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DATE: 1 September 2021

ADULT CARE AND HEALTH PDS INFORMATION BRIEFING

Meeting to be held on Thursday 9 SEPTEMBER 2021

This briefing will only be debated if a member of the Committee requests a discussion be held, in which case please inform the Clerk 24 hours in advance indicating the aspects of the information item you wish to discuss. In addition, questions on the briefing should also be sent to the Clerk at least 24 hours before the meeting.

- 1 ADULT PERFORMANCE MANAGEMENT FRAMEWORK (Pages 3 - 28)**
- 2 COMPLAINTS AND COMPLIMENTS ANNUAL REPORT 2020-2021 (Pages 29 - 78)**
- 3 MINUTES FROM THE INFORMAL HEALTH SCRUTINY SUB-COMMITTEE MEETING HELD ON 13TH JULY 2021 (Pages 79 - 94)**

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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London Borough of Bromley

PART 1 - PUBLIC- Information Briefing

Adults and Health Services Policy Development and Scrutiny Committee

Performance Management Framework – Adults Services

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

Chief Officer: Kim Carey, Director Adult Social Care

1. Summary

- 1.1 To enable the Committee to note the adult's services performance management framework which describes key performance management arrangements for Bromley's adults services

2. **THE BRIEFING**

- 2.1 The council has strong ambitions to improve the quality of life and outcomes for its residents. The appended performance management framework is designed to articulate key roles and responsibilities in respect of performance management for staff, managers, elected members and partners and the arrangements for appropriate oversight of performance.
- 2.2 There are many targets and indicators used to enable judgement on the performance of adults' services. These may be reported externally, eg to the regulator and in statutory returns to central government or, perhaps more importantly, used to inform operational and senior managers in the day to day delivery of services and to enable strategic managers, Executive Members and the council's scrutiny function to be appropriately sighted on performance issues.

3. **IMPACT ON VULNERABLE ADULTS AND CHILDREN**

- 3.1 A performance management framework which reinforces roles and responsibilities, and which ensures that appropriate performance information is provided at the appropriate level in the overall performance management system will support the council's ambitions to improve services for adults.

4. **POLICY IMPLICATIONS**

- 4.1 It is intended that the Performance Management Framework document is part of the overall suite of policies and procedures informing the governance, management and delivery of adults' services. Performance information needs to be relevant to the audience receiving that information and used to make a difference – eg to inform changes in practice, policy or resourcing – which would not otherwise be achieved without that information.

5. **FINANCIAL IMPLICATIONS**

- 5.1 There are no specific financial implications arising from this report.

6 LEGAL IMPLICATIONS

6.1 There are no specific legal implications arising from this report.

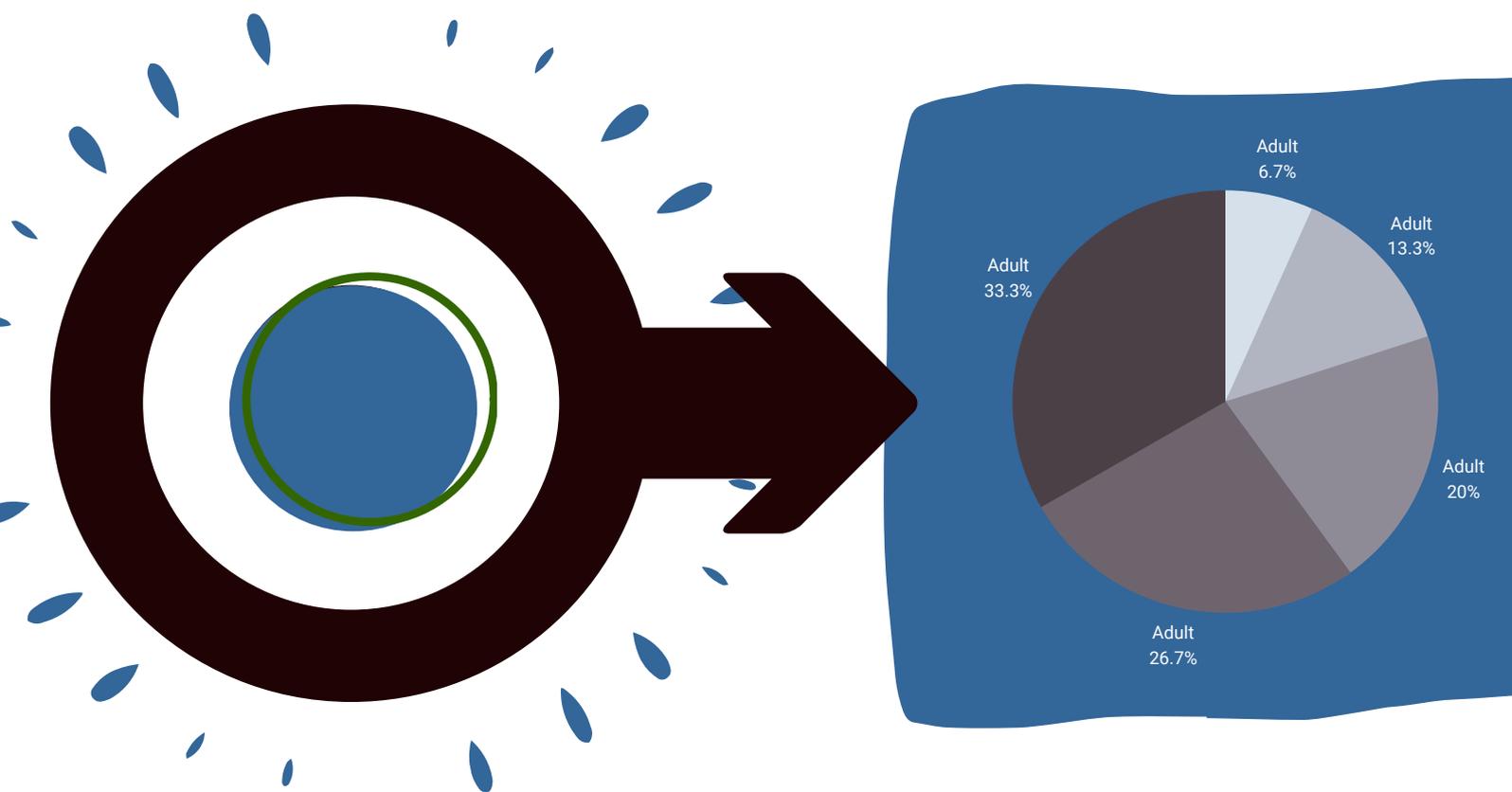
7 PERSONNEL IMPLICATIONS

7.1 The framework document is designed to support individuals in roles connected with the governance, management and delivery of adults' services.

8 PROCUREMENT IMPLICATIONS

8.1 There are no procurement implications arising from the report.

| | |
|---|--|
| 9 Non-Applicable Sections: | None |
| 10 Background Documents: 11 (Access via Contact Officer) | Appendix One – Performance Management Framework for Adults' Services |



Adult Services Performance Management Framework

[Updated Summer 2021]



THE LONDON BOROUGH

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SECTION 1

Introduction

Bromley Council aims for excellence and is committed to ensure that residents of Bromley have access to essential services that are value-for-money, of the highest quality and deliver better outcomes at a sustainable cost. These commitments require a clarity of purpose for the Council and a relentless focus on performance, continuous improvement and innovation.

This document provides a framework for managing the performance of the Council's services for adults, in particular for those who are eligible and in need of social care or health services. It is in line with a similar framework for Children's Services and with performance management arrangements more broadly across the Council.

Bromley Council engages with the Department of Health and Social Care (DHSC) in its review of the outcome performance framework for adult social care, thus ensuring that our framework is current and relevant to the Government's agenda for adult social care



SECTION 2

Corporate context

Since 2010, with measures such as the abolition of the Audit Commission, the ending of the Comprehensive Area Assessment regime and the introduction of the Localism Act, significant external drivers of performance management in local authorities have been removed. Councils now have greater autonomy in the ways in which they manage their own performance and demonstrate accountability to local residents, although some Council services, particularly those provided to meet the needs of the most vulnerable, remain closely scrutinised and regulated by central Government.

At the same time, councils face major challenges, including a significant reduction in central Government funding and the increasing demand for services, as a result of population growth and the impact of other demographic factors such as an ageing population and an increase in the numbers of vulnerable individuals and families. Public expectations of services provided by local authorities also continue to increase.

At a local level, in the face of these challenges, Bromley Council needs to plan effectively and increase the efficiency and impact of the services it delivers and commissions. Robust performance management is essential if the Council is to succeed in meeting its challenges.

These expectations sit within a wider context of greater health and social care integration. Integrating Care has meant more people are seeing the benefits of joined up care between GPs, home care, care homes, community health services, hospitals and mental health services. For staff, it has enabled us to work outside of organisational silos, deliver more user-centred and personalised approaches to care, and tackle the bureaucracy standing in the way of providing the best care for people. Integrated Care enables greater ambition to tackle health inequalities and the wider determinants of health – issues which no one part of the system can address alone. Our Adult Social Care Performance Management Framework should consider system wide measures and implications. Wider work on demand management through the whole of the health and social care system is also required to ensure a full understanding of system impacts and outcome for residents.

SECTION 3

Adult Social Care Services

The Council has a wide range of statutory responsibilities to deliver and commission services for adults with eligible care and support needs and vulnerabilities. Services need to be focused on promoting individuals' wellbeing, preventing needs for care and support and supporting independence in line with the ambitions which are articulated in 'Building a Better Bromley':

“

"through working with partners (we will) ensure the provision of high quality locally relevant information and advice about care and support needs to enable choice and control.....enhance the quality of life for people with care and support needs and ensure that those whose circumstances make them vulnerable are protected from avoidable harm....focus on wellbeing and prevention with our health and other partners, jointly commissioning community services and providing co-ordinated management of (those) with long term conditions."

Building a Better Bromley

”

These commitments clearly require the co-ordinated input of a number of different services working together towards common aims and objectives. Within the Council, the key services with responsibilities for adults are found within the Adult Social Care, Housing and Public Health departments. Key partner agencies outside the Council include NHS commissioners and providers, the police service, housing providers and the community and voluntary sectors. Many services for adults with care and support needs are commissioned by the Council from partner agencies and from the private sector, through various forms of contract.

Bromley's ambition to deliver better outcomes for residents is encapsulated in the department's 'Roadmap to Excellence' and Transforming Bromley plan which have sought to provide vision, a clear direction for service improvement, a culture of shared ambition and leadership at all levels and strengthened partnerships across key agencies. As part of this strategy, the Council has committed to ensuring that performance management and quality assurance processes are made even more rigorous, robust and analytical and that senior leaders and elected members provide critical challenge based on accurate, analytical performance reports. Performance monitoring and scrutiny at all management levels ensures it is used effectively to drive improvements. This Performance Management Framework is designed to support the stronger focus on the performance of adult services the Council has committed to adopt.

Formal business planning in the department is important in defining the priorities, objectives and targets against which the performance of services will be judged going forward. The Portfolio Holder Plan captures priorities for adult services, including those emerging from continuing needs analysis. The Plan also covers the service improvement priorities identified by managers and through the findings of external regulation and peer review.

One of our key commitments is that all Bromley's statutory services are rated 'good' or better by our regulators. Currently, many, but not all, statutory services for adults are inspected by the Care Quality Commission (CQC). The Council's internal Reablement (2019) and Shared Lives (2019) services are rated 'good'.

However, some of the Domiciliary Care and Residential providers commissioned by the Council 'require improvement'. When a current provider receives a CQC 'Requires Improvement' or 'Inadequate' rating, an automatic suspension is placed on that provider. Work is then undertaken with the provider to ensure all the necessary improvements are made. New providers which do not have a 'Good' or 'Outstanding' CQC rating are not utilised.

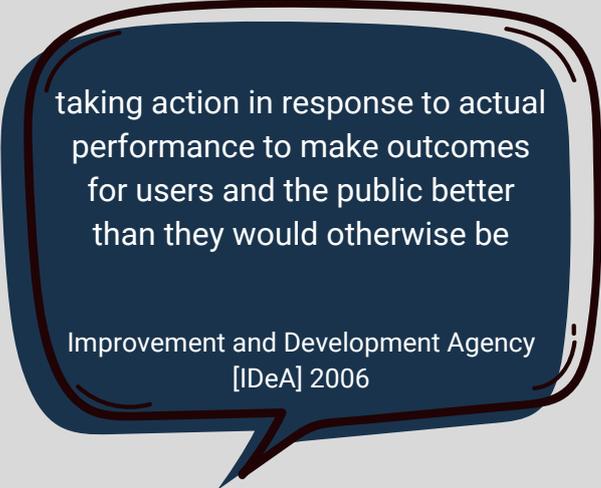
Overall, the mental health services commissioned by the Council and delivered by the Oxleas NHS Foundation Trust is rated 'good' (2020), and where services have required improvement measures have been implemented to address those areas of concern.

In 2021 the Government announced in the White Paper "Integration and Innovation: working together to improve health and social care for all" that more effective data sharing across the health and care system was needed. It also included note of an improved level of accountability to be introduced within social care, with a new assurance framework allowing greater oversight of local authority delivery of care, and improved data collection allowing us to better understand capacity and risk in the social care system.

SECTION 4

What is Performance Management?

In simple terms, performance management is defined as:

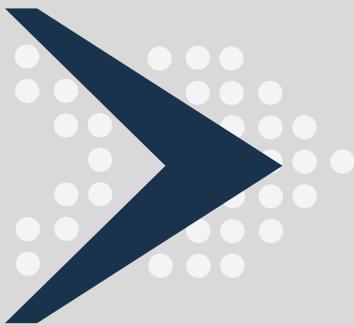


taking action in response to actual performance to make outcomes for users and the public better than they would otherwise be

Improvement and Development Agency
[IDeA] 2006

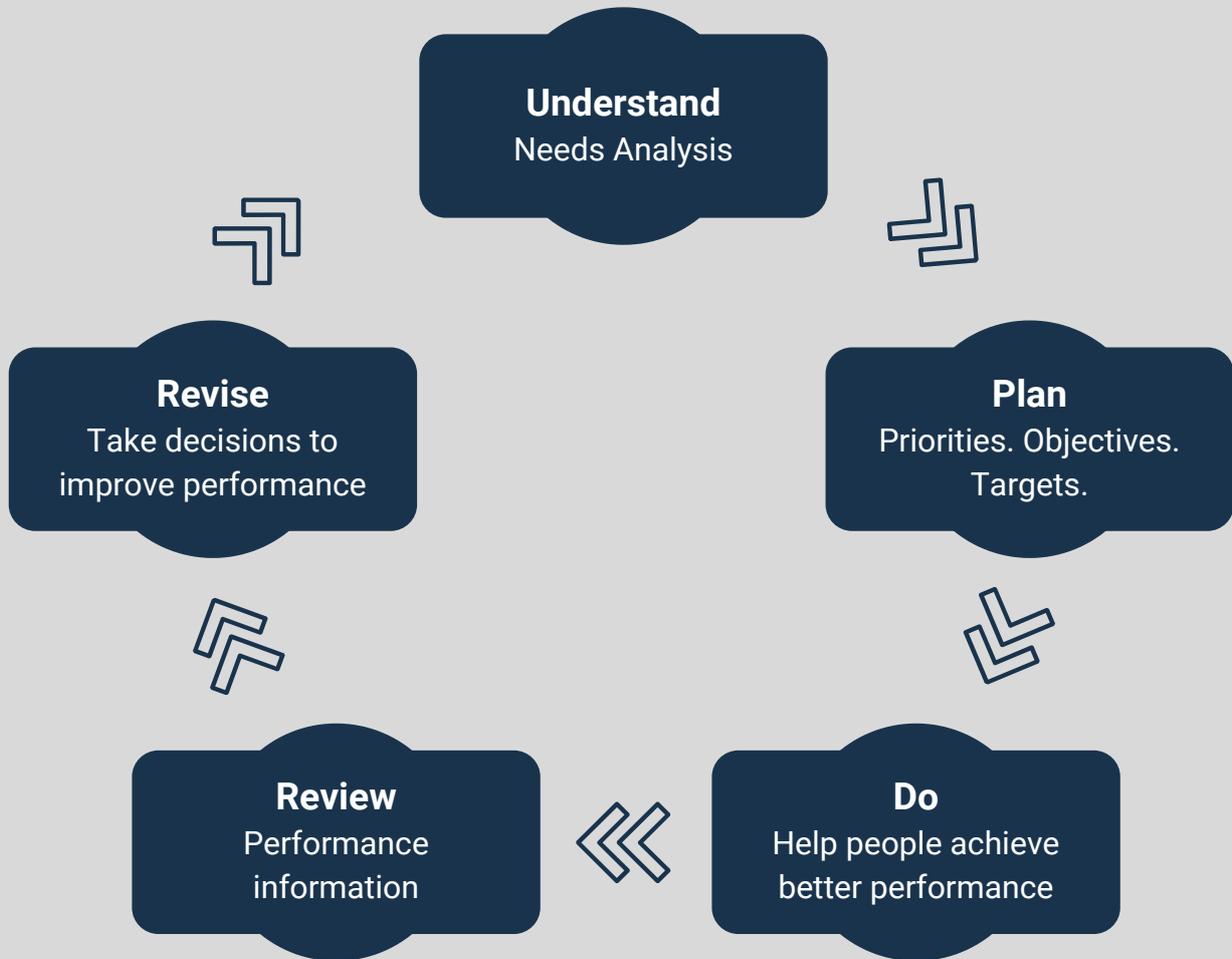
This definition clearly indicates that performance management is an active pursuit designed to make a difference rather than simply the passive monitoring of performance, important though the monitoring process is in the overall performance system.

Effective performance management is characterised by:



- A clear understanding of needs achieved through rigorous needs analysis.
- Explicit aims, objectives, priorities and targets for services.
- Clear plans, strategic and operational in nature, informing service delivery.
- Relevant performance measures enabling judgements to be made on whether services are achieving what is required.
- Performance reporting at the right levels to enable appropriate decisions and actions to be taken in a timely manner.
- Individuals and groups taking responsibility for the continuous improvement of services.
- A culture of transparency and openness amongst stakeholders.
- Being a tool for assessing progress towards collaboration and integration across Council services, with public health and the NHS as required under the Care Act 2014

These characteristics can be summarised thus:



Effective performance management is predicated on achieving clarity of the differing roles and responsibilities of individuals in the performance management system and on the development of a performance culture across the Council and partner agencies through which individuals share improvement ambitions, are motivated to achieve excellence, are supported and resourced accordingly and are thereby held to account for their performance.



SECTION 5

Performance Management Responsibilities

Performance management is everyone’s business in Bromley and includes activities to ensure that the Council’s goals and ambitions are consistently being met in an effective and efficient manner. Performance management, and the reporting systems and data on which it is based, can help elected members and chief officers to ensure the quality and effectiveness of the Council’s work and allows the public to make judgements about services.

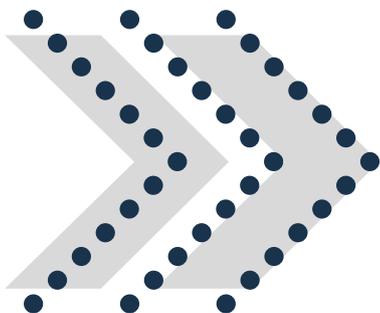
The Council’s elected members, managers and staff share responsibility for the governance, management and delivery of services and for striving for continuous improvement and excellence. Users of services and residents rightly expect high levels of performance and accountability from the Council.

The differing but complementary roles and responsibilities of the Council’s elected members and officers in respect of performance management are summarised below:

Elected Members

Elected Members act in the public interest, working for the benefit of the borough as a whole. The Executive and Portfolio Holders are responsible for the administration of the Council’s affairs and set the policy context for Council services. The Leader of the Council directs the Chief Executive who is accountable, with the Corporate Leadership Team (CLT), to the Leader and respective Portfolio Holders for the effective delivery of Council services.

Portfolio Holders have responsibility for:



- Agreeing with senior officers the strategic direction of services and performance improvement priorities.
- Developing and overseeing the relevant Portfolio Plans.
- Providing strategic oversight of the effectiveness of performance management arrangements in Council services.
- Holding senior managers – the Executive Directors and Departmental Leadership Teams – to account for the performance of services for which they are responsible.

The Policy Development and Scrutiny Committees (PDS) provide support and challenge to the Executive and Portfolio Holders through:



- Contributing to the development of Council plans for services.
- Examining whether plans are being implemented effectively.
- Receiving reports on performance, asking challenging questions about areas of underperformance, and making recommendations accordingly to the Executive

In Bromley the core adult social care, housing and public health services fall within the remit of the two Portfolio Holders - Adult Care and Health and Renewal Recreation and Housing - and their respective Policy Development and Scrutiny Committees.

The Corporate Leadership Team

The Corporate Leadership Team (Chief Executive, Directors and Assistant Directors) is responsible for ensuring Council services perform effectively and achieve objectives set by central Government, the relevant regulators and the Council's Executive through:



- Advising Elected Members on the setting of the strategic direction and performance improvement priorities for Council services.
- Setting appropriate outcome based targets and performance standards.
- Receiving strategic level performance reports and acting on areas of underperformance.
- Ensuring that there is robust performance management and a strong performance culture embedded across all Council services.

In Bromley, the relevant services for children fall within the remit of the Director of Children's Services, and the Directors of Children's Social Care; Education; Adults Social Care, Housing and Public Health.

Departmental Management Teams and Divisional Directors

Departmental Management Teams and Assistant Directors are responsible for the day to day performance management of operational and strategic services through:



- Promoting and embedding a strong performance management culture across individual Council departments.
- Holding Heads of Service to account for the performance of their areas of responsibility.
- Monitoring service performance and standards across all service areas.
- Ensuring performance management is integrated into business and service planning and into the appraisal and supervision processes for individual staff.

Heads of Service and Team Managers

Heads of Service and Team Managers are responsible for managing and improving performance effectively within their particular service areas by:



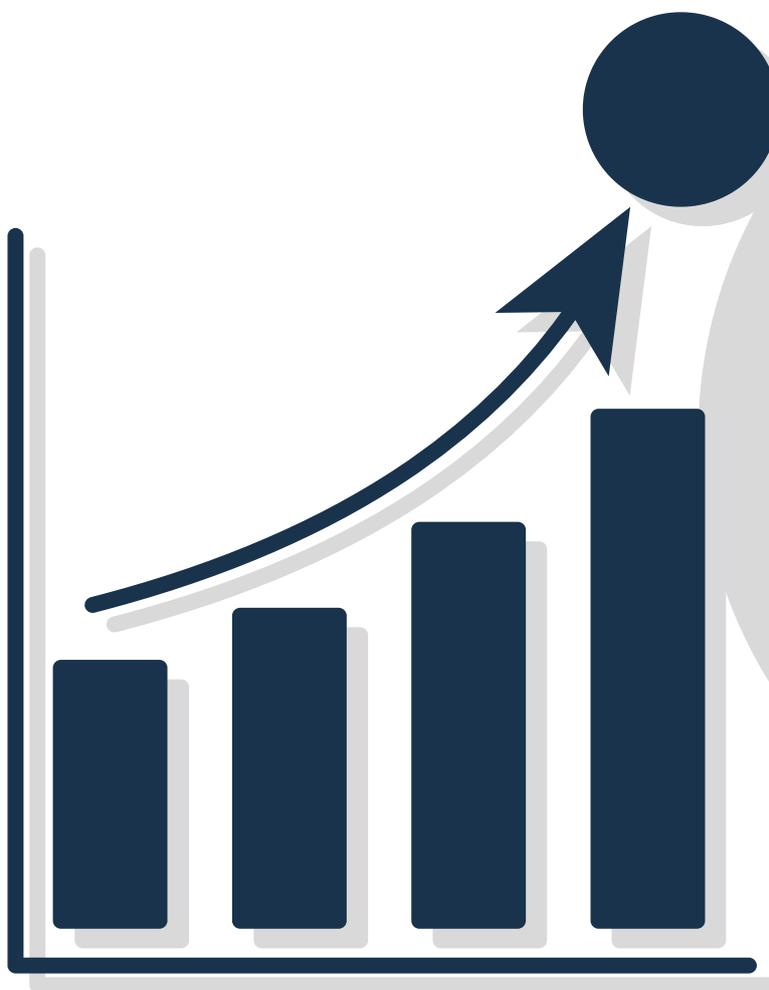
- Promoting the performance management culture within specific service areas.
- Regularly receiving and analysing data and intelligence in respect of the performance of specific services and staff.
- Identifying performance improvement requirements of services and staff and planning accordingly.
- Implementing service improvement plans.

All staff

All Staff have their own responsibilities in respect of performance management and service improvement through:



- Maintaining awareness of relevant Council and departmental priorities.
- Being aware of their own performance against relevant objectives and targets, and occupational or professional standards where they exist.
- Being committed to meeting personal and service improvement needs.
- Adhering to data quality principles and complying with data entry requirements of their individual roles.



SECTION 6

Performance Management Arrangements for Adult Services

Needs analysis

Needs Analysis enables the understanding of current levels of performance and the need for performance improvement and development. It provides managers with information on demand for services, the efficiency of services currently delivered and their effectiveness in achieving desired outcomes. In undertaking needs analysis, service gaps and resourcing issues may also be identified. Needs analysis should be used, therefore, as a key tool in informing service commissioning.

Needs analysis is undertaken by a number of sources – e.g. by the Strategy, Performance and Corporate Transformation Division or as part of the Joint Strategic Needs Assessment (JSNA) led by the Public Health Department. Needs analysis is also undertaken by commissioning staff as part of the routine commissioning cycle.

Planning

Planning enables needs analysis to be translated into specific aims, objectives, targets and actions. Plans exist at a number of different levels:

Strategic level plans include:

- Building a Better Bromley
- Transforming Bromley
- Portfolio Holder Plans
- Health and Wellbeing Strategy
- Bromley Safeguarding Adults Board Strategy
- One Bromley Plan
- Mental Health Strategy
- Learning Disability Strategy
- Ageing Well Strategy

Operational level plans include:

- Adult Social Care Transformation Plan
- Housing Business Plan
- Public Health Business Plan
- Commissioning Business Plan and associated transformation plans
- Heads of Service/Thematic Plans

All levels of plans contain SMART targets and relevant performance indicators.

Performance reporting and review

Performance reporting and review takes place routinely by different levels of management and governance of adult services. Performance reports contain datasets of quantitative, qualitative and outcome performance indicators and measures relevant to the audience receiving the reports.

Examples of quantitative indicators include: numbers of adults referred to services; numbers in receipt of short-term or long-term services; numbers receiving domiciliary or residential care and numbers of homeless families – essentially measures of demand for services.

Qualitative indicators include: the proportion of needs assessments completed within prescribed timescales; delayed transfers of care; the effectiveness of reablement; the proportion of annual reviews undertaken within timescales and the time homeless families remain in temporary accommodation – essentially measures of the efficiency of services.

Outcome measures may include: numbers of adults who remain at home following the receipt of early help services; numbers of successful discharges; adults with learning difficulties living independently or at home and number of cases where positive action prevents homelessness – these indicate the effectiveness of services.

Performance reports are designed to be useful and user-friendly with trajectory, trend, polarity and benchmarking information provided. Increasingly, data items are linked and triangulated to support practice e.g. to determine causes of delayed transfers of care. There is a commitment to further develop reporting on inter-connections between datasets and the level of analysis of data provided.

Performance indicators are, however, only indicators of performance and, to be used appropriately, need to be supported by additional performance information and intelligence which may include: benchmarking against other authorities; results of external inspection or peer review; findings of internal audit and quality assurance processes; staff feedback and, importantly, feedback from service users. Therefore, performance reports are increasingly analytic in nature, designed to readily focus the attention of operational services, managers and governance bodies.

It is worth repeating that performance information is not simply presented to 'tell the story' and be monitored but, more importantly, to enable appropriate support and challenge and decisions to be made which 'make a difference' to performance and outcomes for service users.

The scheme for performance reporting and review is as follows

Governance and Corporate Management

- The Corporate Leadership Team receives a top level performance report which focusses on the Building a Better Bromley themes. Specific performance priorities have been identified in respect of adults including: take up of direct payments; effectiveness of reablement; homeless acceptances and use of temporary accommodation.
- The Portfolio Holders receive performance reports in respect of services affecting adults. The Portfolio Holders also receive thematic reports and briefings from Directors. Together, these reports support the executive role of the Portfolio Holders. The Adult Care and Health Portfolio Holder is a member of Bromley's Health and Wellbeing and Safeguarding Adults Boards, receiving regular performance reports in these forums.
- The Policy Development and Scrutiny Committee receives reports on performance of key commissioned services and key thematic reports such as the Annual Safeguarding Adults Board report.
- The Adult Care and Health Portfolio Holder with the Chief Executive and Directors meet with the Independent Chair of the Bromley Safeguarding Adults Board. This meeting enables the Chair to hold the Council to account for its leadership of the local safeguarding adults 'system' and raise performance issues with the Council's leaders.
- The Council has an annual programme of internal audit which routinely includes elements of adult services. Audits examine compliance with statutory and regulatory requirements and the Council's own policies and procedures, providing further information in respect of performance and, in particular, the value for money of Council services.

Partnership governance

- There are a number of key governance structures which oversee partnerships of agencies working with adults. Performance reports will routinely be provided to each meeting of the One Bromley Board, Bromley Safeguarding Adults Board; Health and Wellbeing Board and the Safer Bromley Board. These reports will reflect the partnership nature of much of the work with vulnerable adults and promote the shared accountability across agencies for the improvement of services and outcomes.
- In line with the government's integration agenda, the Council is developing closer working relationships with the South East London Clinical Commissioning Group including some joint decision-making and joint commissioning. Performance intelligence has been used to inform the commissioning of services include the 'Single Point of Access to Discharge' service, redesigning and speeding up the pathway out of hospital care for adults and older people, and the Bromley Well service, jointly commissioned by the Council and the CCG to broaden the early intervention offer to adults with support needs.

Departmental Management

- The Departmental Leadership Team receives more detailed reports on performance from Heads of Service. These reports focus on priorities and targets, . and enable the department's most senior managers to determine the progress in implementing plans and to take decisions needed to ensure these plans are 'on track' for delivery. They also assist the identification of any cross cutting issues in respect of services to adults.
- A detailed monthly 'Performance Digest' is provided to the Director of Adult Social Care and the Senior Leadership Team. The Digest provides information on key local and national performance issues including: referrals and current service users; assessments and reviews; delayed transfers of care; reablement; permanent admissions to residential and nursing care; take up of direct payments/personal budgets; and carers in receipt of services. The Digest also provides information on safeguarding adults and deprivation of liberty referrals.
- Providing comparative and benchmarking information where possible, commentary by service managers and identifying data integrity issues, the Digest, which includes key finance information, provides senior managers with high level oversight of the department's activity, effectiveness and budget position.
- Performance review is a standing item in the Director's monthly supervision with individual Heads of Service, promoting the accountability of lead officers for individual service areas and enabling the formal communication of key performance issues to the Director.
- At an operational level, more detailed performance reports are provided weekly to Heads of Service and Team Managers. All Heads of Service use information from these reports in team meetings and supervision to address and resolve performance and data quality issues and to increase the ownership of performance, and focus on performance, within teams and individual staff.
- Practice and performance in respect of Deprivation of Liberty assessments is closely monitored by operational and senior managers. Experienced and trained staff quality assure each assessment before sign off. Individual performance issues are dealt with in supervision. Reflective practice sessions are organised for both internal and independent assessors to promote best practice. Statutory timescale for completion of DoLS assessments is a set target enabling performance to be closely managed. There is routine liaison between the DoLS team and the Council's legal services.
- Bromley Safeguarding Adults Board partner agencies complete annual self-audits of safeguarding arrangements and practice for the Board. Working with an agreed pan-London Safeguarding Adults Partnership Audit Tool (SAPAT), agencies can assess their organisation's safeguarding achievements and challenges, with a focus on Making Safeguarding Personal (MSP), and any learning from Safeguarding Adult Reviews (SAR). Partners will have the opportunity to share their findings with other agencies during an annual SAPAT challenge event. This provides scope for further learning as well as the opportunity to build robust inter-agency relationships.

- User feedback on the services they receive provides further intelligence to managers and staff in the department and enhances their understanding of performance issues. Examples of routine feedback include from adults subject to safeguarding enquiries who feel involved in the process; from adults and their carers in the Shared Lives service; and from adults receiving reablement services. Themes from complaints and compliments are also examined by senior managers.
- Quantitative and qualitative feedback is also available through the annual Adult Social Care Survey and the Carers Survey which takes place every two years. This provides the opportunity to benchmark against other boroughs in London and England as well as following trends in responses within Bromley. Additionally, residents can use the surveys as a way to highlight issues with service providers which are followed up through commissioners and contract compliance officers.
- The department also engages with advocacy, carers and other community groups which contributes further to managers' understanding and management of performance issues.

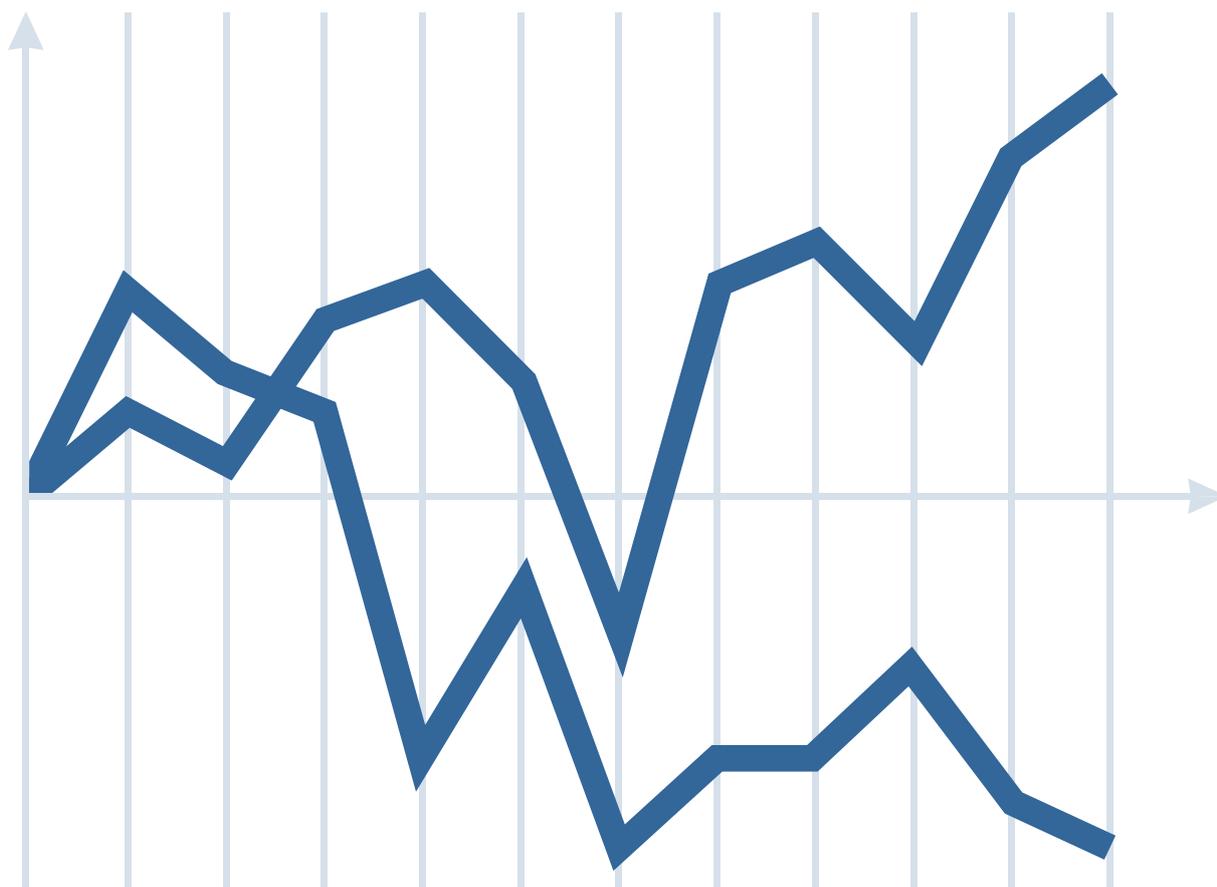
Adult Mental Health Services

- Mental health services for adults are currently commissioned by the Council and provided by the Oxleas NHS Foundation Trust via a Section 31 agreement. The Council's social work staff are seconded into multi-disciplinary teams and are directly deployed and managed by the Trust which holds day to day responsibility for their performance and performance management. Professional supervision and workforce development of social workers is provided by a Head of Social Care, who sits on management teams in both the Trust and Bromley's Adult Social Care. There is regular liaison between the Director of Adult Social Care and the Trust's Service Director in respect of overall contract performance.

Commissioned services

- The Council commissions a significant range of other services to meet needs identified in assessments and care plans. These include domiciliary care, placements in residential and nursing homes, supported accommodation and day activities.
- As articulated in the 'Direction of Travel for Bromley as a Commissioning Organisation', while the process of commissioning transfers responsibility for the delivery of services to a third party, the Council continues to be accountable for achieving the desired outcomes of those services and for ensuring value for money from the Council's funding. It follows that outcomes need to be specified in detail within contracts and funding agreements, that appropriate performance measures are identified and that robust performance management/contract compliance arrangements are in place.
- The commissioning of Adult Social Care services is led by the department's Integrated commissioning Service. Its remit covers:
 - Understanding national health and care priorities and the health and care market; analysing current local service delivery; working with residents to understand local needs and priorities, and reconciling this with available resources.
 - Developing local health and care strategies and plans with residents, service partners and other stakeholders.
 - Ensuring a sufficiency of community-based health and care services to meet local statutory need and the needs of self-funders.
 - Supporting and shaping the capacity and capability of the local health and care market.
 - Commissioning adults and children's health and care services - including care homes sufficiency; domiciliary care provision; preventative and early intervention advice, information, guidance, care and support provision; community and residential mental health; learning disability provision; SEND services; out of hospital health and care services for South East London CCG - services including Bromley HealthCare; end of life care provision; community equipment; respite provision and hospital discharge arrangements.
 - Finding residential and domiciliary care placements to best meet the needs of adults and children who require support.
 - Engaging with service users during the commissioning process to obtain feedback on the quality of support provided.

- The Contract Compliance Team monitors contractors' performance in relation to relevant Quality Assurance Frameworks, ensuring that all commissioned services demonstrate continuous improvement. The team undertakes regular quality assurance visits to placements, providers and people who receive services, reporting regularly on all aspects of the provider's performance. Following a visit, recommendations are made to the provider for service improvements and an action plan is provided with actions monitored.
- The team maintains oversight and awareness of any CQC non-compliance issues, complaints or safeguarding concerns and monitors for trends, raising any concerns to Heads of Service and/or Commissioners for further action where needed. Where concerns are identified, frequency of monitoring is increased with a focus on those rated less than 'Good' by regulators, aiming to secure improvement in line with the Council's policy of using providers rated 'Good' or better wherever possible.
- The Contract Compliance Team works proactively with Adult Social Care providers, organising provider forums for the purpose of sharing good practice across services. The team adapts a multi-agency approach, keeping in regular contact with colleagues in SELCCG, CQC and other colleagues across services to share intelligence and jointly support providers to maintain consistently good standards.



SECTION 7

Adult Social Care and other Council Services

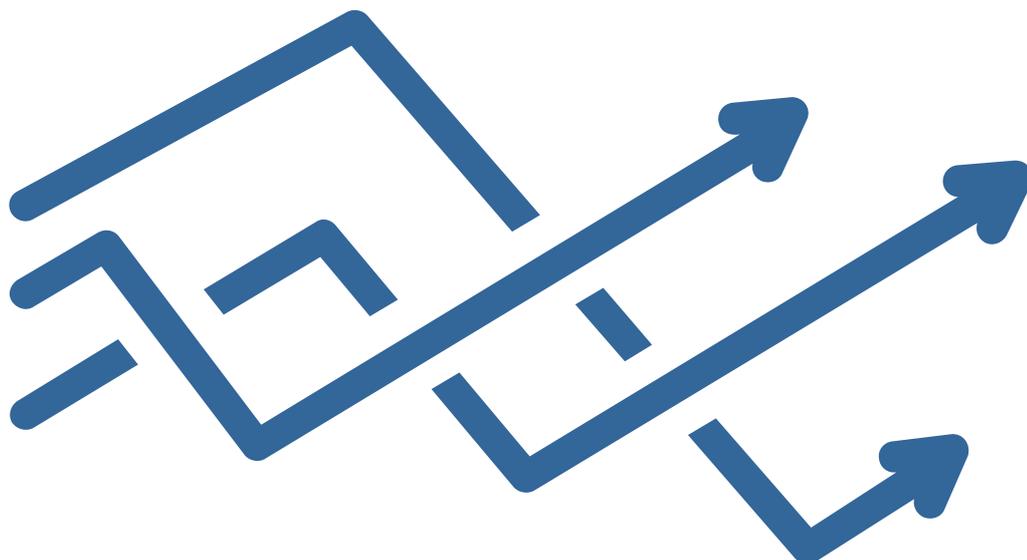
Children's Social Care and young adults

For young people with specific continuing care needs and eligibility for services as adults (young people with learning difficulties, physical disabilities and mental health needs), transitional protocols and arrangements between children's and adult services are in place.

Information on numbers of young people who may require transitional and adult services is shared between children's and adult services to inform planning assumptions including demand for services, commissioning and budgetary implications. A key Transformation project is looking to strengthen the Council's approach to Transitions.

Adult Services seeks early involvement in assessment and planning for individual young people with colleagues from Children's Services. This process addresses the more limited eligibility criteria for adult services and is designed to manage the expectations of young people and families.

Adult services are represented at senior management level in key governance bodies for children and young people including the Safeguarding Children Partnership, the Children's Executive Board, and the SEND/SEN Reforms Governance Boards.



Public Health Services for Adults

Improving the health and wellbeing of adults forms a core element of Bromley’s overall Health and Wellbeing Strategy. The Public Health department commissions universal, targeted and specialist services for adults including: sexual health and substance misuse services; NHS health checks and funding to GPs to promote their public health focus.

As, predominantly, commissioners of services from NHS Trusts and other providers, Public Health staff are responsible for specifying the outcomes required from services, for contracting effectively with providers and for ensuring compliance with the contracts. Performance management information and reporting on KPIs is undertaken at regular contract meetings with providers. Performance is reported to key governance structures e.g. Health and Wellbeing Board; Adult Care and Health PDS Committee as well as in external reports to Government and NHS England.

The Public Health department leads on Bromley’s approach to the Joint Strategic Needs Assessment, engaging with adult services across the statutory and voluntary sectors in respect of work designed to inform and support strategic and operational commissioning of services, including those for vulnerable adults.

In addition to providing professional leadership of the borough’s Health and Wellbeing Board, the Director of Public Health sits on other key governance bodies including the Safeguarding Adults Board.



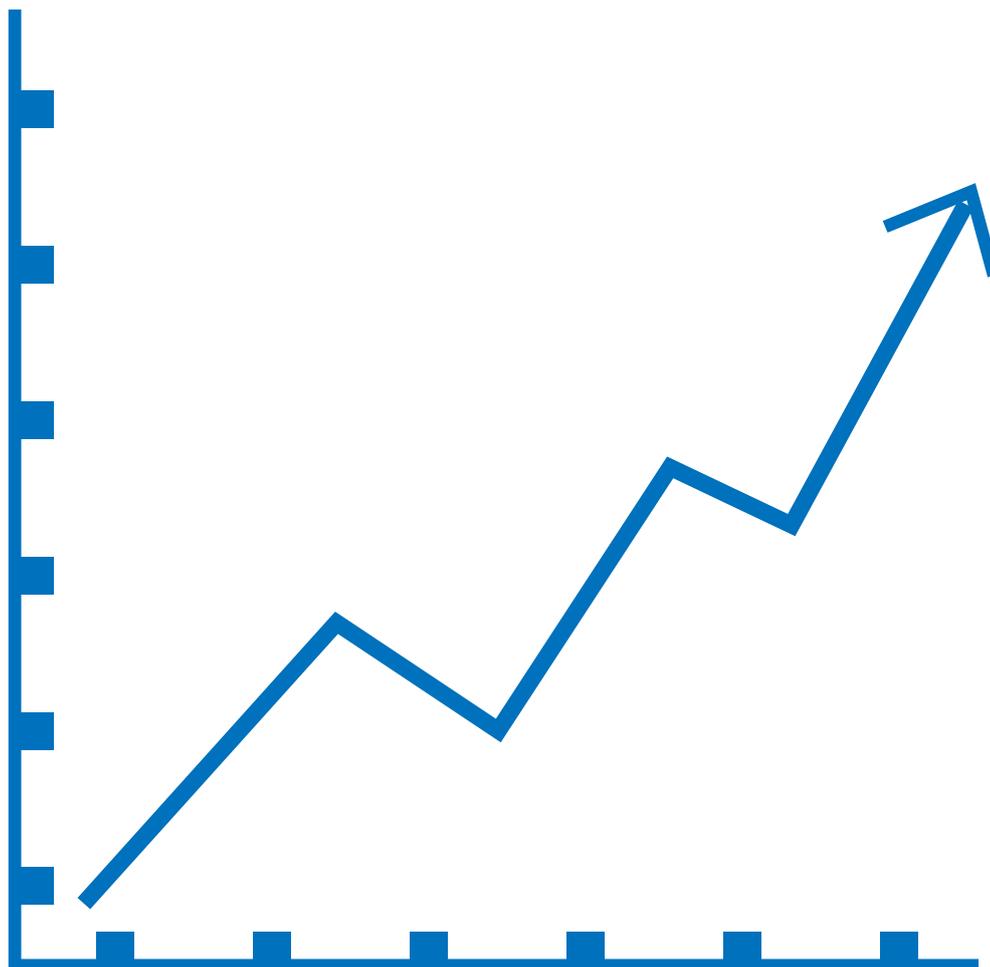
Housing Division

The Housing Division has a key role in supporting the Council’s work with vulnerable adults in addition to its broader responsibilities in respect of homelessness.

There is routine liaison between housing caseworkers and colleagues in adult social care services in respect of specific concerns around vulnerable adults. Escalation procedures are in place to ensure Heads of Service and Directors are sighted on practice and performance issues and can intervene appropriately.

The Division has a number of contracts with housing providers. A local provider forum is in place which enables thematic issues e.g. adults safeguarding to be aired. Providers are encouraged to make use of safeguarding training commissioned by the Safeguarding Adults Board.

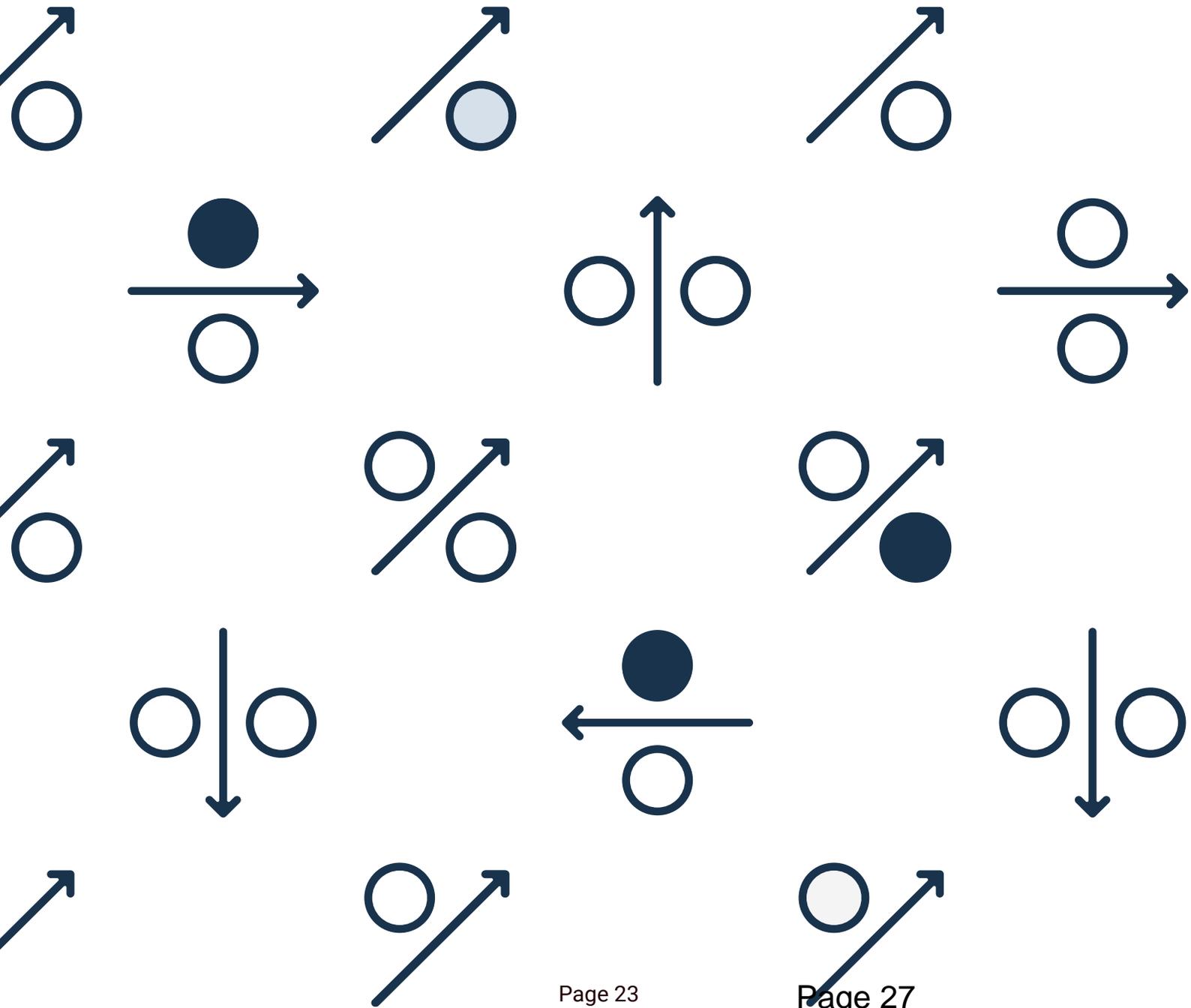
Senior Housing Division managers sit on key governance bodies in respect of vulnerable adults including the Safeguarding Adults Board.



SECTION 8

Appraisal and supervision

Appraisal and supervision arrangements are key elements in the overall Performance Management Framework. On at least an annual basis, managers complete appraisals with individual members of staff in which their performance is reviewed and forward objectives and targets set. Additionally, learning and development needs of staff members are identified which inform an annual staff training programme. Staff then receive regular ongoing 1-1 supervision in line with the Council's staff supervision policies in which performance issues are routinely considered.



Produced by:
Strategy, Performance and Corporate Transformation
London Borough of Bromley
Civic Centre, Stockwell Close
Bromley BR1 3UH



Report No.

London Borough of Bromley

CEF21028

PART ONE / INFORMATION BRIEFING

Decision Maker: **ADULT SOCIAL CARE PDS COMMITTEE**
9th September 2021 – information only
CHILDREN'S SOCIAL CARE PDS COMMITTEE
14th September 2021 – information only
GENERAL PURPOSES & LICENSING
21st September 2021 – Part One

Decision Type: Non-Urgent Executive Non-Key

Title: **ANNUAL COMPLAINTS REPORT & LG&SCO LETTER 2020/21**

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

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 2020/21 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 2021.
-

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). Whilst legislation mainly refers to social care complaints, the Council goes further and publishes greater detail about the Council's performance across the divisions.
- 3.2 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. Where possible, lessons are learnt by the Directorates and an internal report is produced so that reflections and improvements can be made to services.
- 3.3 The report at Appendix 1 provides an overview of complaints and all Local Government & Social Care Ombudsman enquiries to the Council between 1st April 2020 to 31st March 2021.
- 3.4 Overall, the Council received 542 complaints during 2020/21, representing a 17% reduction on last year (656). 44% of complaints were partially upheld or upheld against the Council, which is similar to the previous year. 59% of complaints were responded to on time, an improvement on 47% last year and an area of ongoing improvement.

Local Government & Social Care Ombudsman

- 3.5 The Local Government & Social Care Ombudsman ('the 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.
- 3.6 The Ombudsman stopped accepting new complaints for approximately three months from April to June 2020, which was to enable local authorities to divert resources to tackling the pandemic. Bromley Council sustained a business as usual approach to managing complaints throughout pandemic despite complaints staff, including the Head of Service, being seconded to Covid-19 programmes. The Ombudsman's temporary closure goes some way to explain the significant reduction in referrals about Bromley - during the year 2020/21 Bromley was the subject of 86 referrals to the Ombudsman, 63 (43%) less than the previous year. Of those 86 referrals, 38 became the subject of an investigation by the Ombudsman, and from those full investigations, 26 were upheld against the Council (68%). This is better than the London average and in line with Bromley's performance of the previous year (65%).
- 3.7 The average upheld rate across London boroughs was 72%, placing Bromley joint 11th out of the 32 boroughs. Measured by referrals *per capita*, Bromley ranked 6th, meaning that the Council's figures remain competitive.
- 3.8 The Council sustains thoughtful and robust engagement with the Ombudsman challenging decisions where required. Last year's covering report mentioned the Council had served a pre-action judicial review protocol letter upon the Ombudsman, which led to a previous critical decision being withdrawn and the investigation discontinued without findings. A similar action is being considered in another case in this financial year.

- 3.9 Whilst being robust in our considerations of recommendations for some cases, we have retained a 100% compliance rate in implementing recommendations on all other cases.
- 3.10 The Ombudsman’s annual review letter provides a breakdown of the upheld investigations and a compliance rate for implementing Ombudsman recommendations.
- 3.11 This year’s letter contained some commentary that requires context. Firstly, there was a suggestion that some responses to investigations were either late or not complete. During 2020/21 we recorded 259 separate deadlines to the Ombudsman, of which 84% were responded to within the expected timescale. No complaint outcomes have been affected by any such issue.
- 3.12 Secondly, this year’s letter contains a reference to the Council’s occasional practice of requesting a further opportunity to comment on draft decisions. This allows the Council to challenge Ombudsman’s decisions where required, asking them to issue a revised draft, but this is also an opportunity to swiftly implement remedial action for service users before decisions are published.
- 3.13 Finally, there is a reference to a reduction of effective complaint functions in all local authorities. This is a general observation, rather than specific to Bromley, and follows national comments made by Michael King, the Local Government & Social Care Ombudsman, in emphasising the critical importance of a properly resourced and managed complaint handling service.

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 2020/21
- 6.2 Link below to LG&SCO annual letter 2020/21

<https://www.lgo.org.uk/documents/councilperformance/2021/london%20borough%20of%20bromley.pdf>

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



Complaints & Compliments

Annual Report 2020-2021



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| | |
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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 2020 to 31st March 2021.

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

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 grievances 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.

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.

03 | COUNCIL OVERVIEW

Complaints received

| Division | 2018/19 | 2019/20 | 2020/21 | % change |
|---------------------------------|------------|------------|------------|---------------|
| Adult Social Care | 142 | 117 | 57 | -51.3% |
| Children's Social Care | 114 | 105 | 77 | -26.7% |
| Housing | 118 | 90 | 78 | -13.3% |
| Planning & Regeneration | - | - | 25 | n/a |
| Education | 44 | 38 | 23 | -39.5% |
| Chief Executive's Dept. | 66 | 95 | 75 | -21.1% |
| Public Health | 0 | 0 | 0 | n/a |
| Total | 484 | 445 | 335 | -24.7% |
| Environment & Public Protection | 384 | 211 | 207 | -1.9% |

The Council received 542 complaints during 2020/21, a 17% decrease on the 656 from the previous year.

How complaints were received

| Source | Adult | Children | Housing | P&R | Education | EPP | CED | Public Health | Total | % of total |
|--------------|-----------|-----------|-----------|-----------|-----------|------------|-----------|---------------|------------|------------|
| Email | 38 | 37 | 57 | 15 | 13 | 114 | 52 | 0 | 326 | 60.1% |
| Form | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0.0% |
| In person | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0.0% |
| Letter | 0 | 0 | 0 | 1 | 0 | 3 | 1 | 0 | 5 | 0.9% |
| Telephone | 5 | 3 | 2 | 0 | 1 | 3 | 2 | 0 | 16 | 3.0% |
| Website | 14 | 37 | 19 | 9 | 9 | 87 | 20 | 0 | 195 | 36.0% |
| Total | 57 | 77 | 78 | 25 | 23 | 207 | 75 | 0 | 542 | |

96.1% of complaints were received by email or through the website, a significant increase in the use of our digital channels from 82.7% last year.

Proportion upheld

| | Aspects | Upheld / Partially Upheld | % 2020/21 | % 2019/20 |
|---------------------------------|-------------------------------------|---------------------------|------------|------------|
| Adult Social Care | 68 | 38 | 56% | 49% |
| Children's Social Care | 110 | 48 | 44% | 45% |
| Housing | 93 | 33 | 35% | 29% |
| Planning & Regeneration | 33 | 9 | 27% | - |
| Education | 33 | 13 | 39% | 55% |
| Chief Executive's Dept. | 97 | 48 | 49% | 42% |
| Public Health | 0 | 0 | N/A | N/A |
| TOTAL | 434 | 189 | 44% | 44% |
| Environment & Public Protection | <i>Data not currently collected</i> | | | |

44% of complaints were at least partially upheld, steady compared to the previous year.

The upheld rate reflects our approach to acknowledge fault where appropriate and seek to put things right as far as can be achieved.

Causes for complaint

The most frequent cause for complaint (aspect) was quality of service (41%), one-fifth of which were upheld. Lack of action (18.6%) was the next most prevalent. Complaints about staff conduct were the most likely to be upheld.

Complaints about staff conduct can include staff of third-party providers contracted by the Council.

| Complaint | Adult | Children | Housing | P&R | Education | EPP | CED | Public Health | Total | % of total | % upheld |
|----------------------|-----------|------------|-----------|-----------|-----------|------------|-----------|---------------|------------|------------|----------|
| Staff conduct | 7 | 32 | 9 | 2 | 5 | 18 | 1 | 0 | 74 | 11.5% | 31.1% |
| Disputed Decision | 7 | 11 | 6 | 8 | 3 | 25 | 4 | 0 | 64 | 10.0% | 9.4% |
| Information | 11 | 12 | 4 | 9 | 9 | 13 | 7 | 0 | 65 | 10.1% | 18.5% |
| Lack of Action | 14 | 19 | 23 | 4 | 7 | 38 | 14 | 0 | 119 | 18.6% | 21.0% |
| Quality of Service | 22 | 33 | 51 | 9 | 7 | 113 | 28 | 0 | 263 | 41.0% | 20.2% |
| Service Delay | 2 | 2 | 0 | 1 | 2 | - | 4 | 0 | 11 | 1.7% | 27.3% |
| Behaviour of another | 0 | 1 | 0 | 0 | 0 | - | - | - | 1 | 0.2% | 100.0% |
| Billing / Charging | 5 | - | - | - | - | - | 39 | - | 44 | 6.9% | 9.1% |
| Total | 68 | 110 | 93 | 33 | 33 | 207 | 97 | 0 | 641 | | |

Responding on time

59% of all complaints were responded to within 20 working days, an improvement compared to last year's 47%. Complaints involving contracted services can take longer to address as the Council is ultimately responsible for the quality of their services.

Some of this improvement reflects the well-attended additional 'Complaints Handling' training delivered by the Council, 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.

| Division | 2018/19 | 2019/20 | 2020/21 |
|---------------------------------|------------|------------|------------|
| Adult Social Care | 37% | 35% | 37% |
| Children's Social Care | 43% | 43% | 58% |
| Housing | 56% | 63% | 72% |
| Planning & Regeneration | n/a | n/a | 48% |
| Education | 44% | 45% | 48% |
| Chief Executive's Dept. | 70% | 54% | 52% |
| Public Health | - | - | - |
| OVERALL | 48% | 47% | 59% |
| Environment & Public Protection | - | - | - |

Local Government & Social Care Ombudsman cases

The Council handled 93 Ombudsman cases during the year. Those generated 259 individual Ombudsman response deadlines - only 12% down on the 298 for the previous year - of which 84.1% were responded to within timescale.

The Council was the subject of 38 investigations by the Ombudsman during the year. Of the 38 investigated complaints, 26 were upheld against the Council (68%). Fewer complaints were upheld against the Council than the London average of 72%, therefore placing Bromley 11th best in London. 26 Ombudsman complaints upheld equate to 0.08 complaints upheld per 1000 residents.

2020-2021 Annual Review letter

Every year the Ombudsman publishes an annual review letter for each Council, accompanied by the statistics they hold. For the year 2020-21 their figures disclose the following :-

| | 2018 - 19 | 2019 - 20 | 2020 - 21 | % change |
|--------------------------|------------------------|-----------------------|------------------------------|----------|
| Referrals | 139 | 149 | 103 | -31% |
| Resulting investigations | 42 | 43 | 38 | -11.6% |
| Proportion investigated | 30% | 29% | 37% | +8% |
| Number upheld | 33 | 28 | 26 | -7% |
| Upheld rate | 78% | 65% | 69% | +4% |
| London average | 63% | 70% | 73% | +3% |
| London ranking | Joint 30 th | Joint 7 th | Joint 11th | |

The table above shows the Council maintaining its positive progress in its dealings with the Ombudsman.

The upheld rate is a primary indicator of performance and here the Council has retained its place in the top third of London boroughs, its upheld rate being 4% better than the London average.

The Ombudsman's upheld statistics include those complaints where the Ombudsman would determine that the Council had already provided a satisfactory remedy before the complaint reached the Ombudsman – in this year, that was 15% for the Council, against a London average of 12%.

Financial consequences of complaints

| | | Adults | Children's | Housing | P&R | Education | EPP | CED | TOTALS |
|--------------|---------------------------|------------------|------------------|--------------|------------------|--------------|----------------|-------------------|------------------|
| Ombudsman | Compensation & Backdating | £250.00 | £800.00 | £6,250.00 | £0.00 | £1,400.00 | £0.00 | £0.00 | £8,700.00 |
| | Written off | £9,291.50 | £0.00 | £0.00 | £0.00 | £0.00 | £0.00 | £0.00 | £9,291.50 |
| | Time & trouble | £850.00 | £200.00 | £0.00 | £0.00 | £200.00 | £0.00 | £0.00 | £1,250.00 |
| Stage 1 | Compensation & Backdating | £4,000.00 | £0.00 | £250.00 | £0.00 | £2,700.00 | £0.00 | £121.00 | £7,071.00 |
| | Written off | £5,645.07 | £0.00 | £0.00 | £0.00 | £0.00 | £0.00 | £0.00 | £5,645.07 |
| | Time & trouble | £0.00 | £0.00 | £0.00 | £0.00 | £0.00 | £0.00 | £0.00 | £0.00 |
| | Expert fees | £3,504.00 | £0.00 | £0.00 | £0.00 | £0.00 | £0.00 | £0.00 | £3,504.00 |
| Total | £23,540.57 | £1,000.00 | £6,500.00 | £0.00 | £4,300.00 | £0.00 | £121.00 | £35,461.57 | |

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

The total of £35,461.57 is a 4% decrease on last year's £37,095.67. 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 | 2019/20 | 2020/21 | % change |
|---------------------------------|------------|------------|-------------|
| Adult Social Care | 28 | 33 | 18% |
| Children's Social Care | 48 | 47 | -2% |
| Housing | 284 | 108 | -62% |
| Planning & Regeneration | n/a | 1 | n/a |
| Education | 4 | 22 | 450% |
| Chief Executive's Dept. | 0 | 12 | n/a |
| Environment & Public Protection | 56 | 59 | 5% |
| Total | 420 | 282 | -33% |

04 | 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

| | 2018 - 19 | 2019 - 2020 | 2020 - 21 | % on prev. year |
|---------------------------------|-----------|-------------|-------------------|-----------------|
| Complaints | 142 | 117 | 57 | -51% |
| Percentage responded to on time | 37% | 35% | 37% | 2% |
| Percentage fully upheld | 37% | 28% | 28% | 0% |
| Percentage partially upheld | 18% | 21% | 28% | 7% |
| New Ombudsman cases | 15 | 9 | 4 | -56% |
| Ombudsman cases upheld | 3 | 6 | 6 | 0% |
| Financial consequences | £1,677.25 | £10,057.76 | £23,540.57 | |
| Compliments | 45 | 28 | 33 | 18% |

Complaints received

The Adult Social Care division was the subject of 57 complaints during 2020-21. 38% of individual complaint aspects were responded to on time, contributing to an overall figure of 38% of complaint responses involving Adult Social Care being responded to in a timely way. 56% of complaints were fully or partially upheld, a 7% increase on last year's 49%.

Those 57 complaints gave rise to 57 mentions and 68 individual aspects (please refer to the Terminology section).

'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 19% of complaint aspects, and 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 | 5 | 5 | 2 | 2 | 1 | 0 | 3 |
| % | 9% | 7% | 40% | 40% | 20% | 0% | 60% |
| Complex Care East | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| % | 0% | 0% | 0% | 0% | 0% | 0% | 0% |
| Complex Care West | 9 | 9 | 2 | 3 | 4 | 0 | 4 |
| % | 16% | 13% | 22% | 33% | 44% | 0% | 44% |
| Coordination & Review | 1 | 1 | 0 | 1 | 0 | 0 | 0 |
| % | 2% | 1% | 0% | 100% | 0% | 0% | 0% |
| Duty Team | 5 | 4 | 2 | 2 | 0 | 0 | 1 |
| % | 9% | 6% | 50% | 50% | 0% | 0% | 25% |
| Hospital Team | 7 | 9 | 4 | 1 | 4 | 0 | 2 |
| % | 12% | 13% | 44% | 11% | 44% | 0% | 22% |
| Initial Response | 6 | 8 | 2 | 2 | 4 | 0 | 4 |
| % | 11% | 12% | 25% | 25% | 50% | 0% | 50% |
| Reablement & Rehab | 6 | 7 | 3 | 0 | 4 | 0 | 6 |
| % | 11% | 10% | 43% | 0% | 57% | 0% | 86% |
| Occupational Therapy | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| % | 0% | 0% | 0% | 0% | 0% | 0% | 0% |
| Learning Disability | 3 | 4 | 0 | 1 | 3 | 0 | 1 |
| % | 5% | 6% | 0% | 25% | 75% | 0% | 25% |
| CMHT Oxleas | 3 | 3 | 1 | 0 | 2 | 0 | 1 |
| % | 5% | 4% | 33% | 0% | 67% | 0% | 33% |
| DOLs | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| % | 0% | 0% | 0% | 0% | 0% | 0% | 0% |
| Safeguarding | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| % | 0% | 0% | 0% | 0% | 0% | 0% | 0% |
| Care Link | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| % | 0% | 0% | 0% | 0% | 0% | 0% | 0% |
| 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 | 1 | 0 | 0 | 1 | 0 | 0 |
| % | 2% | 1% | 0% | 0% | 100% | 0% | 0% |
| Brokerage | 3 | 4 | 0 | 1 | 3 | 0 | 1 |
| % | 5% | 6% | 0% | 25% | 75% | 0% | 25% |
| Contracted Services | 11 | 13 | 3 | 6 | 4 | 0 | 3 |
| % | 19% | 19% | 23% | 46% | 31% | 0% | 23% |
| OVERALL | 57 | 68 | 19 | 19 | 30 | 0 | 26 |
| | | | 28% | 28% | 44% | 0% | 38% |

Nature of complaint and outcome

The majority of complaints (32%) were in relation to the quality of service received, of which 59% were at least partially upheld.

| Subject | Aspects this year | Fully upheld | Partially upheld | Not upheld | Ongoing | Answered on time |
|-----------------------------------|-------------------|--------------|------------------|------------|----------|------------------|
| Staff conduct | 7 | 1 | 6 | 0 | 0 | 4 |
| % | 10% | 14% | 86% | 0% | 0% | 57% |
| Disputed decision | 7 | 0 | 3 | 4 | 0 | 0 |
| % | 10% | 0% | 43% | 57% | 0% | 0% |
| Information | 11 | 3 | 2 | 6 | 0 | 4 |
| % | 16% | 27% | 18% | 55% | 0% | 36% |
| Lack of action | 14 | 3 | 1 | 10 | 0 | 9 |
| % | 21% | 21% | 7% | 71% | 0% | 64% |
| Quality of service | 22 | 7 | 6 | 9 | 0 | 6 |
| % | 32% | 32% | 27% | 41% | 0% | 27% |
| Service Delay | 2 | 1 | 1 | 0 | 0 | 1 |
| % | 3% | 50% | 50% | 0% | 0% | 50% |
| Billing & Charging | 5 | 4 | 0 | 1 | 0 | 2 |
| % | 7% | 80% | 0% | 20% | 0% | 40% |
| Behaviour of another service user | 0 | 0 | 0 | 0 | 0 | 0 |
| % | 0% | 0% | 0% | 0% | 0% | 0% |
| OVERALL | 68 | 19 | 19 | 30 | 0 | 26 |
| | | 28% | 28% | 44% | 0% | 38% |

Compliments

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

I met a Reablement carer there yesterday and she was amazing with Mrs L and already has managed to get her to have a shower...Mrs L was very happy with this support and I could see a vast improvement which was fantastic; thank you.

I would just like to take this opportunity to thank you for all your help with this matter over the last few weeks. Your professionalism and care have been very much appreciated, particularly during such a busy and challenging time, thank you.

It was great to speak with you yesterday too. Thank you for sending through the summary of our conversation, it is a huge relief to know that I now have a single point of contact to discuss these issues with and that someone is going to follow up on all the points raised.

Thank you for your help with mum's care after her accident. Please pass on our thanks to all the carers who assisted mum during her recovery. Mum was very pleased with the attitude and professionalism of all the carers involved and has asked me to pass on her thanks to all the team.

During my conversation with her she wanted to take the time to say thank you for our involvement. She also wanted to praise the manner in which you completed your visit. You made her feel very comfortable; you did not rush or pressure her, and you agreed to go for a coffee to discuss the referral and concerns being raised. She could not face someone entering her property as she was embarrassed.

It has always been on our mind to highlight the fantastic work done and express our sincere gratitude for the hard work and dedication by your Team during the Transition and CTR process for our son...We really want to acknowledge the AMAZING WORK done by his adult social worker, who tirelessly worked with the whole Team to successfully get him into his current supported living accommodation.

I just wanted to write to you to thank you from the bottom of my heart for all your help in finding M a permanent placement. I cannot begin to tell you what it has meant to myself and all her family that you took so much care in finding her a place for life, that totally fits with her needs. This placement is down to you - your professionalism in dealing with M, and not accepting anything but the best for her, has enabled us as a family, to feel that she is now in the best hands she can be, and can look forward to a happy and fulfilling life. We will always be grateful to you.

My elderly mum just wanted to pass on all her thanks and gratitude to the OT Team at Bromley. We both just wanted to say a big thanks to T and N - both have been marvellous. They are simply 'the best', they have been not only supporting but really loving and caring towards my elderly mum and dad. They work tirelessly to help and support people with compassion and go above and beyond to help. These guys are the Crown Jewels of the Bromley Service and assets to the council. We can't praise them both enough. Please pass in all our thanks as service users for all their hard work and commitment.

Local Government & Social Care Ombudsman cases

The Ombudsman recorded 11 new Adult Social Care referrals during 2020-21. Of the 12 decisions made during the year, six were upheld.

| Ombudsman outcomes | NFA | No jurisdiction | Premature | NFA | No maladmin'n | NFA | Maladmin & Injustice | Maladmin, no injustice | Already remedied | TOTAL | Ongoing |
|---------------------|----------|-----------------|-----------|----------|---------------|----------|----------------------|------------------------|------------------|-----------|----------|
| Blue Badges | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Brokerage | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| CMHT/Oxleas | 0 | 0 | 0 | 0 | 0 | 0 | 2 | 0 | 0 | 2 | 0 |
| Complex Care West | 0 | 0 | 0 | 0 | 0 | 0 | 2 | 0 | 0 | 2 | 0 |
| Coord'n & Review | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Creative Support | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Duty Team | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 1 | 0 |
| Initial Response | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Learning Disability | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Reablement & Rehab | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 1 | 1 |
| Safeguarding | 2 | 2 | 1 | 0 | 0 | 0 | 1 | 0 | 0 | 6 | 1 |
| OVERALL | 2 | 2 | 1 | 0 | 1 | 0 | 6 | 0 | 0 | 12 | 2 |

Financial consequences of complaints

| | 2018 - 19 | 2019 - 20 | 2020 - 21 |
|-----------------------------------|-----------------|------------------|-------------------|
| Ombudsman cases | | | |
| Compensation / backdated payments | - | 100.00 | £250.00 |
| Charges written off | 1,173.85 | 7,922.83 | £9,291.50 |
| Time & trouble payments | 200.00 | 250.00 | £850.00 |
| Stage 1 complaints | | | |
| Compensation / backdated payments | - | 367.00 | £4,000.00 |
| Charges written off | 303.40 | 1,417.93 | £5,645.07 |
| Time & trouble payments | - | 0.00 | £0.00 |
| Expert fees | - | - | £3,504.00 |
| TOTALS | 1,677.25 | 10,057.76 | £23,540.57 |

05 | 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. We carefully consider 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

| | 2018 - 19 | 2019 - 2020 | 2020 - 21 | % on prev. year |
|---------------------------------|------------|-------------|------------------|-----------------|
| Complaints | 114 | 99 | 74 | -25% |
| Statutory complaints | 6 | 6 | 3 | -50% |
| Percentage responded to on time | 43% | 45% | 58% | 13% |
| Percentage fully upheld | 23% | 27% | 19% | -8% |
| Percentage partially upheld | 21% | 17% | 25% | 8% |
| New Ombudsman cases | 11 | 22 | 10 | -55% |
| Ombudsman cases upheld | 2 | 2 | 6 | 200% |
| Financial consequences | £16,907.52 | £11,171.52 | £1,000.00 | |
| Compliments | 33 | 48 | 47 | -2% |

Complaints under the 1989 Representations Procedure

The numbers of statutory complaints remained largely static.

| | 2018 - 19 | 2019 - 20 | 2020 - 21 |
|--------------|-----------|-----------|-----------|
| Stage 1 | 6 | 6 | 3 |
| Stage 2 | 3 | 1 | 2 |
| Stage 3 | 0 | 0 | 0 |
| Total | 9 | 7 | 5 |

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 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| % | 0% | 0% | 0% | 0% | 0% | 0% | 0% |
| Referral & Assessment, incl. MASH, Atlas & ECT | 18 | 24 | 3 | 9 | 12 | 0 | 10 |
| % | 21% | 22% | 13% | 38% | 50% | 0% | 42% |
| SG&CP East incl. Court Team | 15 | 22 | 4 | 5 | 13 | 0 | 21 |
| % | 17% | 20% | 18% | 23% | 59% | 0% | 95% |
| SG&CP West | 22 | 30 | 3 | 7 | 20 | 0 | 19 |
| % | 26% | 27% | 10% | 23% | 67% | 0% | 63% |
| Children Looked After and Care Leavers | 8 | 10 | 3 | 1 | 6 | 0 | 9 |
| % | 9% | 9% | 30% | 10% | 60% | 0% | 90% |
| Fostering, Adoption and Resources (incl. CWD) | 19 | 19 | 7 | 5 | 7 | 0 | 8 |
| % | 22% | 17% | 37% | 26% | 37% | 0% | 42% |
| Quality Assurance | 4 | 5 | 1 | 0 | 4 | 0 | 5 |
| % | 5% | 5% | 20% | 0% | 80% | 0% | 100% |
| OVERALL | 86 | 110 | 21 | 27 | 62 | 0 | 72 |
| | | | 19% | 25% | 56% | 0% | 65% |

The Children’s Social Care division was the subject of 74 corporate complaints during 2020-21. 65% of individual complaint aspects were responded to on time, contributing to an overall figure of 58% of complaint responses involving Children’s Social Care being responded to in a timely way. 46% of complaints were fully or partially upheld, a 1% increase on last year’s 45%.

Those 74 complaints gave rise to 86 mentions and 110 individual aspects (please refer to the Terminology section).

Nature of complaint and outcome

The majority of complaints (30%) were in relation to quality of service issues of which 60% were at least partly upheld.

| Subject | Aspects this year | Fully upheld | Partially upheld | Not upheld | Ongoing | Answered on time |
|-----------------------------------|-------------------|--------------|------------------|------------|----------|------------------|
| Staff conduct | 32 | 4 | 8 | 20 | 0 | 23 |
| % | 29% | 13% | 25% | 63% | 0% | 72% |
| Disputed decision | 11 | 1 | 1 | 9 | 0 | 8 |
| % | 10% | 9% | 9% | 82% | 0% | 73% |
| Information | 12 | 1 | 3 | 8 | 0 | 7 |
| % | 11% | 8% | 25% | 67% | 0% | 58% |
| Lack of action | 19 | 6 | 3 | 10 | 0 | 11 |
| % | 17% | 32% | 16% | 53% | 0% | 58% |
| Quality of service | 33 | 9 | 11 | 13 | 0 | 21 |
| % | 30% | 27% | 33% | 39% | 0% | 64% |
| Service Delay | 2 | 0 | 0 | 2 | 0 | 2 |
| % | 2% | 0% | 0% | 100% | 0% | 100% |
| Behaviour of another service user | 1 | 0 | 1 | 0 | 0 | 0 |
| % | 1% | 0% | 100% | 0% | 0% | 0% |
| OVERALL | 110 | 21 | 27 | 62 | 0 | 72 |
| | | 19% | 25% | 56% | 0% | 65% |

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 :-

Omg they are truly amazing. I needed their help when my son was diagnosed with ADHD and help with the whole school process. I had a man called G, I couldn't recommend him more, amazing caring man.

The Local Authority have worked tirelessly to ensure that these children's needs are both understood and met. I have been consistently impressed with W's commitment to the children and her willingness to go above and beyond for them both.

From the bottom of my heart I say a VERY BIG THANK YOU to all the social worker DISABLE TEAM who has make this come true because I never dream this can happen soon, you have gone extra mile even out of way, to pick me and my son on the street in an horrible situation and help us find a better life and meaning future, you people did not only show you are Social worker but also a mother who has passionate for children.....I AM delighted and overwhelmed.

I was contacted by J...I found her professionalism and interpersonal skills exceptional, whilst dealing with myself and taking notes going through my personal history she remained her professional at all times and listened to what I had to say. In my opinion that her selfless attitude and kind listening ear was a refreshing change, I have had many dealings with various companies over the phone and J really impressed me in how she conducted the whole process and I hope this is passed to her manager and filtered down to her.

It was lovely to meet you today, thank you for coming along, you were really good with both child and dad, I felt as a team we worked well together, it always makes our job easier when we work with someone who is so approachable and engaging with the families.

I know that you are too modest to accept praises but I am going to say it anyway, it's all down to your determination, kindness ,tenacity, compassion, empathy, enduring sense of fairness, duty and your hard work. You are truly in my eyes what a true public servant should be.

Please don't apologise, really appreciate the information, and the chat with S. You guys are just so amazing. I can't thank you enough for all your help and support!

I just wanted to take this opportunity to feedback what a pleasure it has been working alongside M with this family...M has been nothing but helpful and always replies to any emails promptly which has made my life so much easier. She is always so friendly, approachable and very professional.

Local Government & Social Care Ombudsman cases

The Ombudsman recorded 16 new Children's Social Care referrals during 2020-21. Of the 16 decisions made during this business year, six were upheld.

| Ombudsman outcomes | CLOSED | | | NOT UPHELD | | UPHELD | | | | TOTAL | Ongoing |
|--------------------------------------|----------|-----------------|-----------|------------|---------------|----------|----------------------|------------------------|------------------|-----------|----------|
| | NFA | No jurisdiction | Premature | NFA | No maladmin'n | 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 | 1 | 1 | 1 | 0 | 1 | 0 | 1 | 0 | 1 | 6 | 1 |
| Safeguarding & Care Planning East | 0 | 1 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 2 | 0 |
| Safeguarding & Care Planning West | 1 | 1 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 3 | 0 |
| Children Looked After & Care Leavers | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Fostering Adoption & Resources | 1 | 0 | 0 | 0 | 1 | 0 | 3 | 0 | 0 | 5 | 0 |
| Quality Assurance | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| OVERALL | 3 | 3 | 2 | 0 | 2 | 0 | 5 | 0 | 1 | 16 | 1 |

Financial consequences of complaints

| | 2018 - 19 | 2019 - 20 | 2020 - 21 |
|-----------------------------------|-----------------|------------------|------------------|
| Ombudsman cases | | | |
| Compensation / backdated payments | 2,150.00 | 16,907.52 | £800.00 |
| Charges written off | - | - | £0.00 |
| Time & trouble payments | 400.00 | - | £200.00 |
| Stage 1 complaints | | | |
| Compensation / backdated payments | - | - | £0.00 |
| Charges written off | - | - | £0.00 |
| Time & trouble payments | - | - | £0.00 |
| TOTALS | 2,550.00 | 16,907.52 | £1,000.00 |

06 | HOUSING

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

Housing at a glance

| | 2018 - 19 | 2019 - 2020 | 2020 - 21 | % on prev. year |
|---------------------------------|-----------|-------------|------------------|-----------------|
| Complaints | 118 | 90 | 78 | -13% |
| Percentage responded to on time | 56% | 65% | 72% | 7% |
| Percentage fully upheld | 27% | 18% | 24% | 6% |
| Percentage partially upheld | 17% | 11% | 12% | 1% |
| New Ombudsman cases | 11 | 7 | 6 | -14% |
| Ombudsman cases upheld | 5 | 3 | 4 | 33% |
| Financial consequences | £6,150.00 | £8,000.00 | £6,500.00 | |
| Compliments | 109 | 284 | 108 | -62% |

Housing Complaints under the Council's Corporate Complaints Procedure

The Housing division was the subject of 78 corporate complaints during 2020/21. 63% of individual complaint aspects were responded to on time, contributing to an overall figure of 72% of complaint responses involving Housing being responded to in a timely way. 36% of complaints were fully or partially upheld, a 7% increase on last year's 29%.

Those 78 complaints gave rise to 81 mentions and 93 individual aspects (please refer to the Terminology section).

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

| Service | Mentions this year | Aspects this year | Fully upheld | Partially upheld | Not upheld | Ongoing | Answered on time |
|---------------------------|--------------------|-------------------|--------------|------------------|------------|----------|------------------|
| Housing Allocations | 48 | 57 | 18 | 4 | 34 | 1 | 31 |
| % | 59% | 61% | 32% | 7% | 60% | 2% | 54% |
| Housing Options | 7 | 8 | 2 | 1 | 5 | 0 | 7 |
| % | 9% | 9% | 25% | 13% | 63% | 0% | 88% |
| Housing Register | 5 | 5 | 1 | 0 | 4 | 0 | 4 |
| % | 6% | 5% | 20% | 0% | 80% | 0% | 80% |
| Compliance & Development | 2 | 2 | 0 | 1 | 1 | 0 | 0 |
| % | 2% | 2% | 0% | 50% | 50% | 0% | 0% |
| Management & Acquisitions | 19 | 21 | 1 | 5 | 15 | 0 | 17 |
| % | 23% | 23% | 5% | 24% | 71% | 0% | 81% |
| Support & Resettlement | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| % | 0% | 0% | 0% | 0% | 0% | 0% | 0% |
| OVERALL | 81 | 93 | 22 | 11 | 59 | 1 | 59 |
| | | | 24% | 12% | 63% | 1% | 63% |

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 year | Fully upheld | Partially upheld | Not upheld | Ongoing | Answered on time |
|-----------------------------------|-------------------|--------------|------------------|------------|----------|------------------|
| Staff conduct | 9 | 1 | 1 | 7 | 0 | 8 |
| % | 10% | 11% | 11% | 78% | 0% | 89% |
| Disputed decision | 6 | 0 | 0 | 6 | 0 | 3 |
| % | 6% | 0% | 0% | 100% | 0% | 50% |
| Information | 4 | 2 | 0 | 2 | 0 | 2 |
| % | 4% | 50% | 0% | 50% | 0% | 50% |
| Lack of action | 23 | 5 | 4 | 14 | 0 | 19 |
| % | 25% | 22% | 17% | 61% | 0% | 83% |
| Quality of service | 27 | 11 | 4 | 12 | 0 | 16 |
| % | 29% | 41% | 15% | 44% | 0% | 59% |
| Service Delay | 0 | 0 | 0 | 0 | 0 | 0 |
| % | 0% | 0% | 0% | 0% | 0% | 0% |
| Temporary accommodation | 24 | 3 | 2 | 18 | 1 | 11 |
| % | 26% | 13% | 8% | 75% | 4% | 46% |
| Behaviour of another service user | 0 | 0 | 0 | 0 | 0 | 0 |
| % | 0% | 0% | 0% | 0% | 0% | 0% |
| OVERALL | 93 | 22 | 11 | 59 | 1 | 59 |
| | | 24% | 12% | 63% | 1% | 63% |

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 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.

You have will and power to help everyone who is in need and I wish you would never lose this dedication. You are an absolute golden star.

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.

I understand there are no magic wands amidst the epidemic housing crisis, but it really makes a difference when professionals exhibit positive regard. Being treated as a human being rather than a case number has made a stressful situation a little more bearable.

You calling me and discussing my concerns made a huge difference, knowing someone could actually listen and have a conversation meant a lot. Thank you very much for assisting us with this. Thank you very much for your continuous support.

You have helped me, a lot and thank you for that. Really thank you very much. Maybe it's not a big deal for you , but for me it means a change of life.

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!

Thank you for your efforts, these are much appreciated...as were my previous exchanges with you. You have been very patient and understanding with me and this is really appreciated and is an example that others could learn and benefit from... Thank you ever so much again, your efforts have undoubtedly produced this result, very best wishes

My family and I would like you to know how much we appreciate your kindness, during our period of homelessness. During our hour of need, the kind words and assistance from all, including the security guard, reception staff and the housing solutions team lightened our ordeal.

S has been very supportive to me with my family. She has pushed me to learn English and many other things. I really appreciate her job. She is one in a million. She helps me to know how to communicate with people. She has supported me through all my difficulties. She is an excellent officer. I don't know how to thank you. Especially for you helping me to write and making me learn for myself. I'm so happy to walk with you thanks for accepting me for who I am.

Local Government & Social Care Ombudsman cases

The Ombudsman recorded 12 new Housing referrals during 2020-21. Of the 11 decisions made during the year, 4 were upheld.

| 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 | 1 | 2 | 0 | 0 | 2 | 0 | 0 | 0 | 0 | 5 | 1 |
| Housing Options | 0 | 0 | 0 | 0 | 1 | 0 | 3 | 0 | 0 | 4 | 0 |
| Housing Register | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 1 | 0 |
| Housing Compliance & Strategy | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Housing Management & Acquisitions | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 |
| Housing Support & Resettlement | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| OVERALL | 2 | 2 | 0 | 0 | 3 | 0 | 4 | 0 | 0 | 11 | 1 |

Financial consequences of complaints

| | 2018 - 19 | 2019 - 20 | 2020 - 21 |
|-----------------------------------|-----------------|-----------------|-----------------|
| Ombudsman cases | | | |
| Compensation / backdated payments | 5,150.00 | 5,850.00 | 6,250.00 |
| Charges written off | - | - | - |
| Time & trouble payments | - | 250.00 | - |
| Stage 1 complaints | | | |
| Compensation / backdated payments | 1,000.00 | 1300.00 | 250.00 |
| Charges written off | - | - | - |
| Time & trouble payments | - | - | - |
| TOTALS | 6,150.00 | 7,400.00 | 6,500.00 |

07 | PLANNING & REGENERATION

Complaints in relation to Planning & Regeneration are managed through the corporate complaints procedure. This is the first year that the Customer Engagement & Complaints Service have overseen Planning and Regeneration corporate complaints so no year-on-year comparison data is available.

Planning & Regeneration at a glance

| | 2018 - 19 | 2019 - 2020 | 2020 - 21 | % on prev. year |
|---------------------------------|-----------|-------------|--------------|-----------------|
| Complaints | - | - | 25 | - |
| Percentage responded to on time | - | - | 48% | - |
| Percentage fully upheld | - | - | 15% | - |
| Percentage partially upheld | - | - | 12% | - |
| New Ombudsman cases | 9 | 13 | 10 | -23% |
| Ombudsman cases upheld | 2 | 2 | 1 | -50% |
| Financial consequences | £0.00 | £600.00 | £0.00 | |
| Compliments | - | n/a | 1 | - |

Complaints under the Council's Corporate Complaints Procedure

Planning & Regeneration services were the subject of 25 corporate complaints during 2020-21. 39% of individual complaint aspects were responded to on time, contributing to an overall figure of 55% of complaint responses involving Planning & Regeneration being responded to in a timely way. 27% of complaints were fully or partially upheld.

Those 99 complaints gave rise to 25 mentions and 33 individual aspects (please refer to the Terminology section). The table below sets out the individual complaint aspects for the different services within Planning & Regeneration.

| Service | Mentions this year | Aspects this year | Fully upheld | Partially upheld | Not upheld | Ongoing | Answered on time |
|----------------------------|--------------------|-------------------|--------------|------------------|------------|----------|------------------|
| Development Management | 11 | 15 | 1 | 2 | 12 | 0 | 8 |
| % | 44% | 45% | 7% | 13% | 80% | 0% | 53% |
| Planning Policy & Strategy | 2 | 2 | 0 | 0 | 2 | 0 | 1 |
| % | 8% | 6% | 0% | 0% | 100% | 0% | 50% |
| Building Control | 8 | 8 | 0 | 2 | 6 | 0 | 2 |
| % | 32% | 24% | 0% | 25% | 75% | 0% | 25% |
| Facilities & Support | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| % | 0% | 0% | 0% | 0% | 0% | 0% | 0% |
| Property | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| % | 0% | 0% | 0% | 0% | 0% | 0% | 0% |
| Energy | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| % | 0% | 0% | 0% | 0% | 0% | 0% | 0% |
| Libraries | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| % | 0% | 0% | 0% | 0% | 0% | 0% | 0% |
| Town Centre Renewal | 2 | 3 | 3 | 0 | 0 | 0 | 1 |
| % | 8% | 9% | 100% | 0% | 0% | 0% | 33% |
| Regeneration | 2 | 5 | 1 | 0 | 4 | 0 | 1 |
| % | 8% | 15% | 20% | 0% | 80% | 0% | 20% |
| OVERALL | 25 | 33 | 5 | 4 | 24 | 0 | 13 |
| | | | 15% | 12% | 73% | 0% | 39% |

Nature of complaint

The largest number of complaints (27% each) were concerns about quality of service and information issues. For both aspects, 33% were at least partly upheld.

| Subject | Aspects this year | Fully upheld | Partially upheld | Not upheld | Ongoing | Answered on time |
|-----------------------------------|-------------------|--------------|------------------|------------|----------|------------------|
| Staff conduct | 2 | 0 | 0 | 2 | 0 | 0 |
| % | 6% | 0% | 0% | 100% | 0% | 0% |
| Disputed decision | 8 | 0 | 0 | 8 | 0 | 5 |
| % | 24% | 0% | 0% | 100% | 0% | 63% |
| Information | 9 | 3 | 0 | 6 | 0 | 3 |
| % | 27% | 33% | 0% | 67% | 0% | 33% |
| Lack of action | 4 | 0 | 2 | 2 | 0 | 1 |
| % | 12% | 0% | 50% | 50% | 0% | 25% |
| Quality of service | 9 | 2 | 1 | 6 | 0 | 3 |
| % | 27% | 22% | 11% | 67% | 0% | 33% |
| Service Delay | 1 | 0 | 1 | 0 | 0 | 1 |
| % | 3% | 0% | 100% | 0% | 0% | 100% |
| Behaviour of another service user | 0 | 0 | 0 | 0 | 0 | 0 |
| % | 0% | 0% | 0% | 0% | 0% | 0% |
| OVERALL | 33 | 5 | 4 | 24 | 0 | 13 |
| | | 15% | 12% | 73% | 0% | 39% |

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 :-

(1) Speed of resolving the issue - delays in printing notices/acknowledgement letters - I was very surprised by how quickly the printing letters was addressed. Today, I received a letter within 3 working days which is a dramatic improvement...(2) Also, I want to compliment A for the speed of uploading my application on the Planning Portal, speed addressing my concern about my correspondence being added and for his polite communication, which was very professional, friendly and polite. (3) Also, I also want to compliment J for listening to my concerns, acknowledging the opportunity to still send in our representation and signposting me to raise my concerns about postal delays of notices.

Local Government & Social Care Ombudsman cases

The Ombudsman recorded 11 new Planning & Regeneration referrals during 2020-21. Of the 11 decisions made during the year, one was upheld.

| Ombudsman outcomes | CLOSED | | | NOT UPHELD | | UPHELD | | | | TOTAL | Ongoing |
|----------------------------|----------|-----------------|-----------|------------|---------------|----------|----------------------|------------------------|------------------|-----------|----------|
| | NFA | No jurisdiction | Premature | NFA | No maladmin'h | NFA | Maladmin & Injustice | Maladmin, no injustice | Already remedied | | |
| Development Management | 4 | 0 | 0 | 0 | 1 | 0 | 1 | 0 | 0 | 6 | 1 |
| Planning Policy & Strategy | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Building Control | 2 | 1 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 4 | 0 |
| 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 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Town Centre Renewal | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Regeneration | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 |
| OVERALL | 6 | 1 | 1 | 0 | 2 | 0 | 1 | 0 | 0 | 11 | 2 |

Financial consequences of complaints

| | 2018 - 19 | 2019 - 20 | 2020 - 21 |
|-----------------------------------|-------------|---------------|-------------|
| Ombudsman cases | | | |
| Compensation / backdated payments | - | 300.00 | - |
| Charges written off | - | - | - |
| Time & trouble payments | - | 300.00 | - |
| Stage 1 complaints | | | |
| Compensation / backdated payments | N/K | N/K | - |
| Charges written off | N/K | N/K | - |
| Time & trouble payments | N/K | N/K | - |
| TOTALS | 0.00 | 600.00 | 0.00 |

08 | EDUCATION

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

At a glance

| | 2018 - 19 | 2019 - 2020 | 2020 - 21 | % on prev. year |
|---------------------------------|------------|-------------|--------------|-----------------|
| Complaints | 45 | 38 | 23 | -39% |
| Percentage responded to on time | 44% | 51% | 48% | -3% |
| Percentage fully upheld | 51% | 23% | 15% | -8% |
| Percentage partially upheld | 9% | 35% | 24% | -11% |
| New Ombudsman cases | 7 | 8 | 4 | -50% |
| Ombudsman cases upheld | 4 | 4 | 5 | 25% |
| Financial consequences | £10,604.60 | £5,932.00 | £0.00 | |
| Compliments | 2 | 4 | 22 | 450% |

Complaints under the Council's Corporate Complaints Procedure

The Education division was the subject of 23 corporate complaints during 2020-21. 61% of individual complaint aspects were responded to on time, contributing to an overall figure of 48% of complaint responses involving Education being responded to in a timely way. 39% of complaints were fully or partially upheld, a 16% decrease on last year's 55%.

Those 23 complaints gave rise to 23 mentions and 33 individual aspects (please refer to the Terminology section).

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 | 6 | 8 | 1 | 0 | 7 | 0 | 4 |
| % | 26% | 24% | 13% | 0% | 88% | 0% | 50% |
| Early Years | 1 | 1 | 0 | 0 | 1 | 0 | 1 |
| % | 4% | 3% | 0% | 0% | 100% | 0% | 100% |
| Education Welfare | 3 | 4 | 1 | 0 | 3 | 0 | 2 |
| % | 13% | 12% | 25% | 0% | 75% | 0% | 50% |
| SEN | 8 | 12 | 1 | 5 | 6 | 0 | 7 |
| % | 35% | 36% | 8% | 42% | 50% | 0% | 58% |
| SEN Transport | 5 | 8 | 2 | 3 | 3 | 0 | 6 |
| % | 22% | 24% | 25% | 38% | 38% | 0% | 75% |
| OVERALL | 23 | 33 | 5 | 8 | 20 | 0 | 20 |
| | | | 15% | 24% | 61% | 0% | 61% |

Nature of complaint

The most prevalent complaints (27%) were in relation to information issues a lack of action of which 11% were partly upheld.

| Subject | Aspects this year | Fully upheld | Partially upheld | Not upheld | Ongoing | Answered on time |
|-----------------------------------|-------------------|--------------|------------------|------------|----------|------------------|
| Staff conduct | 5 | 2 | 0 | 3 | 0 | 4 |
| % | 15% | 40% | 0% | 60% | 0% | 80% |
| Disputed decision | 3 | 0 | 1 | 2 | 0 | 2 |
| % | 9% | 0% | 33% | 67% | 0% | 67% |
| Information | 9 | 0 | 1 | 8 | 0 | 5 |
| % | 27% | 0% | 11% | 89% | 0% | 56% |
| Lack of action | 7 | 1 | 2 | 4 | 0 | 5 |
| % | 21% | 14% | 29% | 57% | 0% | 71% |
| Quality of service | 7 | 1 | 4 | 2 | 0 | 3 |
| % | 21% | 14% | 57% | 29% | 0% | 43% |
| Service Delay | 2 | 1 | 0 | 1 | 0 | 1 |
| % | 6% | 50% | 0% | 50% | 0% | 50% |
| Behaviour of another service user | 0 | 0 | 0 | 0 | 0 | 0 |
| % | 0% | 0% | 0% | 0% | 0% | 0% |
| OVERALL | 33 | 5 | 8 | 20 | 0 | 20 |
| | | 15% | 24% | 61% | 0% | 61% |

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 :-

Thank you so much for all your help in the EHCP process, the meeting we had and your help in securing him a place.... It has all been amazing and we are so thrilled for L to be having this amazing and supportive experience of school. With ours, his and everyone else's hard work and patience our hearts are all mending and life can move forward now.

Thank you so much for being so readily available, and for making such a new and overwhelming experience lighter for us all. You have been wonderful and a breath of fresh air

I wanted to thank you both for all your support for Z during what has been, and unfortunately continues to be, a very difficult year for him. As Z has had his first half term I just thought you would like to know that he appears to be happy, making friends and settling in well. Again I cannot thank you all enough for always having Z's best interests at heart and very much appreciate the security you have put in place for him.

The support that we received from E in this situation cannot be praised more highly.... She was always at the end of the phone, was supportive but challenged us where needed, reassured me when there was physically nothing more I could do to make the situation better. I feel lucky that I made that referral as I worry what would have become of all of us in that situation if we hadn't. I don't have pupils or families who need that level of support (or cause me to need it!) at the moment but it is great to know it is there if I should and I am pleased that my colleagues who do need it right now are able to access it... E was amazing- I know to her it may not have seemed much but to me it was a life line

Thank you so much V you have been excellent. I would like to thank you for your prompt responses and your professionalism that has always put K at the centre of everything.

Thanks a lot for your time. It was really helpful, it is always a pleasure to talk to a professional.

We are truly grateful for all you have done for M and for us. We are very pleased about M attending (school) and truly appreciate all your help and support.

Just to let you know I have had positive feedback from the TAs about the new PA... One of the TAs has been giving her copies of some basic signs, including some that the pupils are learning. She is also making some visual resources to support playing some simple games e.g. how many red cars can you see? The PA had taken the initiative to look up some signs on the internet and had asked us for more. Thank you for this. It will really have a positive impact on our pupils, they should arrive happy and ready to learn.

Local Government & Social Care Ombudsman cases

The Ombudsman recorded 8 new Planning & Regeneration referrals during 2020-21. Of the 7 decisions made during the business year, 5 were upheld.

| 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 | 1 | 1 | 0 | 0 | 0 | 0 | 3 | 0 | 1 | 6 | 1 |
| SEN Transport | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 1 | 0 |
| OVERALL | 1 | 1 | 0 | 0 | 0 | 0 | 4 | 0 | 1 | 7 | 1 |

Financial consequences of complaints

| | 2018 - 19 | 2019 - 20 | 2020 - 21 |
|-----------------------------------|------------------|-----------------|-----------------|
| Ombudsman cases | | | |
| Compensation / backdated payments | 10,204.60 | 5,632.00 | 1,400.00 |
| Charges written off | - | - | - |
| Time & trouble payments | 400.00 | 300.00 | 200.00 |
| Stage 1 complaints | | | |
| Compensation / backdated payments | - | - | 2,700.00 |
| Charges written off | - | - | - |
| Time & trouble payments | - | - | - |
| TOTALS | 10,604.60 | 5,932.00 | 4,300.00 |

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

| | 2018 - 19 | 2019 - 2020 | 2020 - 21 | % on prev. year |
|---------------------------------|-----------|-------------|--------------|-----------------|
| Complaints | 66 | 95 | 75 | -21% |
| Percentage responded to on time | 70% | 59% | 52% | -7% |
| Percentage fully upheld | 27% | 25% | 39% | 14% |
| Percentage partially upheld | 23% | 17% | 10% | -7% |
| New Ombudsman cases | 23 | 20 | 9 | -55% |
| Ombudsman cases upheld | 4 | 3 | 2 | -33% |
| Financial consequences | £1,253.00 | £1,454.39 | £0.00 | |
| Compliments | - | - | 12 | - |

Complaints under the Council's Corporate Complaints Procedure

The Chief Executive's Department was the subject of 75 complaints during 2020-21. 61% of individual complaint aspects were responded to on time, contributing to an overall figure of 52% of complaint responses involving the department being responded to in a timely way. 49% of complaints were fully or partially upheld, a 7% decrease on last year's 56%.

Those 75 complaints gave rise to 78 mentions and 97 individual aspects (please refer to the Terminology section).

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 | 1 | 1 | 0 | 0 | 1 | 0 | 1 |
| % | 1% | 1% | 0% | 0% | 100% | 0% | 100% |
| Registrar Services | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| % | 0% | 0% | 0% | 0% | 0% | 0% | 0% |
| Democratic Services | 1 | 1 | 1 | 0 | 0 | 0 | 1 |
| % | 1% | 1% | 100% | 0% | 0% | 0% | 100% |
| Customer Services | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| % | 0% | 0% | 0% | 0% | 0% | 0% | 0% |
| Communications | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| % | 0% | 0% | 0% | 0% | 0% | 0% | 0% |
| Information Management | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| % | 0% | 0% | 0% | 0% | 0% | 0% | 0% |
| Appointeeship | 4 | 5 | 0 | 2 | 3 | 0 | 2 |
| % | 5% | 5% | 0% | 40% | 60% | 0% | 40% |
| Business Rates | 2 | 3 | 3 | 0 | 0 | 0 | 2 |
| % | 3% | 3% | 100% | 0% | 0% | 0% | 67% |
| Care Home Fees | 13 | 19 | 7 | 3 | 9 | 0 | 9 |
| % | 17% | 20% | 37% | 16% | 47% | 0% | 47% |
| Council Tax | 10 | 13 | 5 | 1 | 7 | 0 | 11 |
| % | 13% | 13% | 38% | 8% | 54% | 0% | 85% |
| Direct Payments | 1 | 1 | 0 | 0 | 0 | 1 | 0 |
| % | 1% | 1% | 0% | 0% | 0% | 100% | 0% |
| Domiciliary Care fees | 24 | 30 | 11 | 3 | 14 | 2 | 16 |
| % | 31% | 31% | 37% | 10% | 47% | 7% | 53% |
| Housing Benefit | 12 | 12 | 5 | 0 | 7 | 0 | 9 |
| % | 15% | 12% | 42% | 0% | 58% | 0% | 75% |
| Income & Recovery | 7 | 8 | 4 | 0 | 4 | 0 | 6 |
| % | 9% | 8% | 50% | 0% | 50% | 0% | 75% |
| Freedom Pass | 2 | 3 | 2 | 0 | 1 | 0 | 1 |
| % | 3% | 3% | 67% | 0% | 33% | 0% | 33% |
| Legal | 1 | 1 | 0 | 1 | 0 | 0 | 1 |
| % | 1% | 1% | 0% | 100% | 0% | 0% | 100% |
| OVERALL | 78 | 97 | 38 | 10 | 46 | 3 | 59 |
| | | | 39% | 10% | 47% | 3% | 61% |

Nature of complaint

The majority of complaints were in relation to billing and charging issues (40%), of which 33% were fully upheld and 15% partially upheld.

| Subject | Aspects this year | Fully upheld | Partially upheld | Not upheld | Ongoing | Answered on time |
|--------------------|-------------------|--------------|------------------|------------|----------|------------------|
| Staff conduct | 1 | 0 | 0 | 1 | 0 | 1 |
| % | 1% | 0% | 0% | 100% | 0% | 100% |
| Disputed decision | 4 | 0 | 0 | 4 | 0 | 3 |
| % | 4% | 0% | 0% | 100% | 0% | 75% |
| Information | 7 | 3 | 1 | 2 | 1 | 3 |
| % | 7% | 43% | 14% | 29% | 14% | 43% |
| Lack of action | 14 | 5 | 1 | 8 | 0 | 11 |
| % | 14% | 36% | 7% | 57% | 0% | 79% |
| Quality of service | 28 | 15 | 1 | 12 | 0 | 18 |
| % | 29% | 54% | 4% | 43% | 0% | 64% |
| Service Delay | 4 | 2 | 1 | 1 | 0 | 3 |
| % | 4% | 50% | 25% | 25% | 0% | 75% |
| Billing & Charging | 39 | 13 | 6 | 18 | 2 | 20 |
| % | 40% | 33% | 15% | 46% | 5% | 51% |
| OVERALL | 97 | 38 | 10 | 46 | 3 | 59 |
| | | 39% | 10% | 47% | 3% | 61% |

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 take the opportunity of thanking the London Borough of Bromley for all the financial help they give my wife...without the help of the Council I would not be able to manage so I just want to say a big Thank You.

I would like to bring to your attention outstanding experience from one of your staff dealing with Council Tax. Her name is T, she handled my query very professionally, explained everything, answered all my questions and having consulted her manager came back to me with the answer within half an hour. I can't praise her enough, especially that we are both elderly and vulnerable people.

I am just writing to say that M has been super helpful and kept me updated even with my constant emails asking the same questions over and over again. I imagine during these times it has not been easy for you all especially with all this disruption and extra work load. I just wanted to mention his name as he has been so helpful and I thank him so much.

All of the people we dealt with were brilliant and never before in my life have I dealt with an organisation where everything went so smoothly. Your staff are an absolute credit to you and we would just like to give you our warmest heartfelt thanks for everything you made possible for us in such trying times.

I'd like to thank you and the staff of the Registrar's office for your help in making the day that A became a citizen of the UK a special one. At a time when life is presenting us with problems and obstacles you went out of your way to provide solutions and I appreciate that.

S was very professional. She explained to me the next steps and was very patient with me. I found her incredibly helpful, warm and understanding...Could you please pass this message to her and recognise her - there's not many people who would go out of their way as much as she did for me.

Your staff have been amazing as our original booking was cancelled due to the covid outbreak. We were kept well informed throughout and were extremely happy we could finally go ahead with our special day. The restrictions did not affect our ceremony because M & S made everything feel so special. We thank you all.

I realise that life as a Civil Servant is largely unsung and appreciation for your efforts is normally categorised as 'being part of the job'. I thought I would buck the trend and drop you a line to say thanks to you for your efforts both by phone and email in digging out the relevant entry. You were helpful and cheery which in these troubled times made a refreshing change.

Local Government & Social Care Ombudsman cases

The Ombudsman recorded 11 new referrals concerning the Chief Executive's Department during 2020-21. Of the 9 decisions made during the year, 2 were upheld.

| 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 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Registrar Services | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Democratic Services | 0 | 1 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 2 | 0 |
| Customer Services | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Communications | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 1 | 0 |
| Information Management | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 |
| Appointeeship | 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 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 |
| Council Tax | 1 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 2 | 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 | 1 | 1 | 0 |
| Housing Benefit | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 1 | 0 |
| Appointeeship | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 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 | 2 | 2 | 1 | 0 | 2 | 0 | 1 | 0 | 1 | 9 | 1 |

Financial consequences of complaints

| | 2018 - 19 | 2019 - 20 | 2020 - 21 |
|-----------------------------------|---------------|-----------------|---------------|
| Ombudsman cases | | | |
| Compensation / backdated payments | - | 600.00 | - |
| Charges written off | - | 281.39 | - |
| Time & trouble payments | - | 250.00 | - |
| Stage 1 complaints | | | |
| Compensation / backdated payments | 250.00 | 100.00 | 121.00 |
| Charges written off | 510.30 | 223.00 | - |
| Time & trouble payments | - | 0.00 | - |
| TOTALS | 760.30 | 1,454.39 | 121.00 |

10 | ENVIRONMENT & PUBLIC PROTECTION

Complaints under the Council's Corporate Complaints Procedure

Environment & Public Protection recorded 207 cases as having been handled as corporate complaints during 2020-21.

| Service | 2018 -19 | 2019 - 20 | 2020 – 21 | %age |
|--------------------------------|------------|------------|------------|---------------|
| Highways & Transport | 52 | 22 | 19 | -14% |
| Neighbourhood Management | 164 | 134 | 158 | +13% |
| Public Protection | 45 | 21 | 10 | -52% |
| Traffic, Road Safety & Parking | 84 | 34 | 26 | -24% |
| OVERALL | 384 | 211 | 207 | -0.02% |

Nature of complaint

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

| Service | On time | Information | Lack of action | Operational | Staff conduct | Policy | TOTAL | 2019-20 |
|--------------------------------|--------------|-------------|----------------|-------------|---------------|-----------|------------|------------|
| Highways & Transport | 100% | 0 | 4 | 10 | 1 | 4 | 19 | 22 |
| Neighbourhood Management | 98.5% | 13 | 27 | 84 | 16 | 12 | 152 | 134 |
| Public Protection | 100% | 0 | 3 | 4 | 1 | 2 | 10 | 21 |
| Traffic, Road Safety & Parking | 100% | 0 | 4 | 15 | 0 | 7 | 26 | 34 |
| OVERALL | 99.6% | 13 | 38 | 113 | 18 | 25 | 207 | 211 |

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 :-

Being a women I am always a little apprehensive about visiting the dump, knowing where to park, what to put where etc. However today I visited Churchfields and the men there were very helpful, jolly, polite and were keeping it tidy and organised. A far more pleasant experience than I was expecting.

Please can you pass on my thanks to the team who came to clear up the mess left by the tree that fell in Park Road, Beckenham on 25th September. They turned up promptly on the day it happened, made the area safe and look to have completed the job leaving the area safe and tidy today. This is not the first time this year that the team have had to clear away a fallen tree in Park Road and they did a great job then, too.

I am writing to express my gratitude to one of the officers in the Bromley Council who has been very professional in helping me in a recent noise nuisance caused by a neighbour. I am not sure how this will evolve however the officer has demonstrated an excellent level of duty of care and diligent in carrying out his role and responsibilities. I found him easy to approach and a reliable officer to liaise with. If there are more members of staff like him in all councils and corporates, it will be beneficial to our society.

Just to thank you for your very prompt service following my call to check on my missed food waste collection. Within approx. 30 minutes the container had been emptied with amazing speed and efficiently. Well Done & many thanks.

We – that’s myself and my wife - would like to thank all that were involved on the prompt action you gave us on removing the graffiti from the pavement outside our bungalow. Thank you from both of us.

I would like to thank the street lighting division that so promptly fitted a shield to the street light directly opposite my home. It has greatly reduced the glare into my home which I am extremely grateful for. Please pass this message to the appropriate team. Again many thanks to LBB.

Local Government & Social Care Ombudsman cases

The Ombudsman recorded 17 referrals during 2020-21. Of the 19 decisions made during the year, just 1 was upheld and that required no remedial work.

| Ombudsman outcomes | CLOSED | | | NOT UPHELD | | UPHELD | | | | TOTAL | Ongoing |
|--------------------------|----------|-----------------|-----------|------------|---------------|----------|----------------------|------------------------|------------------|-----------|----------|
| | NFA | No jurisdiction | Premature | NFA | No maladmin'n | NFA | Maladmin & Injustice | Maladmin, no injustice | Already remedied | | |
| Highways & Transport | 4 | 6 | 2 | 0 | 1 | 0 | 0 | 0 | 0 | 13 | 0 |
| Neighbourhood Management | 1 | 0 | 1 | 0 | 2 | 1 | 0 | 0 | 0 | 5 | 0 |
| Public Protection | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 |
| Renewal & Recreation | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| OVERALL | 6 | 6 | 3 | 0 | 3 | 1 | 0 | 0 | 0 | 19 | 0 |

Financial consequences of complaints

| | 2018 - 19 | 2019 - 20 | 2020 - 21 |
|-----------------------------------|-------------|---------------|-------------|
| Ombudsman cases | | | |
| Compensation / backdated payments | - | 300.00 | - |
| Charges written off | - | - | - |
| Time & trouble payments | - | 180.00 | - |
| Stage 1 complaints | | | |
| Compensation / backdated payments | N/K | N/K | - |
| Charges written off | N/K | N/K | - |
| Time & trouble payments | N/K | N/K | - |
| TOTALS | 0.00 | 480.00 | 0.00 |

11 | PUBLIC HEALTH

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



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HEALTH SCRUTINY SUB-COMMITTEE

Minutes of the informal meeting held at 4.00 pm on 13 July 2021

Present:

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

Jaime Walsh, Francis Poltera and Vicki Pryde

Also Present:

Councillor Mike Botting, Executive Assistant for Adult Care
and Health and
Councillor Diane Smith, Portfolio Holder for Adult Care and
Health

1 APOLOGIES

The Chairman welcomed Members to the informal meeting of the Health Scrutiny Sub-Committee, which was held virtually via Webex.

Apologies for absence were received from Councillor Aisha Cuthbert and Marzena Zoladz – Healthwatch Bromley, and Councillor Keith Onslow and Jaime Walsh – Healthwatch Bromley attended as their respective substitutes.

2 PRESENTATION BY THE CHARTWELL CANCER TRUST

This item was deferred to a future meeting of the Health Scrutiny Sub-Committee.

3 UPDATE FROM THE SEL CCG

Councillor David Jefferys declared an interest in item 3b due to his role as Chairman of the Association of British Pharmaceutical Industry's Multimorbidity Action Group, which was working on Long Covid with the National Institute for Health Research.

Dr Angela Bhan, Bromley Borough Director – South East London Clinical Commissioning Group (SEL CCG) ("Bromley Borough Director") informed Members that the presentations (on GP access, Long Covid and vaccinations) provided an overview of how the Bromley team, and wider SEL CCG, had worked to meet the needs that had arisen as a result of the pandemic. It was

noted that a large increase in the number of COVID-19 cases was being seen – the number of hospital admissions had also increased, with more than 20 beds currently being occupied by patients with COVID-19 infections, however none of these patients were in intensive care.

a GP ACCESS

Cheryl Rehal, Acting Head of Primary Care, Bromley – SEL CCG (“Acting Head of Primary Care”) provided an update on GP access in Bromley.

The Acting Head of Primary Care informed Members that there were 43 GP practices across Bromley (one virtual), which sat within one of the eight Primary Care Networks (PCNs). GP access prior to the pandemic had predominately been via face to face appointments (69%) due to other technology not necessarily being available. It was noted that other providers had come into the marketplace offering video consultations and promoting themselves as being highly convenient and accessible for working age adults. This had effectively “cherry picked” patients that were relatively healthy and left GP practices with the most complex and time-intensive patients, which was de-stabilising to General Practice. This had helped to drive change, and an aim of the NHS Long Term Plan was for every patient in England to have the option to access online and video consultations by 2021.

In spring 2020, GP practices had been required to rapidly switch to virtual consultations to protect both patients and staff due to the risks posed by the COVID-19 pandemic. Face to face appointments had been paused wherever possible and GP practices were instead required to operate ‘total triage’, assessing all patients remotely and restricting entry to surgeries for essential in-person care only. Moving through the pandemic, during summer and winter 2020, the focus had been on the restoration of services. Face to face care had been increased – patients were encouraged to seek help for ailments in a timely manner and contact their GP practice for overdue care and screening services. GPs had reported difficulties in reassuring anxious patients that it was safe to visit their surgery, with reluctance being particularly high amongst those who had been shielding and other more vulnerable patients. From spring 2021, General Practice had been “open for business”. The COVID-19 vaccination programme was the main drive and where most of the face to face care had been provided – as the majority of the adult population had now been vaccinated, there would be a multitude of delivery modes by which patients could access clinics. GP surgeries were now expected to permit visits to surgery receptions, and a lower threshold of in-person consultations, where safe to do so.

The Acting Head of Primary Care advised that the most recent data regarding GP access was currently on a South East London (SEL) level, however work was being undertaken to extract data directly from GP surgeries to view at a Bromley level. This included:

- The total appointments in General Practice had risen - across SEL nearly 750,000 appointments were offered in March 2021 compared with 664,000 in March 2020;

- Patients were receiving an appointment sooner - there were 440,000 same day/next day appointments in March 2021 across SEL (60% of total), compared to 350,000 in November 2019;
- Face to face appointments had risen since the original lockdown - in March 2021, 42% of appointments were face to face, compared to just 32% during April-May 2020;
- Home visiting had returned to near pre-pandemic levels - home visits stood at around 3,000 per month across SEL; and
- Online consultations had quadrupled since pre-pandemic levels - around 15,000 e-consults were now submitted to Bromley GP practices every month.

The Acting Head of Primary Care noted that patients had been accessing general practice via total triage. This required every patient contacting the practice to firstly provide some information on the reasons for contact to a member of trained staff, and this was then triaged to decide on the most suitable mode of care delivery, by the appropriate healthcare professional, at the right level of urgency. It was highlighted that around one third of the requests received were admin related, such as details about prescriptions, blood tests or changes to personal circumstances, which did not need to be dealt with by a clinician. This process also allowed urgent items to be flagged for clinicians who could then give patients direct access to a consultation (face to face or virtual) or referral to a specialist, or community pharmacist. The aim of total triage was to ensure that patients received treatment or onward referral in a timely manner.

With regards to online consultations, Members were advised that the highest user groups were those that were employed full time and those that were fully retired. The highest use was by patients living in the areas of Bromley and Beckenham, whilst the lowest usage was in Penge. The most prolific users were the 25 to 64 year-old age cohort and e-consults were mainly submitted at the beginning of the week, with Monday's being the busiest. The Acting Head of Primary Care noted that although the number of online consultations were increasing, it was still unclear if this was reducing the demand on the healthcare system as a whole, as urgent and emergency care was still seeing a significant increase in demand.

In July 2020, a Bromley Patient Survey had been carried out in partnership with Healthwatch. Feedback had reflected that patients' physical and mental health had been affected by: lockdown; delays in seeking help; being unaware that services were open; reluctance to burden the NHS further; being unwilling to visit the surgery; and the preference to wait for face to face contact. As a result primary care was now addressing a build-up of work due to:

- workforce challenges reducing practice capacity;
- increase in demand, both new and accumulated;
- increase in acuity;
- longer waiting lists for acute specialities; and
- a backlog in routine check-ups, screening and immunisations.

The Acting Head of Primary Care highlighted that the pandemic had resulted in a decrease in people accessing NHS services for a range of conditions unrelated to COVID-19. Last summer, the NHS 'Open for Business' campaign sought to give people permission to access NHS services and reassure them that they would not be a burden on the NHS. The GP campaign had been accompanied by explanations about remote triage and consultations, and that face to face appointments were being offered alongside other ways of accessing GP services.

In addition to the feedback provided directly to practices from patients via Friends and Family Test, Patient Participation Groups and ad hoc contacts, there had been efforts locally and nationally to understand people's experiences of accessing General Practice. Whilst some patients wished to return to face to face consultations and felt frustrated that they did not get enough time with their GP's, others were pleased with the remote offer and preferred the new process, and therefore there was a need to provide a balance of both. There was a group of patients considered 'under-served' or otherwise less heard, as well as patients who experience 'digital poverty' or had difficulty conveying their requirements. These patients may not be accessing all the care they required and there needed to be a way to best identify and support digitally excluded patients effectively. Feedback had also been gathered from GP practices in Bromley and it was noted that:

- many GPs and their staff had adopted new ways of working very effectively;
- total triage had been beneficial as a way to keep patients and staff safe;
- most GPs still preferred in-person consultations as a safe, reliable way to provide care but were balancing this alongside rising rates of COVID-19 and potential risks of visitors infecting other vulnerable patients and staff; and
- practices were reporting an increase in the volume of contacts, and an increase in unhappiness amongst patients (who may be frustrated, worried, fatigued, etc.)

To help improve access in General Practice the SEL CCG had identified four areas of focus:

- technology and estates (including investment in digital technology, staff training and improvements to premises);
- workforce (including expanding and retaining the workforce, and proficient triage);
- patient needs (providing a range of appointment options and flexible access); and
- strategic planning (analysis of the demand in Bromley and effective communications).

A Member noted that she had been contacted by several constituents, and highlighted a number of issues that they had raised relating to the Orpington Health and Wellbeing Centre and online triage system. The Acting Head of Primary Care responded that they wanted to ensure that no one was excluded by virtual access. It was highlighted that residents could walk into their GP

surgery and speak with the receptionist – if the practice used the online triage system, the receptionist could assist and support the patient through the process, and this could also be done via the telephone. With regards to what elements may not be detected through the virtual triage system, the Acting Head of Primary Care advised that this was a concern for GP practices. The initial triage of contacts was undertaken by reception teams, and also wider groups such as healthcare assistants, and the general rule was that if they were in any way unsure, the request should be put through. Some practices were using a RAG rating to flag the contacts that they were most unsure about, and those that required urgent attention – the benefit of this was that it ensured they were dealt with in a timely manner. This was reflected in the data, which indicated that more ‘same day’, ‘next day’, and ‘within the next seven days’ appointments were being made available across SEL than there had been previously. It was noted that this was still a learning process for both clinicians and patients. The Acting Head of Primary Care said that around two thirds of the contacts were transferred through to General Practice to be signposted on, and further details could be provided to Members following the meeting.

In response to further questions, the Acting Head of Primary Care advised that telephone calls were the most popular and easiest option for appointments – video consultations were possible, but practices were not using these as frequently. It was noted that there was also the possibility of uploading photos for the clinician to view. The Acting Head of Primary Care advised that patients were entitled to request to be seen by a named doctor, as continuity of care was extremely important, however the wait for an appointment with them may be slightly longer. The Bromley Borough Director noted that people with long-term conditions and the elderly were supposed to have a named GP who had an oversight of their conditions, but this was not a requirement for every individual.

(Post meeting note: Dr Bhan apologises for some inaccurate information given during the meeting, about named GPs, she was quoting from guidance that was not the latest. Current guidance states that all patients should be given a named GP within 20 days of registering with a practice, not just those with long term conditions. Patients should also be told who their named GP is.)

A Member enquired if there was any evidence as to the number of patients directed to the Accident and Emergency department rather than their local practice. The Bromley Borough Director advised that they had some basic data regarding how many people in attendance at Emergency departments had tried to access their GP services first. Current indications were that patients were generally able to see their GP if they wished to do so, but if the appointments given were late on in the day, they were not always convenient for patients. Further work would be undertaken around how, and when, patients could see their GP and it was suggested that an update could be provided to Members at a future meeting of the Sub-Committee. The Bromley Borough Director advised that if a surgery was extremely busy, they could ask a patient to use the 111 system. This system was geared to increasing access

for patients, however when all parts of the system were pressurised with increased requests for consultations, there was difficulty in meeting the needs of everyone.

The Member further questioned if there were any financial sanctions for practices that were underperforming or not complying with instructions. The Acting Head of Primary Care confirmed that there was a contractual process which could be followed if any GP practices were not complying with the directions of their GP contracts. This would initially involve an informal conversation and visit to the surgery; issuing a remedial action notice; and finally they would move to formal contractual action if required.

In response to questions from a Co-opted Member, the Acting Head of Primary Care said that they wanted to educate patients to ensure they were aware of their access options. In SEL, part of this work would look at which patients were accessing primary care services, and how they were doing so – more information would be made available on the different routes, and the wider primary care specialists that patients may be signposted to. With regards to choice around virtual or face to face appointments, this was led by the clinician, but there was also input from the patient.

The Executive Assistant for Adult Care and Health noted that this appeared to be a good system going forward and enquired if this would be prescriptive on GP surgeries. The Acting Head of Primary Care said that they wanted to encourage patients to use online or telephone access routes, but they did not want to prevent them from coming into surgeries if they wished to do so. It was noted that there were 43 practices across Bromley, and some had premises that had been difficult to make COVID secure, but generally they wanted patients to be able to visit their GP reception. It was not prescriptive that surgeries must operate in a specific way, but it was highly recommended – the standard operating procedure for General Practice throughout the pandemic was that they were expected to comply with the guidance to maintain safe and secure operations.

In response to a question from the Chairman, the Acting Head of Primary Care said that if Members received complaints/feedback from constituents she was happy for them to be forwarded on to her confidentially.

b LONG COVID

Mark Cheung, One Bromley Programme Director – SEL CCG (“One Bromley Programme Director”) provided an update on the development of Long Covid services in Bromley.

The One Bromley Programme Director advised that the recovery time for patients that suffered from Long Covid was extremely varied. Although most patients would make a recovery within 12 weeks, sometimes symptoms could last much longer. It was highlighted that the chance of having long-term symptoms was not related to how unwell a patient had been, and Long Covid could also affected those who had been asymptomatic. The National Institute

for Health and Care Excellence (NICE) guidelines defined Long Covid as “signs and symptoms that develop during or after an infection consistent with COVID-19, continue for more than 12 weeks and are not explained by an alternative diagnosis”. It was noted that the CCG were also looking at how to support patients still suffering 4 weeks after the onset of symptoms.

The range of symptoms was extremely varied and included:

- extreme tiredness (fatigue);
- shortness of breath;
- chest pain or tightness;
- problems with memory and concentration ("brain fog");
- difficulty sleeping (insomnia);
- heart palpitations;
- dizziness;
- pins and needles;
- joint pain;
- depression and anxiety;
- tinnitus, earaches;
- feeling sick, diarrhoea, stomach aches, loss of appetite;
- a high temperature, cough, headaches, sore throat, changes to sense of smell or taste; and
- rashes.

The One Bromley Programme Director informed Members that symptoms could be experienced individually or in clusters; could overlap; and could change over time to affect different parts and systems of the body. It was highlighted that learning was still being taken from this, but some studies estimated that around 10% of patients could suffer from Long Covid. As the illness was multifaceted, so were the treatments. This would involve a number of specialties including respiratory; cardiology; neurology services; and several therapies. The One Bromley Programme Director highlighted that one symptom of Long Covid was depression and anxiety which required support from colleagues in Mental Health services. It was essential to have an integrated approach to addressing the support provided to patients via the One Bromley partnership.

The One Bromley Programme Director advised that a post-COVID pathway was being developed in line with recent national guidance, and in conjunction with the other SEL boroughs to ensure there was a consistent offer. The pathway had four different elements, and patients could go back and forth to whichever was the most appropriate:

- GP / primary care (patient identification, assessment and investigation);
- self-management;
- community services; and
- acute services (specialist input, hospital services).

In GP support / primary care, resources and funding were already in place to support identification and assessment of patients, and a referral form and protocols had been developed. The One Bromley Programme Director noted that a condition stipulated was that face to face appointments were required in

order to make a comprehensive assessment. With regards to acute services, a specialist post-COVID syndrome assessment clinic had been established at the PRUH from April 2021 – holistic assessments were undertaken, including respiratory or neurological symptoms to rule out serious underlying conditions, and patients would then be referred on. It was anticipated that a community model would be developed in the coming months, which would receive referrals from GPs, the hospital and other partners. The proposal included the establishment of virtual weekly Multi-disciplinary team meetings, integrated with primary, secondary care and mental health services. Patients would receive a comprehensive holistic assessment which would determine whether they were suitable for self-management; the offer further monitoring and support; or direct face to face interventions. Patients that were suitable for self-management could access the Your COVID Recovery website, which had launched nationally last summer – other platforms were being considered across SEL, and support was also available from the Bromley Well services. The One Bromley Programme Director stressed the importance of continuing to monitor, adapt and record the outcomes of the data that supported this work, and the need to work with partners to share information which would inform how services were developed going forwards.

A Member congratulated the One Bromley Programme Director and his team for the work undertaken in relation to Long Covid services, which was well in advance of what was being seen across many other parts of the country. As highlighted, Long Covid was independent of the severity of infection and it was queried if this message would be used to reinforce the need for people to get their vaccinations. The Bromley Borough Director advised that this message was not being used as much as it could be – they did not want to be too alarmist, and it was noted that they were still trying to understand more about the syndrome. It was not a feature of national, London or SEL communications campaigns, however consideration could be given as to how this message was used. It was further noted that although children may not suffer an illness, they could be subject to Long Covid.

In response to a question, the One Bromley Programme Director said that capacity had been built into the pathway based on 10% of the number of COVID-19 patients, and further details could be provided to Members following the meeting. Data would continue to be monitored and used to scale services up or down as demand required.

A Member noted that the four pathways would put a differential amount of pressure on health services and asked if there was an assumption as to the proportion of patients that would go through each. The One Bromley Programme Director said that this was not currently known, however this was partly due to the way in which the services had been set up. The national priority was to establish the specialist units, whereas in Bromley the thought was to direct patients through the community pathway first, as it could escalate referrals up to acute services. It was noted the patients with Long Covid were being seen via these pathways, and pressures on therapy services were already being reported.

Jonathan Lofthouse, Site Chief Executive – PRUH and South Sites informed Members that the number of NHS staff not functioning in their routine role due to Long Covid was now relatively small and an individual case management issue. With regards to the patient population, there were varying schemes, across both King's and Greater London, including Long Covid clinics and research. It was suggested that further information regarding referrals could be provided to Members following the meeting.

c VACCINATION UPDATE (VERBAL UPDATE)

Dr Angela Bhan, Bromley Borough Director – South East London Clinical Commissioning Group (SEL CCG) informed Members that Bromley, as a whole, was doing extremely well in terms of COVID-19 vaccination uptake. In the 80+ year old cohort uptake stood at over 95% and other age groups were at around 90%. Every care home had been offered vaccinations for residents and staff on several occasions and, following joint efforts, staff uptake had now increased to over 80%. The younger age cohorts (18+) were now being vaccinated – across SEL, 1.2m doses had been administered, 700,000 of which had been in Bromley.

The Bromley Borough Director advised that work was being undertaken to improve the difference in uptake between ethnic groups – the reduction in inequality was only between 2-3% but was heading in the right direction. There had also been door to door delivery of postcards with information on the COVID-19 vaccination programme; vaccination passes had been provided to the homeless and those in emergency accommodation; and information pods were located in The Glades Shopping Centre and Lidl – Burnt Ash Lane. In areas of low uptake, such as Mottingham, Penge, Crystal Palace and Plaistow, Local Authority colleagues had been knocking on doors, and this would now be extended to the Crays and Bromley Common. A satellite clinic was also held regularly at the Keston Mosque.

Work was now underway to look at the delivery of the booster vaccination, which would take place over a 15-week period, from 6th September 2021 to Christmas. A COVID-19 booster vaccination would be provided to the over 50's alongside the flu vaccination. The first stage of the programme would be for those aged over 70 years; those living in older people's care homes; those over 60 years who were immunosuppressed; and frontline health and social care workers. The second stage was for anyone aged over 50 years; those within the 'at risk' groups; and household contacts of those who were immunosuppressed. During this period they would also continue to offer first doses of the vaccine to all those that wanted it, and second doses for the younger cohorts.

The Bromley Borough Director said that there would be a range of options available for delivery of both the COVID-19 booster and flu vaccinations – through GP surgeries, pharmacies and Mass Vaccination Centres. In Bromley, GP's had been asked to deliver between 40-75% of the total vaccination activity, and it was highlighted that there would be a need to ensure that this did not impact on access to General Practice.

The Chairman thanked the Bromley Borough Director, Acting Head of Primary Care and One Bromley Programme Director for their presentations to the Sub-Committee.

4 UPDATE FROM KING'S COLLEGE HOSPITAL NHS FOUNDATION TRUST

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

The Site Chief Executive informed Members that as of that afternoon, there were 22 patients across the PRUH and South Sites with a confirmed inpatient diagnosis of COVID-19. It was highlighted that there had been a 70% growth in the number of inpatients in the last 30 days. In terms of the age range and ethnicity of patients, there did not appear to be any trends, and it was noted that from the following week far more intelligent COVID-19 data and statistics could be shared with health colleagues across the area.

With regards to staff vaccinations, these sat at between 80-83% and, as mentioned previously, healthcare workers would be included in the COVID-19 vaccination booster programme from 6th September 2021. In response to a question, the Site Chief Executive said that the vaccination data provided related to the global number – all staff across the Trust and any sub-contracted staff. When looking at individual professional groups the percentage of uptake was higher. The broad percentage was 80%, but some were as high as 90%, and a breakdown could be provided to Members following the meeting. It was noted that during the COVID-19 vaccination booster programme a further marketing campaign would be undertaken aimed at those staff that were still resistant to come forward.

The Site Chief Executive advised that in terms of the recovery of elective surgeries that had been delayed due to the pandemic, the Trust was currently performing over 96% of these as ‘business as usual’. As per national requirements, the Trust would receive funding for anything over 85% – for the first three months of the year the Trust had secured an additional income level of around £12m. Members were further advised that the Trust were hoping to submit a planning application to the Local Authority within the next 8 weeks for the new Endoscopy unit.

In response to questions from the Chairman, the Site Chief Executive said that some patients had been waiting a very long time for surgery and treatments – some over a year. However, it was highlighted that this cohort of patients had been clinically prioritised and those with the highest level of priority were receiving treatment in a timely manner. With regards to cancer treatment, the Site Chief Executive noted that the PRUH and South Sites were now performing to the national standard across the majority of cancer markers, including 14 days for referral and 62 days for treatment. The two areas of exception were related to specific drug referral and 28-day fast test. It

was agreed that statistics on waiting times and cancer treatment could be circulated to Members following the meeting.

On behalf of the Sub-Committee, the Chairman thanked the Site Chief Executive for attending the meeting and providing an update.

5 UPDATE FROM BROMLEY HEALTHCARE

Jacqui Scott, Chief Executive Officer – Bromley Healthcare (“Chief Executive Officer”) provided an update on the work being undertaken by the organisation. A copy of the presentation is attached to the minutes at Appendix A.

Over the last year, Bromley Healthcare had carried out over 600,000 patient interventions, both virtual and face to face. During the first wave of the pandemic a number of services had been paused or changed, but during the second wave all services had continued. Over 500 laptops had been issued to staff to enable remote working and virtual consultations.

The Chief Executive Officer advised Members that COVID-19 related workforce absences had increased in line with local population increases. As at the 12th July 2021, there were 20 staff absences related to COVID-19: 10 staff were self-isolating; 4 staff had recorded a positive COVID-19 test; and 6 staff were suffering from the effects of Long Covid. There were also around 30 staff who had been risk assessed and were required to work from home. 90% of all staff had received at least one COVID-19 vaccination, however this was lower for BAME staff at 78% and they were continuing to work with the staff groups that had the lowest uptake.

The Bromley Community COVID Monitoring Service (BCMS) provided a 2-hour response to any patients that were COVID-19 positive. Over the last 7 days there had been 25 referrals into the service, which was an increase from 15 in the previous week. The current case load was 8 patients, which was significantly lower than at the peak of the pandemic when there were 200 patients at any one time.

The Chief Executive Officer advised that there were four key quality improvement objectives for 2021/22, as stated in the Bromley Health Care Quality Account:

- Objective 1: Reduction of avoidable acquired pressure ulcers – this was the highest level of reported incidents across the organisation, for which a working group had been established.
- Objective 2: Reduce the number of patients who fall whilst under our care and ensure the appropriate interventions have been completed – the majority of falls happened in people’s homes and were therefore unwitnessed and a working group had also been established.
- Objective 3: To Improve the standard of clinical record keeping – the organisation’s most recent record keeping audit had marked them in

the high 80% but they wanted to improve this further, and a standard had been introduced for all records to be updated within 48 hours.

- Objective 4: Reduce the number of Medicines incidents causing harm.

The Chief Executive Officer highlighted that quality underpinned everything that the organisation undertook and there were a number of areas in which it was monitored:

- Workforce development – a large proportion of the workforce was extremely tired, as they had been working throughout the duration of the pandemic, and Bromley Healthcare were providing them with support. There was also a focus on career pathways and progression, provision of leadership training and internal promotion.
- Datix IQ – this was a system for monitoring feedback across the organisation, which had recently been upgraded to help keep track of all complaints, incidents and positive feedback. The Chief Executive Officer advised that she received a daily email providing an overview of any incidents and a weekly review meeting took place to ensure any necessary action was taken.
- Business intelligence tools – dashboards were used to improve patient safety and patient outcomes, and a series of mock Care Quality Commission (CGC) inspections had been undertaken.

In terms of health and wellbeing, Bromley Healthcare had held a number of initiatives, including a 'Wellbeing Week' where staff took part in yoga, exercise sessions and the 'Big Walk Challenge'. Schwartz Rounds had also been introduced to support the emotional wellbeing of staff, and 16 Mental Health First Aiders had been trained. An Equality and Inclusion Network had also been established and was currently working on a number of different initiatives.

The Chief Executive Officer informed Members that the Bromley 0-19 Public Health Service had been implemented from 1st April and there was now a new website in place. Work was being undertaken to ensure that the KPIs' were at the correct level and a dashboard was being used to monitor this. In collaboration with the PRUH, Bromley Healthcare had also established a new Hospital@Home service for children, which had received very good feedback from both the hospital and the families, and data was provided regarding the potential number of bed days that had been saved.

It was noted that the first standards for Community Services had been introduced the previous year in relation to 2-hour and 2-day response. Bromley Healthcare was part of the SEL accelerator site and both of these targets were being achieved, and one of the key services within this was Bed Based Rehab. Benchmarking data highlighted that patients being admitted had acuity levels similar to patients in other areas, however the patients in Bromley were discharged with a greater level of improvement. There had also been an improvement in the length of stay (LOS) which had reduced by 20% over the previous three financial years.

The Chief Executive Officer advised Bromley Healthcare usually held a staff ball to recognise the work undertaken by colleagues. Due to the COVID-19 pandemic this had not been possible, however awards had been presented to staff at their places of work.

With regards to friends and family patient feedback, the Chief Executive Officer informed Members that the collection of this had been suspended until August 2020, but from September 2020 onwards Bromley Healthcare had stood at between 97-100% on a monthly basis. It was noted that there were challenges within some of the Bromley Healthcare services following the COVID-19 pandemic. The waiting times for some services were much improved as they had taken the opportunity to review how they were delivered, but others had longer waiting times, particularly the wheelchair service. Bromley Healthcare were in the process of recruiting another clinician into the wheelchair service; new premises had been identified; and the use of a local equipment supplier would be implemented. It was hoped that this service would be in a much stronger position in the new year.

The Chairman led Members in thanking Jacqui Scott for her update regarding the work of Bromley Healthcare.

6 UPDATE FROM HEALTHWATCH BROMLEY

Jaime Walsh, Director of Operations for Healthwatch and Engagement Services – Your Voice in Health and Social Care (“Director of Operations”) provided an update to the Sub-Committee regarding the Healthwatch Bromley Quarter 4 Patient Engagement Report.

The Director of Operations informed Members that over 600 reviews had been collated during the Quarter 4 period (January to March 2021). On each occasion, patients gave an overall star rating (1-star to 5-star) and provided free text comments. It was noted that due to the pandemic the feedback for this quarter had been collected through online review platforms, telephone engagement, and direct feedback could also be left via the Healthwatch Bromley website. It was highlighted that the majority of review were 4- or 5-star rated, with 78% of the feedback received being positive. There was a much lower number of negative reviews overall which was a theme that continued to be seen in Bromley, however there had been an increase in 1-star ratings. This was a trend seen since the introduction of online and virtual platforms during the pandemic and this would be monitored once they return to face to face engagement.

During Quarter 4, a number of comments had continued to be received relating to GP and dental services. With regards to the distribution of positive, negative and neutral feedback, GP surgery services had a larger ratio of negative feedback. This was also seen across other Healthwatch areas and was reflective of some of the challenges and issues discussed earlier in the meeting. The Director of Operations highlighted that Children and Young People – SEND services had received a large proportion of negative reviews.

Members noted that it was a concern to see that only 2 out of 36 reviews received for this service had been positive and suggested that this be referred to the Chairman of the Children, Education and Families Policy Development and Scrutiny Committee.

A Member enquired if anything could be done to encourage more younger people to provide feedback on services. The Director of Operations said that during Quarter 4 there had been gaps in the overall monitoring data as a percentage had been gathered from online review platforms and therefore they had not been able to collate all the demographic data. It was considered that this could be looked at over the whole year, and the analysis fed into plans for the current year.

The Chairman thanked Jaime Walsh, Director of Operations for Healthwatch and Engagement Services – Your Voice in Health and Social Care for her update to the Sub-Committee.

7 JOINT HEALTH SCRUTINY COMMITTEE VERBAL UPDATE

Councillor Judi Ellis, Chairman – Our Healthier South East London Joint Health Overview and Scrutiny Committee provided an update from the meeting on 30th June 2021.

Members were advised that the Committee membership consisted of Councillors representatives from the London Boroughs of Bromley, Bexley, Lewisham, Lambeth, Southwark and the Royal Borough of Greenwich. Issues discussed at the meeting had included Integrated Care Services, vaccinations and the recovery of elective surgery across South East London.

With regards to Integrated Care Services, Members had been reassured that the opportunity to scrutinise services, both across London and within individual boroughs, would remain the same. It was noted that Guy's and St Thomas' NHS Foundation Trust were piloting hybrid care – this would provide the opportunity of choice for patients, but that care would be led by clinical necessity.

Discussions had taken place on the progress of the vaccination programmes and the work undertaken regarding pop-up clinics across South East London, as well as how negative reactions to the vaccine and Long Covid were being dealt with.

In relation to the recovery of elective surgeries, Members had been provided with information on the pathways and reallocation of beds following the pandemic. Across SEL, there were 138 patients that had been waiting over one year for operation. These patients were being clinically assessed and brought forward as quickly as possible, with the aim to revert back to an 18-week waiting time. It was highlighted that some of these patients had chosen not to have their operations during the pandemic.

The Chairman – Our Healthier South East London Joint Health Overview and Scrutiny Committee said the meeting had provided the opportunity to look at Bromley in the light of other boroughs. Bromley was performing very well, and thanks were extended to the commissioners and leadership within the borough.

RESOLVED that the update be noted.

8 WORK PROGRAMME 2021/22 AND MATTERS OUTSTANDING

The Chairman informed Members that a request had been received from the SEL CCG to provide an update on Winter Planning at the October 2021 meeting of the Sub-Committee.

The Chairman requested that verbal updates also be presented on GP access, Long Covid and vaccinations. It was considered that Members could provide greater value by feeding back the views they received from constituents, in a structured format which focussed on key themes, and developing further communications with the SEL CCG.

Members were asked to notify the Clerk if there were any further items that they would like added to the work programme.

9 FUTURE MEETING DATES

4.00pm, Thursday 7th October 2021
4.00pm, Thursday 13th January 2022
4.00pm, Wednesday 20th April 2022

The Meeting ended at 6.00 pm

Chairman

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