

NOTICE
OF
MEETING

**ADULT SERVICES AND HEALTH
OVERVIEW AND SCRUTINY PANEL**

will meet on

TUESDAY, 17TH OCTOBER, 2017

At 7.30 pm

in the

ASCOT AND BRAY - TOWN HALL

TO: MEMBERS OF THE ADULT SERVICES AND HEALTH OVERVIEW AND SCRUTINY PANEL

COUNCILLORS MICHAEL AIREY, JUDITH DIMENT, MOHAMMED ILYAS,
JOHN LENTON AND CHARLES HOLLINGSWORTH

SUBSTITUTE MEMBERS

COUNCILLORS GERRY CLARK, DR LILLY EVANS, MARION MILLS, EILEEN QUICK,
LYNDA YONG, MALCOLM BEER, LYNNE JONES AND SIMON WERNER

Karen Shepherd - Democratic Services Manager - Issued: Monday, 9 October 2017

Members of the Press and Public are welcome to attend Part I of this meeting. The agenda is available on the Council's web site at www.rbwm.gov.uk or contact the Panel Administrator **Andy Carswell**

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AGENDA

PART I

<u>ITEM</u>	<u>SUBJECT</u>	<u>PAGE NO</u>
1.	<u>ELECTION OF CHAIRMAN AND VICE CHAIRMAN</u> To elect a Chairman and Vice Chairman for the 2017/18 municipal year.	
2.	<u>APOLOGIES FOR ABSENCE</u> To receive any apologies for absence.	
3.	<u>DECLARATIONS OF INTEREST</u> To receive any declarations of interest.	7 - 8
4.	<u>MINUTES</u> To approve the Part I minutes of the meeting held on May 17 th 2017.	9 - 12
5.	<u>ANNUAL COMPLIMENTS AND COMPLAINTS REPORT</u> To review the report.	13 - 54
6.	<u>UPDATE ON TRANSFER OF ADULT SERVICES TO OPTALIS</u> To note the contents of the report.	55 - 60
7.	<u>UPDATE ON DELIVERY OF BUSINESS PLAN</u> To note the contents of the update report.	To Follow
8.	<u>LOCAL GOVERNMENT ACT 1972 - EXCLUSION OF THE PUBLIC</u> To consider passing the following resolution:- "That under Section 100(A)(4) of the Local Government Act 1972, the public be excluded from the remainder of the meeting whilst discussion takes place on item 9 on the grounds that they involve the likely disclosure of exempt information as defined in Paragraphs 1-7 of part I of Schedule 12A of the Act."	

PART II

<u>ITEM</u>	<u>SUBJECT</u>	<u>PAGE NO</u>
9.	<u>MINUTES</u> To approve the Part II minutes of the meeting held on May 17 th 2017. <i>(Not for publication by virtue of Paragraph 3 of Part 1 of Schedule 12A of the Local Government Act 1972)</i>	61 - 62

MEMBERS' GUIDE TO DECLARING INTERESTS IN MEETINGS

Disclosure at Meetings

If a Member has not disclosed an interest in their Register of Interests, they **must make** the declaration of interest at the beginning of the meeting, or as soon as they are aware that they have a DPI or Prejudicial Interest. If a Member has already disclosed the interest in their Register of Interests they are still required to disclose this in the meeting if it relates to the matter being discussed.

A member with a DPI or Prejudicial Interest **may make representations at the start of the item but must not take part in the discussion or vote at a meeting.** The speaking time allocated for Members to make representations is at the discretion of the Chairman of the meeting. In order to avoid any accusations of taking part in the discussion or vote, after speaking, Members should move away from the panel table to a public area or, if they wish, leave the room. If the interest declared has not been entered on to a Members' Register of Interests, they must notify the Monitoring Officer in writing within the next 28 days following the meeting.

Disclosable Pecuniary Interests (DPIs) (relating to the Member or their partner) include:

- Any employment, office, trade, profession or vocation carried on for profit or gain.
- Any payment or provision of any other financial benefit made in respect of any expenses occurred in carrying out member duties or election expenses.
- Any contract under which goods and services are to be provided/works to be executed which has not been fully discharged.
- Any beneficial interest in land within the area of the relevant authority.
- Any licence to occupy land in the area of the relevant authority for a month or longer.
- Any tenancy where the landlord is the relevant authority, and the tenant is a body in which the relevant person has a beneficial interest.
- Any beneficial interest in securities of a body where:
 - a) that body has a piece of business or land in the area of the relevant authority, and
 - b) either (i) the total nominal value of the securities exceeds £25,000 or one hundredth of the total issued share capital of that body **or** (ii) the total nominal value of the shares of any one class belonging to the relevant person exceeds one hundredth of the total issued share capital of that class.

Any Member who is unsure if their interest falls within any of the above legal definitions should seek advice from the Monitoring Officer in advance of the meeting.

A Member with a DPI should state in the meeting: ***'I declare a Disclosable Pecuniary Interest in item x because xxx. As soon as we come to that item, I will leave the room/ move to the public area for the entire duration of the discussion and not take part in the vote.'***

Or, if making representations on the item: ***'I declare a Disclosable Pecuniary Interest in item x because xxx. As soon as we come to that item, I will make representations, then I will leave the room/ move to the public area for the entire duration of the discussion and not take part in the vote.'***

Prejudicial Interests

Any interest which a reasonable, fair minded and informed member of the public would reasonably believe is so significant that it harms or impairs the Member's ability to judge the public interest in the item, i.e. a Member's decision making is influenced by their interest so that they are not able to impartially consider relevant issues.

A Member with a Prejudicial interest should state in the meeting: ***'I declare a Prejudicial Interest in item x because xxx. As soon as we come to that item, I will leave the room/ move to the public area for the entire duration of the discussion and not take part in the vote.'***

Or, if making representations in the item: ***'I declare a Prejudicial Interest in item x because xxx. As soon as we come to that item, I will make representations, then I will leave the room/ move to the public area for the entire duration of the discussion and not take part in the vote.'***

Personal interests

Any other connection or association which a member of the public may reasonably think may influence a Member when making a decision on council matters.

Members with a Personal Interest should state at the meeting: ***'I wish to declare a Personal Interest in item x because xxx'. As this is a Personal Interest only, I will take part in the discussion and vote on the matter.***

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Agenda Item 4

ADULT SERVICES AND HEALTH OVERVIEW AND SCRUTINY PANEL

WEDNESDAY, 17 MAY 2017

PRESENT: Councillors Mohammed Ilyas (Chairman), Michael Airey (Vice-Chairman), Charles Hollingsworth and Lynne Jones

Also in attendance: Councillor Wisdom Da Costa, Jayne Rigg (Optalis), Jayne Reynolds (Berkshire Healthcare NHS Foundation Trust)

Officers: Andy Carswell, Alan Abrahamson, Alison Alexander and Hilary Hall

APOLOGIES

Apologies for absence were received from Cllrs Diment and Lenton.

DECLARATIONS OF INTEREST

There were no declarations of interest received.

MINUTES

The Minutes of the meeting held on March 16th were agreed as an accurate record.

BERKSHIRE HEALTHCARE NHS FOUNDATION TRUST REVIEW OF QUALITY ACCOUNT

The item was introduced by Jayne Reynolds, Deputy Director of Nursing at Berkshire Healthcare NHS Foundation Trust, who explained that each Trust is legally required to produce a Quality Account each year. She outlined the highlights of the Quality Account to Members.

Jayne Reynolds explained that satisfaction rates amongst patients had generally improved since 2015/16, with the exception being from mental health inpatients. She stated that she believed the lower rates of satisfaction came from patients who had used the Trust's smoking cessation services. She said that the Trust had had challenges in recruiting staff over the last year, particularly in the inpatients area at Prospect Park Hospital. She said that the Trust was currently operating with 20 per cent of posts vacant, although this was down from the previous figure of 35 per cent vacancies. She said that the Trust had managed to successfully retain staff, but was working on ways of improving the recruitment process.

Jayne Reynolds explained that the Trust had scored well across all areas on its most recent CQC inspection in December 2016 and all service areas were now considered compliant. At the previous inspection in 2015 some concerns had been raised in relation to inpatient safety at Prospect Park Hospital, which had been rated as requiring improvement.

Jayne Reynolds stated that the Trust had done particularly well in meeting its targets in relation to patient safety. It was noted that the number of incidents of pressure ulcers due to a lapse in care by the Trust and falls by inpatients was significantly lower than the annual targets that had been set. Jayne Reynolds explained that when an incident of pressure ulcer caused by a lapse in care was recorded, a learning event would also be created in order to improve future actions. The learning event would then be circulated across the whole of the Trust area. Jayne Reynolds stated that although there was no pattern in relation to pressure ulcers, there was an overall downward trend in their numbers. She confirmed that the figures

related to the number of patients with ulcers, rather than the number of individual ulcers recorded.

Jayne Reynolds stated that the Trust had met all of its targets in relation to NICE technology appraisals, and 84 per cent of all NICE guidance. She explained that examples where the Trust did not meet a piece of guidance might be choosing not to implement a particular type of medication due to unaffordability. She stated that the Trust's aim is to see a year on year increase in guidance implementation, rather than setting a target of meeting 100 per cent implementation.

Following a query from Cllr Jones, Jayne Reynolds stated that numbers in relation to incidents of falls in different unit rates and categories of pressure ulcers were fed back to the CCG and numeric figures specific to Royal Borough patients could be made available to Members.

The Chairman asked for more information on the Trust's Zero Suicide Project. Jayne Reynolds explained that crisis plans were created with individuals with mental health problems, whereby triggers to suicidal ideation could be identified and the patient would then know when to get in contact with services, using contact details that they would be supplied with. The patient details would then be uploaded into the Trust's systems. Jayne Reynolds explained that the target was for no suicides within the Trust's area because, while getting the number down was an achievable target, doing so gave the impression that it was considered acceptable for there to be some suicides. She added there had been 22 recorded suicides of patients known to Trust services in 2016/17. She said there had been an initial increase in suicides since the recession and that incidents were decreasing; however, the current numbers were higher than they were four years ago. She said men were more likely to commit suicide than women, and they were more likely to take place in a community setting. Suicides within an inpatient environment were extremely rare.

Cllr Hollingsworth asked if the Trust was confident its IT servers were secure, in light of the hacking of various NHS Trusts the previous week. Jayne Reynolds said the Trust had been unaffected by the hacking and reminders about IT security risks, along with warnings to remain vigilant, had been sent to all staff.

Cllr Jones asked what was being done to improve waiting list times for the CAMHS service. Jayne Reynolds said a transformation project was underway with a specific aim of improving access for youngsters with an autistic spectrum disorder, by creating a pathway that included specialist mental health teams and an out of hours urgent care response unit. She said there was an aim for patients to be seen within 12 weeks. At the moment the average wait within Berkshire was 15-18 months, while the national average was three years. It was hoped a specialist unit for this service could be housed at Prospect Park Hospital. Cllr Jones stated that CAMHS provided a fantastic service for youngsters and asked if there was anything the Panel could do to improve matters and ensure the affected youngsters' schooling did not suffer as a result of waiting for specialist intervention.

The Chairman asked which area needed the biggest prioritisation in terms of learning from complaints. Jayne Reynolds said mental health services had been identified as the area which had the lowest levels of patient satisfaction. She said the Trust was looking to ask patients for feedback on services at a later date, rather than at the point of discharge, which was the current standard practice.

The Chairman thanked Jayne Reynolds for attending the meeting and addressing the Panel.

FINANCIAL UPDATE

The Finance Partner informed Members that there had been a total underspend in the 2016/17 budget of £477,000, or 0.5 per cent of the total budget. There had been a spending of £57,100,000 in the Adult, Children and Health Directorate and an underspend of £12,000. Adult, Children and Health commissioning had seen an overspend of £772,000 on a budget of

£7,124,000, representing 10.8 per cent of the budget. The Finance Partner stated however that much of this figure related to Children's Services and Housing commissioning. There had been a significant underspend of £1,448,000 in the Health and Adult Social Care budget, representing 4.2 per cent of the £34,237,000 budget. Much of this underspend was accounted for in an £887,000 underspend on services for older people and people with a physical disability. The Finance Partner explained the budget for this service area had been set when the Council was experiencing a peak in demand for these services. However demand had reduced in 2016/17 and that level of funding was not required, giving rise to £678,000 of the underspend. The Finance Partner stated that the Council had also benefited from additional income towards the cost of homecare and care provided in nursing homes.

The Finance Partner stated that going forward Members would be provided with finance updates on a quarterly basis, following the transfer of services to Optalis. It was queried why the first quarterly report would not be available until September. The Finance Partner stated that the report was generally put together in July and it was unlikely to be ready for the Panel meeting taking place that month. However he stated that it could be circulated to Members the figures were confirmed.

Following questions from Cllr Jones, the Finance Partner stated that the money from the underspend would be put into the Council's reserves and set aside for use in the relevant budget area.

ADULT SOCIAL CARE INVESTMENT

The Managing Director stated that the need for additional financial resources had been identified in 2015, as the demand for adult social care would continue to increase each year and additional investment would be required in order to help people with complex needs. Additional funding had been acquired through the Adult Social Care Precept. The Managing Director informed Members that an investment of £28.5million over the next three years had been proposed in order to provide a more proactive service for residents. The Managing Director said that some of the funds would be committed to ensuring that salaries of the social care workforce was in line with the national minimum living wage. Areas of high need had been identified and four new social work staff had been recruited to assist.

The Managing Director informed Members that additional work on improving delayed transfers of elderly patients out of hospitals had been identified as a priority. This entailed looking at improving residential or community care as an alternative to hospital treatment, so that patients could be transferred out of hospital in a timely manner. Responding to a question from Cllr Airey, The Managing Director stated that patients would undergo an assessment as early as possible in order to assess their needs and plan for their discharge from hospital. However there was a need to ensure there was the staffing capacity to enable this to happen.

The Managing Director reminded Members that services had successfully been transferred out to Optalis in April, and the Council wished to re-invest into adult social care services. The Managing Director informed Members that the Council had a hospital team based within adult social care.

RESOLVED UNANIMOUSLY: That the report recommendation be agreed.

STOP SMOKING SERVICE UPDATE

The Deputy Director - Strategy and Commissioning reminded Members that the Council had revised the smoking cessation service in 2016 in order to provide a more targeted service for young people, pregnant women and those with mental health issues. The target groups had been agreed at a Task and Finish group. In addition to the three target groups already identified in the contract, the Task and Finish Group agreed to include people suffering from hypertension and/or asthma in order to make the service more effective, and to provide school-based activities in order to encourage younger people to stop smoking. It was noted

that the targeted groups would benefit the most from the changes in the service; however they were felt to be the hardest groups to engage with.

The Deputy Director - Strategy and Commissioning informed Members that the management of the smoking cessation contract would be brought in-house, in order for the Council to retain greater control over contracts and spot interventions for smokers with exceptional circumstances.

The Deputy Director - Strategy and Commissioning said that a report would be brought back to the Panel in six months' time to inform Members on the progress of the service. The Deputy Director - Strategy and Commissioning said that since the meeting of the Task and Finish group new venues for service delivery were being sought; opportunities to deliver service within Health and Social Care models were being sought; plans were being advanced to train drug and alcohol service providers to deliver advice on stopping smoking; and the Council had joined that Berkshire Tobacco Control Alliance.

The Deputy Director - Strategy and Commissioning said that it had been difficult to do a comparison of targets for stopping smoking, but those that had been set were viewed as being realistic and achievable.

Cllr Airey stated his belief that the spot interventions were a good idea and Cllr Jones stated the new service afforded greater flexibility. Members agreed with the next steps that had been proposed and thanked the Officers for their team's efforts.

WAYS INTO WORK ANNUAL UPDATE

The Deputy Director - Strategy and Commissioning reminded Members that Ways into Work had been established in March 2015 as an in-house Council service to provide help for people with disabilities find employment, before becoming an independent social enterprise. Ways into Work met all of its targets during its first two years of operation, which led to the Council agreeing a five year contract to provide services. This led to a decreased financial burden on the Council, although the figures in relation to this were still to be confirmed. The Deputy Director - Strategy and Commissioning informed Members that the majority of clients were staying in employment after Ways into Work had provided them with their initial assistance. The Deputy Director - Strategy and Commissioning said Ways into Work relied upon winning new contracts to receive funding.

Cllr Jones stated her belief that Ways into Work had proved successful due to the consistent level of contact between client and employer.

LOCAL GOVERNMENT ACT 1972 - EXCLUSION OF THE PUBLIC

RESOLVED UNANIMOUSLY: That under Section 100(A)(4) of the Local Government Act 1972, the public be excluded from the remainder of the meeting whilst discussion takes place on item 10 on the grounds that they involve the likely disclosure of exempt information as defined in Paragraphs 1-7 of part I of Schedule 12A of the Act.

The meeting, which began at 7.00 pm, finished at 8.32 pm

CHAIRMAN.....

DATE.....

Royal Borough Windsor & Maidenhead

Compliments and Complaints Annual Report for:

**Formal Corporate Complaints
Statutory Adult Complaints
Statutory Children's Complaints**

1 April 2016 – 31 March 2017

“Building a borough for everyone – where residents and businesses grow, with opportunities for all”

Our vision is underpinned by six priorities:

Healthy, skilled and independent residents

Growing economy, affordable housing

Safe and vibrant communities

Attractive and well-connected borough

An excellent customer experience

Well-managed resources delivering value for money

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- 2 Complaints process and procedures
- 3 National and legislative context
- 4 Summary of complaints activity, quality assurance and learning
- 5 Compliments
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- 7 Operations and Customer Services
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- 9 Children's Services
- 10 Appendices
 - Appendix A: Maps 1-3 of complaints by postcode
 - Appendix B: Analysis of Local Government Ombudsman complaints decisions 2016-17
 - Appendix C: Compliments received by service

Frequently used acronyms

LGO	Local Government Ombudsman
The Council	Royal Borough of Windsor and Maidenhead
ADR	Alternative Dispute Resolution

1. INTRODUCTION

1.1 This annual report covers the period 1 April 2016 – 31 March 2017 and reports on all compliments and complaints made by or on behalf of customers that are investigated under the:

- Formal corporate complaints policy.
- Statutory Adults complaints policy.
- Statutory Children’s complaints policy.

It is not a statutory requirement to produce an annual report for formal corporate complaints, it is for adults and children’s statutory complaints and this combined report will be published on the council’s website.

1.2 The Royal Borough undertakes a huge amount of activity each year and it is expected that the number of complaints made are small in comparison to the business volume transacted on a day to day basis. Whilst the exact volumes made from and to the council is not known, it is known that in 2016-17 the Royal Borough’s activity included:

- Customer Services dealing with 250,000 phone calls, 25,000 emails and 15,000 face to face enquiries and 4,000 customers seeking Housing Options advice.
- Sending 117,500 bills along with 16,000 reminders for non-payment for Council Tax and Business rates to 64,000 domestic properties and 4800 businesses.
- Processing 57,000 items for 7,200 residents in receipt of Housing Benefit or Council Tax Support.
- Assessing 781 people requiring help with care costs.
- Emptying 3 million bins
- 3 million car park visits and issuing 27,000 car parking tickets
- Responding to 3,453 Environmental protection requests including 683 noise complaints.
- Receiving 3,000 contacts to MASH for Children Services
- Supporting children and 66 schools including administering the schools admission and appeals and school transport process.
- 115 children were in care at any one time and 120 children were on a child protection plan.
- Having 754,658 physical visits and 305,976 virtual visits to libraries where 728,063 books and 45,631 Audio-visual were loaned and 43,553 requests for specific items were sourced.
- Working with 62 schools and 9 children centres to promote literacy and reading for pleasure.
- Supporting arts through two art centres, and providing historic information through the museum to 70,000 contacts.
- 300 reports by the community wardens and undertaking 49 community speed watches.
- Around 1,700 adults were receiving long term care and support, 156 people went into long term care, 78 into residential care and 91 into nursing care working with 46 care homes, 15 nursing homes and two day centres.
- 484 Deprivation of Liberty Safeguards assessments received and 1,800 safeguarding concerns and enquiries were investigated.

- 7625 weddings were conducted with 1036 notices of marriage taken
- 423 people attended citizenship ceremonies.
- 850 deaths and 530 births were registered.
- 3,500 planning applications were considered and 650 planning enforcement breaches were investigated.

- 1.3 Complaints are a vital part of the councils overall approach to quality assurance giving valuable feedback on the way in which services are delivered and learning from complaints is important.
- 1.4 The report details the number of compliments and complaints received, the themes of complaints, the council's performance as a whole and by directorate in responding and handling these and how changes have been made to services as a result.
- 1.5 The report has been organised across a number of sections. Section two of the paper provides an overview of the complaints process and procedure as it currently operates. Section three provides an overview of the national policy and legislative context that governs how local authorities manage this area of work. The next section provide and overview of the council's performance of the number of compliments and complaints received in respect of handling, responding, resolving and learning from these. This final sections detail directorate performance and the appendices provides further information.

2 ROYAL BOROUGH COMPLAINTS PROCESS AND PROCEDURES

- 2.1 Complaints made about the Council's services are dealt with under the formal corporate complaints policy. In practice, these are generally focused on services delivered within Corporate and Communities directorate and Operations and Customer directorate because complaints made about adult and children's services are, in the main, dealt with under statutory legislation.
- 2.2 The purpose of any complaints procedure is to ensure that every opportunity for resolution is sought through dialogue or local resolution but where it cannot be agreed; there is an escalation or review process that allows a further mechanism of resolution where appropriate. The exception to this is the statutory adult social care complaints process, which only has one stage. Regardless of which policy a complaint is investigated under, or the outcome, the complainant still has the right to refer their complaint on to the Local Government Ombudsman.
- 2.3 Complaints are made in a number of ways, by email, phone call, letter, face to face or now by logging the complaint online. All complaints received, along with comments and compliments, are recorded electronically, allowing a formal record to enable the monitoring of workflow. This information is used to produce data on the number, types and themes of compliments and complaints and lessons learned.
- 2.4 The Royal Borough's complaints policies are intended for use by service users, customers, residents, businesses and visitors or their chosen representatives, which may include Councillors. Complaints are recorded by directorate, service, theme and postal address.
- 2.5 An important facet of the complaints process is the independence of the complaints team, which for the reporting period 2016-17 sat within Customer Services. Independence from services ensures there are no conflict of interest and enables impartial challenges to be made. The complaints team will meet with complainants at any point in the complaints process.
- 2.6 In October 2016 the formal corporate complaints policy and procedure was reviewed and changed to clearly define what a complaint is and to exclude where there is an alternative route that should be used for dispute resolution or appeal (parking, planning, school admissions) and where we treat a concern as business as usual in the first instance (for example, refuse collection).
- 2.7 The grounds for escalation seeking a review and the number of stages within the process were reduced from three to two stages.

Process April – October 2016

- Stage 1: investigation by Team Manager within 10 working days.
- Stage 2: investigation by Head of Service within 10 working days.
- Stage 3: investigation by Managing Director within 10 working days

Process October 2016 – March 2017

- Stage 1: the complaint: investigation by Head of Service within 10 working days
- Stage 2: the review: investigation by Executive Director within 20 working days

2.8 As a result of the change in stages midway through 2016–17, the information contained in this report covers complaints under both the old and the new formal corporate complaints procedure and policy. Stage 3 no longer exists for formal corporate complaints. There has been no change to the statutory Adult and Children’s policies.

The Local Government Ombudsman

2.9 Regardless of the procedure being followed, once the council’s policies have been exhausted, the complainant can ask for their complaint to be investigated by the Local Government Ombudsman.

2.10 Although customers can refer complaints to the Local Government Ombudsman at any stage, the Ombudsman will not normally investigate until the council have exhausted their complaints procedure.

Quality assurance

2.11 The complaints team carry out sample quality assurance checks of Stage 1 complaint responses to ensure the language and terminology used is easy to understand. This is essential if the complaint is from a child, young person or someone with specific needs. The findings, including key themes and recommendations, are shared with managers.

2.12 Lessons learned and recommendations are captured for continual improvement and often one to one training/advice/meetings are held with staff to offer support and guidance on how best to resolve a complaint raised.

Demographic information

2.13 In order to identify whether all sections of the community are accessing the complaints process, work will be undertaken in 2017-18 to gather and use demographic data, such as race, gender and disability. Providing this data will, however, remain optional, with complainants not being obligated to provide this should they choose not to. Appendix A shows insight via three heat maps of where complaints have been made by postcode.

2.14 Effective complaints management is crucial to allow confidence on the part of complainants to submit complaints with the understanding that the council will take these seriously and respond. Staff will support the complaint processes therefore putting residents first. The council will continue to improve the transparency and efficiency of the complaints process. The online contact platform gives both complainants and officers the ability to track complaints in real time. Information is known on what is being complained about as well as the progress of complaints by a number of different criteria.

2.15 A quarterly report will be presented to senior and departmental management teams to compare performance across the year and monitor lessons learned and new learning points.

3. NATIONAL AND LEGISLATIVE CONTEXT

Formal corporate complaints

- 3.1 The council's formal corporate complaints policy is discretionary and has been developed based on the Local Government Ombudsman's guidance 'Running a complaints system - Guidance on good practice'

Adult services

- 3.2 The council has a statutory duty, under the NHS and Community Care Act 1990, to have in place a complaints procedure for Adult Social Care services and is required to publish an annual report relating to the operations of its complaints procedures.
- 3.3 The Local Authority Social Services and NHS Complaints (England) Regulations 2009 introduced a single approach for dealing with complaints for both the NHS and Adult Social Care, the key principles of which are:
- Listening - establishing the facts and the required outcome
 - Responding - investigate and make a reasoned decision based on the facts/information
 - Improving - using complaints data to improve services and influence/inform the commissioning and business planning process.

Children's services

- 3.4 The statutory Children's Services complaints process changed in September 2006 following new regulations and guidance, 'Getting the Best from Complaints'. The guidance emphasises that "vulnerable children and young people must get the help they need, when they need it, however large or small their complaint". The scope of what can be complained about was also expanded and prospective adopters and foster carers are included as 'qualifying individuals' who can complain under the social care process.
- 3.5 Qualifying individuals are defined in national guidance as the child or young person, their parent, carer or foster carer or 'anyone who could be seen to be acting in the best interests of the child.'
- 3.6 Under the regulations, the council is required to produce and publish an annual report.

4 SUMMARY OF COMPLAINTS ACTIVITY, QUALITY ASSURANCE AND LEARNING

- 4.1 Many factors affect the level or number of complaints received, such as customer satisfaction, access to and awareness of the complaints process; the extent of promotional activity to raise awareness; outreach work and so on. Therefore a high level of complaints cannot be simply interpreted as negative, nor conversely does a low level of complaints necessarily reflect a strong service area and high satisfaction.

4.2 The council is a unitary authority delivering all services to residents; in addition there are around 7,000 visitors a year to the borough. There are many interactions across the council by phone, email, digital contact, letter and face to face for example the customer service centre alone received 251,377 calls during 2016-17 which averaged 1,000 calls, and 100-150 digital contacts a day. In addition services are delivered directly to residents by team services where direct contact is made, refer to 1.2.

Complaints activity

4.3 In 2016-17, the complaints team received 1,089 contacts from residents and visitors. 804 were accepted as complaints but two did not progress to investigation, so the analysis for 2016-17 is based on 802 complaints, representing an increase of 35% on 2015-16.

4.4 One reason for the increase is likely to be as a result of improved recording of complaints with all complaints sent to the complaints team for recording, liaising and monitoring with a view for improving services. In addition there is a greater awareness of the complaints process and ease of access.

4.5 Of the 802 complaints received, 62 were withdrawn after the investigation started either because further information was requested but not received or because the customer no longer wished to complain. All but 100 of these complaints were dealt with under the formal corporate complaints process, compared with 460 in the previous year.

4.6 Of the 702, 527 were in Operations and Customer Services, primarily in relation to waste and recycling, parking enforcement, customer services and council tax and benefits and 175 in Corporate and Community Services, primarily in relation to planning, planning enforcement and trees. For both directorates, this reflects an increase in activity on the previous year, 320 and 140 respectively.

4.7 The remaining 100 complaints were dealt with under the statutory complaints procedures for adults, 42, and for children, 58. In both service areas, the number of complaints has reduced from the previous year, from 44 and 88 respectively.

4.8 The top five themes of all complaints, totalling 65% of complaints received remain the same as 2015-16, namely:

- Situation handled incorrectly.
- Services delivered at a lower standard than in our policy.
- Attitude or behaviour of staff.
- Unhappy with the decision made.
- Lack of action – did not do what we said we would.

4.9 Despite the overall increase in the number of complaints received, 2016-17 saw a more timely response to complaints in timescale, the new online system may have attributed to this. In 2015-16, just under half of the complaints were responded to in timescale; in 2016-17, this rose to 63%. The improvement was most notable in the Operations and Customer Services directorate where there was a 97% improvement in responsiveness.

- 4.10 55% of all complaints in 2016-17 were either fully or partially upheld compared to 38% in 2015-16. This may be due to the introduction of the ‘partially upheld’ category in 2016-17 to capture if any element of a complaint is upheld rather than a flat not upheld or upheld.

Themes

- 4.11 Themes of complaints are captured to allow comparisons and improvements to be made. Table 1 compares themes of complaints received in 2015-16 and 2016-17 and the percentage that each theme equates to each year, and the overall percentage change. In 2016-17 the top five themes were the same five as 2015-16 with the greatest theme being ‘situation handled incorrectly’ increasing by 7% from 11% in 2015-16 to 18%. Examples of this theme are:
- Corporate and communities: non-determination of a planning application – upheld in terms of delay but not in terms of communication from the planning team.
 - Corporate and communities: residents were assured that planned roadworks by a utilities company would not affect access to their properties by residents or by refuse collectors. This did not happen and access was intermittent over a period of five weeks.
 - Operations and customer services: Car park coin change machine not working. Sainsbury’s, said they’re not responsible, but that the machine had been out of service for some time. Each time they had put a notice on the machine that it was out of order, the notice was taken off.
 - Adult: poor handover for a resident moving to a different local authority, resulting in a delay of services received.
 - Children’s: poor communication following a child protection enquiry and a delay in restarting contact.
- 4.12 The second highest theme was ‘services delivered at a lower standard than published’; this has been reduced by 8% to 15% from 23%. Table 2 provides the complaint themes received by directorates.

Table 1: Themes of complaints and percentage change

Themes	2015-16		2016-17		% change overall
	Number	%	Number	%	
Situation handled incorrectly	65	11	144	18	+7
Services delivered at a lower standard than in our policy	136	23	117	15	-8
Attitude or behaviour of staff	67	11	89	11	0
Unhappy with the decision made	86	14	88	11	-3
Lack of action – did not do what we said we would	40	7	84	10	+3
Failed to follow timescales	33	6	58	7	+1
Multiple	22	4	58	7	+3
Failed to respond at all	52	9	44	5	-4
Did not follow policy	12	2	32	4	+2
Gave the wrong information	13	2	24	3	+1

Themes	2015-16		2016-17		% change overall
	Number	%	Number	%	
Failed to take all information into account	7	1	13	2	+1
Inaccurate information recorded on file	8	1	13	2	+1
Did not answer all questions	5	1	7	1	-
Malice/bias	3	1	7	1	-
Objecting/ disagreeing against an actual policy	22	4	7	1	-3
Data protection	7	1	6	1	-
Safeguarding	7	1	5	1	-
Unknown	0	0	5	1	+1
Not kept informed	11	2	1	0	-2
Failed to advise correctly on appeal or next steps	1	0	0	0	-
Total	597	100	802	100	

Table 2: Themes of complaints received by directorate

Themes	Adults	Children	Corporate	Operations	Totals
Attitude or behaviour of staff	7	14	3	64	89
Data protection	0	0	3	3	6
Did not answer all questions	0	0	5	2	7
Did not follow policy	2	4	6	20	32
Failed to follow timescales	1	3	22	32	58
Failed to respond at all	0	2	20	22	44
Failed to take all information into account	2	2	3	6	13
Gave the wrong information	2	1	0	21	24
Inaccurate information recorded on file	0	3	1	9	13
Lack of action – did not do what we said we would	3	3	20	58	84
Malice/bias	2	2	1	2	7
Multiple (complaints about more than one theme or service)	4	8	15	31	58
Not kept informed	1	0	0	0	1
Objecting/ disagreeing against an actual policy	0	2	1	4	7
Safeguarding	1	2	0	2	5

Themes	Adults	Children	Corporate	Operations	Totals
Services delivered at a lower standard than in our policy	6	3	18	90	117
Situation handled incorrectly	4	5	37	98	144
Unhappy with the decision made	5	4	19	60	88
Unknown	1	0	1	3	5
	42	58	175	527	802

Timescales

- 4.13 Each stage of the three individual complaint processes have indicative response times varying from 10 to 20 working days. It can be extended or alternative timeframes agreed from the outset with the complainant. 16% more complaints were responded to within the timeframes agreed compared to 2015-16, see table 3 for overall response rate and table 4 for response rate by directorate. In November 2016 senior managers and service managers underwent training by the Local Government Ombudsman and in December 2016 the online complaints system was launched sending automatic reminders as deadline dates approach. All these factors are contributing to the increase in responsiveness.

Table 3: Percentage of all complaints responded to within timescales.

	Number of complaints	Number in timescales	% in timescales
2015-16	592	277	47%
2016-17	802	502	63%

Table 4: Response times by directorate

	2015-16 %	2016-17 %	Improvement %
Corporate and Communities	31	50	61% improvement in responding to on time
Operations and Customer Services	32	63	97% improvement
Adult	62	71	15% improvement
Children's	43	62	47% improvement

Decisions

- 4.14 As complaints responses are captured, the decision upheld, partially upheld, or not upheld is recorded, see table 5. 55% of all complaints received were either fully or partially upheld with the directorate position ranging from 47% in Children's to 61% in Operation and Customer Services. It is essential that services do not repeat mistakes and make changes as a result from learning captured and root cause analysis. See table 6 for learning in 2016-17.

Table 5: Outcome of complaints

	Fully upheld	Partially upheld	Not upheld	Withdrawn	Not yet concluded	Not a complaint under the complaints policy	% Partially or fully upheld
Corporate and Communities	31	42	66	9	15	13	55%
Operations and Customer Services	208	111	111	31	35	30	61%
Adult	10	10	14	5	3	0	48%
Children's	10	22	8	17	1	0	47%
Totals	259	185	199	62	54*	43	55%

*It should be noted that the 'not yet concluded' is likely to mean that the complaints team are waiting for the response to update the records rather than the complaint being outstanding.

Local Government Ombudsman

4.15 The Local Government Ombudsman received 54 complaints and enquiries about the Royal Borough in 2016-17, it must be remembered that some of these complaints would have been dealt with by the council in 2015-16 rather than 2016-17. 48 decisions have been made by the Ombudsman and these are:

- 20 were referred back to the Royal Borough as they had not been through the complaints process
- 3 were deemed 'incomplete or invalid' and were not investigated
- 12 were closed after initial enquires where they would have asked the council for details and evidence.
- 7 were investigated and not upheld, this was the same in 2015-16.
- 6 were investigated and upheld, this was 2 more than 2015-16. See appendix B, tables 32 and 33 for full details of decisions as per the 2016-17 Local Government Ombudsman annual letter on cases upheld and not upheld.

Learning and improvements from complaints

4.16 Understanding why complaints are made, establishing root causes, changing process and delivering training as a result is essential. Listening to customers and reflecting on examples of where we have not got it right can reveal or highlight opportunities for improvement and increase satisfaction. The speed of response is key particularly if the complaint stems from a timeliness related issue. See table 6 for specific learning by directorate in 2016-17. Even if a complaint is not upheld there can be learning from that complaint with improvements arising as a result. The complaints process and the feedback gained is an integral part of the quality assurance process, which feeds into the development and monitoring of services. Learning from complaints is reviewed by services at team meetings.

4.17 Effective recording, monitoring and evaluating of complaints enables the council to also celebrate good practice, and commend positive service delivery and implementation. Learning from best practice is sought by the local

authority and disseminated to other service areas through the complaints team.

Table 6: Specific learning from complaints

Directorate	Actions and learning as a result of complaints made
Corporate and Communities	<ul style="list-style-type: none"> • An increase in permanent planning staff. • Staff updated on complaint outcomes. • Processes changed in response to complaints.
Operations and Customer Services	<ul style="list-style-type: none"> • Standard letter templates reviewed. • Formal call back system introduced so there is visibility of customer call backs and timescales. • Meetings with contractors to discuss customer complaints. • Implementation of online 'My Account' so residents can be kept up to date on progress on cases they raise online themselves. • Training and improved communications for and with Customer Services. • Training for parking enforcement staff on how to handle difficult situations and how to deal with people who may be cross.
Adult services	<ul style="list-style-type: none"> • Improvements made in communications between teams and residents they are working with. • Assessments monitored to ensure carried out in a timely manner to prevent over or under payments from occurring. • Data protection training to ensure checks are made regarding capacity to deal with and check about adult children.
Children's Services	<ul style="list-style-type: none"> • Refresher training for data protection. • Awareness and impact training on communicating key facts effectively to parents working with Children's Services. • Policy change to contact families within three days when new allocation made. • Raised awareness on assumptions not made when first meeting young people about what they want to discuss, and to "check-in" directly with the young person to ensure that they are comfortable throughout. • Maintain continuity of social workers involved in a case as far as possible. • Improved communications between children, young people, parents and professionals including in a timely way. • Share reports, information and outcomes of assessments in a timely manner. • Reminder for full consultation with all significant family members including non-resident fathers when undertaking a child and family assessment.

Directorate	Actions and learning as a result of complaints made
	<ul style="list-style-type: none"> • Check that outcomes and proposed next steps are understood by families working with the service. • Training to see things from the user's perspective for a greater understanding. • Effective dialogue even when there is dispute including standing firm when necessary and communicating this effectively.

5 COMPLIMENTS

5.1 Whilst the council gets things wrong it does also provide excellent service and our staff often go the extra mile. It is essential that positive feedback is also captured and shared. Compliments that are forwarded to the complaints team are logged centrally and in 2016-17 there were 192 compliments recorded for teams or individuals across the council, see table 7 and appendix C for more detail. Compliments received are fed back to the relevant service areas to ensure that due recognition is given to staff and that learning is shared and disseminated across the directorate.

Table 7: Compliments received by directorate

	2015-16	2016-17	% Change
Corporate and Communities	1	1	-
Operations and Customer Services	67	100	+49
Adult	44	35	-20
Children's	19	56	+194
Totals	131	192	+47

5.2 It is unclear if the split of compliments recorded across directorates is a true reflection of compliments received within services. It is possible that the variance between teams constitutes an under-reporting of compliments in some areas. Improving reporting of compliments is a priority and more is being done to raise awareness and encourage self-reporting.

6 CORPORATE AND COMMUNITY SERVICES

6.1 Summary

- 161 stage 1 complaints were received for Corporate and Community services. This represents 20% of the total number of council complaints received.
- 70% of complaints received fall into the top five themes
 - Situation handled incorrectly
 - Failed to follow timescales
 - Failed to respond at all
 - Lack of action – did not do what we said we would
 - Services delivered at a lower standard than in our policy, this was the highest in 2015-16.
- 61% of complaints relate to Planning and 16% Trees,
- 50 % were responded to within timeframes compared to 31% in 2015-16.
- 55% of complaints were either fully or partially upheld.
- 11 complaints were made to the Local Government Ombudsman, 4 were investigated 2 were upheld and 2 not upheld. See appendix B, tables 32 and 33 for details.
- 1 compliment was received, the same as in 2015-16. This was for the living advent calendar managed by Town Centre Management.

6.2 Corporate and Community services saw an overall increase of 35 (25%) in complaints received with an increase of 30% at stage 1, and 30% decrease at stage 2. One extra stage 3 complaint was received, totalling 7. Table 8 details the complaints received by stage and the percentage change from 2015-16 and 2016-17.

Table 8: Corporate and Community Services complaints overview by stage

Corporate and Community Services	2015–16	2016–17	Percentage change
Stage 1	124	161	+30%
Stage 2	10	7	-30%
Stage 3 (ceased from 1 October 2017 when policy updated)	6	7	+17%
Totals	140	175	+25%

6.3 Table 9 details the number of stage 1 complaints received by themes and the percentage make up of each theme.

Table 9: Corporate and Community Services stage 1 complaints received by themes during 2016-17

Type of Complaint	Number	percentage of total complaints
Situation handled incorrectly	32	20%
Failed to follow timescales	22	14%

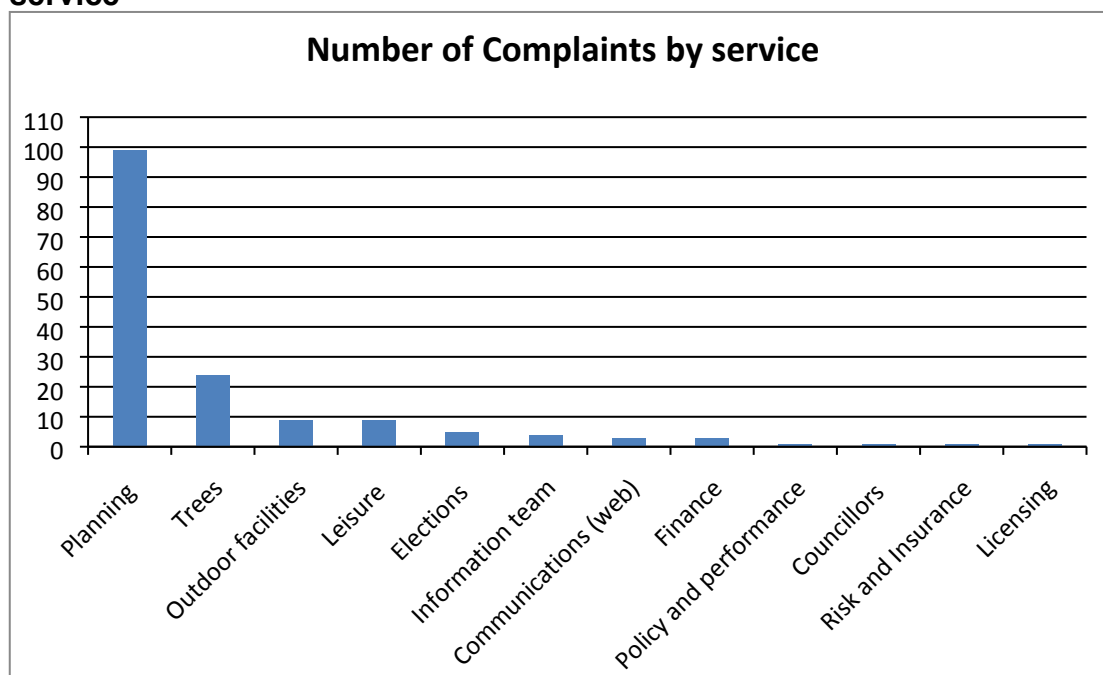
Type of Complaint	Number	percentage of total complaints
Failed to respond at all	20	12%
Lack of action – did not do what we said we would	20	12%
Services delivered at a lower standard than in our policy	18	10%
Unhappy with the decision made	16	9%
Multiple	14	9%
Did not follow policy	6	4%
Attitude or behaviour of staff	3	2%
Data protection	3	2%
Failed to take all information into account	2	1%
Inaccurate information recorded on file	1	1%
Malice/bias	1	1%
Did not answer all questions	1	1%
Objecting/ disagreeing against an actual policy	1	1%
Unknown	1	1%
Safeguarding	0	0%
Not kept informed	0	0%
Gave the wrong information	0	0%
Total	161	100 %

- Complaints received by services**
- 6.4 Of the 161 complaints received 77% (124) were related to Planning (99) and Trees (25). Table 10 and chart 1 details the complaints received by all services within the directorate.

Table 10: Corporate and Community Services – number of stage 1 complaints received by service

Teams	Number of Complaints	Percentage
Planning	99	61 %
Trees	25	16 %
Outdoor facilities	9	5 %
Leisure	9	5 %
Elections	5	3 %
Information team	4	2 %
Communications (web)	3	2 %
Finance	3	2 %
Policy and performance	1	1 %
Councillors	1	1 %
Risk and Insurance	1	1 %
Licensing	1	1 %
Total	161	100 %

Chart 1: Community and Corporate Services stage 1 complaints by service



Planning

- 6.5 The highest number of complaints, 99 (61%) received in Corporate and Communities directorate was in relation to planning and planning enforcement which is not a surprise given the nature of the work (approx. 3,000 planning applications and 650 enforcement investigations). Trees were the second highest with 25 (16%)
- 6.6 Complaints for planning are often complex and involve detailed investigation; there has been an improvement in updating complainants on the progress of their complaint which can be attributed to the new system. 66 of the 99 planning complaints fall into three main areas:
- 28% Unhappy with decision made.
 - 27% relate to responding in timeframes or not at all.
 - 11% did not think the situation was handled correctly.
- 6.7 37% of complaints were upheld and 46% of those upheld were related to the timeliness of responses/decisions.
- 6.8 9 complaints were made to the Local Government Ombudsman, 4 were investigated; 2 were upheld and 2 not upheld.
- 6.9 No compliments were recorded for planning during 2016-17.
- 6.10 In October 2016 the formal corporate complaints policy was changed to specifically exclude planning objections or dissatisfaction with a decision taken which could be challenged through formal appeal processes. For the first six months of 2016-17 76 planning complaints were accepted compared to 36 in the last six months, 17 were not accepted as complaints. Table 11 details planning complaints by themes

Table 11: Planning complaints by theme

Themes	Totals	Percentage
Unhappy with the decision made	28	28%
Failed to respond at all	15	15%
Failed to follow timescales	12	12%
Situation handled incorrectly	11	11%
Lack of action – did not do what we said we would	9	9%
Multiple	8	8%
Did not follow policy	6	6%
Services delivered at a lower standard than in our policy	5	5%
Failed to take all information into account	2	2%
Data protection	1	1%
Did not answer all questions	1	1%
Objecting/ disagreeing against an actual policy	1	1%
Total	99	100%

6.11 37% (37) of planning complaints were fully or partially upheld, this is lower than the overall council average which is 55% See table 12 for details on themes upheld. 46% upheld relate directly to timeframes.

6.12 **Table 12: Planning complaints upheld by theme.**

Themes	Totals	Percentage
Failed to respond at all	9	24%
Failed to follow timescales	8	22%
Situation handled incorrectly	4	11%
Multiple	4	11%
Unhappy with the decision made	3	8%
Did not follow policy	3	8%
Services delivered at a lower standard than in our policy	3	8%
Lack of action – did not do what we said we would	2	5%
Objecting/ disagreeing against an actual policy	1	3%
Total	37	100%

Trees

6.13 The second highest number of complaints received in Corporate and Communities was in relation to trees, these 25 complaints equated to 16% of the total. In the main they were regarding why something was or was not cut, and failure to respond about these questions.

6.14 25 complaints fall into two main areas:

- 29% Lack of action – did not do what we said we would
- 42% relate to responding in timeframes or not at all

6.15 52% (13) of complaints were upheld and 31% (4) related to 'not doing what we said we would do' and 54% of these were in related to the timeliness of responses/decisions.

6.16 No complaints were made to the Local Government Ombudsman.

- 6.17 No compliments were recorded.
- 6.18 Table 13 details the tree complaints received by themes

Table 13: Trees complaints by themes

Themes	Totals	Percentage
Lack of action – did not do what we said we would	8	29%
Failed to follow timescales	6	25%
Failed to respond at all	4	17%
Unhappy with the decision made	3	13%
Multiple	2	8%
Attitude or behaviour of staff	1	4%
Services delivered at a lower standard than in our policy	1	4%
Total	25	100%

- 6.19 84% (13) of complaints upheld fall into three categories; not doing what we said we would and timeliness related. Table 14 details the tree complaints received by decision made.

Table 14: Tree complaints fully or partially upheld

Themes	Totals	Percentage
Lack of action – did not do what we said we would	4	31%
Failed to respond at all	4	31%
Failed to follow timescales	3	23%
Multiple	1	8%
Attitude or behaviour of staff	1	8%
Total	13	100%

- 6.20 Overall across the Corporate and Communities directorate 50% (80) of complaints were responded to within timescales and 50% (81) not. Whilst there have been improvements all round on the response times half that were out of time were planning or planning enforcement, 54 (67%), and 13 (16%) were about trees totalling 67 out of 81. 40% (27) of those late were complaints around timescales not being followed, either in terms of breaching policy or to do with of a lack of response to an enquiry.
- 6.22 11 complaints were made to the Local Government Ombudsman, four were investigated, two were upheld and two not upheld. There were no recommendations were made. 11 were also made in 2015-16.

7 OPERATIONS AND CUSTOMER SERVICES

7.1 Summary

- 513 complaints were received for Operations and Customer Services. This represents 64% of the total number of council complaints received.
- 70% of complaints received fall into the top five themes
 - Situation handled incorrectly
 - Services delivered at a lower standard than in our policy, this was the highest in 2015-16
 - Attitude or behaviour of staff
 - Lack of action – did not do what we said we would
 - Unhappy with the decision made
- 23% of complaints relate to Waste and Recycling and 20% Parking Enforcement.
- 63 % were responded to within agreed timeframes compared to 32% in 2015-16.
- 61% of complaints were either fully or partially upheld.
- 20 complaints were referred to the Local Government Ombudsman, 4 were investigated. 2 were upheld with recommendations of an apology and financial redress, 2 were not upheld. See appendix B tables 32 and 33 for details.
- 100 compliments were received, an increase from 67 in 2015-16.

7.2 Operations and Customer services saw the biggest increase of 64% in complaints received. Stage 1 increased by 65% (202) and a 50% (4) increase at Stage 2. One extra (total 2) stage 3 complaint was received than in 2015-16. Table 15 details complaints received by stage, the percentage change from 2015-16 to 2016-17.

Table 15: Operations and Customer Services overview

Operations and Customer Services	2015 – 2016	2016 – 2017	Percentage change
Stage 1	311	513	+65%
Stage 2	8	12	+50%
Stage 3 (ceased from 1 October 2017)	1	2	+100%
Totals	320	527	+64%

7.3 Table 16 shows complaints for Operations and Customer Services by themes and the percentage make up of each theme.

Table 16: Themes of stage 1 for Operations and Customer Services complaints received during 2016-17

Type of Complaint	Number	Percentage
Situation handled incorrectly	96	19%
Services delivered at a lower standard than in our policy	87	17%

Type of Complaint	Number	Percentage
Attitude or behaviour of staff	63	12%
Lack of action – did not do what we said we would	58	11%
Unhappy with the decision made	58	11%
Failed to follow timescales	32	6%
Multiple	29	6%
Failed to respond at all	21	4%
Gave the wrong information	21	4%
Did not follow policy	19	4%
Inaccurate information recorded on file	9	2%
Failed to take all information into account	6	1%
Data protection	3	1%
Objecting/ disagreeing against an actual policy	4	1%
Unknown	3	1%
Malice/bias	2	0%
Safeguarding	2	0%
Did not answer all questions	0	0%
Not kept informed	0	0%
Total	513	100%

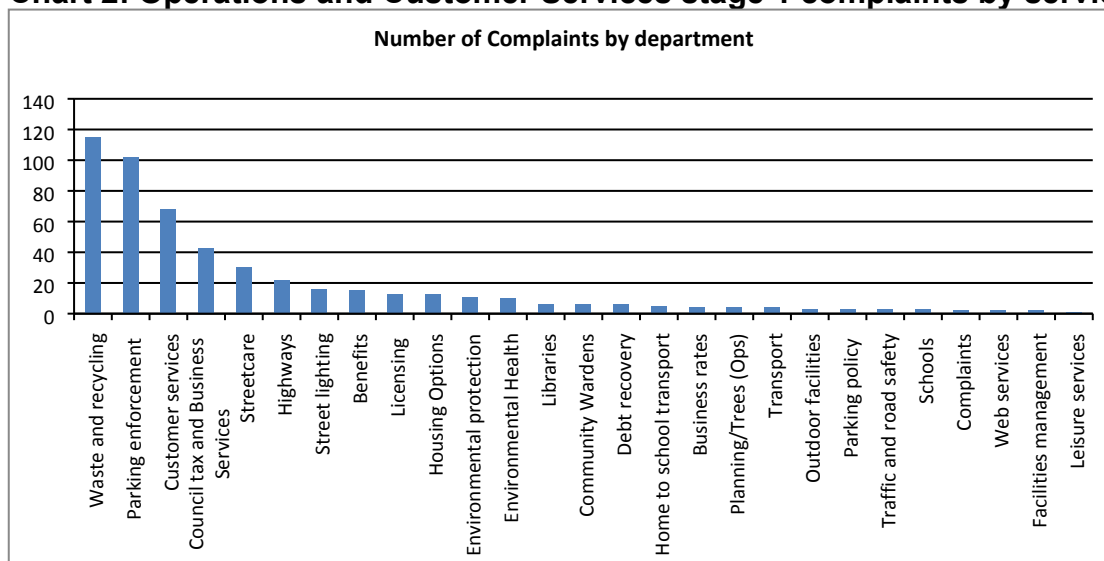
- 7.4 **Complaints received by service** Of the 513 complaints received 23% (115) were related to waste and recycling and 20% (102) parking enforcement. Waste and recycling collect 3 million bins and parking enforcement issued 27,000 penalty charge notices. Table 17 and chart 2 details the complaints received by all services within the directorate.

Table 17: Operations and Customer Services stage 1 complaints received by team

Teams	Number of Complaints	Percentage
Waste and recycling	115	23%
Parking enforcement	102	20%
Customer services	69	13%
Council tax and Business Services	43	8%
Streetcare	30	6%
Highways	22	4%
Street lighting	16	3%
Benefits	15	3%
Licensing	13	3%
Housing Options	13	3%
Environmental protection	11	2%
Environmental Health	10	2%
Libraries	6	1%
Community Wardens	6	1%
Debt recovery	6	1%
Home to school transport	5	1%
Business rates	4	1%
Planning/Trees (Ops)	4	1%
Transport	4	1%

Teams	Number of Complaints	Percentage
Outdoor facilities	3	1%
Parking policy	3	1%
Traffic and road safety	3	1%
Schools	3	1%
Complaints	2	0%
Web services	2	0%
Facilities management	2	0%
Leisure services	1	0%
Totals	513	100%

Chart 2: Operations and Customer Services stage 1 complaints by service



Waste and Recycling

7.5 The highest number of complaints received in Operations and Customer Services were about Waste and Recycling with 115 being received. With over 3m bin collections each year from around 60,000 properties it is not unexpected to be the largest volume.

7.6 50% (57) of the waste and recycling complaints fall into two main areas:

- 33% Services delivered at a lower standard than in our policy
- 17% relate to Lack of action – did not do what we said we would

7.7 72% (83) of the total complaints received were fully or partially upheld, 36% of these related to services being delivered at a lower standard

7.8 No complaints were made to the Local Government Ombudsman.

7.9 6 compliments were received.

7.10 Table 18 details the number and percentage of waste and recycling complaints by themes. The highest being service delivered at a lower standard and lack of action of what we said we would do.

Table 18: Waste and recycling stage 1 complaints by themes

Themes	Totals	Percentage
Attitude or behaviour of staff	16	14%
Did not follow policy	8	7%
Failed to follow timescales	10	9%
Failed to respond at all	1	1%
Gave the wrong information	3	2%
Inaccurate information recorded on file	1	1%
Lack of action – did not do what we said we would	20	17%
Multiple	1	1%
Objecting/ disagreeing against an actual policy	1	1%
Services delivered at a lower standard than in our policy	37	33%
Situation handled incorrectly	13	11%
Unhappy with the decision made	4	3%
Total	115	100%

- 7.11 Of the 115 complaints 72% (83) were upheld with 52% (43) of those upheld being services delivered at a lower standard and lack of action. Table 19 details the decisions for waste and recycling complaints by themes.

Table 19: Waste and recycling: complaints fully or partially upheld

Themes	Totals	Percentage
Services delivered at a lower standard than in our policy	30	36%
Lack of action – did not do what we said we would	13	16%
Attitude or behaviour of staff	12	14%
Failed to follow timescales	9	11%
Did not follow policy, rules, process or the law	7	8%
Situation handled incorrectly	6	7%
Gave the wrong information	2	2%
Unhappy with the decision made	2	2%
Failed to respond at all	1	1%
Multiple	1	1%
Total	83	100%

Parking Enforcement

- 7.12 Parking enforcement was the second highest receiver of complaints with 102 being received. Again it is not a surprise given the contentious nature of the service and 27,000 penalty charge notices having been issued.
- 7.13 67% (67) Parking enforcement complaints fall into four main areas:
- 22% Situation handled incorrectly.
 - 17% Services delivered at a lower standard than in our policy.
 - 17% Unhappy with the decision made.
 - 11% Attitude or behaviour of staff.
- 7.14 67% (67) complaints were fully or partially upheld, of these 22% situation handled incorrectly, 17% related to services being delivered at a lower

standard, 17% unhappy with the decision and 15% attitude and behaviour of staff.

7.15 No complaints were made to the Local Government Ombudsman.

7.16 No compliments were recorded for parking enforcement.

7.17 In October 2016 the formal corporate complaints policy was changed to exclude parking appeals as there is a formal appeals process. 58 complaints were accepted in the first six months and 44 in the second half of the year, six were not accepted. Table 20 details parking enforcement complaints by themes.

Table 20: Parking enforcement complaints by theme

Themes	Totals	Percentage
Situation handled incorrectly	22	22%
Services delivered at a lower standard than in our policy	17	17%
Unhappy with the decision made	17	17%
Attitude or behaviour of staff	11	11%
Lack of action – did not do what we said we would	8	8%
Multiple	6	6%
Did not follow policy	4	4%
Failed to follow timescales	4	4%
Gave the wrong information	3	3%
Inaccurate information recorded on file	3	3%
Failed to respond at all	2	1%
Failed to take all information into account	2	1%
Data protection	1	1%
Incomplete response	1	1%
Malice/bias	1	1%
Total	102	100%

Decisions on parking enforcement complaints

7.18 67% (67) of parking enforcement complaints were upheld which is higher than the council average of 55%

Table 21: Parking enforcement all complaints fully or partially upheld

Themes	Totals	Percentage
Services delivered at a lower standard than in our policy	14	21%
Situation handled incorrectly	13	19%
Attitude or behaviour of staff	10	15%
Lack of action – did not do what we said we would	6	9%
Failed to follow timescales	4	6%
Multiple	4	6%
Unhappy with the decision made	4	6%
Inaccurate information recorded on file	3	4%
Did not follow policy	2	3%
Failed to respond at all	2	3%
Gave the wrong information	2	3%
Data protection	1	1%
Failed to take all information into account	1	1%

Themes	Totals	Percentage
Malice/bias	1	1%
Total	67	100%

- 7.19 Overall during 2016-17 the Operations and Customer directorate responded to 63% (325) complaints on time, this is a big improvement of 97% on 2015-16. Of the 187 complaints not responded to within timescales, 39 (21%) were complaints about waste services and 28 (15%) were about customer services.
- 7.20 20 complaints were made to the Local Government Ombudsman, four were investigated; two were upheld with recommendations for an apology and one financial redress. This compares to 14 made in 2015-16. See appendix B for details.
- 7.21 In 2016-17 there were 100 compliments recorded for the Operations and Customer Services Directorate. 34% were for Customer Services, 10% for Highways and Transport and 10% for Housing Options see appendix C for full list.

8 ADULT SERVICES

8.1 Summary

- 42 complaints were received for Adult Services. This represents 5% of the total number of council complaints received.
- The two top themes are 'service being delivered at a lower standard than is set out' (18%) and 'attitude and behaviour of staff' (16%)
- 48 % of complaints were either fully or partially upheld.
- 47% of complaints relate to Physical Disabilities and Older People team and 10% Finance Team.
- 71 % were responded to within agreed timeframes compared to 62% in 2015-16
- 12 complaints were made, 2 were investigated by the Local Government Ombudsman, 1 upheld and 1 not upheld. See appendix B tables 32 and 33 for details.
- 35 compliments were received for adult services. See appendix C.

8.2 During 2016-17 around 1,700 adults were receiving long term care and support with 325 going into care (residential, nursing or long term). 781 assessments for help with care costs, 484 DOLS and 1,800 safeguarding assessments/concerns were dealt with. 70 contacts were logged by the complaints team for adult services and of these, 42 statutory complaints were referred to adult services for investigation. This is 5% less than in 2015-16 when 44 complaints were received. Table 22 details the number of complaints received by stage.

Table 22: Adult Services overview

Adult Services	2015 – 2016	2016 – 2017	Percentage change
Stage 1	44	42	-5%
No stage 2 for Adult Services	0	0	-
No stage 3 for Adult Services	0	0	-
Totals	44	42	-5%

8.3 In addition, four complaints were withdrawn by the complainant after the investigation had commenced. 25 contacts were recorded that were not complaints, one of which was from an MP.

8.4 There is no discernible trend in relation to the number of complaints received for adult social care services, see table 23 for the volumes for the period 2009-17. In 2013-14, there was a significant peak of 78 complaints but the last two years have stabilised around the mid-40s and the council is recording complaints consistently.

Table 23: Total number of adult complaints, 2009-2017

2009-10	2010-11	2012-12	2012-13	2013-14	2014-15	2015-16	2016-17
34	19	16	49	78	21	44	42

- 8.5 In 2016-17, the majority of complaints received, 20 (47%), were in relation to the Physical Disability and Older People Team. This could be expected given that these teams hold the highest number of cases. See table 24 for the full breakdown by team.

Table 24: Adult services complaints for 2016-17, by team

Teams	Number	Percentage
Physical Disability and Older People Team	20	47%
Finance Teams	4	10%
Safeguarding Team	3	9%
Community Mental Health Team	3	7%
Community Team for People with Learning Disabilities	3	7%
Remaining service areas	9	20%
Total	42	100%

- 8.6 During 2016-17, there were 12 complaint themes monitored, see table 25. This is an increase on the number of themes monitored in previous years, nine. The two highest areas making up 34% are 'services being delivered at a lower standard than is set, or attitude or behaviour of staff'.

Table 25: Themes of stage 1 adult complaints received during 2016-17

Type of Complaint	Number	Percentage
Services being delivered at lower standard than is set out in our policy	8	18%
Attitude or behaviour of staff	7	16%
Multiple reasons	4	11%
Unhappy with how a situation/incident was handled	5	11%
Unhappy with the decision made	4	11%
Did not follow policy, rules, process or the law	2	7%
Failed to take all information into account	3	7%
Lack of action - did not do what we said we would do	3	7%
Malice, bias or unfair discrimination	2	4%
Gave the wrong information	2	4%
Failed to follow timescales	1	2%
Safeguarding	1	2%
Total	42	100%

- 8.7 The majority of complaints made in 2016-17 were by the service user themselves, 60%, see table 26 for full breakdown, followed by the parent or child of the service user, 16%.

Table 26: People making adult complaints

Who made the complaint	Number	%
Service user	24	60%
Child of service user	7	16%
Parent of service user	7	16%
Extended family	1	2%

Who made the complaint	Number	%
Spouse or partner	2	4%
Advocate	1	2%
Total	42	100%

- 8.8 The Royal Borough's target for dealing with adult services complaints is 10 to 20 working days although there is no specified limit for statutory complaints about adult social care. Of the 42 that were received during 2016-17, 71% were responded to within these timescales. This is 15% more than in 2015-16 where 62% were responded to within timescales.
- 8.9 Complaints that were responded to outside of timescales were as a result of being complex issues requiring further investigations. Where there is a delay in the process, the Complaints Team continue to liaise with the complainant, providing the reasons for the delay and negotiating new timeframes.
- 8.10 The Local Government Ombudsman received 12 complaints and investigated two statutory complaints in 2016-17, which compares to 14 received in 2015-16. Of the two complaints investigated, one was upheld with a recommendation for an apology and one was not upheld. See appendix B tables 32 and 33 for details.
- 8.11 35 compliments were recorded in 2016-17 for adult services; this was less than the 44 recorded in 2015-16. This is likely to be due to underreporting. 26% (9) were for the Short Term service (STS&R), 23% (8) Older People and Disabilities service and 20% (7) were for the Community Mental Health Team. See appendix C for the breakdown by service.

9 CHILDREN'S SERVICES

9.1 Summary

- 58 complaints were received for Children's Services. This represents 7% of the total number of council complaints received.
- The two top themes are attitude and behaviour of staff (23%) and failed to take all the information into account (20%).
- 47% of complaints were either fully or partially upheld.
- 57% of complaints relate to the POD's (child protection, children in need and children in care) and 26% CYPDS.
- 62 % were responded to within agreed timeframes compared to 43% in 2015-16.
- 10 complaints were made to the Local Government Ombudsman, 3 complaints were investigated. 1 was upheld and 2 not upheld. See appendix B tables 32 and 33 for details.
- 35 compliments were received for adult services. See appendix C.

9.2 During the 2016-17 3,000 contacts were received by the MASH for children, 115 children were in care at any one time and there were 120 child protection plans. 85 contacts were logged by the complaints team and of these, 58 stage 1 complaints were referred to children's social care for investigation, see table 27 for the numbers by stages.

9.3 Children services have seen the biggest reduction of complaints received. This is a reduction of 34% (30) complaints overall compared to 88 received in 2015-16, with less being received at all stages and no stage 3's being received at all. Stage 3 panel still exists for children's complaints.

Table 27: Children Services overview

Children's Services	2015-16	2016-17	Percentage change
Stage 1	81	54	-33%
Stage 2	5	4	-20%
Stage 3	2	0	-100%
Totals	88	58	-34%

9.4 In addition, 17 complaints were withdrawn by the complainant after the investigation had commenced. Nine contacts were recorded that were not complaints, seven of which were from MPs or Councillors.

9.5 The number of complaints relating to children's social care services has risen over the last seven years, peaking at 92 in 2013-14, see table 28 for a breakdown for the period 2009-17. A high number of complaints are not, in and of itself, a poor reflection on the service. It can be an indication of a greater awareness of the complaints service and its efficiency in resolving issues.

Table 28: Total number of children's complaints, 2009-17

	2009-10	2010-11	2012-12	2012-13	2013-14	2014-15	2015-16	2016-17
Stage 1	31	22	18	43	90	61	81	54
Stage 2	2	1	1	1	2	0	5	4
Stage 3	1	1	0	0	0	0	2	0
Total	34	24	19	44	92	61	88	58

- 9.6 In 2016-17, the majority of complaints, 28 (57%), received were in relation to the Pods, see table 29 for full breakdown by team. This may be expected given that these teams hold the long term cases, dealing with complex child protection and children in care cases, often involving court proceedings.

Table 29: Stage 1 complaints, 2016-17, by team

Teams	Number	Percentage
Pods (child protection, children in need and children in care)	28	57%
Children & Young People Disabilities Service	15	26%
Multi-Agency Safeguarding Hub	6	9%
Adopt Berkshire	2	4%
Early Help services	1	2%
School Admission	1	2%
Local Authority Designated Officer	1	2%
Total	54	100%

- 9.7 There were 15 themes for the complaints received, see table 30. This is an increase on the number of themes monitored in previous years, nine. This will change for future reporting as there are fewer themes captured but more qualitative work will be taking place in order to identify more fully what issues need to be addressed.
- 9.8 The highest number of complaints received was around the theme "Attitude or behaviour or staff" followed by "Multiple reasons". In 2015-16, the highest grouping of complaints was "unhappy with the decision made" followed by "attitude or behaviour of staff".

Table 30: Themes of stage 1 children's complaints received during 2016-17

Type of Complaint	Number	Percentage
Attitude or behaviour of staff	13	24%
Multiple reasons	7	13%
Unhappy with the decision made	5	9%
Unhappy with how a situation/incident was handled	5	9%
Did not follow policy, rules, process or the law	4	7%
Lack of action, did not do what we said we would do	3	6%
Failed to follow timescales	3	6%
Failed to take all information into account	2	4%

Type of Complaint	Number	Percentage
Failed to respond at all	2	4%
Malice, bias or unfair discrimination	2	4%
Safeguarding	2	4%
Inaccurate and wrong information was recorded or is on file, passed on	2	4%
Not kept informed	1	2%
Services being delivered at lower standard than is set out in our policy	1	2%
Gave the wrong information	1	2%
Objecting/disagreeing against an actual agreed policy	1	2%
Total	54	100%

9.9 The vast majority of complaints made in 2016-17, 93%, were by parents, 93%, see table 31.

Table 31: People making children's complaints

Who made the complaint	Number	Percentage
Parent/Step parent	50	93%
Professional Officer	2	3.5%
Carer	2	3.5%
Total	54	100%

9.10 The timescale for dealing with a stage 1 complaint is 10 working days. However, this can be extended to 20 working days for more complex complaints or if additional time is required. Of the 54 stage 1 complaints that were received during 2016-17, 62% were responded to within timescales, which is higher than the 43% in 2015-16.

9.11 Complaints that were responded to outside of timescales were multiple complex issues requiring further investigations. Where there is a delay in the process, the complaints team will continue to liaise with the complainant, providing the reasons for the delay and negotiating new timeframes.

9.12 Four Stage 2 complaints were dealt with and fully resolved in 2016-17, see table 32. No complaints were investigated at Stage 3.

Table 32: Stage 2 children's complaints, 2016-17

Origin	Number of complaints	Outcome
Escalated from Stage 1	4	Complainant satisfied with response
Initiated at Stage 2	3	Complainant satisfied with response
Escalated from Stage 1 in 2015-16, responded to and concluded in 2016-17	1	Complainant satisfied with response

9.13 The Local Government Ombudsman received ten complaints for children's services, three were investigated. One was upheld, two not upheld and there

were no recommendations suggested. 14 complaints were made in 2015-16. See appendix B, table 32 and 33 for details on 2016-17 decisions.

- 9.14 56 compliments recorded for children's service in 2016-17, this is an increase of 194% from 19 recorded in 2015-16. 43% (24) of these were compliments were for the children and young people disability service and 23% (13) were for the pods. See appendix C for compliments received by services.

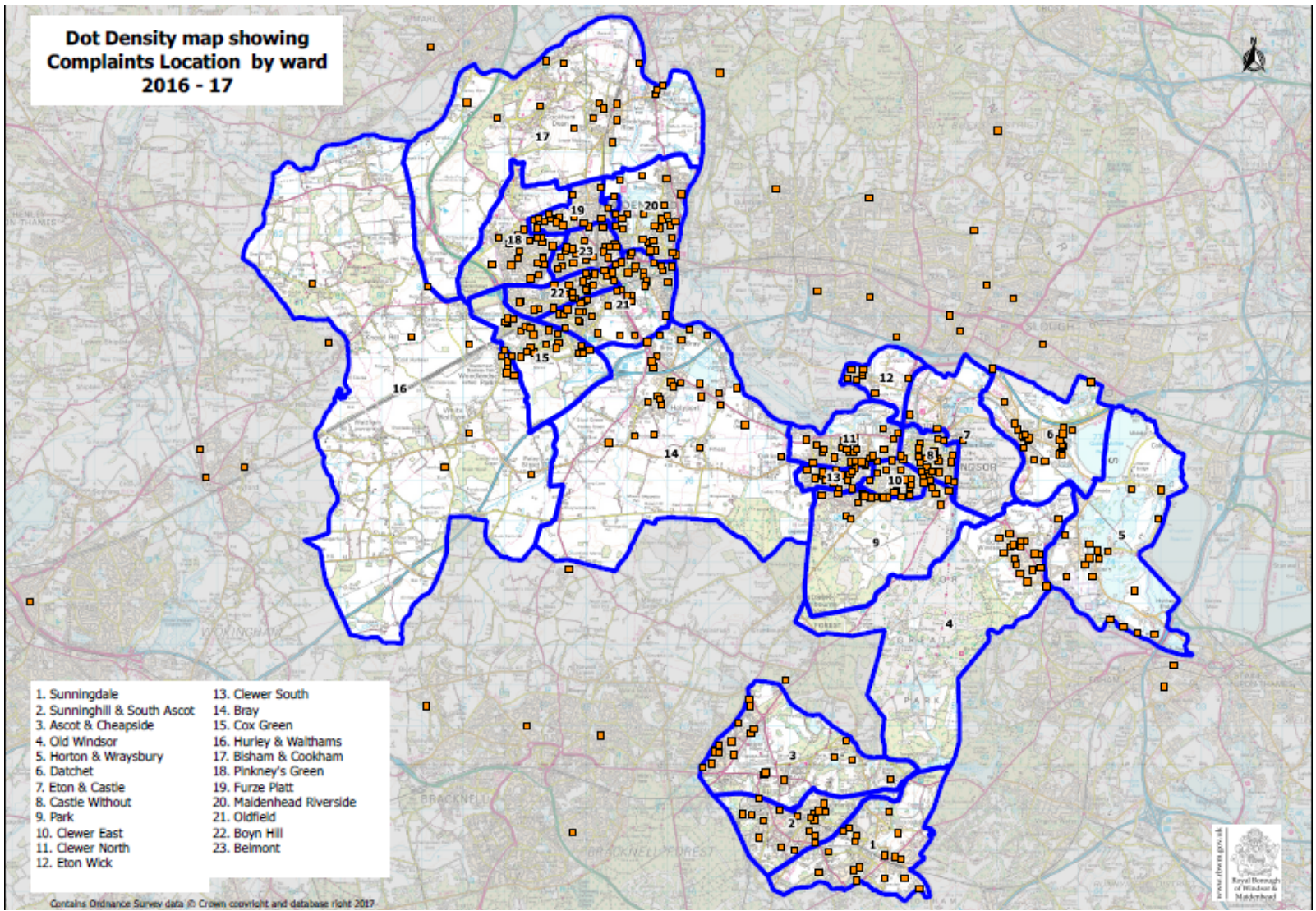
10 APPENDICES

Appendix A: Maps of where complaints are received from by post code

Map 1: By postcode across UK

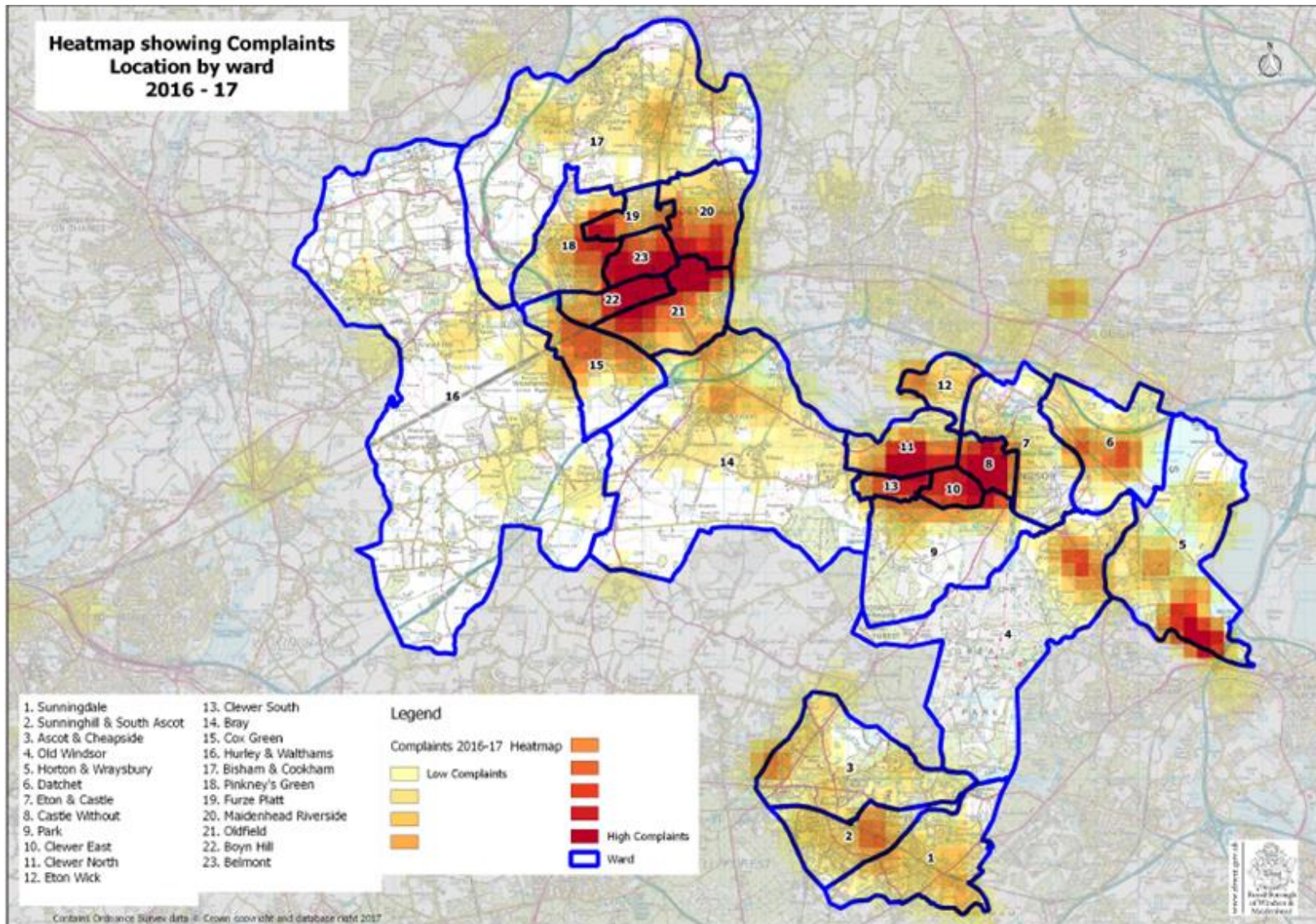


Map 2: Dot density by ward



Map 3: Heat map by ward

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Appendix B: Decisions from Local Government Ombudsman annual letter 2016-17.

Table 32: Complaints upheld by the Local Government Ombudsman in 2016-17

Reference	Directorate	Category	Decision Date	Decision	Details
16003237	Corporate	Corporate & Other Services	15-Jul-16	Upheld	The Ombudsman will not investigate this complaint about council officers being rude to the complainant's son. This is because the Council has already provided a proportionate response. In addition, the complainant can take legal action if she thinks the Council is responsible for deterioration in her son's health.
16004171	Corporate	Planning & Development	15-Dec-16	Upheld	The Council was at fault in determining a planning application by Mr and Mrs J's neighbours. But, this fault did not change the decision. The Council was also at fault in the way in which it dealt with subsequent planning enforcement issues. This caused Mr and Mrs J injustice in the form of stress, time and trouble. But, the Council offered a remedy for this.
16002068	Operations	Highways & Transport	03-Oct-16	Upheld	The Council failed to review a temporary traffic restriction order over a railway bridge that expired in 2009. It failed to respond to Mr X's emails about this. It is now reviewing the need for traffic restrictions on the bridge. It has apologised to Mr X for failing to reply to him.
15010707	Operations	Environmental Services & Public Protection & Regulation	06-Jan-17	Upheld	The Council is at fault as it has delayed in completing its investigation into Mrs X's business and in making a decision on what action it should take. As a result Mrs X has been caused significant uncertainty which the Council has agreed to remedy as recommended.
16009349	Adult	Adult Care Services	19-Jan-17	Upheld	Mr G complains about how the Council treated him under its safeguarding procedures. The Council failed to tell Mr G about the action it was taking and failed to respond to some of his e-mails. It needs to apologise.
15012592	Children	Education & Children's Services	28-Jul-16	Upheld	The Council did not give enough consideration to contact issues in its work with Ms F prior to the Adoption Panel. The subsequent decision to discontinue the adoption process without any discussion with Ms F caused her injustice. The Council has agreed to apologise to Ms F and explain its decision in a face to face meeting.

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Table 33: Local Government investigations 'Not Upheld' in 2016-17

Reference	Directorate	Category	Decision Date	Decision	Details
15011157	Corporate	Planning & Development	12-Apr-16	Not Upheld	There was no fault in the Council's decision that the lease of a clinic car park did not require planning permission. This complaint is not upheld, as the Council took the decision aware of the relevant guidance.

Reference	Directorate	Category	Decision Date	Decision	Details
16002636	Corporate	Planning & Development	02-Nov-16	Not Upheld	The Council was not at fault in the way in which it determined a local golf club's application to re-contour its practice ground. It properly assessed key material considerations, including those relating to health and safety. It was also not at fault in doing this under officers' delegated authority.
15005817	Operations	Benefits & Tax	10-Nov-16	Not Upheld	There is no fault by the Council in its recovery of council tax from Mr B. However, the Council has removed charges due to delay responding to complaints. This is an acceptable remedy for its delay.
16010327	Operations	Housing	16-Dec-16	Not Upheld	Unable to find any details of case
15018572	Adult	Adult Care Services	29-Jun-16	Not Upheld	The Ombudsman found no fault on Mr H's complaint that the Council refused to provide his wife with financial help towards her care costs because it wrongly considered her savings to be above the financial threshold for assistance. The Council properly considered the evidence and information Mr H presented. The Council agrees to re-consider its decision if he provides specific evidence it needs to see.
16004520	Children	Education & Children's Services	24-Oct-16	Not Upheld	The complaint concerns a school admission appeal hearing against the refusal of the admission authority to offer a Reception place to a child (B) at a primary school (school Z). There is no evidence of fault by the Independent Appeal Panel causing the appellant (Mrs C) injustice.
16011986	Children	Education & Children's Services	15-Mar-17	Not Upheld	The Council decided not to process the application for a place for the complainants' daughter at his preferred school from the family's current address. There are no grounds for the Ombudsman to intervene in the merits of the Council's decision.

Table 34: Comparison of Local Government Ombudsman decisions 2015-16 and 2016-17 by service.

Year	Adult care services	Benefits and tax	Corporate and other	Education and children's services	Environment services	Highways and transport	Housing	Planning and development	Other	Total
2015-16	14	3	2	14	4	7	0	9	1	54
2016-17	12	6	2	10	6	4	4	9	1	54
Difference	+2	-3	-	-4	+2	-3	+4	-	-	-

Appendix C: Compliments received by Service

Service	Number of compliments
Customer services	34
CYPDS	24
Pods	13
Highways and transport	10
Housing Options	10
Complaints	9
Short term services	9
Physical Disability and Older People's team	8
Facilities	7
Traffic	7
Community Mental Health Team	7
MASH	6
Libraries and museums	5
Community Team for People with learning difficulties	5
Children's Centres	5
Community Wardens	4
Waste and recycling	4
Youth Services	4
Parks and open spaces	3
Hospital Team	2
Town Centre Management	1
Assessments and interventions	1
Building control	1
Client finance	1
Engineering and Transport	1
Fair trading	1
Home to school transport	1
Parking	1
Joint health and social care	1
Long term team	1
Senior management team	1
Step together	1
Early Help	1
Family Placement Team	1
Nursery	1
Schools - teachers	1
Total	192

Document Name	Compliments and Complaints Annual Report 2016-2017		
Document Author	Jacqui Hurd Head of Library and Resident Services		
Document owner	Jacqui Hurd Head of Library and Resident Services		
Accessibility	Publicly available		
File location			
Destruction date	Not applicable		
How this document was created	Version 1	Author	September 2017
	Version 2	Senior Leadership Team	September 2017
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Circulation restrictions	None		
Review date	April 2018		

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Agenda Item 6

Subject:	Update on transfer of Adult Services to Optalis
Reason for briefing note:	To update Adult Services and Health Overview and Scrutiny Panel on the transfer of adult services to Optalis Ltd and performance.
Responsible officer(s):	Hilary Hall, Deputy Director Strategy and Commissioning
Senior leader sponsor:	Alison Alexander, Managing Director
Date:	6 October 2017

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SUMMARY

On 3 April 2017, the Royal Borough formally entered into a partnership with Wokingham Borough Council for the delivery of its adult services through Optalis, the local authority trading company jointly owned by the two councils. 230FTE successfully transferred to Optalis on that date. A robust governance structure, at Member, Managing Director and officer level, is in place to manage the ownership and performance of the company.

1 BACKGROUND

- 1.1 In October 2016, the Royal Borough agreed to enter into a partnership with Wokingham Borough Council to deliver its adult services through Optalis, the local authority trading company jointly owned by the two councils. This partnership formally came into effect on 3 April 2017 when 230FTE employees successfully transferred to Optalis.
- 1.2 The Managing Director retains the statutory role of the Director of Adult Social Services. The Deputy Director Adult Social Care and Health transferred to Optalis to lead the operational delivery of adult services and is now the Operations Director within the company.

2 KEY IMPLICATIONS

- 2.1 Operational delivery of adult services is now through Optalis with staff based in the Town Hall, Maidenhead. Effective management of the contract is vital and a robust governance structure, at Member, Managing Director and officer level, is in place. Overview and Scrutiny has a key role to play in this structure, in scrutinising performance of the contract and providing feedback.

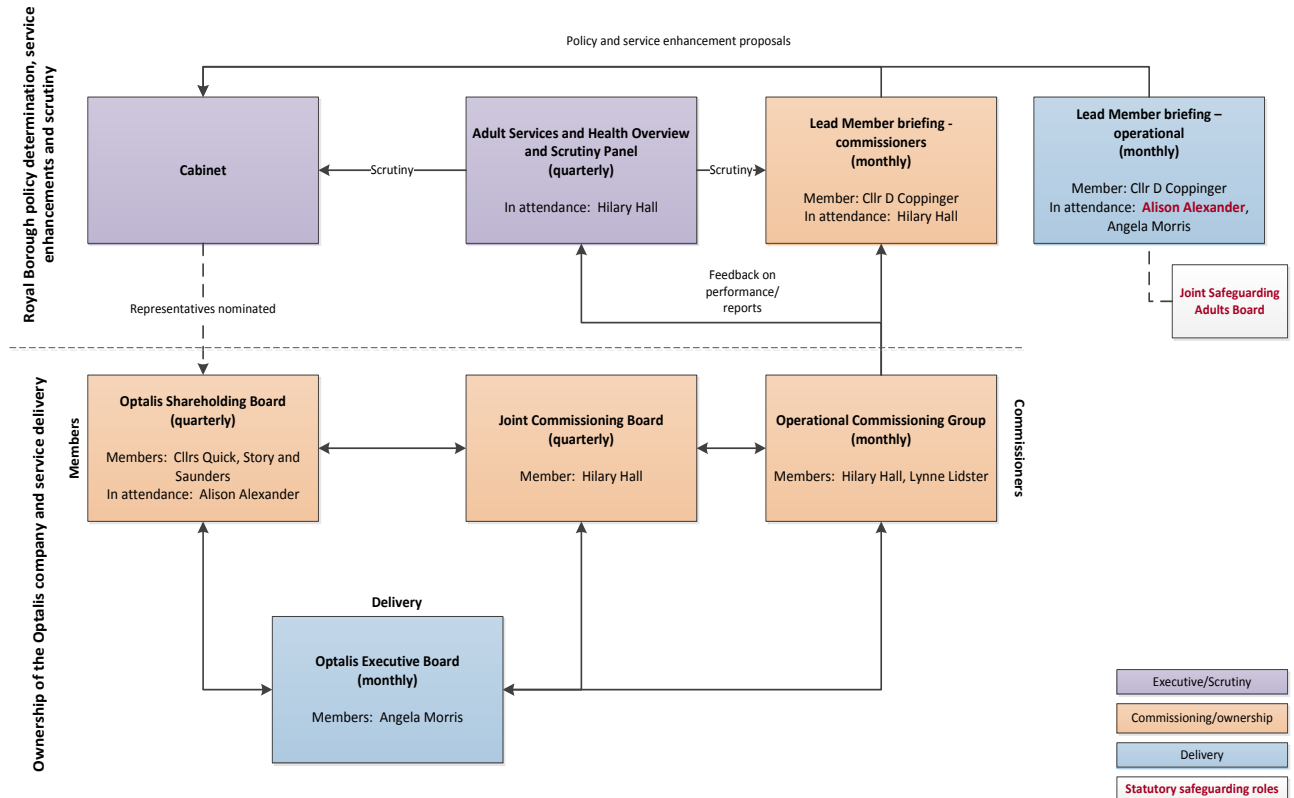
3 GOVERNANCE ARRANGEMENTS

- 3.1 The governance structure associated with the delivery of adult services and the associated management of the contract with Optalis operates at Member and officer level, see diagram 1 and appendix 1.
- 3.2 It is important to note that these governance arrangements operate in two parts:
 - Proposals and policy issues in relation to adult services in the borough will continue to come from the Lead Member, through Overview and Scrutiny Panel, to Cabinet for

determination as they do now – with the delivery of the resulting decision being effected by staff in Optalis.

- Ownership of the company, Optalis, and the delivery of adult services through the contract with the company.

Diagram 1: Governance of adult services



Optalis Shareholding Board

- 3.3 The Board is a self-standing legal entity within Company Law and represents Optalis Holdings Ltd which wholly owns Optalis Ltd, the delivery arm and the company to which Royal Borough employees were TUPE transferred on 3 April 2017.
- 3.4 The Board is responsible for setting out the expectations and ambitions of the two councils as owners of Optalis Ltd at a strategic level and ensures that the provisions of the Shareholder’s Agreement are observed by Optalis Ltd. There are six directors on the Board – three from each local authority. The Royal Borough’s representatives are Cllrs MJ Saunders, John Story and Eileen Quick. The Chief Executive/Managing Director of the two Councils attend to support the Directors.
- 3.5 The Board of Directors makes decisions on the reserved matters, see appendix 2, relating to the joint ownership of and commissioning of services from Optalis Ltd.

Commissioning arrangements

- 3.6 There are two commissioning meetings:
- Joint Commissioning Board.
 - Operational Commissioning Group.
- 3.7 The Joint Commissioning Board comprises the lead commissioners of the two councils and meets quarterly. It is concerned with how the company overall is performing and

identifying areas for development or investment for recommendation to the Shareholdings Board.

- 3.8 The Operational Commissioning Group meets monthly and is concerned solely with the delivery of the contract in Windsor and Maidenhead. It is the place where the Operations Director in Optalis – previously the Deputy Director of Adult and Health – is held to account for the performance of the service and the delivery of the key performance indicators in the contract. The Deputy Director Strategy and Commissioning feeds back on performance from these meetings to the Lead Member for Adult Services, Health and Sustainability and Adult Services and Health Overview and Scrutiny Panel, see section 4.

Optalis Executive Board

- 3.9 The Optalis Executive Board oversees the activities of the company. It has an Independent Chair and Non Executive Director, both of whom were appointed by the two councils. The rest of the Board is made up of the executive directors of the company, including the Operations Director.

4 PERFORMANCE AND DELIVERY

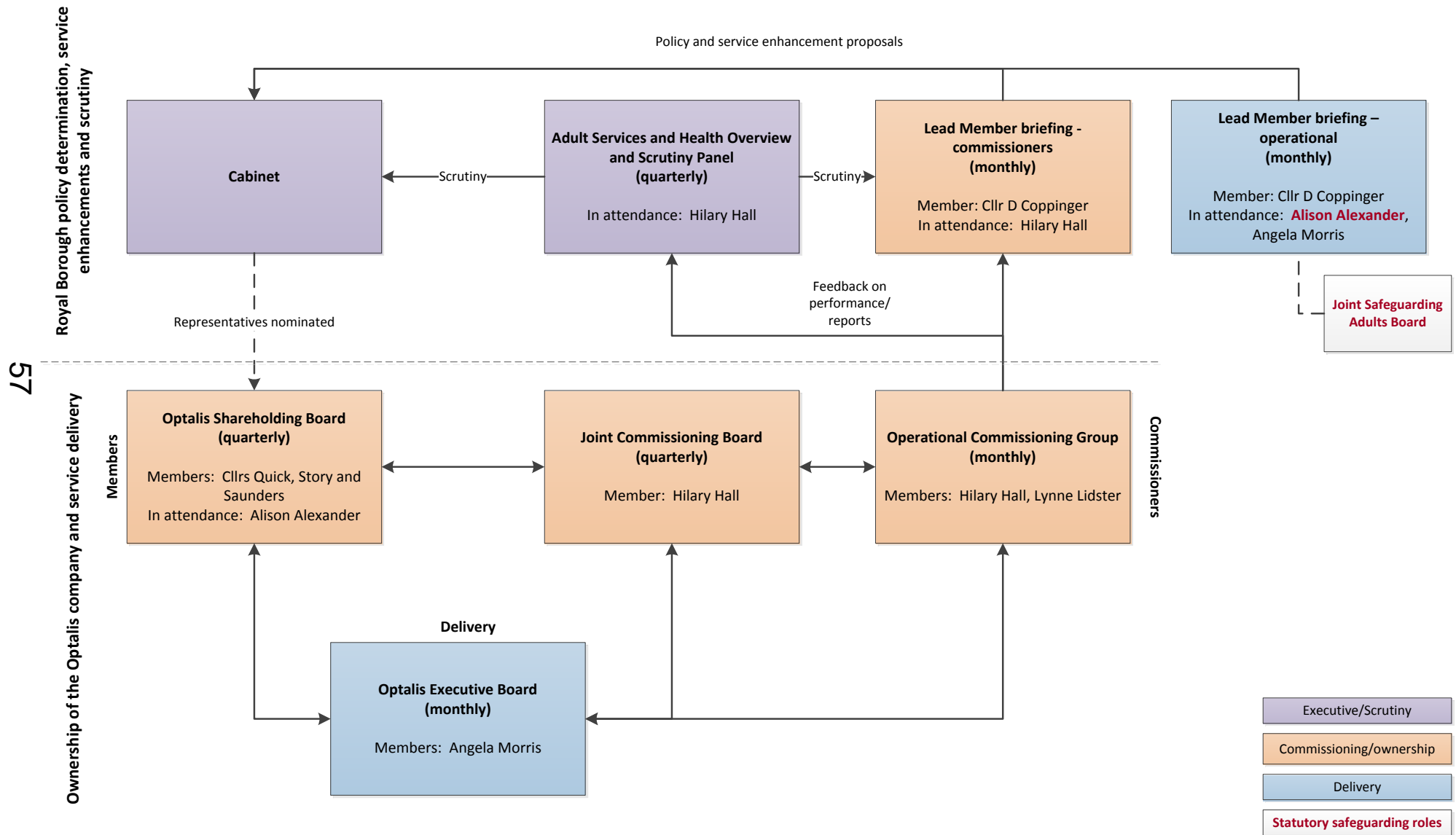
- 4.1 Since 3 April 2017, performance has been monitored monthly. Overall, performance across the range of indicators has maintained, and in some cases exceeded, the levels seen prior to transfer, see table 1.

Table 1: Service delivery performance

	Target	March 2017	August 2017	RAG
Percentage of long term cases reviewed in the last 12 months.	96%	64.2%	70%	
Percentage of current carers reviewed within the last 12 months.	96%	31.6%	N/A	
Percentage of support plan assessments in timescale.	80%	94.1%	89.5%	
Percentage of Independence plans reviewed within timeframe of 2 weeks (new indicator).	96%	N/A	81.3%	
Delayed transfers of care, per 100,000 population, attributable to RBWM (lower is better).	1.5	2.3	1.7	
Percentage of rehabilitation clients still at home after 91 days.	87.5%	81.4%	89.6%	
Percentage of safeguarding enquiries allocated within timescale.	90%	84%	89.6%	
Percentage of safeguarding enquiries progressing to investigation.	30%	26.6%	35.9%	
Safeguarding service user satisfaction (new indicator).	80%	N/A	75.2%	
Percentage of establishments in serious concerns, moved on within six months (new indicator.)	50%	N/A	N/A	
Percentage of DoLS applications not dealt with within 12 months.	25%	19.7%	10%	

- 4.2 There have been improvements in performance in relation to delayed transfers of care, rehabilitation clients still at home after 91 days following discharge from hospital, safeguarding enquiries and Deprivation of Liberty Standards applications. Delayed transfers of care are a national issue, with a target being set for the area by the Department of Health. The Royal Borough and Optalis are working closely with health colleagues to address delays. Delays can be for a number of reasons; however, the number of delays attributable to social care remains very low:
- Delayed due to health.
 - Delayed due to social care.
 - Delayed due to both health and social care.
 - Delay due to private self funders.
- 4.3 Where performance needs to improve is around reviews of long term cases and carers, reviews of independence plans provided by Carewatch, the Royal Borough's domiciliary care provider and satisfaction with safeguarding. The reviews of long term cases, whilst an improving trend, has been impacted by problems with recruiting staff. Optalis has made good progress in recruiting and is projecting that they will achieve the year end target by 31 March 2018. Commissioners have requested an improvement in planning of care reviews to ensure that the target is secured. Priority is also being given to reviewing residents who are placed out of borough. The review process for independence plans has now been strengthened with performance expected to achieve the target by year end.
- 4.4 User satisfaction with safeguarding, which is a new indicator for this year, is just below target and is being closely monitored to determine whether the target requires amendment. There have been data collection issues in relation to the reviews of carers which have been resolved and data should now be available from September 2017.
- 4.5 In terms of finance, the delivery of the specified services continues to be delivered within the contract price. Overall, adult services is showing an underspend this year due to a number of one-off windfalls including:
- High costs ordinary residence case reimbursement of £213,000 following Secretary of State determination.
 - Increased client contribution income of £382,000.
 - Reimbursement of continuing healthcare claims of £451,000.

APPENDIX 1: GOVERNANCE OF ADULT SERVICES IN THE ROYAL BOROUGH OF WINDSOR AND MAIDENHEAD



APPENDIX 2: RESERVED MATTERS

A unanimous vote by the Board of Directors of Optalis Holding Ltd is required for:

1. Altering in any respect its articles of association or the rights attaching to any of its shares.
2. Entering into any arrangement, contract or transaction resulting in expenditure either with a capital or revenue value in excess of £50,000 unless included in the Business Plan.
3. Engaging in any business other than as contemplated by the Business Plan and operating revenue budget or defraying any monies other than in good faith for the purposes of or in connection with the carrying on of such business.
4. Changing the nature of the Business or commencing any new business by any Group Member with any third party.
5. Entering into any borrowing, credit facility or investment arrangement (other than trade credit in the ordinary course of business) that has not been approved by the Board under the Business Plan.
6. Appointing or approving the appointment of auditors.
7. Business Planning: annual update of three year Business Plan:
 - a. End of April - Wokingham and RBWM commissioners to notify Company of ASC requirements and priorities for next financial year.
 - b. June – Company shall issue strategic intent and function to Optalis Limited including commissioners' requirements ('the Remit').
 - c. September - receive and scrutinise the annual update Optalis Business Plan based on Remit.
 - d. December – adoption of annual update to Business Plan.
8. Replacing or modifying the three year Business Plan or adopting the annual update to the Business Plan in respect of each financial year, which shall include the adoption and amendment of an operating revenue budget.
9. Appointing or removing any of the Directors.
10. Amending in any material respect the terms and conditions on which any Director of the Company is employed.
11. Amalgamating or merging with any other company or business undertaking.
12. Forming any Subsidiary Undertaking or acquiring shares in any other company or participating in any partnership or joint venture (incorporated or not) with a view to providing services to third parties.
13. Making any acquisition or disposal of any material asset(s).
14. Allotting or issuing any shares in the Company or any group company.
15. Changing the nature of the Business or commencing any new business by any Group Member which is not ancillary or incidental to the Business or is otherwise not on arm's length terms.
16. Passing any resolution for the winding up of the Company or presenting any petition for the administration of the Company, other than where the Company is insolvent.
17. Agreeing to remunerate or incur costs effecting greater than 10 employees or requiring expenditure in excess of £[50,000], unless approved in the Business Plan.

Agenda Item 9

By virtue of paragraph(s) 3 of Part 1 of Schedule 12A of the Local Government Act 1972.

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