdated payments	11,949.33	-	100.00
Charges written off	5,844.40	1,173.85	7,922.83
Time & trouble payments	250.00	200.00	250.00
Stage 1 complaints			
Compensation / backdated payments	-	-	367.00
Charges written off	-	303.40	1,417.93
Time & trouble payments	-	-	0.00
TOTALS	18,043.73	1,677.25	10,057.76

06 | CHILDREN'S SOCIAL CARE

The Council's experience is that only a small proportion of Children's Social Care complaints it receives are actually from young people or those acting on their behalf, which therefore fall to be processed under the three-stage procedure set out in The Children Act 1989 Representations Procedure (England) Regulations 2006. These are referred to as statutory complaints, the timescales for which are :-

- Stage 1 : Initial response within 10 (up to 20) working days
- Stage 2 : Investigation within 25 (up to 65) working days
- Stage 3 : Review Panel within 30 working days

All other complaints from parents, family or friends raising issues that do not directly relate to the quality of the care and support the child in question receives are managed through the corporate complaints procedure. CE&CS carefully considers each complaint on its own merits and determines through which procedure it should be processed.

Children and young people making a complaint have a legal entitlement to advocacy services to support them in making a complaint or expressing their views. Where the child involved has not already been referred, the Complaints Team will refer complaints made by or on behalf of children in relation to Children Social Care to the independently commissioned Advocacy service.

At a glance

	2017 - 18	2018 - 19	2019 - 20	% on prev. year
Complaints	112	114	99	-13%
Statutory complaints	7	6	6	-
Percentage responded to on time	56%	43%	45%	+2%
Percentage fully upheld	26%	23%	27%	+4%
Percentage partially upheld	13%	21%	17%	-4%
Ombudsman cases	16	11	22	+100%
Ombudsman cases upheld	8	2	2	-
Financial outcomes	£2,550	£16,907.52	£11,171.52	

Complaints under the 1989 Representations Procedure

The numbers of statutory complaints remained largely static, reflecting the Council's experience over recent years.

	2017 – 18	2018 - 19	2019 - 20
Stage 1	7	6	6
Stage 2	1	3	1
Stage 3	0	0	0
Total	8	9	7

Complaints under the Council's Corporate Complaints Procedure

The table below sets out the individual complaint aspects for the different services and teams within Children's Social Care.

Service	Mentions this year	Aspects this year	Fully upheld	Partially upheld	Not upheld	Ongoing	Answered on time
Early Intervention & Family Support	4	4	2	2	0	0	4
%	4%	3%	50%	50%	0%	0%	100%
Referral & Assessment, incl. MASH, Atlas & ECT	36	49	18	7	24	0	20
%	33%	34%	37%	14%	49%	0%	41%
SG&CP East incl. Court Team	15	21	7	4	10	0	20
%	14%	15%	33%	19%	48%	0%	95%
SG&CP West incl. Disabled Children	32	42	8	9	24	1	6
%	29%	29%	19%	21%	57%	2%	14%
Children Looked After and Care Leavers	9	11	2	1	8	0	6
%	8%	8%	18%	9%	73%	0%	55%
Fostering, Adoption and Resources	9	10	1	1	7	1	6
%	8%	7%	10%	10%	70%	10%	60%
Quality Assurance	5	6	2	0	4	0	3
%	5%	4%	33%	0%	67%	0%	50%
OVERALL	110	143	40	24	77	2	65
			28%	17%	54%	1%	45%

The Children's Social Care division was the subject of 99 corporate complaints during 2019/20, 45% of which were responded to in a timely way. 45% of complaints were fully or partially upheld, a 1% increase on last year's 44%.

Those 99 complaints gave rise to 110 mentions and 143 individual aspects (please refer to the Terminology section in the Foreword).

Nature of complaint and outcome

The majority of complaints (37%) were in relation to staff conduct issues of which 42% were at least partly upheld.

Subject	Aspects this year	Fully upheld	Partially upheld	Not upheld	Ongoing	Answered on time
Staff conduct	53	12	10	30	1	29
%	37%	23%	19%	57%	2%	55%
Disputed decision	18	0	1	17	0	9
%	13%	0%	6%	94%	0%	50%
Information	20	10	4	6	0	5
%	14%	50%	20%	30%	0%	25%
Lack of action	23	6	3	13	1	7
%	16%	26%	13%	57%	4%	30%
Quality of service	26	9	6	11	0	14
%	18%	35%	23%	42%	0%	54%
Service Delay	2	2	0	0	0	1
%	1%	100%	0%	0%	0%	50%
Behaviour of another service user	1	1	0	0	0	0
%	1%	100%	0%	0%	0%	0%
OVERALL	143	40	24	77	2	65
		28%	17%	54%	1%	45%

Compliments

As much as we like to learn from complaints we like to learn from compliments too. The following are examples of those received this year :-

At that point, he was assigned to L who, from the outset has had a hugely positive effect on W and a highly reassuring one on our family. We have been impressed with her energy and commitment; her proactive approach in seeking interventions to help W, and her ability to keep the balance right between supporting W but also challenging him when he has been wrong.. L has been a shining example of what we, as parents of a YOS client, wanted and needed.

She wanted to let you both know that in the past they have had some terrible experiences with social workers but C was a breath of fresh air. ... Ms H's son is very shy and usually runs away when new people visit but he took to C immediately, she made a huge, positive difference to their lives. They were all sad when her contact with the family stopped and she is missed.

I wanted to thank you so much for all you have done for O and I as a family over the last couple of years. It has been a very tough time for us emotionally, physically and financially! Your help, guidance and always friendly smiling face has helped throughout the process, so I thank you whole heartedly!

I just wanted to let you know how much we appreciate the work you have done for our children. You have gone the extra mile and it is completely evident that you genuinely care. I appreciate your proactiveness too.

You make me feel like I am at the top of your list and I really appreciate all that you are doing for me and my family.

I have been really pleased with how you both (and Bromley) have responded to my boy's complex needs; also including me which was lovely as I always put myself aside as long as the boys are ok.

The staff and especially yourself have been amazing and I cannot thank you enough for everything you have done for myself and my family. Especially when I have been having a particularly hard day, there has always been someone to talk to and share my feelings with and you never make me feel different and always offer the most practical advice!

I feel that K is such an asset to your team, and I cannot thank her enough for already helping support, listen and move my son and me forward, without her continued help I really don't think that my son and myself would be in a good place after what has happened previously.

I want to say a major thank you to the team and recommend that you do all you can to keep L because amazing social workers who are understanding, fair as well as stern are in high demand and hard to come by. She has worked with my family since just before Christmas last year and has been incredible. We've felt we could trust and be honest with her without judgement and she has helped my family to the point where the case is closed.

Local Government & Social Care Ombudsman cases

Children's Social Care were subject of 27 referrals to the LG&SCO during 2019/20, only 2 of which had been upheld by the time of reporting.

Ombudsman outcomes	CLOSED			NOT UPHELD		UPHELD				TOTAL	Ongoing
	NFA	No jurisdiction	Premature	NFA	No maladmin'h	NFA	Maladmin & Injustice	Maladmin, no Injustice	Already remedied		
Early Intervention & Family Support	0	0	0	0	0	0	0	0	0	0	0
Referral & Assessment	4	2	0	0	5	0	1	0	0	12	2
Safeguarding & Care Planning East	0	0	0	0	0	0	0	0	0	0	0
Safeguarding & Care Planning West	0	1	0	0	0	0	0	0	0	1	0
Children Looked After & Care Leavers	0	0	0	0	0	0	0	0	0	0	1
Fostering Adoption & Resources	1	2	0	0	2	0	1	0	0	6	3
Quality Assurance	0	0	0	0	2	0	0	0	0	2	0
OVERALL	5	5	0	0	9	0	2	0	0	21	6

Financial consequences of complaints

	2017 - 18	2018 - 19	2019 - 20
Ombudsman cases			
Compensation / backdated payments	800.00	2,150.00	16,907.52
Charges written off	-	-	-
Time & trouble payments	-	400.00	-
Stage 1 complaints			
Compensation / backdated payments	-	-	-
Charges written off	-	-	-
Time & trouble payments	-	-	-
TOTALS	800.00	2,550.00	16,907.52

07 | HOUSING PLANNING & REGENERATION

Complaints in relation to Housing are managed through the corporate complaints procedure. For the year covered by this report, CE&CS oversaw all Housing complaints but only those involving the Ombudsman for Planning and Regeneration.

From April 2020 CE&CS are overseeing all complaints for the whole division.

Housing at a glance

	2017 – 18	2018 - 19	2019 - 20	% on prev. year
Complaints	112	118	90	-24%
Percentage responded to on time	65%	56%	65%	+9%
Percentage fully upheld	19%	27%	18%	-9%
Percentage partially upheld	8%	17%	11%	-6%
Ombudsman cases	10	11	7	-36%
Ombudsman cases upheld	4	5	3	-40%
Financial consequences	£4,550.00-24%	£6,150.00	£8,000.00	

Housing Complaints under the Council's Corporate Complaints Procedure

The Housing division was the subject of 90 corporate complaints during 2019/20, 65% of which were responded to in a timely way. 29% of complaints were fully or partially upheld, a 15% decrease on last year's 44%.

Those 99 complaints gave rise to 92 mentions and 97 individual aspects (please refer to the Terminology section in the Foreword).

The table below sets out the individual complaint aspects for the different services within Housing.

Service	Mentions this quarter	Aspects this quarter	Fully upheld	Partially upheld	Not upheld	Ongoing	Answered on time
Housing Allocations	39	41	6	5	29	1	26
%	42%	42%	15%	12%	71%	2%	63%
Housing Options	22	24	6	4	13	1	15
%	24%	25%	25%	17%	54%	4%	63%
Housing Register	11	11	2	2	7	0	10
%	12%	11%	18%	18%	64%	0%	91%
Compliance & Development	1	1	0	0	1	0	1
%	1%	1%	0%	0%	100%	0%	100%
Management & Acquisitions	10	10	2	0	8	0	5
%	11%	10%	20%	0%	80%	0%	50%
Support & Resettlement	9	10	1	0	9	0	6
%	10%	10%	10%	0%	90%	0%	60%
OVERALL	92	97	17	11	67	2	63
			18%	11%	69%	2%	65%

Nature of complaint

The largest number of complaints (26%) were concerns about a lack of action of which 24% were fully upheld, followed by issues with temporary accommodation, of which none were fully upheld and 10% were partially upheld.

Subject	Aspects this quarter	Fully upheld	Partially upheld	Not upheld	Ongoing	Answered on time
Staff conduct	10	3	2	5	0	7
%	10%	30%	20%	50%	0%	70%
Disputed decision	15	4	2	9	0	9
%	15%	27%	13%	60%	0%	60%
Information	9	2	1	6	0	8
%	9%	22%	11%	67%	0%	89%
Lack of action	25	6	0	18	1	15
%	26%	24%	0%	72%	4%	60%
Quality of service	11	1	3	7	0	9
%	11%	9%	27%	64%	0%	82%
Service Delay	6	1	1	4	0	4
%	6%	17%	17%	67%	0%	67%
Temporary accommodation	20	0	2	17	1	11
%	21%	0%	10%	85%	5%	55%
Behaviour of another service user	1	0	0	1	0	0
%	1%	0%	0%	100%	0%	0%
OVERALL	97	17	11	67	2	63
		18%	11%	69%	2%	65%

Compliments

As much as we like to learn from complaints we like to learn from compliments too. The following are examples of the compliments received by Housing this year :-

Thank you so much for your help regarding B's accommodation we both appreciate your support. this has been a very stressful time having to go through procedures to be quite honest we find it hard getting support not many people would go that extra mile to help so I want to say from B and myself a very big thank you I will keep you up to date if that's ok

Thank you so much for taking the time to read my email, also can you pass my thanks onto B. We really appreciate your fast response so far and help with trying to resolve this issue. This is just an email to say thank you so much for helping us, I cannot explain how much this means to us, and how much happier we will now be.

Whoop! Whoop! Sorry I'm so happy don't know what it's like yet ha ha. You have been wonderful thank you.

They also did what they said they were going to do, when they said they were going to do it, which in my experience with different local authorities is quite remarkable.

You are one of the nicest and straightest managers we've had....we are really going to miss you...I hope they see in you what we have, a kind hearted person who gets on so well with Irish travellers, not a lot do LOL...you have a lot to give and you have a lot of potential to go far which we know you will.

We thank you enormously for all your help and support with giving us the opportunity to build a home for us and more importantly our daughter this is life changing for all of us so thank you.

I just wanted to say thank you again for taking the time to come to visit my flat. It really helps to know that there are people out there that understand my situation, and do want to help if they can. Thank you for being so polite, professional, friendly and helpful, and for not judging me! It's very much appreciated!

Huge, huge thanks for doing this as I'm now the proud tenant of the flat & literally moved in yesterday! Many thanks to all, I really appreciate it! Have a great Xmas & a prosperous New Year! Thanks a million!

I have some good news! Today I finally got the keys for the property and I have signed my new tenancy. Thank you so much for your support and just being a very good professional Housing manager. L cried today when I took him to the house and he said he was happy. Thank you again...

Local Government & Social Care Ombudsman cases

Housing

Housing was the subject of 9 referrals to the LG&SCO during 2019/20, 3 of which had upheld by the time of reporting.

Ombudsman outcomes	CLOSED			NOT UPHELD		UPHELD				TOTAL	Ongoing
	NFA	No jurisdiction	Premature	NFA	No maladmin'n	NFA	Maladmin & Injustice	Maladmin, no Injustice	Already remedied		
Housing Allocations	2	0	0	0	0	0	1	0	0	3	1
Housing Options	0	0	0	0	0	0	1	0	0	1	2
Housing Register	0	0	0	0	0	0	0	0	0	0	1
Housing Compliance & Strategy	0	0	0	0	0	0	0	0	0	0	0
Housing Management & Acquisitions	0	0	0	0	0	0	1	0	0	1	0
Housing Support & Resettlement	0	0	0	0	0	0	0	0	0	0	0
OVERALL	2	0	0	0	0	0	3	0	0	5	4

Financial consequences of complaints

	2017 – 18	2018 - 19	2019 - 20
Ombudsman cases			
Compensation / backdated payments	4,300.00	5,150.00	5,850.00
Charges written off	-	-	-
Time & trouble payments	250.00	-	250.00
Stage 1 complaints			
Compensation / backdated payments	-	1,000.00	1300.00
Charges written off	-	-	-
Time & trouble payments	-	-	-
TOTALS	4,550.00	6,150.00	7,400.00

Local Government & Social Care Ombudsman cases

Planning & Regeneration

Planning & Regeneration were the subject of 16 referrals to the LG&SCO during 2019/20, just 2 of which had upheld by the time of reporting.

Ombudsman outcomes	CLOSED			NOT UPHELD		UPHELD				TOTAL	Ongoing
	NFA	No jurisdiction	Premature	NFA	No maladmin'n	NFA	Maladmin & Injustice	Maladmin, no injustice	Already remedied		
Development Management	3	3	1	0	1	0	2	0	0	10	2
Planning Policy & Strategy	0	0	0	0	0	0	0	0	0	0	0
Building Control	0	1	1	0	0	0	0	0	0	2	1
Facilities & Support	0	0	0	0	0	0	0	0	0	0	0
Property	0	0	0	0	0	0	0	0	0	0	0
Energy	0	0	0	0	0	0	0	0	0	0	0
Libraries	1	0	0	0	0	0	0	0	0	1	0
Town Centre Renewal	0	0	0	0	0	0	0	0	0	0	0
Regeneration	0	0	0	0	0	0	0	0	0	0	0
OVERALL	4	4	2	0	1	0	2	0	0	13	3

Financial consequences of complaints

	2017 – 18	2018 - 19	2019 - 20
Ombudsman cases			
Compensation / backdated payments	300.00	-	300.00
Charges written off	-	-	-
Time & trouble payments	-	-	300.00
Stage 1 complaints			
Compensation / backdated payments	N/K	N/K	N/K
Charges written off	N/K	N/K	N/K
Time & trouble payments	N/K	N/K	N/K
TOTALS	300.00	0.00	600.00

08 | EDUCATION

Complaints in relation to Education services are managed through the corporate complaints procedure.

At a glance

	2017 – 18	2018 - 19	2019 - 20	% on prev. year
Complaints	31	45	38	-15%
Percentage responded to on time	61%	44%	51%	+7%
Percentage fully upheld	39%	51%	23%	-28%
Percentage partially upheld	5%	9%	35%	+26%
Ombudsman cases	7	7	8	+14%
Ombudsman cases upheld	1	4	4	-
Financial outcomes	£2,200	£10,604.60	£5,932.00	

Complaints under the Council's Corporate Complaints Procedure

The Education division was the subject of 38 corporate complaints during 2019/20, 51% of which were responded to in a timely way. 55% of complaints were fully or partially upheld, a 5% decrease on last year's 60%.

Those 38 complaints gave rise to 42 mentions and 49 individual aspects (please refer to the Terminology section in the Foreword).

The table below sets out the individual complaint aspects for the different services within Education.

Service	Mentions this year	Aspects this year	Fully upheld	Partially upheld	Not upheld	Ongoing	Answered on time
Admissions	4	4	0	0	4	0	1
%	13%	11%	0%	0%	100%	0%	25%
Early Years	1	1	0	0	1	0	1
%	3%	3%	0%	0%	100%	0%	100%
Education Welfare	1	1	0	0	1	0	0
%	3%	3%	0%	0%	100%	0%	0%
SEN	32	38	9	13	16	0	20
%	76%	78%	24%	34%	42%	0%	53%
SEN Transport	4	5	1	4	0	0	3
%	10%	10%	20%	80%	0%	0%	60%
OVERALL	42	49	10	17	22	0	25
			20%	35%	45%	0%	51%

Nature of complaint

The majority of complaints (49%) were in relation to a lack of action of which 63% were at least partly upheld.

Subject	Aspects this year	Fully upheld	Partially upheld	Not upheld	Ongoing	Answered on time
Staff conduct	3	0	2	1	0	1
%	6%	0%	67%	33%	0%	33%
Disputed decision	9	1	3	5	0	6
%	18%	11%	33%	56%	0%	67%
Information	3	0	1	2	0	1
%	6%	0%	33%	67%	0%	33%
Lack of action	24	6	9	9	0	12
%	49%	25%	38%	38%	0%	50%
Quality of service	6	1	1	4	0	4
%	12%	17%	17%	67%	0%	67%
Service Delay	4	2	1	1	0	1
%	8%	50%	25%	25%	0%	25%
Behaviour of another service user	0	0	0	0	0	0
%	0%	0%	0%	0%	0%	0%
OVERALL	49	10	17	22	0	25
		20%	35%	45%	0%	51%

Compliments

As much as we like to learn from complaints we like to learn from compliments too. The following are examples of the compliments received by Education this year :-

We just wanted to say how delighted we have been with the EHCP support our son was provided by Bromley Council. You picked up his EHCP plan aged 14 at a point of significant change in our son's life - new house and school and did it with ease and professionalism. This was all the more important as we remember this was also a point of overhaul in the whole support process. At every step we felt confident and supported and it seemed the liaison with his new college didn't falter.

Just wanted to say thank you for sorting out F's place. You were very helpful and understanding. I know you say it's your job but actually as lot of people don't do theirs well so it is massively appreciated when someone does!

We would like to thank you from our hearts for all your help and support. We can't thank you enough for your amazing job and hard work....Thanks for believing in us...We are so happy with our new school!

I have asked for your e-mail from D in order to send you a note of appreciation from my wife & I for the outstanding help and support we have received from your team - notably D. We, as a family, are grateful for all what D has done for us; especially my son. I want you to know what a difference D's support and assistance has made to us. Thank you D and thank you SEND BROMLEY FOR ALL YOUR HELP.

I just wanted to send you a personal message to thank you sincerely from the bottom of our hearts for helping us secure the residential placement for our son. There are not enough words to express our gratitude, this decision will not only enhance his quality of life but will also go a long way in improving our family life. Secure in the knowledge that he is happy and well looked after...we will now be able to focus some much needed time and attention to our younger son and restore some balance and sense of normalcy to our family life.

Local Government & Social Care Ombudsman cases

Education services were the subject of 10 referrals to the LG&SCO during 2019/20, 4 of which had upheld by the time of reporting.

Ombudsman outcomes	CLOSED			NOT UPHELD		UPHELD				TOTAL	Ongoing
	NFA	No jurisdiction	Premature	NFA	No maladminin	NFA	Maladmin & Injustice	Maladmin, no injustice	Already remedied		
Admissions	0	0	0	0	0	0	0	0	0	0	0
Early Years	0	0	0	0	0	0	0	0	0	0	0
Education Welfare	0	0	0	0	0	0	0	0	0	0	0
SEN	0	0	1	0	1	0	3	0	0	5	3
SEN Transport	0	0	0	0	1	0	1	0	0	2	0
OVERALL	0	0	1	0	2	0	4	0	0	7	3

Financial consequences of complaints

	2017 – 18	2018 - 19	2019 - 20
Ombudsman cases			
Compensation / backdated payments	2,200.00	10,204.60	5,632.00
Charges written off	-	-	-
Time & trouble payments	-	400.00	300.00
Stage 1 complaints			
Compensation / backdated payments	-	-	-
Charges written off	-	-	-
Time & trouble payments	-	-	-
TOTALS	2,200.00	10,604.60	5,932.00

09 | CHIEF EXECUTIVE'S DEPARTMENT

Complaints in relation to the Chief Executive's Department are managed through the corporate complaints procedure. This division covers areas such as Finance, Legal, Electoral and Registrar services.

At a glance

	2017 – 18	2018 - 19	2019 - 20	% on prev. year
Complaints	58	66	95	+44%
Percentage responded to on time	78%	70%	59%	-11%
Percentage fully upheld	21%	27%	25%	-2%
Percentage partially upheld	24%	23%	17%	-6%
Ombudsman cases	25	23	20	-13%
Ombudsman cases upheld	4	4	3	-33%
Financial outcomes	£1,253	£760.30	£1,454.39	

Complaints under the Council's Corporate Complaints Procedure

The table below sets out the individual complaint aspects for the different services within the Chief Executive's Department.

Service	Mentions this year	Aspects this year	Fully upheld	Partially upheld	Not upheld	Ongoing	Answered on time
Electoral Services	5	5	0	1	4	0	5
%	5%	4%	0%	20%	80%	0%	100%
Registrar Services	2	2	0	0	2	0	2
%	2%	2%	0%	0%	100%	0%	100%
Customer Services	3	5	1	0	3	1	4
%	3%	4%	20%	0%	60%	20%	80%
Business Rates	1	1	0	0	1	0	0
%	1%	1%	0%	0%	100%	0%	0%
Care Home Fees	8	10	6	0	3	1	2
%	8%	9%	60%	0%	30%	10%	20%
Council Tax	29	34	8	6	15	5	19
%	29%	29%	24%	18%	44%	15%	56%
Direct Payments	5	5	1	2	1	1	1
%	5%	4%	20%	40%	20%	20%	20%
Domiciliary Care fees	24	28	8	6	12	2	18
%	24%	24%	29%	21%	43%	7%	64%
Housing Benefit	18	20	4	4	12	0	16
%	18%	17%	20%	20%	60%	0%	80%
Freedom Pass	2	2	1	0	1	0	1
%	2%	2%	50%	0%	50%	0%	50%
Income & Recovery	2	4	0	0	3	1	0
%	2%	3%	0%	0%	75%	25%	0%
Legal	1	1	0	1	0	0	1
%	1%	1%	0%	100%	0%	0%	100%
OVERALL	100	117	29	20	57	11	69
			25%	17%	49%	9%	59%

The Chief Executive's Department was the subject of 95 corporate complaints during 2019/20, 59% of which were responded to in a timely way. 42% of complaints were fully or partially upheld, an 8% decrease on last year's 50%.

Those 95 complaints gave rise to 100 mentions and 117 individual aspects (please refer to the Terminology section in the Foreword).

Nature of complaint

The majority of complaints were in relation to quality of service issues, of which 14% (3) were fully upheld, and 'Billing & charging' of which 24% (4) were fully upheld.

Subject	Aspects this year	Fully upheld	Partially upheld	Not upheld	Ongoing	Answered on time
Staff conduct	10	2	3	4	1	5
%	9%	20%	30%	40%	10%	50%
Disputed decision	12	3	1	8	0	7
%	10%	25%	8%	67%	0%	58%
Information	8	3	1	3	1	5
%	7%	38%	13%	38%	13%	63%
Lack of action	17	5	2	9	1	7
%	15%	29%	12%	53%	6%	41%
Quality of service	30	8	7	12	3	21
%	26%	27%	23%	40%	10%	70%
Service Delay	9	2	0	7	0	5
%	8%	22%	0%	78%	0%	56%
Billing & Charging	31	6	6	14	5	19
%	26%	19%	19%	45%	16%	61%
OVERALL	117	29	20	57	11	69
		25%	17%	49%	9%	59%

Compliments

As much as we like to learn from complaints, we like to learn from compliments too. The following are examples of those received this year :-

I would like to put on record my thanks to T. The special delivery letter I sent above was signed for at 8.07 am... and I received a call by lunchtime the same day from T. He had already arranged for the direct debit to be taken from the correct account. I have sole power of attorney for my mother and he has put in place an instruction so that Bromley Council is aware that if I needed to at some point speak to Bromley Council in the future it would give me the authority to do so. This situation was dealt with promptly and efficiently by Mr Davison.

I would just like to say I visited your Bromley site and was greeted and helped by a lovely young man. I think his name was R - helpful, polite, knew that he was talking about he delivered a really good service. Just wanted to make you aware of the good worker, if you wouldn't mind giving him some sort of praise or something it would be very much appreciated thank you

Brilliant, yes I had confirmation this morning. Thank you again for all your help. Tremendous service and greatly appreciated.

Local Government & Social Care Ombudsman cases

The Chief Executive's Department was the subject of 16 referrals to the LG&SCO during 2019/20, 2 of which had been upheld by the time of reporting.

Ombudsman outcomes	CLOSED			NOT UPHELD		UPHELD				TOTAL	Ongoing
	NFA	No jurisdiction	Premature	NFA	No maladmin'n	NFA	Maladmin & Injustice	Maladmin, no Injustice	Already remedied		
Electoral Services	2	2	1	0	0	0	0	0	0	5	0
Registrar Services	1	0	0	0	0	0	0	0	0	1	0
Customer Services	0	0	0	0	0	0	0	0	0	0	0
Business Rates	0	0	0	0	0	0	0	0	0	0	0
Care Home Fees	0	0	0	0	0	0	0	0	0	0	1
Council Tax	3	0	1	0	0	0	2	0	0	6	1
Direct Payments	0	0	0	0	0	0	0	0	0	0	0
Domiciliary Care fees	0	0	0	0	0	0	0	0	0	0	0
Housing Benefit	1	0	0	0	0	0	0	0	1	2	0
Freedom Pass	0	0	0	0	0	0	0	0	0	0	0
Legal	0	0	0	0	0	0	0	0	0	0	0
OVERALL	7	2	2	0	0	0	2	0	1	14	2

Financial consequences of complaints

	2017 - 18	2018 - 19	2019 - 20
Ombudsman cases			
Compensation / backdated payments	590.00	-	600.00
Charges written off	853.00	-	281.39
Time & trouble payments	300.00	-	250.00
Stage 1 complaints			
Compensation / backdated payments	-	250.00	100.00
Charges written off	-	510.30	223.00
Time & trouble payments	-	-	0.00
TOTALS	1,743.00	760.30	1,454.39

10 | ENVIRONMENT & PUBLIC PROTECTION

Complaints under the Council's Corporate Complaints Procedure

Environment & Public Protection recorded 211 cases as having been handled as corporate complaints during 2019/20.

Service	2018 -19	2019 - 20	%age
Highways & Transport	52	22	-58%
Neighbourhood Management	164	134	-18%
Public Protection	45	21	-51%
Traffic, Road Safety & Parking	84	34	-60%
OVERALL	384	211	-45%

Nature of complaint

Environment & Public Protection currently allocate their complaints to one of four categories.

Service	On time	Information	Lack of action	Operational	Policy	TOTAL	2018-19
Highways & Transport	85%	1	3	11	7	22	52
Neighbourhood Management	82%	6	101	13	14	134	164
Public Protection	100%	0	3	14	4	21	45
Traffic, Road Safety & Parking	97%	2	3	14	15	34	84
OVERALL	91%	9	110	52	40	211	345

Compliments

As much as we like to learn from complaints, we like to learn from compliments too. The following are examples of those received by Environment & Public Protection this year :-

Please will you pass on my wife's thanks to M who dealt admirably with her complaint. His suggestion on the phone to contact company HQ has paid dividends with a free perfume. From my own perspective I am really pleased that Trading Standards is maintaining its high standards. I think M read the riot act to the store and his telephone manner is excellent.

Please could you pass on my gratitude to the Street Cleaning Team that tidy and keep clean our road and the surrounding areas. I have this week reported that bill stickers/ signs were posted along our road and others advertising a funfair and they had pinned them to railings, car park areas and flat entrances and were very unsightly. I wanted to thank them for removing them but also to say I frequently see them tidying and very much appreciate the work they do as our road and area can get very messy from some residents.

This is brilliant news - thank you so much on behalf ... It will be a relief to people. I really appreciate you going there at that early time. It is then (and the end of the day) that the noise is most upsetting. I didn't think you would be able to get there so early! Thank you. It's good that they responded to you by closing the door... Thank you for being so responsive and doing as you said you would and for making a difference to the situation. I feel a lot less grumpy about the situation.

R from the Local Authority responded to my web report by commissioning the work and I met him several times as he personally visited and inspected the work throughout. The contractor supervisor also often visited and inspected the work of his men. The workmen themselves were efficient, thorough, personable and the standard of their work is extremely good. Having held CEO posts in public service for many years I know how many complaints are received when compared to compliments and thanks, so thought you might be interested in this feedback.

Compliments to all involved in the road clearances over the past two storm weekends; the service in clearing blocked and unsafe roads has been excellent. Similarly last year the attention to potholes in the area has been excellent. Thank you all.

Thank you to both you and J for years of combined support, help and advice and visits help to keep Dad safe. On behalf of Dad and myself especially I can't thank you both enough.

Just a line to thank all your waste collection crews for the great job they are doing. It is nice to see some normality in these uncertain times. I hope they have the necessary equipment they need to do their jobs and are staying safe. They are an essential service and we thank them for keeping going.

Local Government & Social Care Ombudsman cases

Environment & Public Protection were the subject of 8 referrals to the LG&SCO during 2019/20, 1 of which had been upheld by the time of reporting.

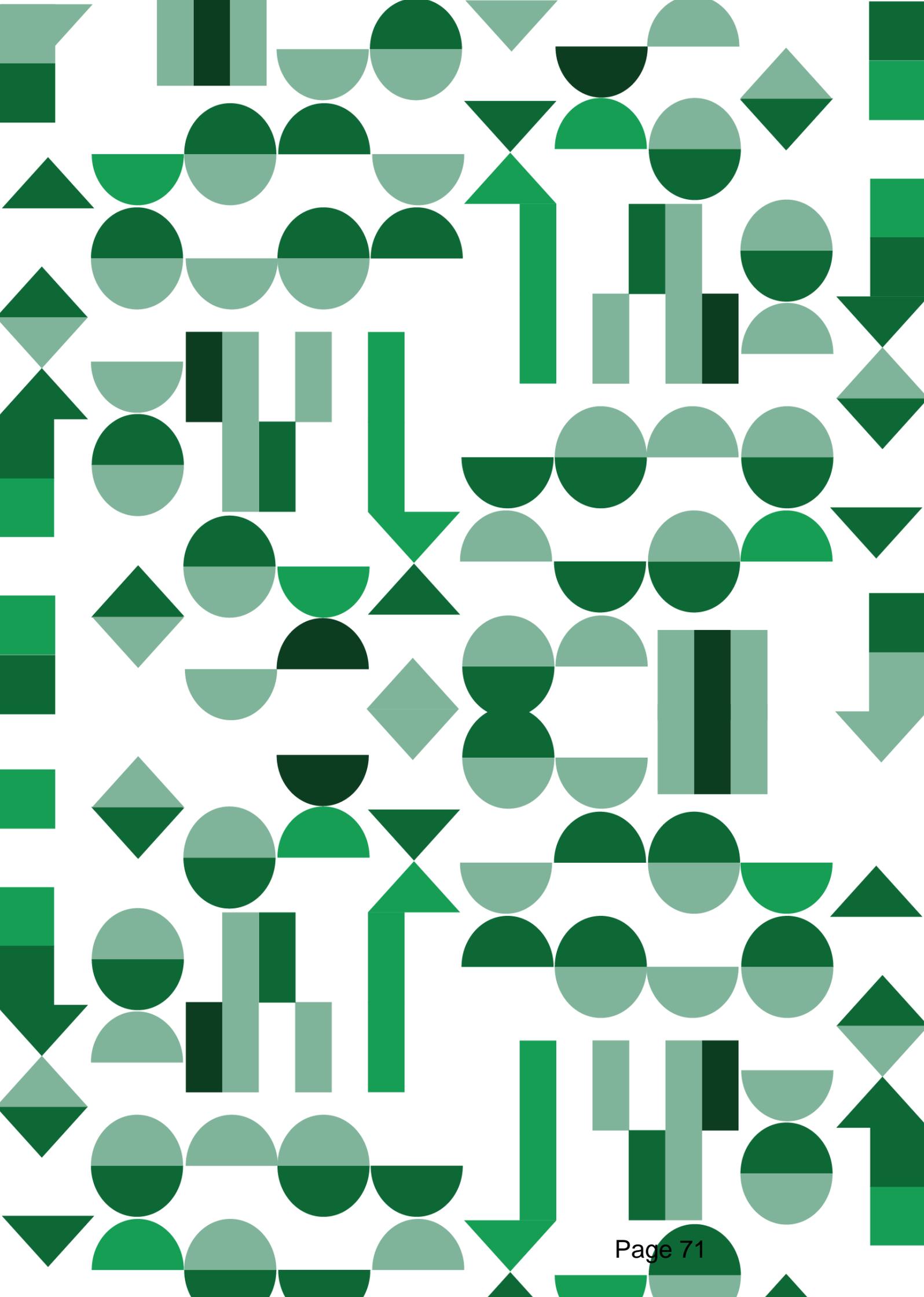
Ombudsman outcomes	CLOSED			NOT UPHELD		UPHELD				TOTAL	Ongoing
	NFA	No jurisdiction	Premature	NFA	No maladmin'h	NFA	Maladmin & Injustice	Maladmin, no Injustice	Already remedied		
Highways & Transport	0	0	0	0	0	0	0	0	0	0	0
Neighbourhood Management	0	0	0	0	0	0	0	0	0	0	0
Public Protection	3	0	0	0	3	0	1	0	0	7	1
Renewal & Recreation	0	0	0	0	0	0	0	0	0	0	0
OVERALL	3	0	0	0	3	0	1	0	0	7	1

Financial consequences of complaints

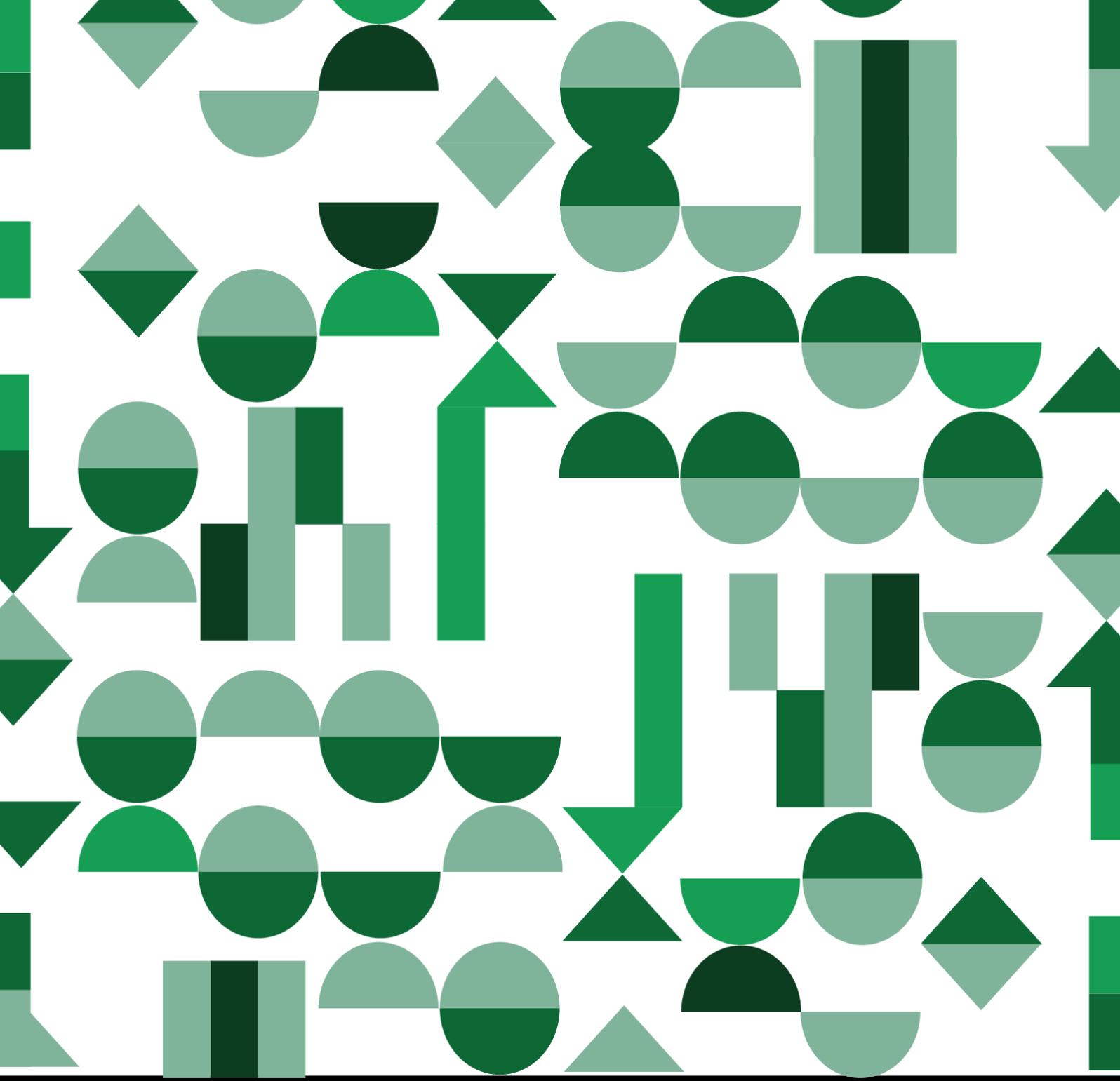
	2017 – 18	2018 - 19	2019 - 20
Ombudsman cases			
Compensation / backdated payments	600.00	-	300.00
Charges written off	-	-	-
Time & trouble payments	650.00	-	180.00
Stage 1 complaints			
Compensation / backdated payments	N/K	N/K	N/K
Charges written off	N/K	N/K	N/K
Time & trouble payments	N/K	N/K	N/K
TOTALS	1,250.00	0.00	480.00

11 | PUBLIC HEALTH

The Council received no complaints relating to its Public Health responsibilities this year.



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HABITUAL CONTACT POLICY

How we manage unreasonable, repeated, persistent or aggressive customer contact



THE LONDON BOROUGH

1 | INTRODUCTION & PURPOSE

The Council has responsibility for a wide range of services which can impact on its customers in a variety of ways. We recognise that our customers will not always agree with our decisions or accept the effects of the work we do.

Whilst our staff will always endeavour to respond with patience and understanding, there are occasions when customers do not communicate with the Council in an acceptable way. Regardless of why that might be, we have a duty not only to use our limited resources responsibly but also to protect our staff from repeated, unreasonable or threatening behaviour from those they come into contact with. This document will therefore be read in conjunction with the Council's internal policy on how aggression and violence towards officers will be responded to.

We are clear about the sort of behaviour we find unacceptable and how we will respond if it occurs. This policy sets out how the Council will assess what behaviour is unacceptable and what steps it will take as a result.

If a customer is behaving unreasonably, we will not delay ensuring that the customer understands the standards of behaviour expected of them so they can make the appropriate changes. That customer may choose not to alter their behaviour, but in continuing they will know the possible consequences.

The Council is the only source of support or a service in many circumstances and to limit a customer's contact with us could have a severe impact upon their life and cause significant injustice. We will respond carefully - any restrictions will not be instigated lightly and will be authorised by senior staff only.

The procedures set out in this policy will only be used when it is considered that all possible alternatives have been tried to resolve the dispute with the customer. Nothing in this policy is intended to override a customer's right to seek their own legal advice on their circumstances or the options available to them.

2 | WHEN THIS POLICY WILL APPLY

Concerns about customer behaviour will often arise out of complaints, Freedom of Information requests or other data protection issues, but not always. The customer may well have a genuine dispute with the Council but expresses that disagreement unreasonably in their dealings with the Council. There may or may not be some merit in the points they are making, but it is the way they are making them that is unreasonable.

This procedure will apply to habitual contact with Council staff. For the purposes of this policy, the terms 'staff' shall include employees of the Council, its elected members, service users, partner organisations, volunteers or contractors.

This policy will apply regardless of how the habitual contact is made – whether in person, email, telephone or some other means.

Habitual contact comes in many forms and there is no one-size-fits-all definition. Concerns may arise not only due to the nature of the contact but also due to the effect that behaviour is having on one or more Council staff. Where there is a subjective judgement to be made, that will be the responsibility of the relevant senior manager identified by this policy.

This policy will not usually apply to those Freedom of Information requests considered as vexatious, for which there is a separate process overseen by the Council's Information Governance Manager, unless the conduct of the requestor also brings them within the scope of this policy.

This procedure may not apply in situations where there is an alternative formal process available.

3 | CONSIDERATIONS BEFORE ACTION

Safeguarding Vulnerable Adults

Some customers make repeated contact because of mental health problems. Where this is the case, any concerns that staff may have about vulnerability should be raised in line with the Council's policies and procedures for safeguarding adults, including but not limited to a referral to the Duty Team for urgent attention where appropriate.

Consideration should be given as to how any additional support can be provided. If the customer already receives support from the Council or any agency on its behalf, contact should be made with them in the first instance.

Advocacy groups can be involved at the customer's request.

Confidentiality

Information about those customers made subject to restrictions under this process should only be shared where necessary, respecting the confidentiality of those involved.

A list of those designated under the policy will be kept by the Customer Engagement & Complaints Service.

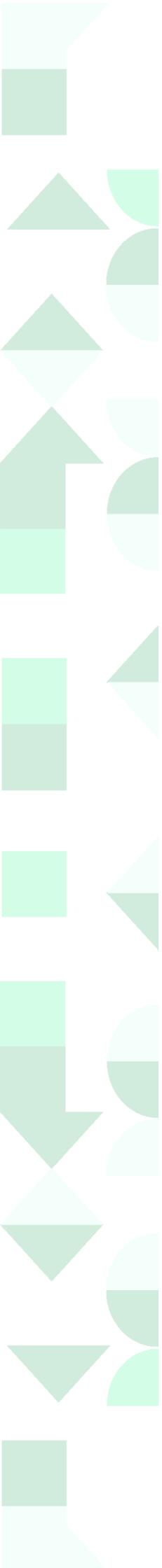
Current complaints or requests

The Council should be satisfied either that any complaint or information request has already been properly responded to, or that the circumstances justify invoking this policy even though other procedures have not yet been completed.

4 | EXAMPLES OF UNREASONABLE PERSISTENCE

The following is a non-exhaustive list of the sort of contact the Council is likely to consider unreasonably persistent – where a customer...

- Continues to pursue a complaint where the Council's complaints procedure has been concluded, either through a formal response being issued or through the customer being told the complaint will not be considered
- Changes the substance of a complaint, raises new elements to the complaint more than once, or raises substantially the same concerns or questions upon receipt of the Council's formal response
- Uses new complaints/contact to resurrect issues which were addressed in previous complaints
- Is unwilling to accept documentary evidence of services provided as being determinative of the dispute, or unwilling to accept that facts can sometimes be difficult to verify after a long period of time has elapsed.
- Insists they have not had an adequate response in spite of significant correspondence specifically answering their questions/concerns.
- Is unable or unwilling to identify the precise issues they wish to be answered, despite efforts to help them do so by staff and, where appropriate, advocacy groups
- Is unwilling or unable to accept that the concerns identified are not the responsibility of the Council to address
- Focuses on an element of a complaint to an extent which is out of all proportion to its significance and continues to do so
- Makes repeated complaints and contact which appear to the Council to be designed to delay or avoid the payment of monies legally due, where there is no sustainable dispute
- Contacts the Council an excessive number of times, placing unreasonable demands on staff and/or resources
- Makes the same or similar contact with a number of different Council departments or staff, whether directly or through third parties such as elected representatives or external agencies

- 
- Makes unjustified complaints about staff who are trying to deal with the issues and seeking to have them replaced
 - Seeks to use the Council's constitution in an unreasonable way, including repeated use of questions and petitions
 - Displays unreasonable demands or expectations and fails to accept that these may be unreasonable once a clear explanation has been given (e.g. insisting on the response to a complaint or enquiry being provided more urgently than is reasonable or recognised practice)
 - Insists on using contact numbers or email addresses after having been advised that those contact details are not intended for contact with the public

5 | EXAMPLES OF UNACCEPTABLE BEHAVIOUR

The following is a non-exhaustive list of the sort of behaviour the Council is likely to consider unreasonable – where a customer...

- Displays abusive behaviour over a period of time which, whether intentional or not, may undermine an officer and affect their confidence to deal with that customer
- Is abusive about staff, either repeatedly over a period of time or on a single occasion where the comments are extreme
- Makes unsubstantiated allegations of dishonesty and/or professional misconduct which, whether intentional or not, may undermine an officer and affect their confidence to deal with that customer
- Uses language or behaves in a way that would be considered a hate crime
- Uses swear words in an attempt to abuse, influence or undermine an officer
- Harasses or is personally abusive or verbally aggressive on more than one occasion towards staff, or their families and/or colleagues
- Records meetings or conversations without the prior knowledge and consent of the Council officer/s involved, whether or not that recording meets the definition of a criminal offence
- Acts in a vexatious or vindictive way that causes harm or distress to an officer, contractor, Councillor or their families/colleagues.
- Uses or threatens physical violence towards staff or their families/colleagues

It should be noted that the last of these will automatically lead the Council to invoke the warning stage procedure set out further on in this document and possibly, whether the conduct is sufficiently severe, move straight to the restriction stage.

6 | OUR RESPONSE – WARNING STAGE

When Council staff believe that a customer's persistence or behaviour means that this policy should be invoked, it will be the responsibility of the relevant Director or Assistant Director ('senior manager') to decide whether it is appropriate for the Council to send a formal warning to the customer.

The senior manager should have sight of sufficient examples / details of the customer's conduct for them to be satisfied that a formal warning is appropriate.

That formal warning should, save in exceptional circumstances, be in writing on headed Council notepaper and either emailed and/or posted to the customer. A copy of the warning letter should be retained on the customer's social care file (if appropriate) and also in a register maintained by the Head of the Customer Engagement & Complaints Service.

The warning letter should set out in clear terms the conduct the Council objects to and the steps the Council requires the customer to take to ensure that there is no repeat. It should also provide the customer with a copy of, or a link to, this policy and explain that unless the customer corrects their behaviour, the steps set out in Section 7 below may be taken without further notice.

In sufficiently serious cases the Council may move straight to the Restriction Stage without any advance warning.

7 | OUR RESPONSE – RESTRICTION STAGE

If the customer's unacceptable behaviour continues notwithstanding their receipt of a warning letter, or is of a sufficiently serious nature so as to justify the Council moving straight to this stage, the matter may be referred to the Council's Chief Executive.

The Chief Executive should be provided with sufficient detail of the customer's conduct and of the attempts already made to persuade the customer to desist, as well as (wherever possible) a draft of any letter he is being asked to sign. The Chief Executive should also be provided with a summary of the content and progress of any complaint, information request or other matter that is related to the conduct.

The information provided to the Chief Executive as above should also be provided to the Director of Corporate Services for his awareness and any views on the proposed course of action.

He will consider the information provided and decide if the proposed action is justified and proportionate. If the Chief Executive authorises restrictive action, a letter will be sent from his office informing the customer of the action the Council is taking, the length of time for which those restrictive measures will be in force and (where applicable) the right of the customer to approach the Local Government & Social Care Ombudsman about the fact that their dealings within the Council have been restricted under this policy.

In the event that the Chief Executive is absent or otherwise unavailable, the decision may be taken by a Director who was not involved in any previous decision to send a warning letter.

This letter may be copied to others already involved such as medical practitioners, conciliators, the Citizens Advice Bureau, Members of Parliament, advocates etc. All chief officers will be notified of the action, to allow them to inform staff as necessary.

The restrictive action may include, but is not limited to :-

- Requiring the customer to sign a written agreement (if appropriate, involving the relevant service head) setting out a code of conduct they will adhere to in order for the Council to agree to continue dealing with the individual
- Declining and/or blocking further contact with the customer, or other third parties on their behalf, save that the customer shall be permitted to communicate with the Council through one specific email address and/or

telephone number, when further communication will be acted upon as appropriate but not acknowledged

- Restricting contact to liaison through a third party and/or to specific days or times
- Limiting contact to subjects not specified in the letter
- Requiring any telephone calls or face to face meetings to be recorded
- Informing the customer that the Council has responded fully to the points they have raised, that the Council has nothing more to add, that continuing contact on the matter will serve no useful purpose and the Council will not therefore be doing so
- Informing the customer that the Council reserves the right to refer unreasonable or habitual customers to the Monitoring Officer and/or the police where it appears a criminal offence may have been committed
- Temporarily suspending all contact with the customer, the response to a complaint or information request pending receipt of legal advice or guidance
- Banning the customer from specific Council's buildings, or all of them, if necessary by means of an injunction
- Limiting or regulating the customer's use of the Council's facilities and services, such as libraries or leisure centres

8 | OUR RESPONSE – ADDITIONAL ACTION

If the customer's conduct is deemed sufficiently serious and/or continues after the Council's Chief Executive has issued a letter as provided for above, the Council may do one or more of the following :-

- Refuse all contact from the customer, whether for a set period or until further notice
- Decline to continue with any current complaints, information requests or other services or support
- Report them to the police, whether or not the stage set out in this policy have been exhausted
- Issue civil court proceedings against the customer and/or those acting on their behalf, to include but not limited to seeking an injunction or financial compensation
- Decide to cease responding to a current complaint or information request and approach the Local Government & Social Care Ombudsman, or Information Commissioner's Office as appropriate, with a request that that regulator consider intervening

9 | AFTER RESTRICTIVE ACTION IS TAKEN

Review

The justification for continuing restrictions will be reviewed at the end of the period set out in the Chief Executive's letter or, if that is indefinite, on an annual basis to consider whether a more reasonable approach is being used by the individual and whether restrictive measures should be extended, altered or discontinued.

A summary of the relevant information should be compiled by the Head of the Customer Engagement & Complaints Service, or another officer as deemed appropriate, and considered by him with the Chief Executive, the relevant senior manager/s and any other Council officer considered relevant at the time.

The customer will be informed in writing of the outcome of that review by a senior manager as soon as practicable following the conclusion of that review.

Monitoring

A list should be maintained of those customers currently subject to restrictions by the Customer Engagement & Complaints Service. This will be kept in accordance with the Council's data protection policies. Anonymised information about those restricted under this may be included in reports and, where appropriate, the Council's complaints database may be marked accordingly.

Request to be derestricted

A customer whose dealings with the Council have been restricted under the terms of this policy may write to the Chief Executive requesting that some or all of those restrictions be lifted. The Chief Executive will consult with such staff as he considers appropriate before deciding whether that request should be acceded to.

The customer will be informed in writing of the outcome of that review by the Chief Executive's office as soon as practicable following the conclusion of that review.

Save in exceptional circumstances such a request will not be entertained unless at least half the period set out in the Chief Executive's letter has passed or, where the restrictions are to apply indefinitely, until at least one calendar year has passed since the date of the Chief Executive's letter.

Future unrelated complaints

Where the restrictive action arose out of a complaint the customer raised with the Council, the customer will not be automatically barred from raising concerns or complaints on an unconnected matter.

New complaints or requests will be treated on their merits and responsibility for determining whether such a complaint should be accepted and responded to by the Council falls to the Head of the Customer Engagement & Complaints Service.

