

NOTICE
OF
MEETING

**CORPORATE OVERVIEW & SCRUTINY
PANEL**

will meet on

MONDAY, 4TH OCTOBER, 2021

At 7.00 pm

by

COUNCIL CHAMBER - TOWN HALL, MAIDENHEAD AND ON [RBWM YOUTUBE](#)

TO: MEMBERS OF THE CORPORATE OVERVIEW & SCRUTINY PANEL

COUNCILLORS CHRIS TARGOWSKI (CHAIRMAN), PHIL HASELER (VICE-CHAIRMAN), JULIAN SHARPE, LYNNE JONES AND SIMON WERNER

SUBSTITUTE MEMBERS

COUNCILLORS LEO WALTERS, GEOFF HILL, SHAMSUL SHELMIM, JOSHUA REYNOLDS AND SAYONARA LUXTON

Karen Shepherd – Head of Governance - Issued: 24th September 2021

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 **Mark Beeley** 01628 796345 / mark.beeley@rbwm.gov.uk

Recording of Meetings – In line with the council's commitment to transparency the Part I (public) section of the virtual meeting will be streamed live and recorded via Zoom. By participating in the meeting by audio and/or video, you are giving consent to being recorded and acknowledge that the recording will be in the public domain. If you have any questions regarding the council's policy, please speak to Democratic Services or Legal representative at the meeting.

AGENDA

PART I

<u>ITEM</u>	<u>SUBJECT</u>	<u>PAGE NO</u>
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3.	<u>MINUTES</u> To consider the minutes of the meeting held on 23 rd June 2021.	5 - 10
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5.	<u>ANNUAL COMPLAINTS AND COMPLIMENTS REPORT</u> To consider the report.	39 - 74
6.	<u>REVIEW OF COUNCILS GOVERNANCE OF RBWM PROPERTY COMPANY</u> To consider the review.	To Follow
7.	<u>WORK PROGRAMME</u> To consider the Panel's work programme for the remainder of the Municipal year. To include consideration of items scheduled on the Cabinet Forward Plan .	75 - 76

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 3

CORPORATE OVERVIEW & SCRUTINY PANEL

WEDNESDAY, 23 JUNE 2021

PRESENT: Councillors Chris Targowski, Phil Haseler, Julian Sharpe, Simon Werner and Geoff Hill

Also in attendance: Councillors Gurpreet Bhangra, John Bowden, David Cannon and Gurch Singh

Officers: Mark Beeley, Shilpa Manek, Adele Taylor and Nikki Craig

ELECTION OF CHAIRMAN AND VICE CHAIRMAN

Councillor Sharpe nominated Councillor Targowski to be Chairman, which was seconded by Councillor Haseler.

RESOLVED UNANIMOUSLY: That Councillor Targowski was elected as Chairman of the Corporate Overview and Scrutiny Panel for the 2021/22 municipal year.

Councillor Sharpe nominated Councillor Haseler as Vice Chairman, which was seconded by Councillor Targowski.

RESOLVED UNANIMOUSLY: That Councillor Haseler was elected as Vice Chairman of the Corporate Overview and Scrutiny Panel for the 2021/22 municipal year.

APOLOGIES FOR ABSENCE

An apology for absence was received from Councillor L Jones, Councillor Hill was attending the meeting as substitute.

DECLARATIONS OF INTEREST

There were no declarations of interest received.

MINUTES

RESOLVED UNANIMOUSLY: That the minutes of the meeting held on 19th April 2021 were approved as a true and accurate record.

Q4 PERFORMANCE REPORT

Adele Taylor, Executive Director of Resources, explained that the Q4 performance report was responding to the councils strategy and was effectively a progress update against the interim strategy. Of the nine targets in the report:

- Four were green – succeeding or achieved.
- Three were amber – near target.
- Two were red – needed improvement.

It had been a challenging year to meet the needs of residents during the global pandemic. Covid had a significant impact on the performance of the council, for example lockdown restrictions had affected the number of visits to libraries. Home based learning had been encouraged and there were increases in visits starting to be seen but these were at lower

volumes. The number of calls which had been received by RBWM had increased substantially in Q2 due to the waste problems, with the target of the percentage of calls answered within 60 seconds finishing amber. The revenues and benefits targets had exceeded the expected position, but the percentage of business rates collected had been impacted.

The Chairman commented on the targets for the percentage of calls answered and the number of digital forms received. He asked what metric was used by officers to show that residents queries were being dealt with and if residents were satisfied with the response that they received. The Chairman also asked if there was anything that was a concern to officers or if the general performance of RBWM was good.

Adele Taylor said that the website system was being worked on and improved. For the digital forms, it was something that officers wanted to improve, particularly to see if there were a number of repeat requests from residents. Responding to the question from the Chairman if there was anything to be concerned about, Adele Taylor said that there was a dip in performance in Q3 but this was to be expected. It had been a challenging year for the revenues and benefits team with some of the targets being particularly difficult to achieve.

The Chairman asked if RBWM had a good contact management system.

Adele Taylor said that there was a contact management system but work was ongoing to improve it.

Councillor Hill asked if performance reports in future would contain metrics against RBWMs net carbon pledge using the climate strategy and would it be aligned to the corporate plan. He also asked if Cabinet would be open to recommendations from the Panel on what metrics should be used to monitor performance going forwards.

Adele Taylor said that for the climate strategy, the metrics fell under a different Overview and Scrutiny Panel. The metrics would be on the new corporate plan and officers would be reviewing metrics to ensure that they reflected the performance and development of the corporate plan.

Councillor Hill asked if there was any further breakdown on digital forms and how often they were used by each department. The search bar on the website was not working as well as it should and was something that needed to be investigated. Councillor Hill commented that he felt the council was moving to 'digital by default' rather than 'digital by choice' and this was locking some residents out of services that the council provided. On voluntary turnover, Councillor Hill asked if this was known by department or area and if there were any red flags for voluntary turnover in any part of the council.

Adele Taylor said that a lot of work had been undertaken on the website, the search bar issue had been fixed recently and the function should now be performing better. It was a priority of RBWM to make systems quick, easy and effective to use and it was a continual improvement. Adele Taylor was unable to give a breakdown of the digital forms but all areas of the council were encouraged to use them. Adele Taylor said that she was happy to discuss with Councillor L Jones outside of the meeting.

Nikki Craig, Head of HR, Corporate Projects and IT, said that staff turnover could be broken down further but this would not necessarily highlight the problems that RBWM faced. The information was shared at directorate level and it was scrutinised with the councils HR business partner.

ACTION – Nikki Craig to send breakdown of staff turnover to the Panel.

Councillor Rayner, Deputy Leader of the Council and Cabinet Member for Corporate & Resident Services, Culture & Heritage, and Windsor, confirmed that the search engine issue on the website had been resolved. A new user group had been set up to test the website and

this would include representatives from the Disability and Inclusion Forum and other groups that the council worked with. Regarding the discussion on staff turnover, it could often fluctuate. For example, students joining the council during the summer months on short term internships would affect the turnover figure.

Councillor Sharpe asked if officers had done any analysis comparing RBWM with other local authorities. He asked what the metric was that was used to measure visits to libraries and whether this was physically based or included digital visits too.

Adele Taylor said that benchmarking against other local authorities depended on if they used similar metrics. Other comparisons were more difficult as information was collected in a different way. Officers had largely been concentrating on the councils own performance. Library visits included both physical and digital visits across the whole year.

Councillor Sharpe expressed concern for a completely digital library experience and feared that some residents could be left behind.

Adele Taylor said that libraries formed a key part of the transformation strategy, where there was a piece specifically looking at digital exclusion. The council was looking to support and help people using digital devices if they needed it.

Councillor Bowden joined the meeting.

Councillor Werner asked which targets had not been hit for non-Covid reasons. He commented on the climate change strategy of the council, which discussed working with key stakeholders, but they did not feel like they were part of the process. Councillor Werner expressed concern about the digital divide and said it worried him when organisations said that they would help to bridge the gap, explaining that he had seen a negative experience occur with a customer in his local bank branch.

Adele Taylor said that she did not think there were any targets that had not been achieved for non-Covid reasons. Sustainability was not in the remit of the Panel and so could not comment on but this could be fed back to officers. The council were committed to helping residents access online services as some would need extra support. The internet could open up a new world for some residents and it was important to concentrate resources on allowing residents to access the internet.

Councillor Haseler said that he used digital forms to report issues with things like waste. He had noted that the council set a target for the number of forms received, but surely this meant that a number of things were going wrong or that there were a number of issues. He said that less forms being received could actually be a positive thing.

Adele Taylor said that there was a blend of different forms which had different functions. Some covered issues, like Councillor Hasler had suggested, but there were also forms covering things like requests for information or access to services. It was the level of customer interaction which the council were interested in monitoring, with digital forms a key way to measure this.

Councillor Haseler said it would be useful to see a breakdown of the forms received for issues so that officers could see if the forms were more positive or negative in nature.

Councillor Werner said that some residents had complained to him that the 'report it' tool was hard to use and they had abandoned the process part way through. He asked if there was a measure for how many forms were abandoned before they had been submitted.

Adele Taylor said that the transformation project team had been looking extensively at the website and digital forms. She would ask the relevant officers regarding the questions on digital forms and report back to the Panel after the meeting.

ACTION – Adele Taylor to ask about the digital form enquires from Councillor Hasler and Councillor Werner and report back to the Panel.

RESOLVED UNANIMOUSLY: That the Corporate Overview and Scrutiny Panel noted the report and:

- i) Noted the 2020/21 Corporate Overview and Scrutiny Panel End of Year Data & Performance Report in Appendix A.**
- ii) Requested relevant Cabinet Members, Directors and Heads of Service to maintain focus on improving performance.**

WORKFORCE PROFILE REPORT

Nikki Craig explained that the workforce profile was an annual survey of the make up of the council. The first section of the report included things like a head count and pay grades, while it also made comparisons to the previous year so that trends and patterns could be identified. There had been a reduction of 55 employees over the last year, mainly due to a transfer of staff to Achieving for Children. A full time monitoring officer had also been appointed. The second section of the report considered the protected characteristics. One positive was the comparison between starters and leavers profile in ethnicity and disability, which showed a larger percentage of starters than leavers. At a senior management level, no employees were from a Black, Asian or Minority Ethnic background. The final section of the report highlighted the councils commitment to improvement and also employee initiatives like the diversity, equality and inclusion network. The network had recently surveyed staff on their diversity related experiences. The report had been compared with the Census 2011 results, next year the report would be produced using the new Census 2021 data.

The Chairman noted that there were no employees from a Black, Asian or Ethnic Minority background in senior management at RBWM and asked what was being done about it. Protected characteristics were part of the report but there was nothing on the socio-economic background of employees, which would be good to know.

Nikki Craig said that RBWM was keen to nurture talent from within and it was important that senior management identified who was keen to progress and develop. The diversity, equality and inclusion network survey had recently been completed and it would be interesting to see those results which would reveal how staff felt.

Vanessa Faulkner, Service Lead – HR People Services, said that the diversity, equality and inclusion network had recently completed the survey. Once the results had been collated, the network could then move forward and see what they wanted to do.

Nikki Craig suggested it would be possible to look at socio-economic information of staff and said that she would discuss this idea with her team. However, this would depend on staff being comfortable to share this with the council.

Councillor Werner asked what resources were being used by the council to help those with a disability. He noted that the figures in the report did not include companies owned by RBWM, for example RBWM Property Company Ltd, and asked why they were not included. Councillor Werner asked if RBWM was interested in the diversity of the various contractors which the council worked with.

Nikki Craig said that the provision of equipment in relation to disabilities would always be provided to any employee who required it to undertake their role. RBWM Property Company Ltd and external contractors were separate entities to RBWM and therefore officers did not see any of the data, as they were not RBWM employees.

Councillor Werner asked how the process could be changed, it was important that external companies were following RBWM standards when it came to equalities.

Nikki Craig said that during the procurement process, there were questions asked about adhering to the Equalities Act. She said that she would need to ask an officer from procurement for confirmation of what procedures they undertook. Officers could ask for general employee data but there was no obligation for external organisations to share this with the council.

Councillor Werner suggested that this was something that could be added to the procurement process.

ACTION – Nikki Craig to ask procurement team for confirmation of the process used to ensure that contractors abide by similar equalities values as RBWM.

Councillor Hill said that voluntary turnover was shown as 10.55% but this did not match with the head count figure for March 2020. He asked what figure it represented.

Nikki Craig explained that turnover was calculated by the leavers figure being divided by the starters and average head count across the year.

Councillor Sharpe commented that everything looked good in the report and asked if this was a correct statement to make.

Nikki Craig said that things did look good on the whole but some areas could be improved, for example the lack of ethnic diversity at management level. It would be interesting to compare the report next year when the latest census data would be available.

Adele Taylor said that things like the survey from the diversity, equality and inclusion network would help officers to understand how staff felt to work at RBWM. There were opportunities for the council to improve.

The Chairman asked if the Panel would get to see the results from the survey that had been undertaken by the network.

Nikki Craig explained that the network was employee led and the results of the survey would be referenced in future reports which would be brought to the Panel. She said that she would be happy to ask the network to see if they would be happy to share the results with Members.

ACTION – Nikki Craig to ask the diversity, equality and inclusion network if survey results can be shared with the Panel.

RESOLVED UNANIMOUSLY: That the Corporate Overview and Scrutiny noted the report and:

- i) Received future reports which would take into account the Census 2021 detail when published.**

WORK PROGRAMME

The Chairman said that he had asked Panel Members at the last meeting to send him suggestions for items to include on the work programme, but he had not received any. He asked if residents would be able to submit suggestions for topics to be scrutinised.

Mark Beeley, Democratic Services Officer, confirmed that residents were able to submit topic suggestions on the website. Messages would go out on social media to advertise this and any items that were received would be added to the work programme. Mark Beeley said that a

suggestion had been received a few months ago on an RBWM App and a report was currently being drafted. Once this was ready, it would be brought to the Panel for consideration.

The Chairman asked if this could be added into the 'items suggested but not yet programmed' section of the work programme.

Councillor Werner suggested having a finance update come to the Panel for the meeting in October 2021. He suggested having an item on procurement and whether it was possible to add in equalities as a requirement for any contract which RBWM entered in to.

The Chairman suggested to wait until Nikki Craig had asked the question and reported back to the Panel on the discussion that had taken place around equalities in the previous agenda item. The Panel could then determine whether it needed to be added to the work programme.

Adele Taylor confirmed that the Panel would be seeing the finance updates and they would be added to the work programme.

Councillor Hill suggested performance monitoring against the corporate plan and the customer journey. Councillor Hill said that RBWM was carrying a lot of debt and suggested a task and finish group on how the council would clear the debts, also looking at developer contributions from development sites. He asked what changes needed to be made to scrutiny to make it more effective, Cabinet needed to welcome challenge from scrutiny.

The Chairman said that the suggestion on the scrutiny process was a statement rather than a suggestion to be added to the work programme.

Councillor Hill explained that scrutiny should make written statements and suggestions to Cabinet which should be answered in public forums.

Adele Taylor said that developer contributions were picked up as part of the Medium Term Financial Strategy and so was not sure of how a specific task and finish group on the topic would work. Adele Taylor suggested that the topic could fall under the remit of the Audit and Governance Committee, she would be happy to discuss the potential scope with Councillor L Jones.

Councillor Sharpe said that he believed the equalities issues discussed were already part of the procurement process but thought it would be best to wait and see what Nikki Craig came back with before deciding to add it as an item on the work programme.

The Chairman suggested that the clerk could take the suggestions away and work with the Panel and officers after the meeting to see where suggestions could be added to the work programme.

The meeting, which began at 6.15 pm, finished at 7.50 pm

CHAIRMAN.....

DATE.....

Report Title:	2021/22 Q1 Data & Performance Report
Contains Confidential or Exempt Information	No - Part I
Cabinet Member:	
Meeting and Date:	Corporate Overview and Scrutiny Panel, 4 October 2021
Responsible Officer(s):	Adele Taylor, Executive Director of Resources/S151 Officer
Wards affected:	All



REPORT SUMMARY

The council is currently working to an Interim Strategy, adopted by Cabinet on 30 July 2020 in recognition of the significantly changed operating context brought about by the COVID-19 pandemic.

A new Corporate Plan to succeed the Interim Strategy is presently being developed. It has been agreed that performance reports continue to provide insight into the Interim Strategy's delivery (Appendix A) until such time as the new Corporate Plan and associated performance management framework is in place. Performance of measures previously reported to the Panel under the Council Plan 2017-2021 are included on the basis that these measures provide insights into current service delivery.

1. DETAILS OF RECOMMENDATION(S)

RECOMMENDATION: That Corporate Overview and Scrutiny Panel notes the report and:

- i) Notes the 2021/22 Corporate Overview and Scrutiny Panel Q1 Data & Performance Report in Appendix A.**

Requests relevant Cabinet Members, Directors and Heads of Service to maintain focus on improving performance.

2. REASON(S) FOR RECOMMENDATION(S) AND OPTIONS CONSIDERED

Options

Table 1: Options arising from this report

Option	Comments
Accept the recommendations in this report. This is the recommended option	This will allow continuing insight into the delivery of the council's agreed priorities in order to aid decision-making and maintain focus on continuous improvement.
Not accept the recommendations in the report.	The failure to use relevant performance information to understand delivery against the council's agreed priorities impedes the

Option	Comments
	council's ability to make informed decisions and seek continuous improvement.

- 2.1 The Council Plan 2017-21 remained current up to 30 July 2020 when Cabinet approved an Interim Council Strategy 2020/21 for immediate adoption in recognition of the significantly changed operating context brought about by the COVID-19 pandemic. The Interim Strategy sets out the priorities to which the council is responding, acknowledging that any instances where previous objectives can still be delivered without affecting delivery of interim objectives is a good thing and will be supported. The council is currently developing a new Corporate Plan and related performance management framework to succeed the Interim Strategy. It has been agreed that performance reporting against the Interim Strategy continues until such time as the new Corporate Plan and related performance management framework is approved.
- 2.2 Appendix A provides insights into the Interim Council Strategy's priorities and how they are progressing. It details the council's ongoing response to and recovery from the Covid-19 pandemic and also key updates in relation to major workstreams such as the Transformation Strategy, Environment and Climate Strategy, alongside corporate developments relating to council Governance, the People Plan and Medium-Term Financial Strategy.
- 2.3 The impact of COVID-19 continues to be felt in a number of areas of the council's operations, and this has been reflected in the council's performance indicators. For example, visits to libraries remain low compared to pre-pandemic volumes, and the percentage of calls answered within 60 seconds and abandoned after 5 seconds has been impacted by staff preparations to reopen libraries across the borough from 12 April. Call performance has, however, steadily improved each month throughout Q1. Encouragingly, performance in relation to the average number of days to process new claims for Housing Benefits has been consistently on target for the entire period of Q1.
- 2.4 Table 2 summarises the position of all reported key performance indicators as at the close of Q1. Appendix A sets out performance trends and related commentary for each indicator. All indicators continue to be monitored and reported to relevant Overview and Scrutiny Panels on a quarterly basis as part of an ongoing performance dialogue.

Table 2: Summary KPI Q1 21-22

	Green (Succeeding or achieved)	Amber (Near target)	Red (Needs improvement)
Percentage of Council Tax collected		X	
Percentage of non-domestic rates (Business Rates) collected			X
Percentage of calls answered within 60 secs			X
Percentage of calls abandoned after 5 secs		X	
No. visits (physical and virtual) to libraries	X		
Average days to process new claims (Housing Benefits)	X		
Average days to process changes in circumstances (Housing Benefits)		X	
Percentage online forms submitted by (customer/residents)	X		
Percentage voluntary turnover (YTD)	X		
TOTAL (9)	4	3	2

3. KEY IMPLICATIONS

3.1 The key implications of this report are set out in table 3.

Table 3: Key Implications

Outcome	Unmet	Met	Exceeded	Significantly Exceeded	Date of delivery
The council is on target to deliver its strategic priorities	< 100% priorities on target	100% priorities on target			30 June 2021

4. FINANCIAL DETAILS / VALUE FOR MONEY

4.1 There are no direct financial implications arising from the recommendations.

5. LEGAL IMPLICATIONS

5.1 There are no legal implications arising from the recommendations.

6. RISK MANAGEMENT

6.1 The risks and their control are set out in table 4.

Table 4: Impact of risk and mitigation

Risk	Level of uncontrolled risk	Controls	Level of controlled risk
Poor performance management practices resulting in lack of progress towards the council’s agreed strategic priorities and objectives.	HIGH	Robust performance management within services to embed a performance management culture and effective and timely reporting.	LOW

7. POTENTIAL IMPACTS

7.1 There are no Equality Impact Assessments or Data Protection Impact Assessments required for this report. There are no climate change or data protection impacts as a result of this report.

8. CONSULTATION

8.1 Performance against the strategic priorities is regularly reported to the council’s four Overview and Scrutiny Panels. Comments from the Panels are reported to Cabinet Members, Directors and Heads of Service as part of an ongoing performance dialogue.

9. TIMETABLE FOR IMPLEMENTATION

9.1 The full implementation stages are set out in table 5.

Table 5: Implementation timetable

Date	Details
Ongoing	Comments from the Panel will be reviewed by Cabinet Members, Directors and Heads of Service.

10. APPENDICES

10.1 This report is supported by one appendix:

- Appendix A: Corporate Overview and Scrutiny Panel Q1 Data & Performance Report.

11. BACKGROUND DOCUMENTS

11.1 This report is supported by one background document:

- Interim Council Strategy 2020/21:
<https://rbwm.moderngov.co.uk/ieListDocuments.aspx?CId=132&MId=7763&Ver=4>

12. CONSULTATION

Name of consultee	Post held	Date sent	Date returned
<i>Mandatory: Statutory Officers (or deputy)</i>			
Adele Taylor	Executive Director of Resources/S151 Officer	18.08.21	
Emma Duncan	Deputy Director of Law and Strategy / Monitoring Officer	18.08.21	
<i>Other consultees:</i>			
<i>Directors (where relevant)</i>			
Duncan Sharkey	Chief Executive	18.08.21	
Hilary Hall	Executive Director of Adults, Health and Housing	18.08.21	19.08.21
<i>Heads of Service (where relevant)</i>			
Nikki Craig	Head of HR, Corporate Projects and IT	18.08.21	06.09.21
Daniel Brookman	Head of Transformation	18.08.21	23.09.21
Louise Freeth	Head of Revenue, Benefits, Library and Resident Services	18.08.21	25.08.21
<i>External (where relevant)</i>			
N/A			

REPORT HISTORY

Decision type:	Urgency item?	To follow item?
Non-key decision	No	No

Report Author: Radhika Thirunarayana Govindarajan, Lead Performance Analyst

Corporate Overview and Scrutiny Panel
Q1 2021-22 Data and Performance Report
April 2021 – June 2021

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1. Executive Summary

- 1.1 The Council Plan 2017-21 remained current up to 30 July 2020 when Cabinet approved an Interim Council Strategy 2020/21 for immediate adoption on the basis that the Covid-19 pandemic has significantly altered the context in which the council is currently operating.
- 1.2 The Interim Council Strategy clarifies the revised priorities to which the council is responding, acknowledging that any instances where previous objectives can still be delivered without affecting delivery of interim objectives is a good thing and will be supported. The priorities are:
 - **Covid-19 objectives:** focusing on the immediate response, long-term recovery, and new service requirements.
 - **Interim Focus Objectives 2020-21:** focusing on revised service operating plans, development of the Transformation Strategy, Climate Strategy, Governance, and People Plan.
 - **Revised Medium Term Financial Strategy:** focusing on the impact of Covid-19, economic downturn, and government policy.
- 1.3 This report is structured to provide insight into the delivery of the Interim Strategy's priorities (section 2). Performance of measures previously reported to the Corporate Overview and Scrutiny Panel are also included on the basis that these measures provide some insights into service delivery. These measures are grouped in this report by the lead service.
- 1.4 The council is currently developing a new Corporate Plan and related performance management framework to succeed the Interim Strategy. It has been agreed that performance reporting against the Interim Strategy continues in this format until such time as the new Corporate Plan and related performance management framework is adopted.

2. Interim Council Strategy: Delivery of priorities

2.1 This section provides a brief overview of key activities and milestones achieved by the council to date in 2021/22.

PRIORITY:	COVID-19 OBJECTIVES
Item	Achievements and key milestones
<p>Response (immediate)</p>	<p>Community response and Clinically Extremely Vulnerable (CEV) Residents: Official shielding was lifted for more than 8,000 residents – some 6% of the population – in April 2021. This brought to an end an innovative community partnership protecting our CEV residents from Covid-19. From the outset of the first lockdown in March 2020 a coordinated team of staff, drawn from all services in the council, maintained regular contact with residents who were shielding and took any appropriate action to ensure that these individuals’ needs were met.</p> <p>The public-facing online directory of Covid-19 Support Groups developed to direct residents to community-based support options for particular needs, continues to be developed and is a key tool for residents and services going forward. The database (Lyon), which again was developed during the pandemic, continues to be developed to manage interactions with anyone seeking help and support in the community. Lyon also enables registration of individuals wishing to volunteer their time to the community effort, and with the development of an app will support appropriate “matching” of volunteers with those needing help and support.</p> <p>With the easing of restrictions from 19 July 2021, CEV residents still need to be extremely cautious and are being encouraged to adhere to the Government guidance. The council, through the network of community groups, will continue to provide appropriate help and support.</p>
<p>Response (immediate)</p>	<p>Outbreak Control Plan and Local Outbreak Engagement Board: The Outbreak Control Plan Summary was published on the RBWM website on 30 June 2020 in line with national instruction from the Department of Health and Social Care. The plan was produced in collaboration with the NHS and Public Health to guide our response to the ongoing Covid-19 pandemic, to put in place measures to identify and contain outbreaks and to protect the public’s health. The Outbreak Engagement Board is a subgroup of the Health and Wellbeing Board, established to provide public-facing engagement and communication in relation to Covid-19. The Board meets every fortnight (every other meeting is in public). The Local Outbreak Control Plan continues to be updated to reflect changes in national guidance.</p>
<p>Response (immediate)</p>	<p>Community Influencers and Community Information Champions: In October 2020 a new “community influencers” group was established with representatives from across various RBWM departments, including Achieving for Children, Libraries and Environmental Health. The group’s aim is to communicate key Covid-19 messages to the wider community, whilst targeting messaging to specific demographic groups based on analysis of key datasets. The group launched its “Community Information Champion” scheme in November 2020, through which members of the community can volunteer themselves to receive regular information from the council regarding Covid-19 and then share this information with their</p>

	<p>family, friends, and other contacts. This approach ensures greater transmission of key Covid-19 messages across the community where other council communication methods may not have reached. Champions can also feedback to the council any questions or requests for clarity from the community. This two-way relationship helps the council to refine its Covid-19 messages and to also dispel any myths that may be circulating regarding the virus. To date, a network of 150 Champions has been established.</p> <p>A new Covid Engagement Officer was recruited, jointly funded by Public Health and the council to support a wide range of COVID related engagement activities. There has also been the opportunity to vaccinate residents within their localities with vaccinations being offered on the mobile testing unit.</p> <p>Engagement with communities to mitigate the rise in infections and cases remains a key priority for the council and its partners.</p>
<p>Recovery (long-term)</p>	<p>The RBWM Recovery Strategy sets out the council’s approach to supporting residents and businesses, empowering communities to thrive and building lasting partnerships with businesses.</p> <p>During Q1 2021-22 activity was focussed on supporting businesses and residents through the government roadmap to reopening. A Royal Borough re-opening and recovery strategy was developed to support the safe reopening of the high street and recovery of the high street economy in the Royal Borough of Windsor and Maidenhead as restrictions start to lift. The aim was to provide clear, consistent messages that considered the needs of the destination, its local communities, its businesses and its visitors to stimulate the local economy and a return to days out and staycations in a safe and measured way. Innovative “Tech For Good” tools were used in the form of “Hello Lamp Post”, which lets people talk to street objects and share their thoughts on the high streets and what they want to see on their town centres. All of these comments are then considered as part of the local recovery plan. This initiative has been rolled out in Windsor with over 3,000 responses to date and there are plans to introduce it across the borough. The campaign “Don’t Let Your Guard Down” was launched to provide reassurance to visitors returning to visit our local towns.</p> <p>A recovery dashboard has been developed which will be used to steer future workstreams from the recovery and renewal strategy adopted in 2020. Q2 activity will focus on business engagement and support following stage 4 of the roadmap to reopening and developing jobs and skills support for our residents.</p>
<p>Recovery (long-term)</p>	<p>Local Contact Tracing Service: The council set up a local contact tracing service which started operating in November 2020 to complement the national NHS Test and Trace service. Operating 7 days a week, the service reaches out to residents who have tested positive for Covid-19 but who have not been successfully contacted by the national NHS Test and Trace system. The service introduced a text messaging service on 9 June 2021. Over 3,000 messages were sent, consisting of:</p>

	<p>Week 1: Acknowledging the use of Lateral Flow Device (LFD) Test Community Collect service and reminding users to log their result at https://www.test-for-coronavirus.service.gov.uk/report-result within 24 hours if they had tested positive. Suggesting that LFD Home Tests can sometimes be false positives: make sure to also take a Confirmatory PCR Test within 48 hours to reconfirm that you indeed need to isolate and to get access to the Isolation Support Fund if relevant.</p> <p>Week 2: Communicating that it may still be possible for people that have received vaccinations to contract COVID-19, although a full course will reduce the chances of becoming seriously ill. Cautioning the residents that cases are rising within RBWM and reiterating the public health message to continue to follow the national guidelines of social distancing, wearing a face mask and washing your hands frequently.</p> <p>Week 3: Communicating the provision to self-book a vaccination if you are 18 years or over via the following link www.nhs.uk/conditions/coronavirus-covid-19/coronavirus-vaccination/book-coronavirus-vaccination and acknowledging the walk-in centres' availability in Maidenhead and Windsor.</p> <p>RBWM switched to "Local 0" on 28 June 2021. The "Local 0" will result in RBWM residents that have tested and recorded positive being contacted by a local tracer rather than a tracer working nationally. The purpose of this shift is to:</p> <ul style="list-style-type: none"> • reduce the time before the resident is contacted, and hence further potential cases identified. • allow for a better understanding of types of cases in the borough. • provide a more efficient and proactive approach to identifying trends and taking appropriate action <p>The opening hours have been extended from 10am – 4pm to 9am – 5pm, 7 days a week. This reflects the national ambition to have more calls 'handled' locally to increase the overall effectiveness of contact tracing locally. This change was expected to dramatically increase the number of cases RBWM handled and a recruitment drive has been put in place in order to support the service and increased level of capacity necessary. At the close of Q1 2021/22, there were 134 cases and 243 calls made. (Full impact of the switch to 'Local 0' will be reported in Q2).</p>
<p>Recovery (long-term)</p>	<p>Lateral Flow Device Tests: From 8 February 2021 rapid Covid-19 test centres opened in Braywick Leisure Centre and Windsor Leisure Centre, offering 30-minute Lateral Flow Device Tests (LFDTs) initially to people working in public-facing roles who do not have Covid-19 symptoms. The purpose of the tests was to identify asymptomatic carriers of the virus. Following an announcement by the Prime Minister in April 2021, anyone was able access the LFDT at the centres, or to pick up a home-testing kit or get a rapid Covid-19 test at Braywick or Windsor Leisure Centre as lockdown restrictions were eased. In addition to the leisure centre test sites, a mobile testing offer was started at Ascot Racecourse.</p> <p>After a review of the demand the operating hours were adjusted slightly at both leisure centres to reflect ongoing demand. This saw the Lateral</p>

	<p>Flow Test (LFT) sites reduced to 2 booths at each site and moved to revised delivery areas to allow the leisure centres to reuse the original spaces for leisure income generating activities. The revised operation, implemented on 17 May 2021, was still able to deliver the service to meet the ongoing demands.</p> <p>The mobile testing operation unit moved from Ascot racecourse to Horton (Champney Hall) on Mondays and Wraysbury (Car Park, The Green) on Wednesdays with effect from Monday 21 June operating from 9am – 1pm. The mobile unit now offers assisted testing as well as distributing Community Collect kits. The mobile unit is now being used to support pop up vaccination offer at locations being agreed with the NHS.</p> <p>Collection of Community Collect kits is now also available from each of the reception areas of all 5 leisure centres and Windsor Information Centre. This allows greater access and availability to the kits for residents. During Q1 6,329 LFTs were completed and 5,823 Community Collect kits have been distributed.</p>
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PRIORITY:	INTERIM FOCUS OBJECTIVES 2020-21
Item	Achievements and key milestones
Revised Service Operating Plans	<p>As part of the organisational recovery strategy, services have made changes to existing operating models where necessary to continue to deliver services with customers being at the centre of it. One example has been the Library Transformation Strategy. This strategy is the outcome of the public library consultation and focuses on facilitating and coordinating, via community groups and other partners, a range of services for everyday life to meet community needs. One such example is the select and deliver service supported by volunteers to ensure all residents are able to access library services regardless of mobility, disability or distance from a static library or any other barrier.</p>
Transformation Strategy	<p>The Transformation Strategy 2020-2025 was unanimously approved by the Cabinet Transformation Sub-Committee on 22 September 2020. The strategy's development responds to key challenges surrounding the council's financial position and builds upon the strong foundations of innovation and community-empowerment that quickly developed in response to the Covid-19 pandemic. The Strategy aims to deliver radical changes to the way in which the council operates and identifies 6 key areas for transformation (culture, environment, prevention, digital, process redesign and finance).</p> <p>Action plans by which to deliver the Strategy are at sign-off stage with quarterly Cabinet Transformation Sub-Committee meetings being added to the corporate diary. Whilst Covid-19 has impacted progress, a number of projects have been implemented, proving that design and innovation can be done quickly and in an agile fashion. Asset Based Community Development methods have been used to deliver the Embedding Community Response project in Clewer and Dedworth. This project has created a blueprint for the council to work with communities to co-produce and co-design ways of delivering community projects.</p>

	<p>In April 2021, the next phase of Embedding Community Response was launched in Maidenhead, with the creation of five subgroups working directly with communities and partners.</p> <p>The RBWM Together Engagement site has launched and this will be used as an integrated tool for community engagement and empowerment.</p> <p>A successful bid to the NHS Charities fund has given us the opportunity to innovate a joined-up health, social care, and community initiative. The programme refers individuals in need, for wrap-around support led by the community (Maidenhead Magpies) but backed up by the council and NHS in a unified approach. Whilst needs differ across the individuals, the support being offered is similar. Supporting the vision of enabling people to remain independent for longer, this project will also test some of the technology enabled care systems available on the market to embed digital solutions as part of the personalised care.</p>
<p>Environment and Climate Strategy</p>	<p>The Council has strengthened its Sustainability and Climate Change Team, recruiting two new Sustainability Officers and moving the Countryside Manager and Landscape Officer into the team to provide additional resource.</p> <p>The Council has made good progress against the action plan. Key achievements have included securing external funding in excess of £1 million to deliver energy projects within the Borough, drafting a Biodiversity Action Plan and helping facilitate the launch of a Repair Café in Maidenhead.</p> <p>Officers have met regularly with the cross-party steering group as well as working closely with the community to deliver specific actions. Work is underway to look at future governance arrangements that will support delivery of the strategy moving forward.</p>
<p>Governance</p>	<p>A new full-time Monitoring Officer and Deputy Director of Law and Strategy joined the Council in February 2021 to lead a new Governance, Law and Strategy Directorate and to bolster the council’s governance capability.</p> <p>The focus of the Directorate since February 2021 has been to develop robust processes and systems to enhance decision-making and performance and to develop a culture to support this.</p> <p>Key areas of focus in Q1 have been as follows:</p> <p>Identifying and responding to key governance issues: The Statutory Officers Group consisting of the Head of Paid Service, S151 Officer, Monitoring Officer and deputies oversee the governance framework and meet regularly to discuss issues of concern and monitor the progress and actions contained in the Annual Governance Action Plan.</p> <p>In Q1 the Council’s governance environment has been tested against the Centre for Governance and Scrutiny’s new Risk and Resilience Framework, which builds on the CIPFA’s “Delivering Good Governance”. Key areas of work have been identified and incorporated into the plan for the current year Annual Governance Statement (AGS).</p> <p>The AGS itself has been revised to reflect best practice.</p>

	<p>Member Code of Conduct: A new Code of Conduct has been adopted and Members trained. Training has also been provided to Parish Councils. Members have also been given training on social media usage.</p> <p>Corporate Plan: The Corporate Plan is a key document in terms of delivering outcomes for our residents and communities and measuring performance. The development of the plan is following an evidence-based approach and is currently at the consultation draft stage.</p> <p>Communications and engagement: Consultation best practice guidance has been developed and circulated and builds on a more rigorous process that has been introduced on Equality Impact Assessments (EQIAs). A new Communication Protocol and Engagement Strategy is in the process of being developed. An e-newsletter is being produced for Parishes to foster closer working and better outcomes for residents.</p> <p>Constitution: The Constitution has been reviewed and updated during the year. There is a greater focus on using the rules of debate to support effective decision making.</p> <p>Following the CIPFA financial governance reviews, detailed action plans were developed in relation to finance and pension fund governance and these have continued to be monitored and reviewed throughout the year. All actions for the finance governance review have been started and almost all actions completed in year. For the pensions action plan, these are reported to the Pensions Fund Committee and over half have already been completed and the rest are expected to be completed to the timelines agreed.</p>
<p>People Plan</p>	<p>The council's appraisal process was relaunched in June 2021. Now called Connect, forms have been updated that support the scoring of objectives as well as the review of how work is undertaken in line with our values of:</p> <ul style="list-style-type: none"> • Invest in strong foundations • Empowered to improve • One team and vision • Respect and openness. <p>The new format has been used by the chief executive and directors in their recent end of year reviews and across all levels in the organisation. The next stage will be to move the process online and into the HR Information System "iTrent".</p> <p>The updated People Strategy and People Activity Plan have been shared with Corporate Leadership Team, Ambassador group and Equality, Diversity and Inclusion network. It is currently being finalised and will be shared with all employees.</p>

PRIORITY:	REVISED MEDIUM TERM FINANCIAL STRATEGY
Item	Achievements and key milestones
<p>Revised Medium Term Financial Strategy</p>	<p>The Medium-Term financial strategy was refreshed and approved during 2020/21 and was approved at Full Council on 23 February 2021 as part of setting the budget for 2021/22.</p>

	<p>At cabinet in July, an update on the medium-term financial plan was considered that set the financial criteria necessary to commence the development of the 2022/23 budget, according to the agreed strategy.</p> <p>Any revisions to the strategy will be considered throughout the budget setting process for 2022/23.</p>
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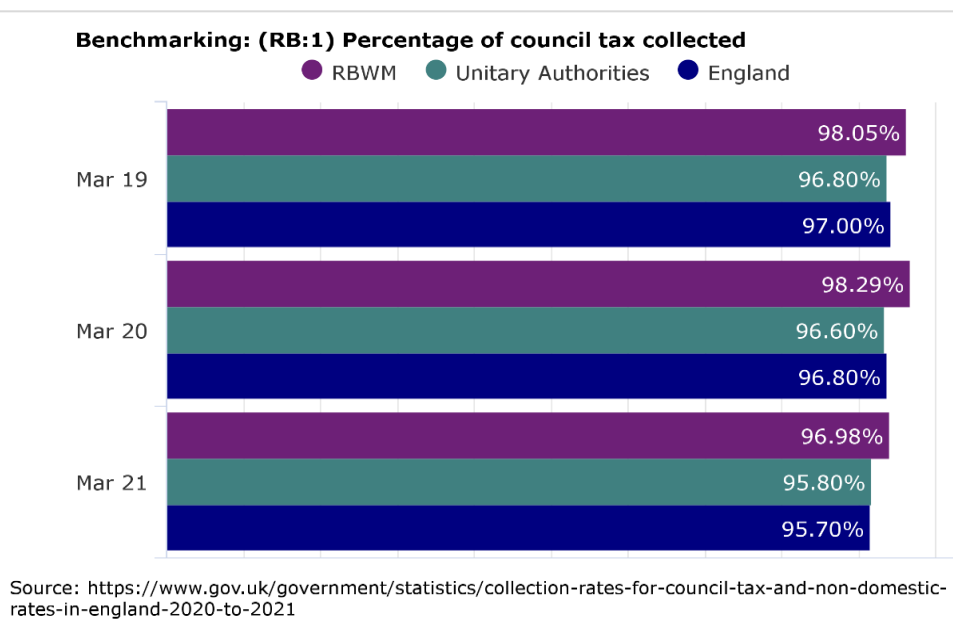
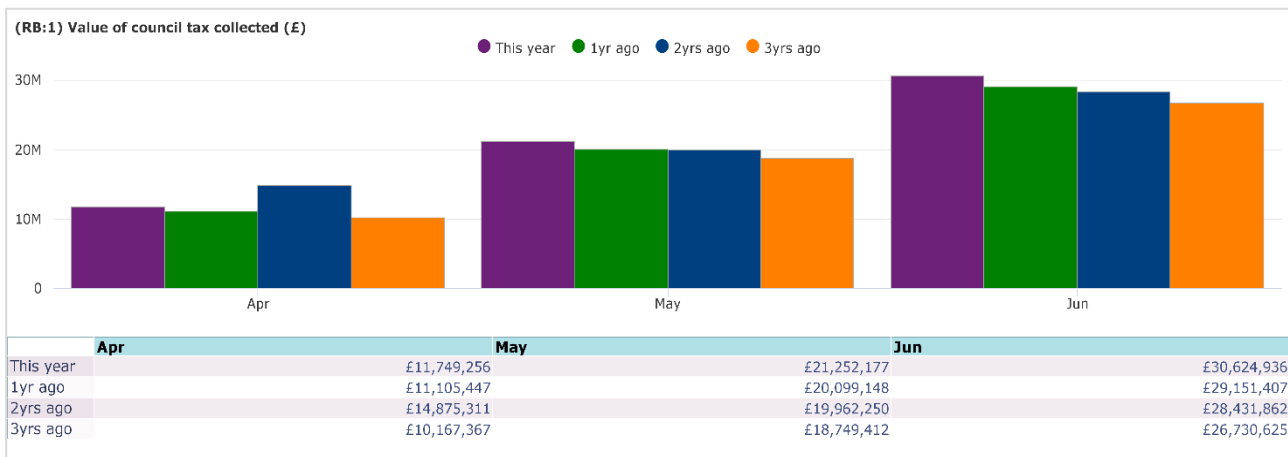
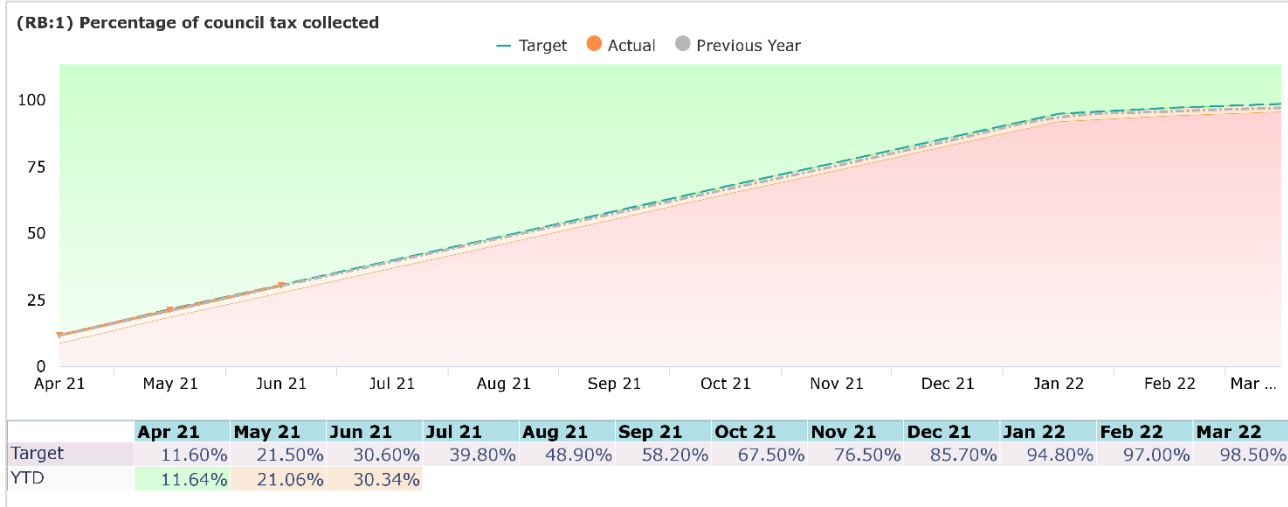
3. Service Performance Summary Report (YTD)

3.1 Performance of measures previously reported to the Corporate Overview and Scrutiny Panel are set out here on the basis that these measures provide some insights into service delivery (priority 2).

	Green (Succeeding or achieved)	Amber (Near target)	Red (Needs improvement)
Percentage of Council Tax collected		X	
Percentage of non-domestic rates (Business Rates) collected			X
Percentage of calls answered within 60 secs			X
Percentage of calls abandoned after 5 secs		X	
No. visits (physical and virtual) to libraries	X		
Average days to process new claims (Housing Benefits)	X		
Average days to process changes in circumstances (Housing Benefits)		X	
Percentage online forms submitted by (customer/residents)	X		
Percentage voluntary turnover (YTD)	X		
TOTAL (9)	4	3	2

4. Revenue, Benefits, Library and Resident Services

4.1 Council Tax

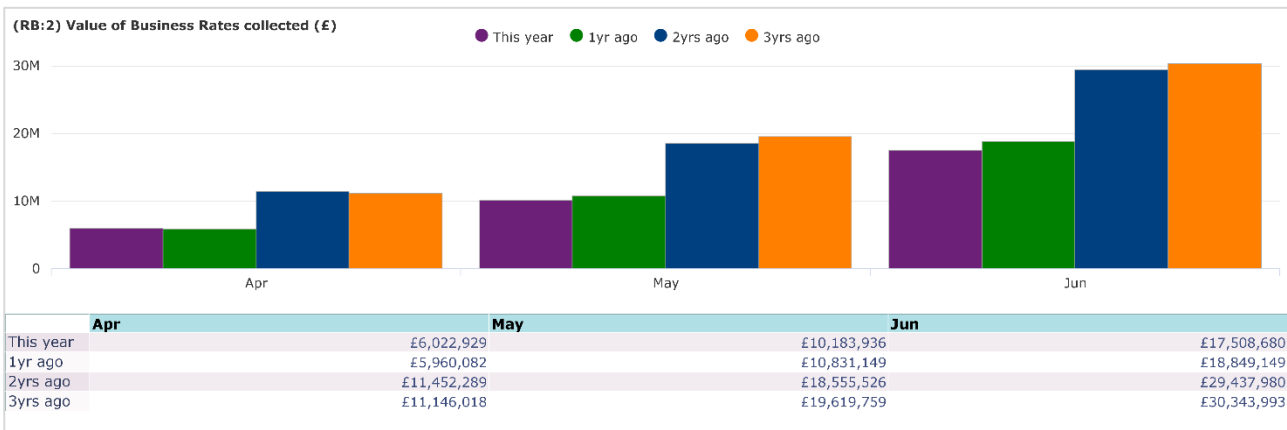
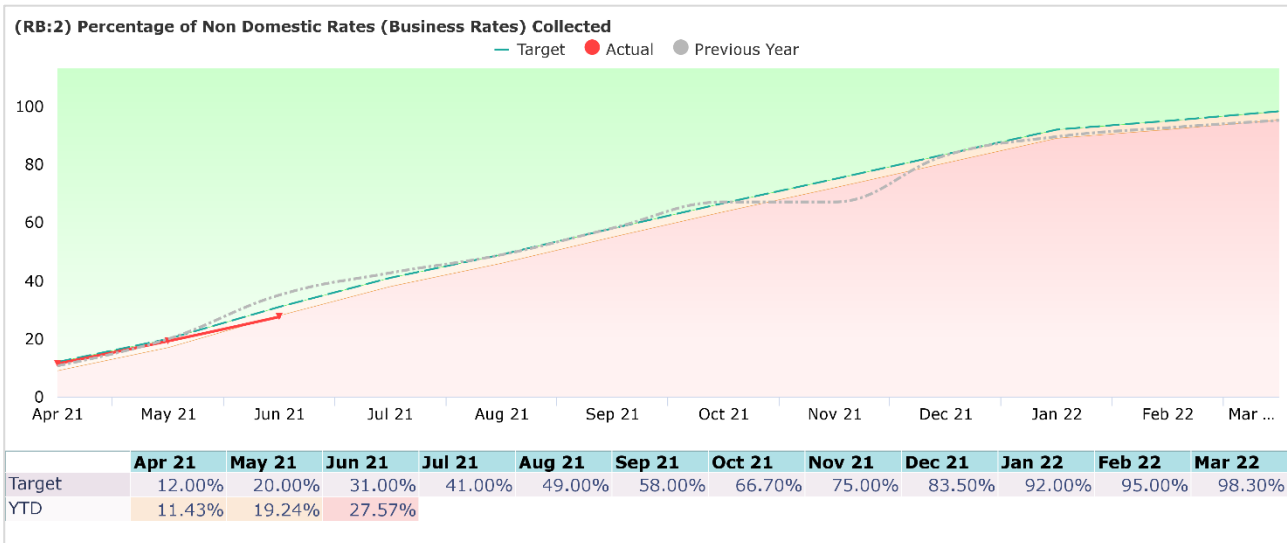


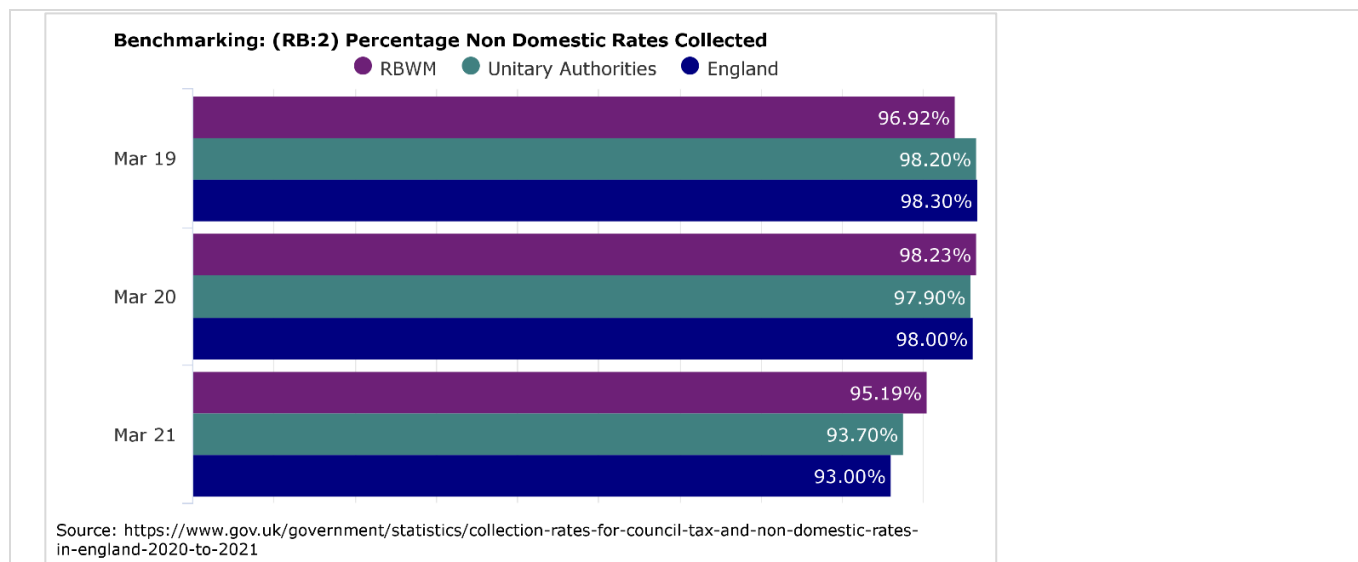
The year-end target for this measure is 98.50% profiled monthly. A red flag is raised if the year-end value is at/falls below 95.50%.

As at the close of Q1 performance of this measure stands at 30.34%, below target (30.60%) by 0.26 and within tolerance for the measure, however higher than the collection rates for Q1 2020/21 (30.24%). The value of council tax collected by the close of June 2021 (£30,624,936) is the highest collection value in the last 3 years in cash terms, at £1.47m more than Q1 2020/21.

Available benchmarking data shows that the council tax collection rates for Windsor and Maidenhead have been more than England and Unitary authorities consistently for the last three years 2018/19, 2019/20 and 2020/21.

4.2 Business Rates





Q1 Commentary

The year-end target for this measure is 98.30% profiled monthly. A red flag is raised if the year-end value is at/falls below 95.30%.

At the close of Q1 performance for this measure stands at 27.57% below the target (31.00%) by 3.43% outside the tolerance and less when compared to Q1 2020/21(35.08%).

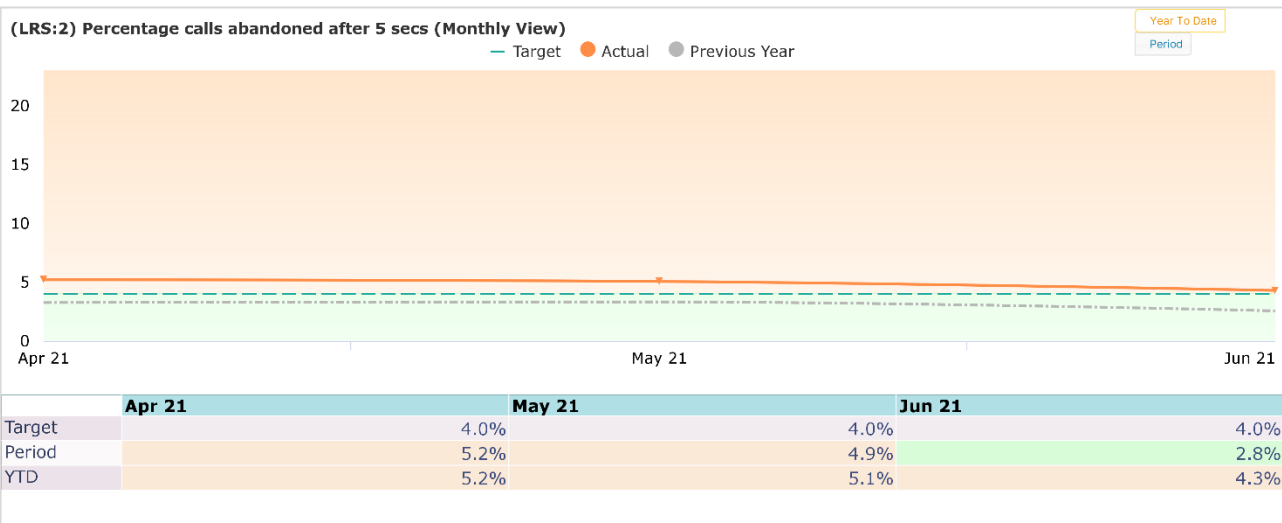
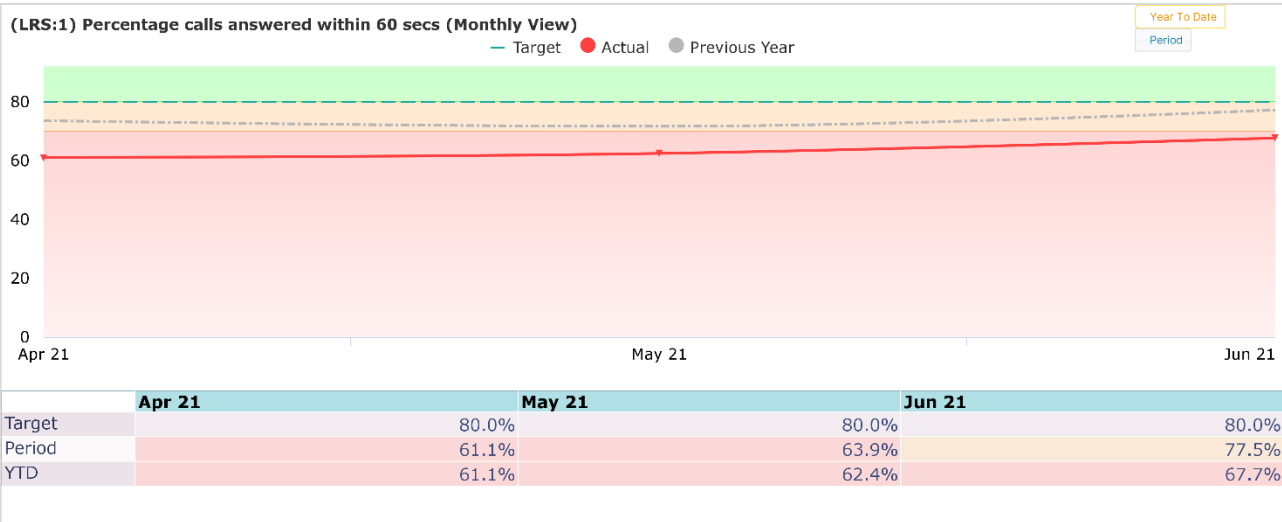
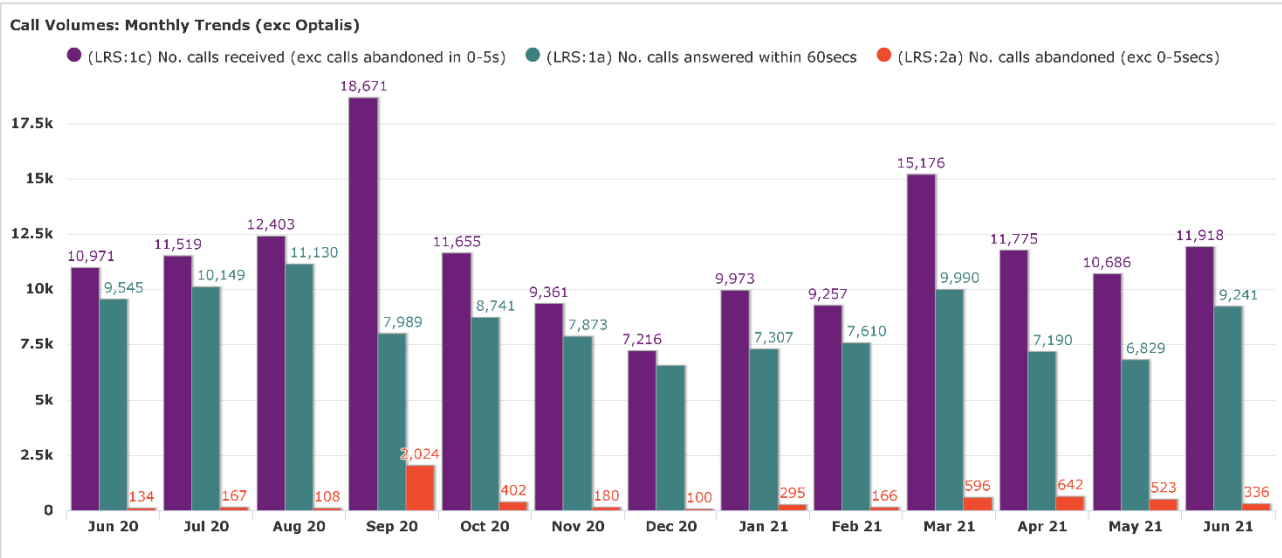
The net collectible debit (NCD) increased by £10.5m between May and June as a direct result of the announcement in the March budget that the Expanded Retail Relief and Nursery Relief would drop from 100% to 66%, with the introduction of cash caps affecting larger businesses, with effect from 1 July 21. Although the start date is after Q1, the change had to be actioned in Q1 in order to take effect from 1 July 21. This increase in the NCD obviously impacts on the calculation of the collection rate.

Due to the legal requirement to provide at least 14 days clear notice prior to any payment being requested by instalment, the majority of the affected businesses will not be requested to make a payment until 1 August 21, therefore the effects of this change will also play through into the collection rate calculation for July (Q2).

It should also be borne in mind that these are businesses who have not been required to make any payments towards business rates since April 2020 and will now be expected to make payments while many are still recovering from the effects of the various lockdown restrictions. The Revenues team will assist as much as possible, e.g., if a business is in hardship and wishes to negotiate an alternative payment arrangement, but ultimately the focus will be on securing the funds due.

Available benchmarking data shows that the non-domestic collection rates for Windsor and Maidenhead are higher than England and Unitary authorities for the last two years 2019/20 and 2020/21.

4.3 Customer contact centre calls



Q1 Commentary

The monthly and year-end target for percentage calls answered within 60 seconds is 80%. A red flag is raised if percentage is at/falls below 70%. The monthly and year-end target for percentage

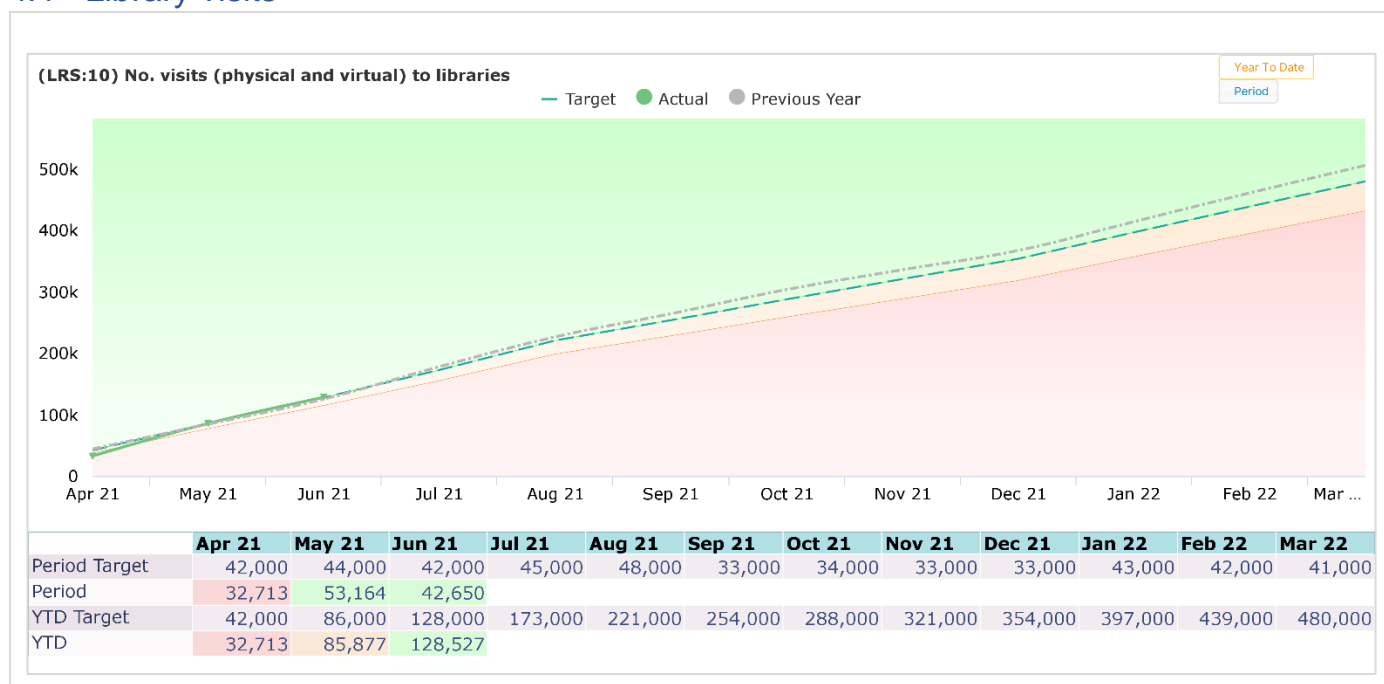
calls abandoned (excluding calls abandoned within 0-5 seconds) is 4% and red flag is raised if percentage is at/exceeds 20%.

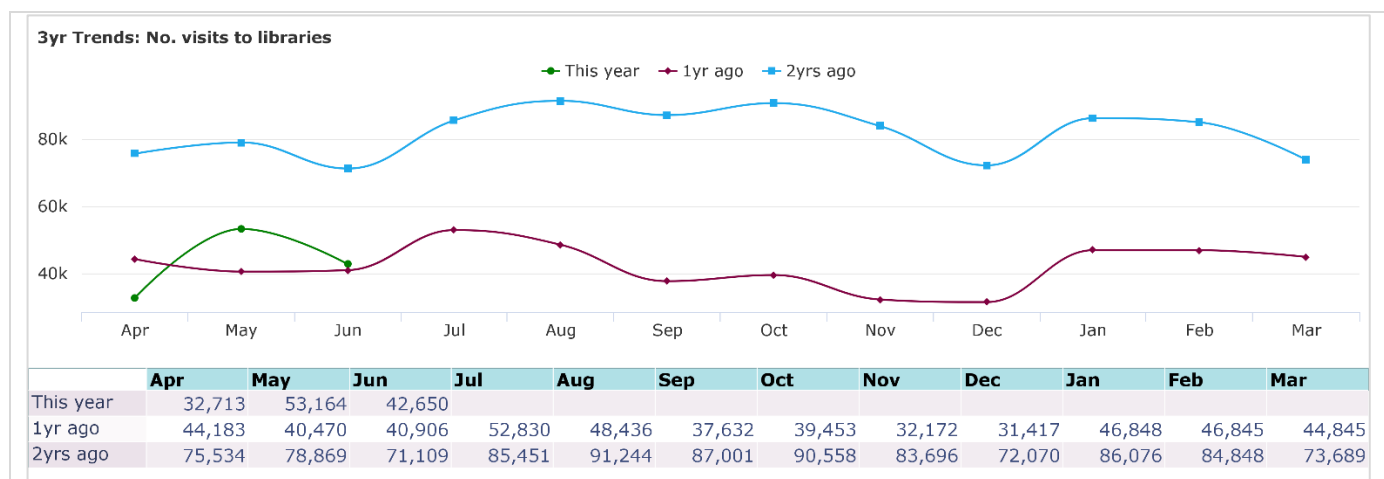
The total volume of calls to the contact centre in Q1 was 34,379, an increase by 13.4% for the same period in 2020/21 (30,319 calls). At the close of Q1 2021/22 the service has answered 67.7% (23,260/34,379) calls within 60 seconds, below the 80% target. The service is just short of target though with tolerance thresholds for calls abandoned after 5 seconds, achieving 4.3% (1,501/34,379).

As the lockdown restrictions eased, staff were very busy working to get the libraries open again for the public whilst also maintaining their digital offerings. This, coupled with an increase in the volume of calls regarding council tax and benefits, elections and school admissions, has impacted the performance of both metrics. However, the service is steadily improving from the April position with the period performance for June being 77.5% (just short of target) for calls answered with 60s and 2.3% (meeting target) for calls abandoned after 5 seconds.

Since its introduction (in March-21) the new telephony system is embedding well and allows full integration of different contact methods – including webchat, email and social media – therefore streamlining the Call Centre and ensuring customers are dealt with in a uniform way regardless of whichever contact option they choose.

4.4 Library visits





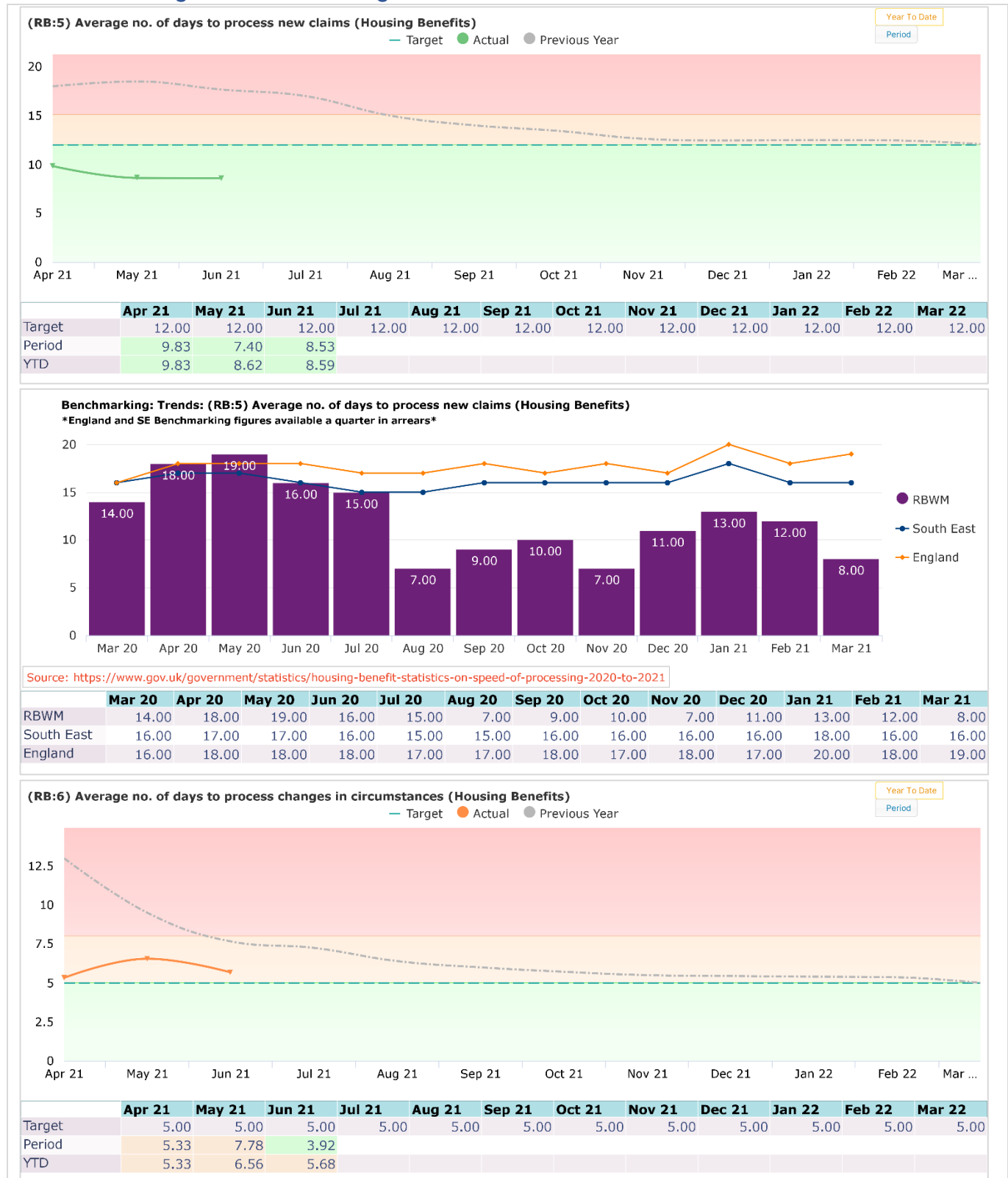
Q1 Commentary

The year-end target for this measure is 480,000 and profiled monthly. A red flag is raised if volumes are at/fall below 10% of the target. The target is a 40% reduction on the 2020/21 target (800,000). Customer behaviours have changed during lockdown with many resorting to other forms of entertainment like online gaming or increased levels of watching TV and other online video services. Hence it is acknowledged that these targets will help understand customer behaviours post Covid and are a reasonable expectation to achieve as opposed to being definitive statement of success/failure.

At the close of Q1, the number of visits to libraries is 128,527, above the target of 128,000 by 527. The libraries re-opened during April followed by the opening of the container libraries in May in accordance with the national roadmap out of lockdown. The service is offering browsing, bookable computer access for one session per day and bookable study space in Windsor and Maidenhead libraries. Throughout the pandemic there has been particular focus on the growth of the service’s digital offer to support home-based leisure and learning and to mitigate the risk of a widening digital divide which the service is continuing to deliver. Apart from the variety of digital offers like video-streaming service (Kanopy), online video tutorials (Niche Academy), academic journals and research papers (Access to Research), online university courses (Future Learn), free courses on basis IT skills (Learn my Way), and Encyclopaedia Britannica the service has introduced a free online resource; Complete Business Reference Advisor (COBRA) for business start-ups and small firms providing a number of practical guides on how to get started in any industry sector.

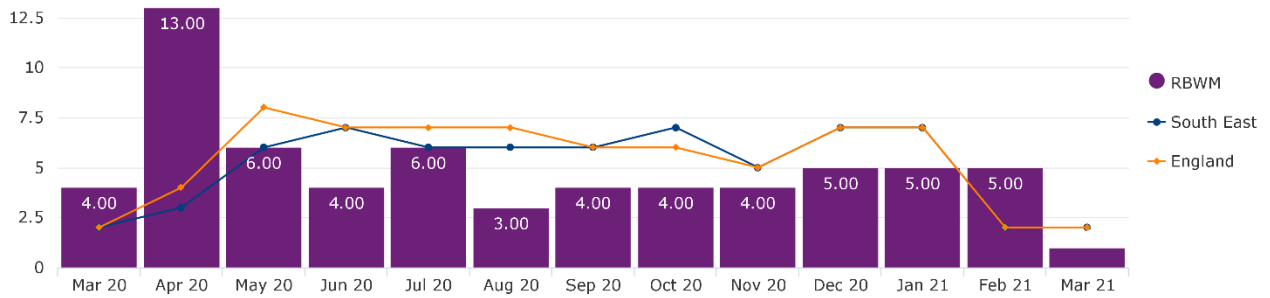
The Summer Reading challenge and a variety of activities rolled out for all age groups during summer is expected to see an increase in the visits in Q2.

4.5 Processing times for housing benefits



Corporate Overview & Scrutiny Panel: 2021/22 Q1 Data & Performance Report

Benchmarking: Trends: (RB:6) Average no. of days to process changes in circumstances (Housing Benefits)
 England and SE Benchmarking figures available a quarter in arrears



Source: <https://www.gov.uk/government/statistics/housing-benefit-statistics-on-speed-of-processing-2020-to-2021>

	Mar 20	Apr 20	May 20	Jun 20	Jul 20	Aug 20	Sep 20	Oct 20	Nov 20	Dec 20	Jan 21	Feb 21	Mar 21	
RBWM	4.00	13.00	6.00	4.00	6.00	3.00	4.00	4.00	4.00	5.00	5.00	5.00	5.00	1.00
South East	2.00	3.00	6.00	7.00	6.00	6.00	6.00	7.00	7.00	5.00	7.00	7.00	2.00	2.00
England	2.00	4.00	8.00	7.00	7.00	7.00	6.00	6.00	5.00	7.00	7.00	7.00	2.00	2.00

Q1 Commentary

Please note that Q4 2020/21 figures for both measures have been updated following the official data-release by the Department for Work and Pensions. The Q4 YTD figure for RB:5 has been updated from 11.81 (green) to 12.08 (amber). The Q4 YTD figure for RB:6 has been updated from 4.94 (green) to 5 (green).

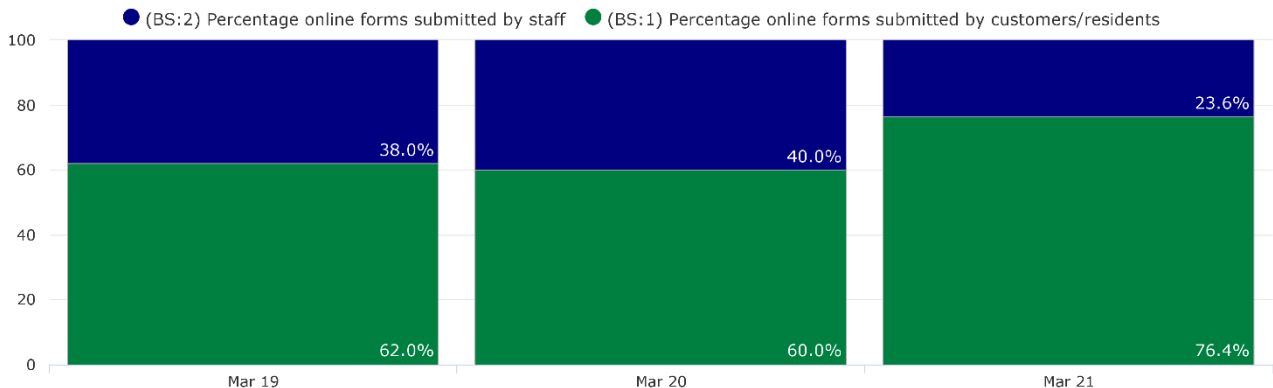
Based on internal reports, at the close of Q1 the year-to-date performance for average number of days to process new claims is 8.59 days and below target of 12 days and the average number of days to process changes in circumstances claims is 5.68 days which is just above target, though within the tolerance thresholds of 5 days.

Available benchmarking data up to the end of March 2021 (please note that South East and England benchmarking figures are available a quarter in arrears) for both processing new claims (RB:5) and change in circumstances (RB:6) shows RBWM's performance to be better than reported figures for the South East and England since July 2020 showing that the service was quick to adapt to remote working and increased demand due to Covid-19 after the nation went into its first lockdown in March 2020.

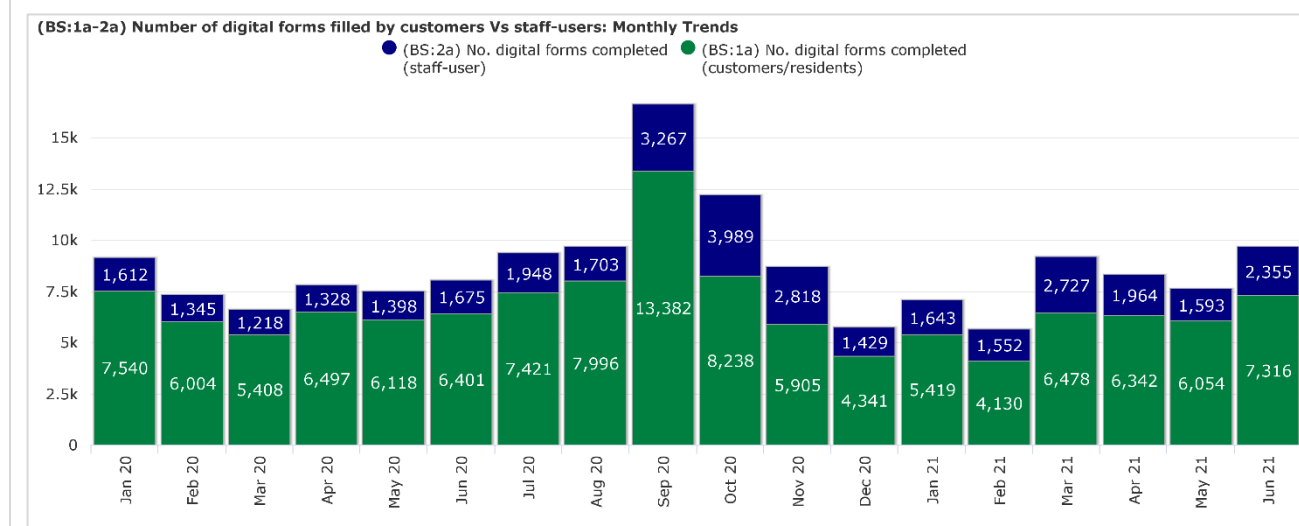
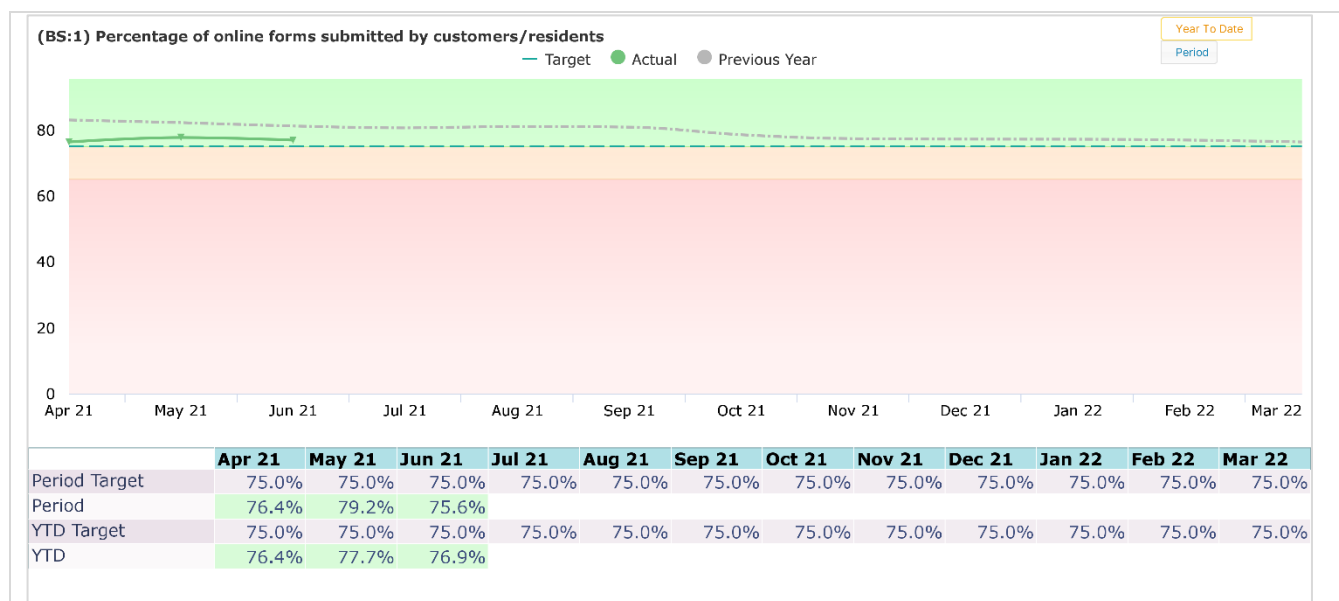
5. Transformation

5.1. Digital Customer Interactions

Percentage forms submitted by customers/residents Vs staff users: Annual Trends



Corporate Overview & Scrutiny Panel: 2021/22 Q1 Data & Performance Report



Q1 Commentary

The “Percentage of online forms submitted by customers/residents” is a new measure to the 2021/22 framework and replaces the previous measure “No. online forms submitted by customers/residents”. The monthly and year-end target is 75% with a red flag raised if percentage is at/falls below 65%.

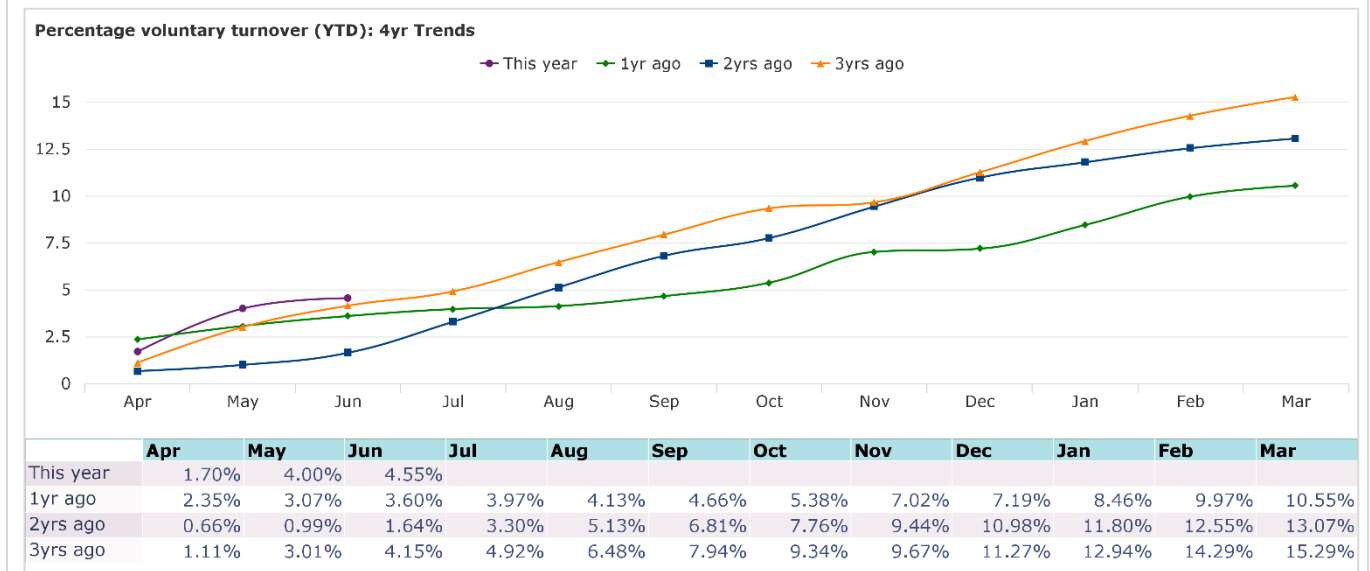
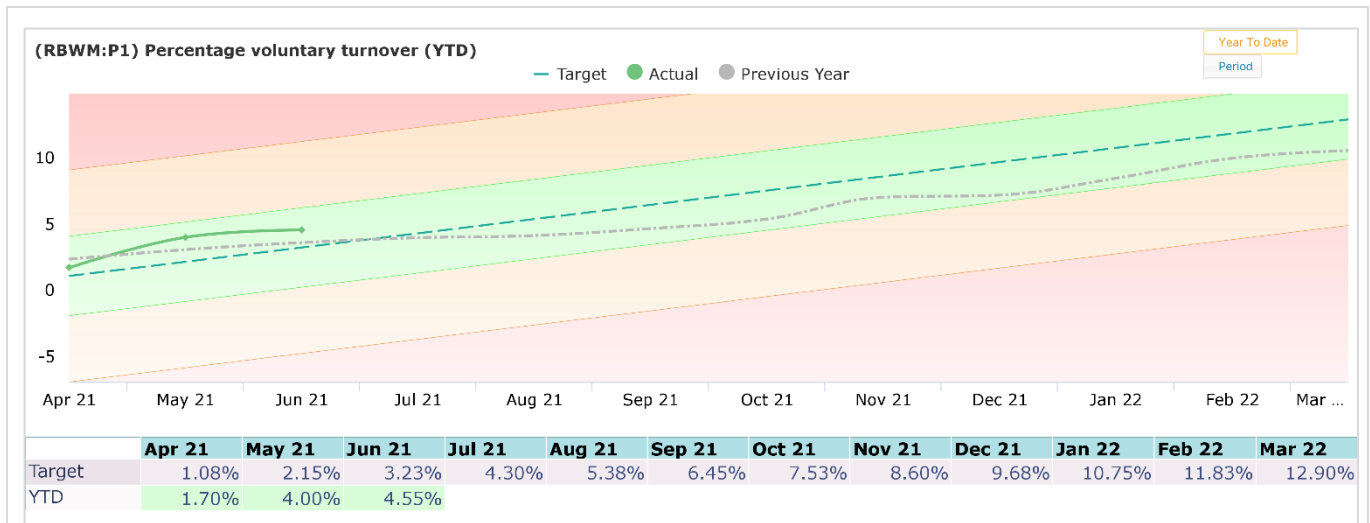
The service tracks the volume of digital forms submitted through the council’s website with a distinction being made on whether the form was completed by a staff member or a customer/resident. Therefore, this measure monitors the take-up of digital self-service across our customers/residents and ease of accessibility of council website’s digital offer.

At the close of Q1 the percentage of online forms submitted by customers/residents is 76.9% (19,712/25,624) and stands above target (75%) by 1.9.

Whilst the Covid-19 pandemic and associated lockdown restrictions created a dependence on digital interactions across the country where physical contact could be avoided, a review of annual trends over the last 3 years shows a growing reliance on digital solutions well before the pandemic.

6. Royal Borough of Windsor and Maidenhead

6.1 Voluntary turnover



Q1 Commentary

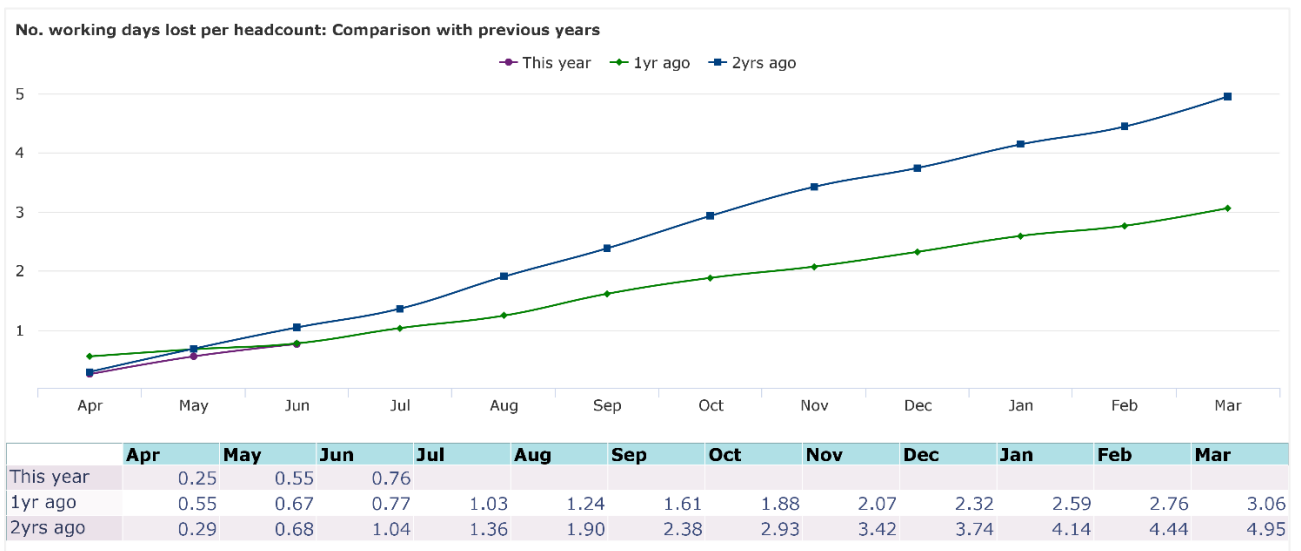
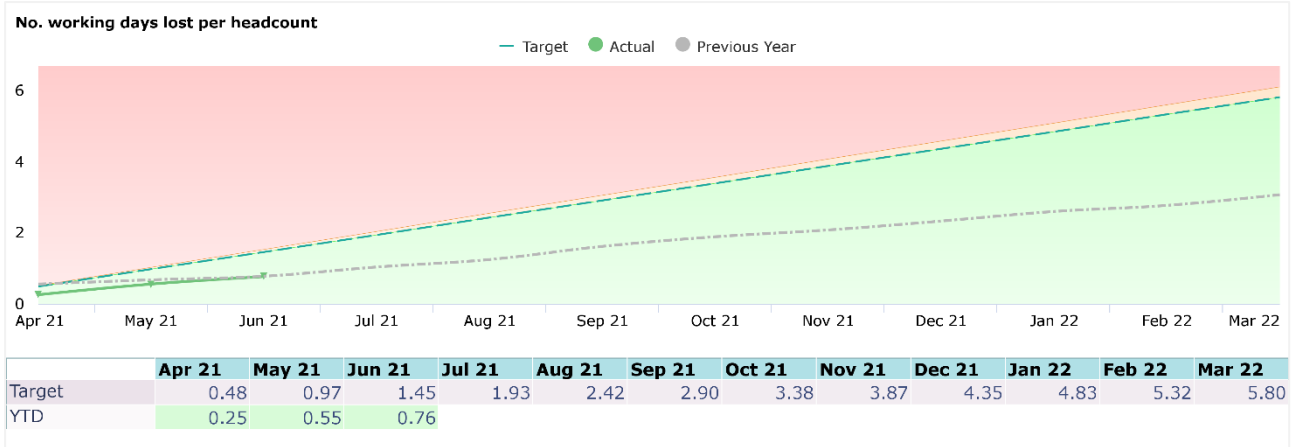
RBWM voluntary turnover includes those who choose to resign or retire. Turnover is calculated by dividing voluntary leavers by the average headcount (headcount at start and end of period / 2). It is acknowledged that some staff-churn is healthy for any organisation and so this measure is configured as a fixed target each month with appropriate tolerance-bandings both above and below the monthly target.

At the end of Q1 the year-to-date percentage voluntary turnover is 4.55% and tracks consistently within the profiled tolerance thresholds. A comparison with the previous year shows a slight increase in voluntary turnover. This is likely to be attributable to staff feeling less concerned about moving roles now, whereas last year we were at the peak of the pandemic with much uncertainty, and as a result less movement.

7. Business Intelligence: RBWM Sickness Absence

7.1 Reporting of sickness absence is based on working days lost per headcount. At the close of Q1 working days lost due to sickness per headcount is 0.76 and within target

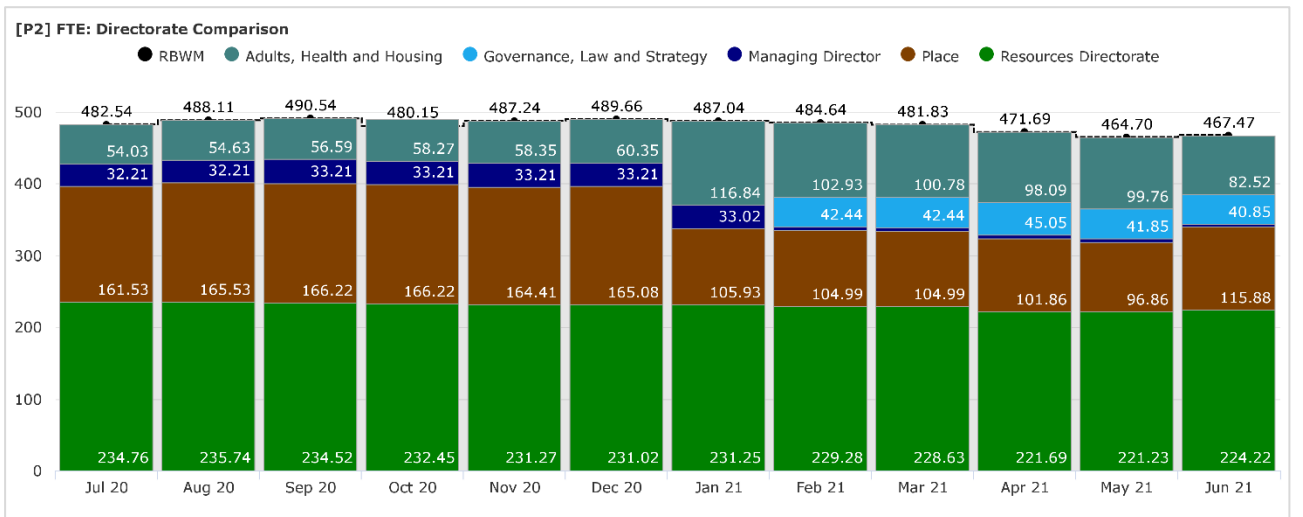
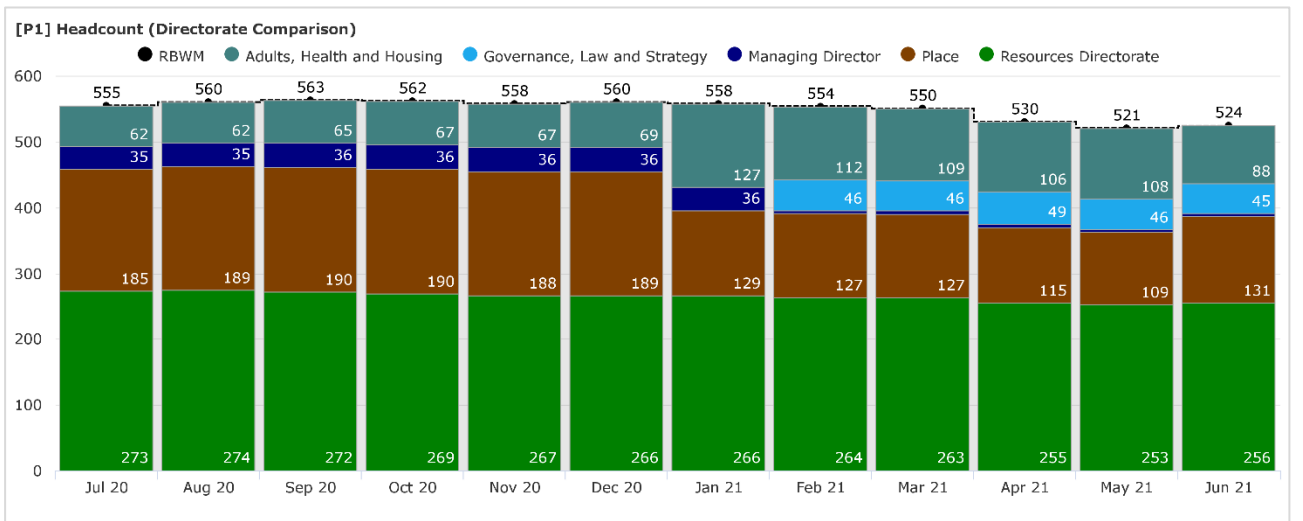
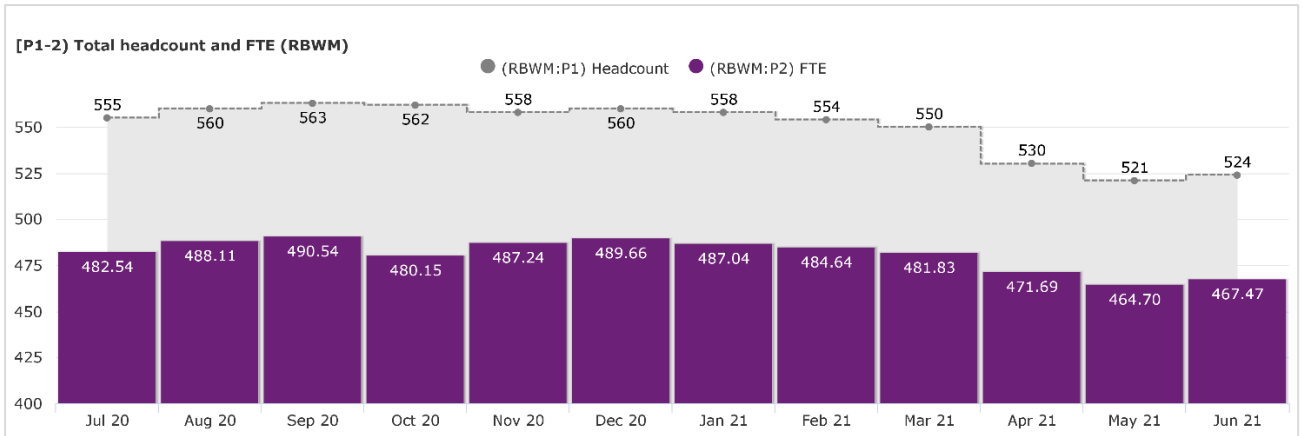
of 1.45. Comparison with last two years shows working days lost per headcount to be fewer this year, which could be attributed to staff working from home due to Covid restrictions. In the past staff may have needed to take sick leave however the increased flexibility means that they may be able to continue working from home if they are well enough to do so.



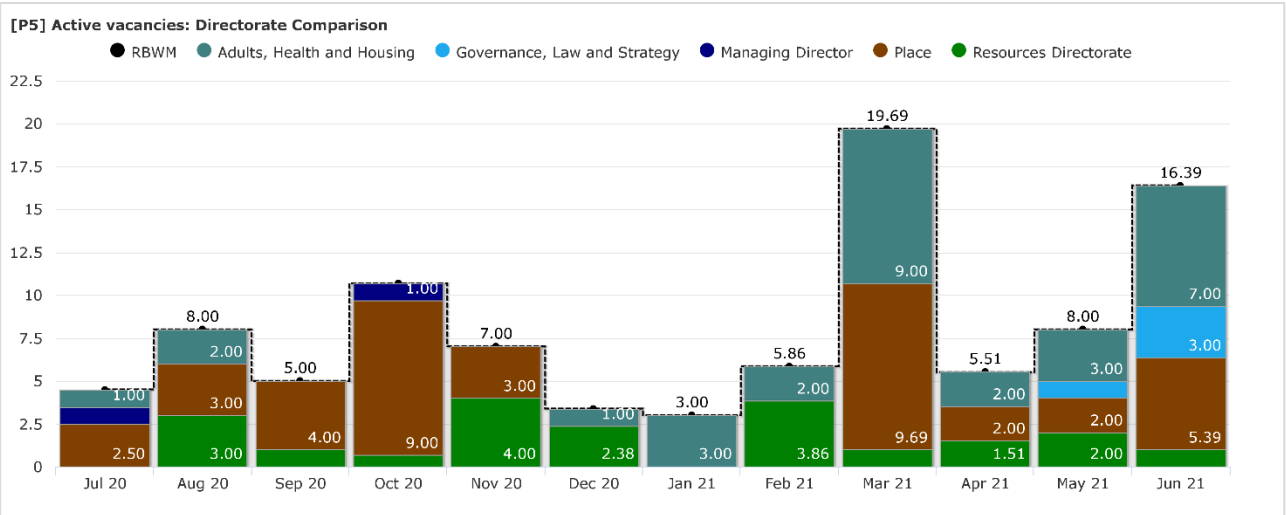
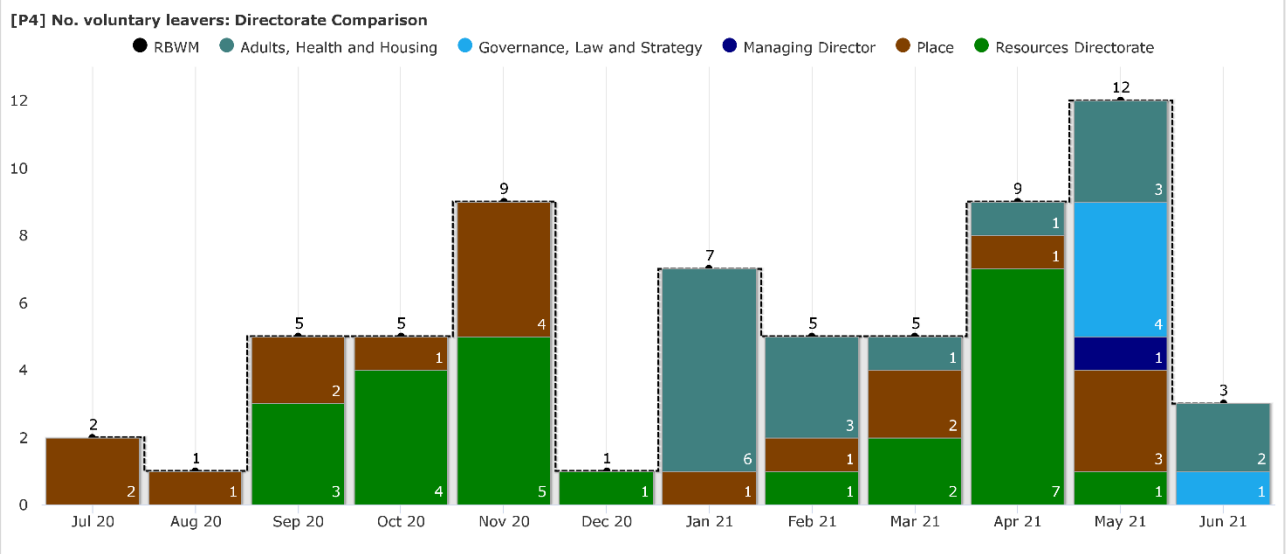
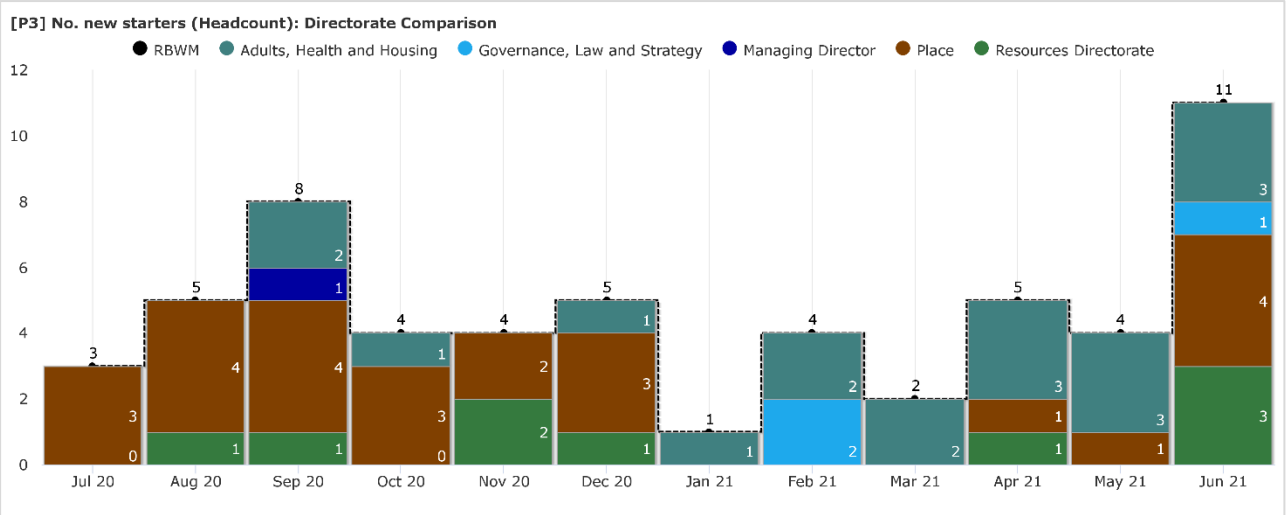
8. Business Intelligence: Establishment

8.1 The charts below show council workforce’s figures with trends over 12-month period. Effective 1 February 2021, there was a change to the Council structure with the creation of a new Governance, Law and Strategy directorate and the moving of some services across directorates.

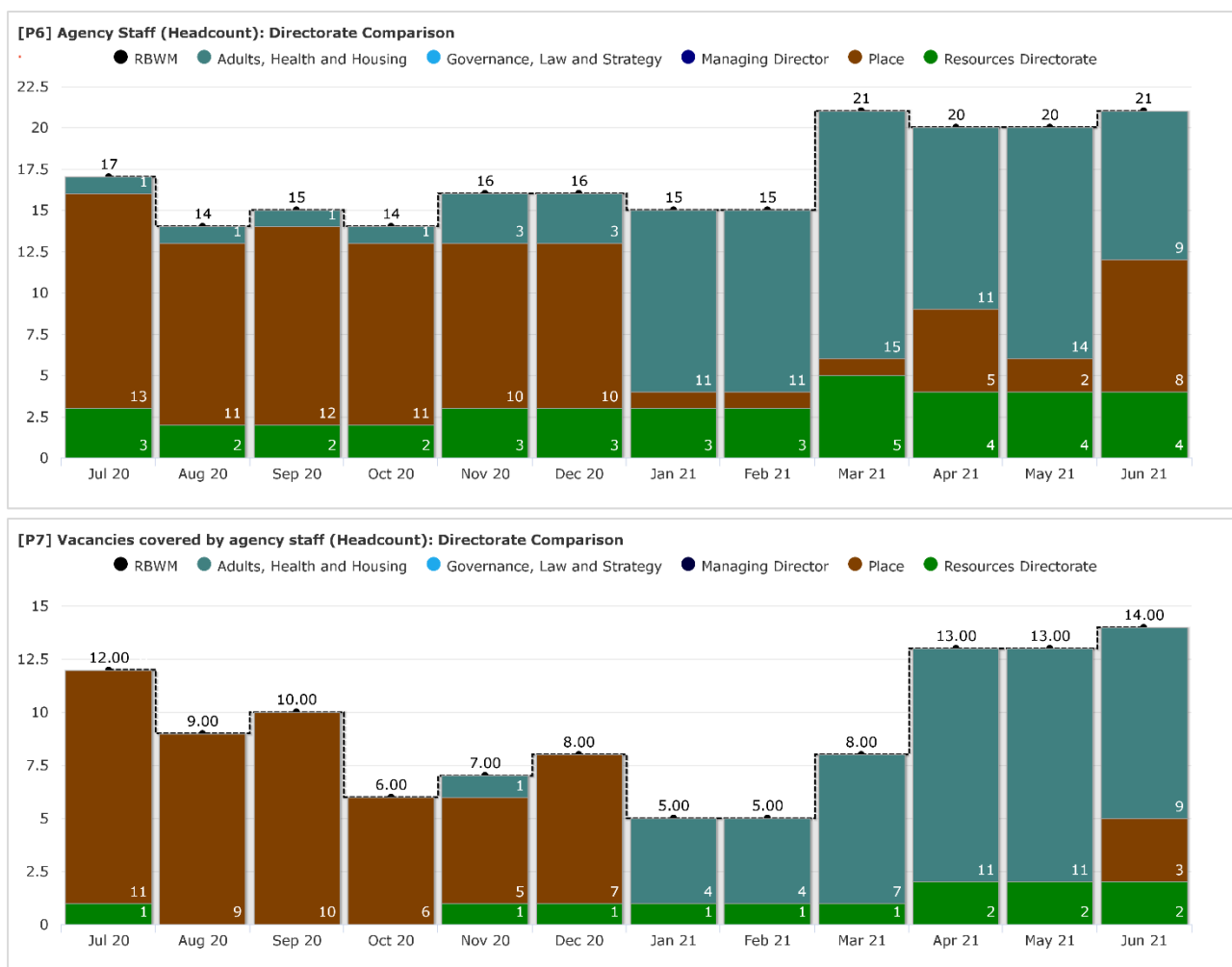
Corporate Overview & Scrutiny Panel: 2021/22 Q1 Data & Performance Report



Corporate Overview & Scrutiny Panel: 2021/22 Q1 Data & Performance Report



Corporate Overview & Scrutiny Panel: 2021/22 Q1 Data & Performance Report



There was a comparatively large reduction in headcount at the start of Q1, this is in part due to the implementation of staffing savings in accordance with approved 2021/22 budget.

Q1 2021/22 saw a slight increase in the level of starters in Adults, Health and Housing mainly in support of the Public Health and COVID engagement agenda. This is coupled with a slight increase in the number of leavers across a range of roles within Adults Health and Housing, Governance, Law and Strategy and the Resources Directorate. As referred to previously in section 6.1, the increase in leavers in Q1 is likely to be due to increased optimism surrounding the pandemic which was previously suppressing movement. Leavers from the Resources Directorate were mainly from within Library and Resident Services ahead of the implementation of the Library Transformation Strategy.

Active recruitment within Q1 focused mainly on Housing and Licencing roles within the Adults, Health and Housing Directorate coupled with recruitment to Planning and Transport roles within the Place Directorate. Whilst recruitment progressed the level of agency staff who were covering predominantly Housing and more recently Planning roles continued in order to support service delivery.

Report Title:	Annual Complaints and Compliments report 2020/21
Contains Confidential or Exempt Information	No - Part I
Cabinet Member:	Cllr Rayner, Cabinet Member for Corporate & Resident Services, Culture & Heritage and Windsor
Meeting and Date:	Corporate Overview and Scrutiny Panel – 11 October 2021
Responsible Officer(s):	Adele Taylor, Executive Director of Resources and S151 and Nikki Craig, Head of HR, Corporate Projects and IT
Wards affected:	None

www.rbwm.gov.uk



REPORT SUMMARY

The purpose of the report is to share with Overview and Scrutiny the annual compliments and complaints report for 2019/20 before it is published on the council's website. Local Authorities are not required to produce an annual report on complaints relating to corporate activities, they are only required to report complaints submitted on adults and children's services.

The complaints and compliments report is produced annually and details all compliments and complaints made by or on behalf of customers, that are investigated under the:

- Formal corporate complaints policy
- Statutory adults and children's complaints policies

NB: children's complaints taken under the corporate complaints policy are reported in Section 6 of the annual report (Appendix 1) with other information about children's complaints.

1. DETAILS OF RECOMMENDATION(S)

RECOMMENDATION: That Corporate Overview and Scrutiny Panel notes the report and:

- i) That the report is published on the Council's website.
- ii) That the annual report continues to be produced and presented at Overview and Scrutiny panels

2. REASON(S) FOR RECOMMENDATIONS) AND OPTIONS CONSIDERED

Options

Table 1: Options arising from this report

Option	Comments
That the report is published on the Council's website and that the annual	This is a requirement for children's and adults annual

Option	Comments
report continues to be produced and presented at Overview and Scrutiny panels. This is the recommended option	complaints information and good practice for other complaints areas.

- 2.1 The council's complaints and compliments report is compiled annually. There is a statutory requirement to publish information on adult and children's complaints and compliments and the report for April 2020 – March 2021 will be published in October 2021 (appendix 1). While there is no requirement to publish information on complaints about other services provided by the council, the decision has been taken to include this information in the annual report. This captures all the information about complaints and compliments to the council, ensures transparency and provides an opportunity to ensure we maximise the learning opportunities from any outcomes from the complaints.
- 2.2 The report contains details of:
- numbers of compliments received
 - complaints received
 - themes of complaints
 - timeliness of complaint responses
 - outcomes of complaints
 - learning from complaints
 - number of complaints made to and decided by the Local Government and Social Care Ombudsman (LGSCO)

Overview of all complaints to the council

- 2.3 There are a number of complaints processes and which one is invoked will depend on the service and the reason for a complaint to be made. See appendix B of appendix 1.
- 2.4 Table 2 compares the number of complaints received across the council for 2020/21 with the figures for 2019/20.

Table 2: All complaints received

	2020/21	2019/20
Adult complaints	11	27
Children's complaints	50	54
Complaints about other services	354	317
Total complaints	415	398

Top 5 service areas for non adults and children's complaints

- 2.5 Table 3 shows the top 5 service areas for customer complaints in 2020/21:

Table 3: Top 5 service area complaints

Waste Management	34%	120/353
Highways	9%	33/353
Planning Services	9%	31/353
Revenue and Benefits	9%	31/353
Housing Services	8%	29/353

2.6 The number of complaints received for services considered across the council is 354, of which 58% were upheld or partially upheld at stage 1, compared to 2019/20 when 63% were upheld or partially upheld.

Themes of complaints

2.7 Across the council, the reason for the highest number of Formal Corporate complaints received in both 2019/20 and 2020/21 was ‘lack of action’. More detailed information is included in the annual report. See Appendix 1, 7.7, figure 20.

Timeliness of complaint responses

2.8 Across the council, timeliness of Formal Corporate complaint responses being provided at Stage 1 has improved from 60% in 2019/20 to 62% in 2020/21. The percentage of complaints responded to within timescales at Stage 2 is 88%, less than 2019/20 at 94%. More detailed information is included in the annual report. See Appendix 1, 7.9, figure 22.

Outcomes of complaints

2.9 Across the council, the number of Formal Corporate complaints fully or partially upheld at Stage 2 has fallen from 50% in 2019/20 to 44% in 2020/21. More detailed information is included in the annual report. See Appendix 1, 7.14, figure 23.

2.10 In relation to timeliness and outcomes, the majority of complaints within Revenues, Benefits, Libraries and Resident Services were related to changes as a result of the pandemic, for example the complaints associated with the Registration Service, were in connection with the cancellation of ceremonies and weddings, and now that lockdown has ended, this situation is unlikely to occur again over the next 12 months.

Complaints to services considered by Corporate Overview and Scrutiny Panel

2.11 From the Service areas in table 3, those covered by the Corporate Overview and Scrutiny Panel are Revenues and Benefits which is within the top 5 service area complaints, and the learnings are detailed in appendix 1, 7.24 and 7.25.

Complaints made to and decisions made by the LGSCO

2.12 Table 4 compares the number of complaints made to the LGSCO in 2020/21 against those made in 2019/20. See Appendix 1, 2.10.

Table 4: Complaints to LGSCO

Year	Adult Care Services	Benefits & Tax	Corporate & Other Services	Education & Children’s Services	Environmental Services & Public Protection & Regulation	Highways & Transport	Housing	Null	Planning & Development
2020/21	2	3	1	5	8	4	3	0	5
2019/20	5	2	2	10	8	7	2	1	9

2.12 Table 5 compares the number of complaints decided by the LGSCO in 2020/21 against those decided in 2019/209. See Appendix 1, 2.12.

Table 5: Decisions by outcome

Year	Advice Given	Closed after initial enquiries	Incomplete/ Invalid	Referred back for local resolution	Detailed Investigation		Percentage Upheld
					Upheld	Not Upheld	
2020/21	1	7	1	11	9	4	69%
2019/20	0	16	4	14	7	8	47%

2.13 The Ombudsman made 33 decisions in 2020/21 compared to 49 in 2019/20. This includes 10 enquires submitted to the LGSCO prior to 2020/21 and 23 enquiries submitted in 2020/21. Enquiries that were made to the LGSCO in 2020/21, but no decision made within that year will be included in the decisions reported in subsequent years.

2.14 In relation to Revenues and Benefits, the service will continue to adapt to the changing support announced by Central Government, despite the criteria for such support not always meeting the expectations of residents.

Overview of all compliments to the council

2.14 Table 6 compares the number of compliments received across the council for 2020/21 with the figures for 2019/20, this was an 84% increase on 2019/20 See Appendix 1, 2.22, figure 1.

Table 6: Compliments

	2020/21	2019/20
Adult compliments	16	21
Children compliments	28	63
Compliments about other services	766	356
Total compliments	810	440

3. KEY IMPLICATIONS

3.1 There are a number of indicators of success across the council. For last year to March 2021, given the impact of the pandemic only 1 was met and 2 were not. For the current financial year, improvements in all of these could indicate progress in delivery of solutions:

Table 7: Key Implications

Outcome	Unmet	Met	Exceeded	Significantly Exceeded	Date of delivery
Reduced percentage of upheld complaints	60 - 100%	59%	50-58%	<50%	31 March 2022
Increased percentage of complaints completed within timescales	0-60%	61%	62-75%	>75%	31 March 2022

Outcome	Unmet	Met	Exceeded	Significantly Exceeded	Date of delivery
Reduced percentage of complaints to the LGSCO are upheld	70 - 100%	69%	50-68%	<50%	31 March 2022

4. FINANCIAL DETAILS / VALUE FOR MONEY

- 4.1 There are no direct financial implications in the publishing of the annual report. There are implications for the council in getting things wrong including resources within service being redirected to complaints handling, remedy payments and reputational damage.

5. LEGAL IMPLICATIONS

- 5.1 The publishing of children's and adult complaints reports is statutory.

6. RISK MANAGEMENT

- 6.1 None

7. POTENTIAL IMPACTS

- 7.1 Equalities. There are no implications under the equality act arising from this report.
- 7.2 Climate change/sustainability. There are no climate change or sustainability implications arising from this report.
- 7.3 There are no data protections/GDPR implications arising from this report as no personal data has been processed.

8. CONSULTATION

- 8.1 Consultation has happened with CLT in July and August 2021 and will happen with Overview and Scrutiny panels in September and October 2021.

9. TIMETABLE FOR IMPLEMENTATION

- 9.1 N/A. The annual report will be published on the Council website in October 2021.

10. APPENDICES

- 10.1 This report is supported by 1 appendix:
- Appendix 1 – Annual complaints report

11. BACKGROUND DOCUMENTS

11.1 This report is supported by LGSCO Annual Letter (see Appendix A of Appendix 1). These are the annual summary of statistics on the complaint on complaints made to the Local Government and Social Care Ombudsman about the authority for the year ending 31 March 2021. The annual letters and corresponding data tables were published on LGSCO website on 31 July 2021.

12. CONSULTATION

Name of consultee	Post held	Date sent	Date returned
<i>Mandatory: Statutory Officers (or deputy)</i>			
Adele Taylor	Executive Director of Resources/S151 Officer	06.09.21	13.09.21
Emma Duncan	Deputy Director of Law and Strategy / Monitoring Officer	06.09.21	09.09.21
<i>Deputies:</i>			
Andrew Vallance	Head of Finance (Deputy S151 Officer)	06.09.21	09.09.21
Elaine Browne	Head of Law (Deputy Monitoring Officer)	06.09.21	09.09.21
Karen Shepherd	Head of Governance (Deputy Monitoring Officer)	06.09.21	09.09.21
<i>Directors</i>			
Duncan Sharkey	Chief Executive	06.09.21	09.09.21
Andrew Durrant	Executive Director of Place	06.09.21	09.09.21
Kevin McDaniel	Executive Director of Children's Services	06.09.21	09.09.21
Hilary Hall	Executive Director of Adults, Health and Housing	06.09.21	08.09.21
<i>Heads of Service</i>			
Nikki Craig	Head of HR, Corporate Projects and IT	06.09.21	08.09.21
Louise Freeth	Head of Revenues, Benefits, Library and Residents Services	06.09.21	09.09.21

Confirmation relevant Cabinet Member(s) consulted	Cllr Rayner, Cabinet Member for Corporate & Resident Services, Culture & Heritage and Windsor	Yes
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REPORT HISTORY

Decision type:	Urgency item?	To follow item?
For information	No	No

Report Author: Vanessa Faulkner, Service Lead – HR People Services, 01628685622

Royal Borough of Windsor and Maidenhead

Annual Complaints and Compliments Report 2020-21

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6. Children’s Corporate Complaints	13
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Appendix 1 - A: LGSCO annual review letter 2021	
Appendix 1 - B: Council’s complaints process and procedures	
Appendix 1 - C: National and legislative context – March 2021	

1. Introduction

- 1.1. The annual report covers the period 1 April 2020 to 31 March 2021, and details all compliments and complaints made by or on behalf of customers that are investigated under the:
 - Adults Statutory Complaints process
 - Children's Statutory Complaints process
 - Children's Corporate Complaints process
 - RBWM's Formal Corporate Complaints Policy
- 1.2. Local Authorities are not required to produce an annual report on complaints relating to corporate activities. They are required under statute to report complaints submitted on adults and children's services. The compliments and complaints team produces an annual report detailing the volumes of all complaints and compliments, including insights into response rates and the reasons for complaints. This allows the council to assess how residents experience the council in its entirety and can inform service-improvement.

2. Summary of Activity

- 2.1. In 2020/21 the council received 2,268 contacts from customers that were initially logged as complaints. This is a 7.7% increase in contacts to the compliments and complaints team from 2019/20 (2,106 contacts). Contacts that were not progressed as complaints were signposted to an alternative means of resolution, for example a service request or via an alternative appeals process, such as parking appeals or statutory tribunals or were withdrawn.
- 2.2. The total volume of complaints progressed through Stage 1 of the specific complaints process that they followed was 415 in 2020/21, an increase on 2019/20 (398). Stage 2 and 3 complaints are escalations of Stage 1 complaints and so are not counted as new complaints.
- 2.3. Table 1 summarises the total volumes of complaints at Stage 1 and breakdown by outcome in 2020/21 in comparison to 2019/20 for each process (Adults, Children's Statutory, Children's Corporate and RBWM Formal Corporate). A green arrow indicates a positive outcome, and a red arrow indicates a less favourable outcome when compared to last year.
- 2.4. From Table 1 it can be seen that the percentage of complaints upheld or partially upheld in 2020/21 has been less for all processes namely, Adults Statutory (45% in 2020/21, 52% in 2019/20), Children's Statutory (71% in 2020/21, 84% in 2019/20), RBWM Formal Corporate (58% in 2020/21, 63% in 2019/20) except Children's Corporate (68% in 2020/21, 57% in 2019/20). Overall, the percentage of complaints upheld or partially upheld in 2020/21 was 59% and less than 2019/20 (63%).
- 2.5. The timeliness to respond within timescales has also improved across all processes namely, Adults Statutory (64% in 2020/21, 56% in 2019/20), Children's Statutory (50% in 2020/21, 37% in 2019/20), RBWM Formal Corporate (62% in 2020/21, 60% in 2019/20) except Children's Corporate (49% in 2020/21, 66% in 2019/20) making the

overall percentage of complaints responded to within timescales higher in 2020/21 (61%) when compared to 2019/20 (59%). (Table 1)

Table 1: 2020/21 Summary of Complaints at Stage 1 by each process

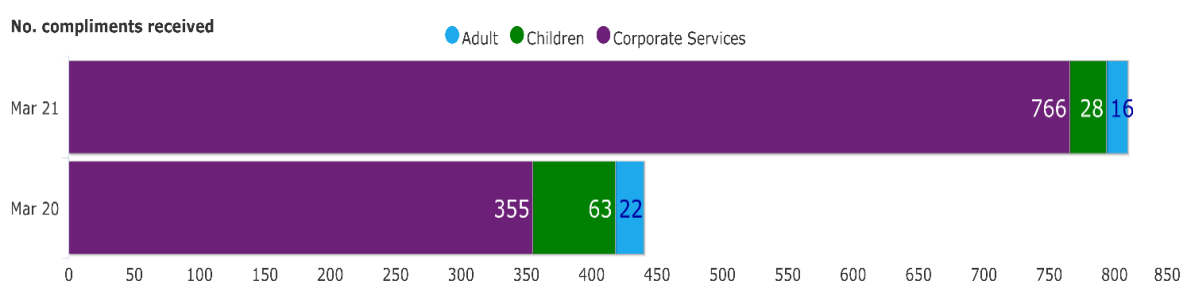
Process	No. of complaints	Upheld	Partially Upheld	Not Upheld	No Finding	In Progress at the time of reporting	Outcome not recorded* (No. of complaints)	Upheld or Partially Upheld	Responded to within timescales
Adults Statutory	11 ↓ 2019/20 (27)	18% ↓ 2019/20 (22%)	27% ↓ 2019/20 (30%)	36% ↓ 2019/20 (48%)		18%		45% ↓ 2019/20 (52%)	64% ↓ 2019/20 (56%)
Children's Statutory	14 ↓ 2019/20 (19)	0% ↓ 2019/20 (16%)	71% ↑ 2019/20 (68%)	21% ↑ 2019/20 (16%)	7%	None		71% ↓ 2019/20 (84%)	50% ↑ 2019/20 (37%)
Children's Corporate	36 ↑ 2019/20 (35)	11% ↓ 2019/20 (20%)	57% ↑ 2019/20 (37%)	23% ↓ 2019/20 (40%)	0% 2019/20 (3%)	9%	1	68% ↑ 2019/20 (57%)	49% ↓ 2019/20 (66%)
RBWM Formal Corporate	354 ↑ 2019/20 (317)	41% ↑ 2019/20 (39%)	17% ↓ 2019/20 (24%)	33% ↓ 2019/20 (37%)	1%	8%	1	58% ↓ 2019/20 (63%)	62% ↑ 2019/20 (60%)
Overall	415 ↑ 2019/20 (398)	36% ↑ 2019/20 (35%)	23% ↓ 2019/20 (28%)	32% ↓ 2019/20 (37%)	1% 2019/20 (0.3%)	8%	2	59% ↓ 2019/20 (63%)	61% ↑ 2019/20 (59%)

2.6. There were 2 complaints where the outcome could not be extracted because of the transition from previous to current recording systems. These are excluded from the percentage breakdown by outcome and response within timescales in the table above and are not further referenced in the report.

Compliments

2.7. Compliments 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 teams. In 2020/21 a total of 810 compliments were received, 84% increase on 2019/20 (440). Figure 1 shows the breakdown of compliments by major category (Adults, Children, Corporate Services). For the purposes of this report, "Corporate Services" refers to compliments that were received by services other than those within adult and children's services.

Figure 1: Compliments received: Breakdown by major category



Local Government Social Care Ombudsman (LGSCO)

2.8. The Local Government Social Care Ombudsman (LGSCO) received 31 complaints and enquiries about the council in 2020/21, a reduction on 2019/20 (46).

2.9. Table 2 sets out complaints and enquiries received by LGSCO by different categories in comparison to last year.

2.10. Following the Covid pandemic, on 18 March 2020 the LGSCO temporarily suspended their central telephone line and complaint submissions via their website for all first-time complainants, this has since been reinstated.

2.11. It can be seen from the table below that complaints and enquiries received by LGSCO in 2020/21 have decreased or remained the same in all categories except in Housing when compared to 2019/20.

Table 2: 2020/21 Complaints and enquiries received by LGSCO: Comparison with 2019/20 (data received from LGSCO in July 2021. Covering letter in Appendix A).

Year	Adult Care Services	Benefits & Tax	Corporate & Other Services	Education & Children's Services	Environmental Services & Public Protection & Regulation	Highways & Transport	Housing	Null	Planning & Development
2020/21	2	3	1	5	8	4	3	0	5
2019/20	5	2	2	10	8	7	2	1	9

2.12. The Ombudsman made 33 decisions in 2020/21 in comparison to 49 decisions in 2019/20. This includes 10 enquires submitted to the LGSCO prior to 2020/21 and 23 enquiries submitted in 2020/21. Enquiries that were made to the LGSCO in 2020/21, but no decision made within that year will be included in the decisions reported in subsequent years.

2.13. Table 3 breaks down the decisions made by outcome. After detailed investigations, 69% (9/13) of decisions were upheld an increase from 2019/20 (47% upheld). The 9 complaints that were investigated and upheld were in relation to:

- Adult Social Care (3)
- Benefits and Tax (1)
- Education and Children Services (2)
- Highways (1)
- Housing (1)
- Environmental Services & Public Protection & Regulation (1)

Table 3: 2020/21 Decisions made by outcome: Comparison with 2019/20

Year	Advice Given	Closed after initial enquiries	Incomplete/ Invalid	Referred back for local resolution	Detailed investigation Upheld	Detailed investigation Not Upheld	Percentage Upheld
2020/21	1	7	1	11	9	4	69%
2019/20	0	16	4	14	7	8	47%

LGSCO Reports

2.14. One public interest report relating to adult social care was published in 2020/21. The requirements for publication and consideration by the relevant Overview and Scrutiny

Panel and Cabinet were met and in November, the Ombudsman agreed that the council had taken the matter seriously, had delivered all the actions required and closed the case.

Improvements in working with LGSCO and other parties

2.15. The compliments and complaints team attended a webinar on complaints handling in 2020/21. They are members of SRCMG (South Region Complaints Manager Group) which meets quarterly and is used to raise concerns or queries and support each other on a need basis.

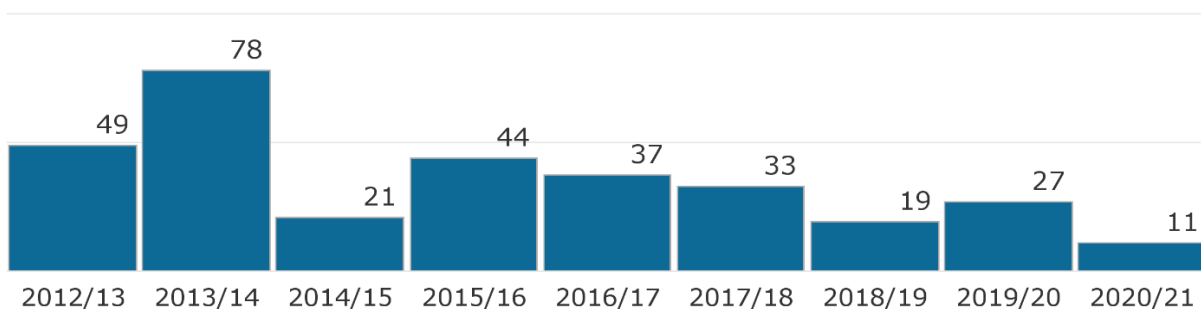
3. Statutory Adults Complaints Process

Complaints received

3.1. Figure 2 shows the volumes of adults' complaints in the last 9 years. With the exception of 2019/20 there has been a sustained decrease in the number of complaints received since 2015/16. Only 11 complaints were received in 2020/21, a 59% reduction on 2019/20. This has also been the lowest volume of complaints received in the last 9 years.

3.2. Following the Ombudsman's public interest report received in 2020, the approach to managing complaints within the service was radically overhauled. Emphasis has been placed on proactive management of issues before they escalate into formal complaints which is reflected in the numbers below. Where formal complaints are received, the Director of Statutory Services within Optalis is personally responsible for liaising with the complainants throughout the process to ensure that the process is transparent, and the outcome of the complaint is understood and accepted.

Figure 2: Adults' complaints volumes: Annual trends



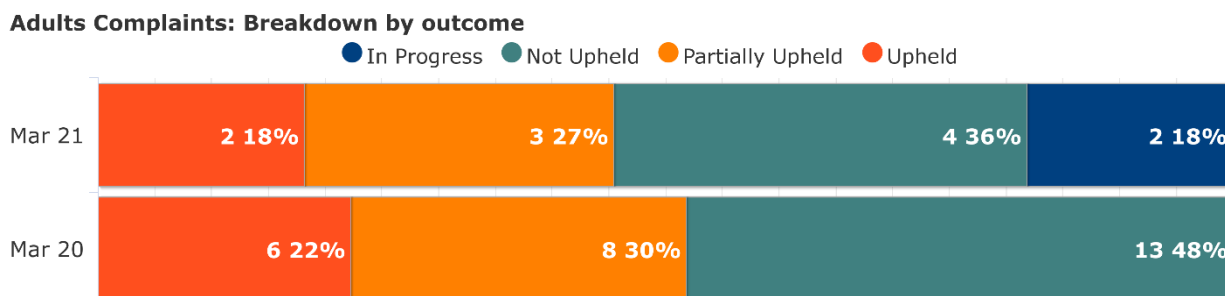
3.3.

3.4.

3.5.

3.6. **Figure 3** shows the breakdown of adults' complaints by outcome in 2020/21 compared to 2019/20. In 2020/21 both the percentage of complaints upheld (18%) and partially upheld (27%) are less than 2019/20 (upheld 22% and partially upheld 30%).

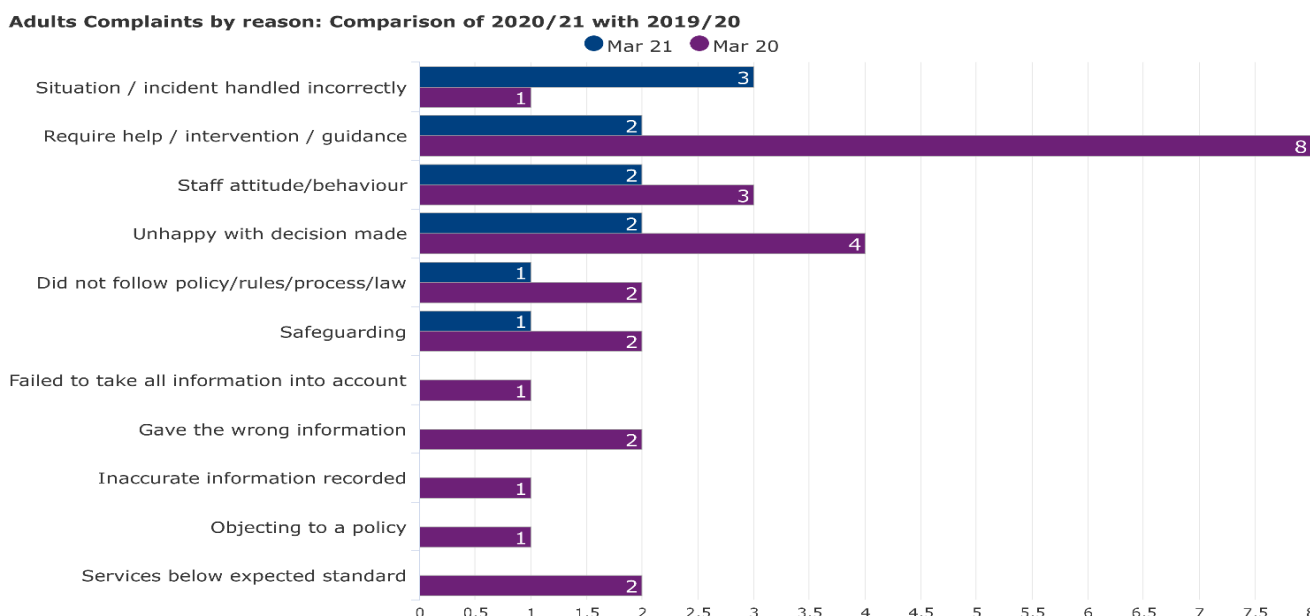
Figure 3: Adults complaints by outcome



Reasons and outcomes

- 3.7. When logging their complaint via the council website, complainants self-select the reason for their complaint and the compliments and complaints team does not change this categorisation. When a complaint is logged by a member of the team or the Customer Contact Centre on behalf of a complainant, the staff member will select the reason they believe is most appropriate. Only one reason can be selected for each complaint.
- 3.8. Figure 4 sets out the volume of adult’s complaints made by reason in 2020/21 compared to 2019/20. It is encouraging to note that in 2020/21 complaints have been recorded by fewer reasons (6) in comparison to 2019/20 (11). Additionally, in 5/6 reasons, the number of complaints made in 2020/21 is less than 2019/20.

Figure 4 Adults complaints by reason



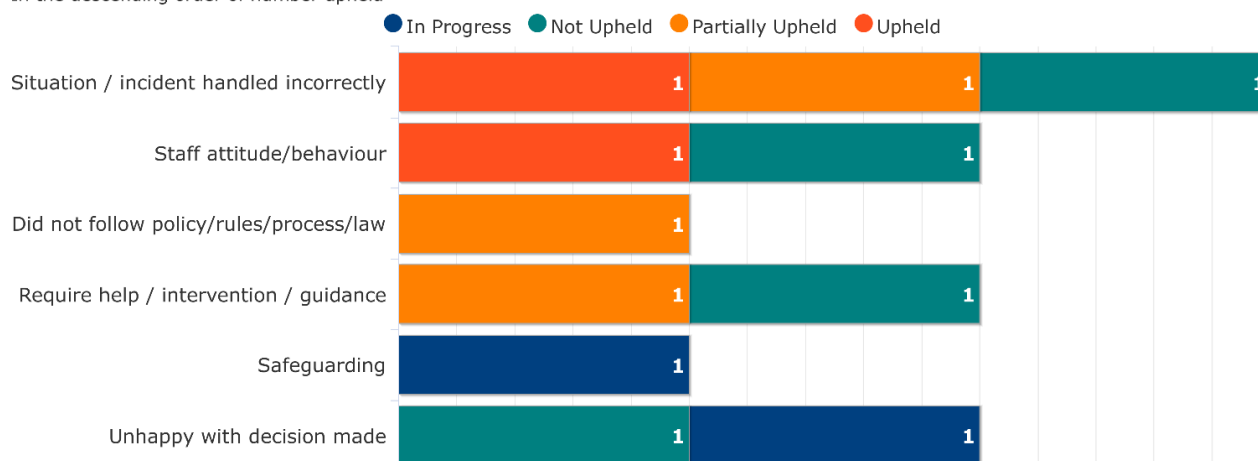
- 3.9. At the time of data extraction for preparation of this report out of 11 complaints, 9 complaints had an outcome recorded and 2 were in progress and an outcome had not yet been reached. Figure 5 shows the outcome of adult’s complaints by reason. It can be seen that 67% (2/3) of the complaints against the ‘Situation/incident handled

incorrectly' (top reason) were upheld/partially upheld. It may be helpful to clarify what led to the two complaints that were upheld/partially upheld. In one case there was confusion over whether the person was asking the Council to arrange their care which triggers a fee or was setting up and funding his own care. The complaint was that Optalis requested the arrangement fee inappropriately. This was then corrected, and managers have been reminded that this needs checking. The other case was about a need to improve practice when working with people who lack capacity. This led to practice improvement measures for the overall service and also the worker.

Figure 5: Adults complaints outcome by reason

Adults Complaints: Outcome by reason

In the descending order of number upheld

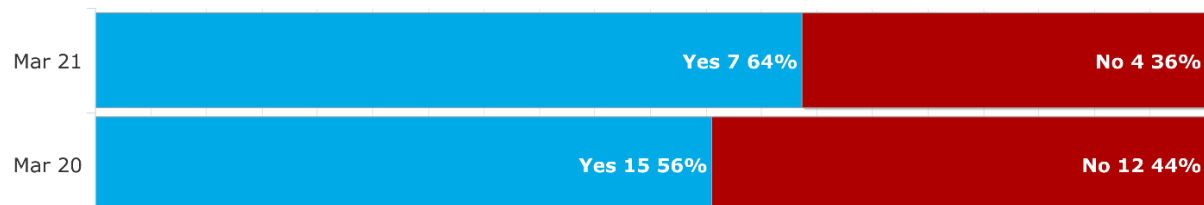


Timeliness

3.10. Although there is no specified time limit for statutory complaints about adult social care, the council's target for responding to adult services complaints is 10 working days which can be extended to 20 working days. If a response is not provided within 20 working days, the complaint will be informed and provided with a response timeline. Figure 6 shows that in 2020/21 the percentage of complaints responded to within timescale is 64% (7/11), an improvement on 2019/20 (56% 15/27). This improvement reflects the changes made to the way in which Optalis manages complaints.

Figure 6: Percentage of adults' complaints responded within timescales

Adults Complaints within timescales: Number and Percentage



Compliments

3.11. In 2020/21 adults' services received 16 compliments, 6 less than 2019/20 (22). Staff sometimes fail to record the compliments they receive; however they do receive them and are regularly encouraged to log them. It is encouraging however that overall there have been more compliments (16) than complaints (11) in adults services in 2020/21. Due to the pandemic there had been limited contact between staff and customers, which we think has reduced the number interactions which generate compliments.

Learnings from complaints

3.12. Adult Services are constantly learning from their complaints and striving to improve the quality of services provided. Below are some of the key learnings from the complaints made.

3.13. The Adult Services complaints upheld in 20/21 comprised a mixture of one case of confusion in care arrangements which led to an arrangement fee being levied incorrectly, as a result financial awareness training is being planned for all social care staff who undertake assessments. The second was concerning staff attitude which led to formal action. In another case there was some confusion how a couple who lacked capacity were supported, this resulted in increased support to a member of staff and a revised practice guidance note. Another was a limited error of communication where one family was feedback to, but not the other. One complaint was regarding services provided by a domiciliary care company as a result of the complaint staff training took place regarding communication between staff and families.

4. Children's Complaints Processes Summary (Statutory and Corporate)

Summary

4.1. 2020/21 saw a total of 50 children's complaints. Table 4 summarises the volume of children's complaints (both statutory and corporate) received and the Stage 1 outcome in comparison to 2019/20. 2020/21 saw 69% of complaints upheld or partially upheld marginally higher than 2019/20 (67%) and 49% of complaints responded to within timescales (56% 2019/20) (Table 4). Details on Children's Statutory and Children's Corporate complaints can be found in sections 5 and 6.

Table 4: Children's Complaints (Statutory and Corporate): Summary of Complaints at Stage 1

No. of complaints	Upheld	Partially Upheld	Not Upheld	No Finding	In Progress at the time of reporting	Upheld or Partially Upheld	Responded to within timescales
50 ↓ 2019/20 (54)	8% ↓ 2019/20 (19%)	61% ↑ 2019/20 (48%)	22% ↓ 2019/20 (31%)	2% 2019/20 (2%)	6%	69% ↓ 2019/20 (67%)	49% ↓ 2019/20 (56%)

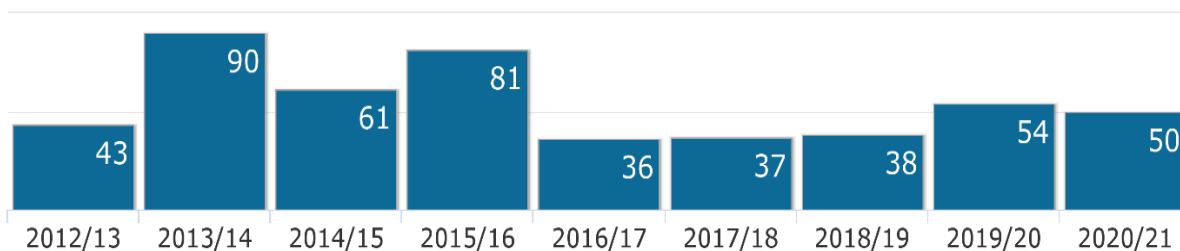
Complaints received

4.2. Figure 7 shows the total volume of children's complaints in the last 9 years. There has been some fluctuation in volumes since the peak in 2015/16 (81) and in 2020/21 50 complaints were received, a 7% reduction on 2019/20 volumes (54).

4.3. Of the 50 complaints, 28% (14/50) were statutory and 72% (36/50) were corporate.

Figure 7: Children's Complaints Volumes: Trends over the years

Total volume of complaints (Children's Corporate and Statutory)



Compliments

- 4.4. In 2020/21 the children's services received 28 compliments 35 less than 2019/20 (63). It is not clear why this is, however, teams within the organisation will continue to be encouraged to share compliments they receive with the compliments and complaints team so that they can be logged. Without a doubt, the pandemic has had an impact on this. This includes schools not being open for all of the time, staff sickness and self-isolating, as well as people not being focused on this aspect of work, as they have been firefighting.

Learnings from complaints

- 4.5. Listed in 4.6 are some of the learnings from the children's complaints which be embedded to constantly improve on the service delivered.
- 4.6. The processes which involve Customer Service colleagues are reviewed on an annual basis or when a gap is identified. A number of Customer Service colleagues have been established as 'Super users' and have received additional training with teams such as school admissions and school transport to enhance their knowledge and improved their ability to offer support to residents. The Call Back system is being successfully used by both school admissions and school transport. This system avoids parents having to repeatedly contact the Customer Service centre and avoids multiple communications to teams regarding the same issue.

Social Care and early help:

- Have revised the process for managing Stage 1's, in order to be more streamlined, and anticipate seeing an improvement in timeliness as a result.
- Have introduced a new process for quality assuring assessments, based on feedback about factual inaccuracies.
- Parents/carers are now required to sign assessments to say they are factually accurate.

SEND Team:

- The SEND team have updated their processes to improve communication about cases which have to be paused in the complaint process if taken to Tribunal for resolution.
- Long-running concerns are now put into the complaints processes earlier to help drive increased clarity for residents.

5. Statutory Children’s Complaints

5.1 Most complaints about children’s social care must follow a series of steps set out in law, known as the children’s statutory complaints procedure. The statutory guidance, ‘Getting the best from complaints’ sets out which of a council’s children’s social care functions can be considered under the procedure. Generally, assessments and services in the following areas should be considered under the statutory procedure:

- Children in need
- Looked after children
- Special Guardianship support
- Post-adoption support

5.2 In 2020/21 there were 14 statutory complaints which is 26% less than 2019/20 (19).

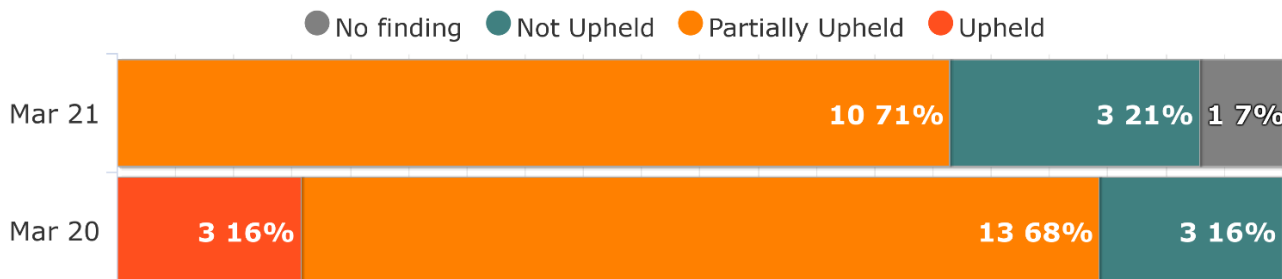
Stage 1 Outcome

5.1. At the time of data extraction for preparation of this report all 14 children’s statutory complaints had an outcome recorded. Further breakdown of children’s statutory complaints shows that none were upheld, 71% (10/14) partially upheld, 21% (3/14) not upheld and 7% (1/14) with no finding (Figure 8).

5.2. From Figure 8 it can be seen that 71% of the complaints were upheld/partially upheld in 2020/21 which is less than 2019/20 by 13 (84% complaints upheld/partially upheld).

Figure 8: Children’s Statutory Complaints by Stage 1 outcome

Children’s Statutory Complaints where Stage 1 Outcome has been recorded

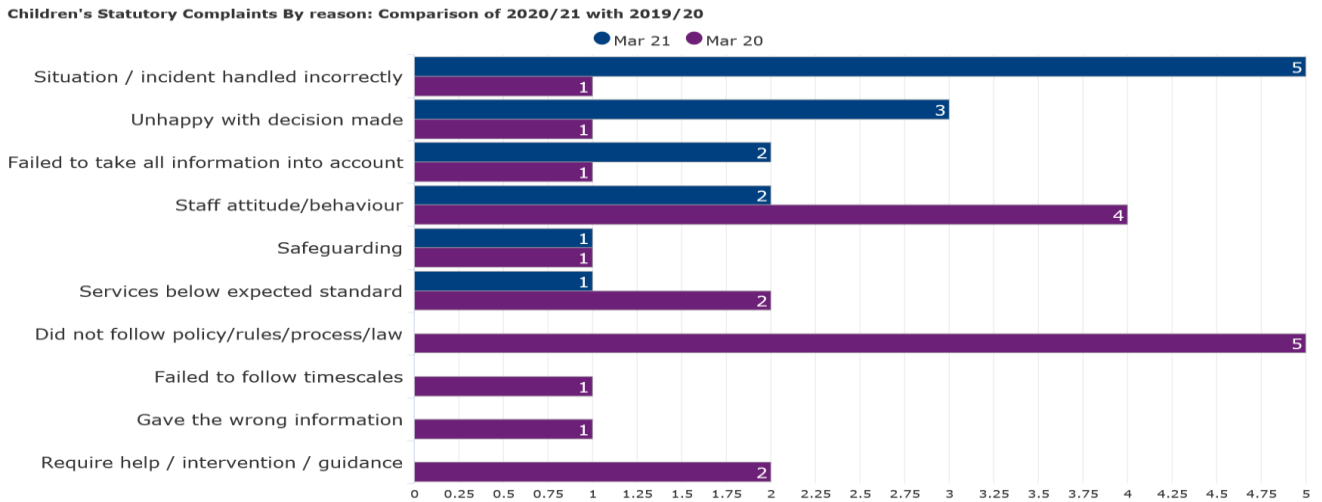


Reasons and outcome

5.3.

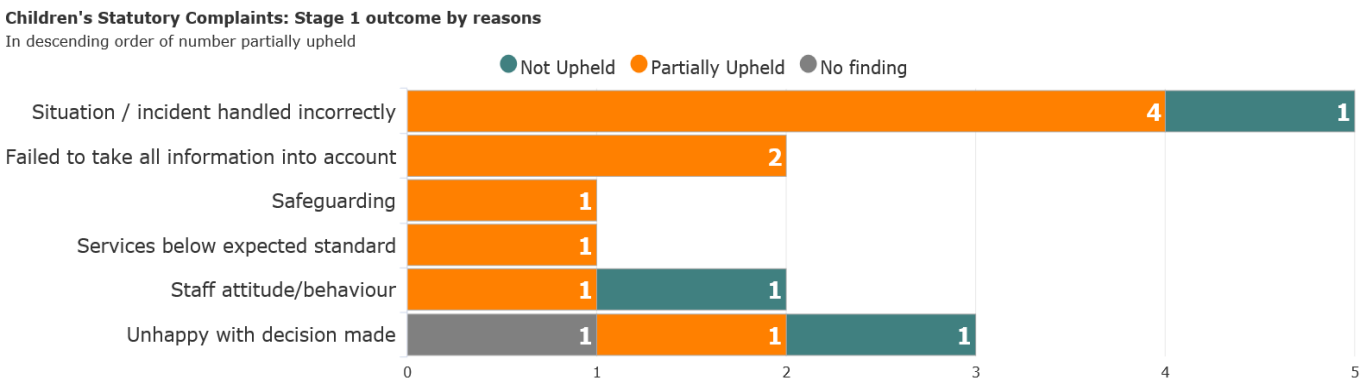
5.4. Figure 9 shows the breakdown of children’s statutory complaints by reasons. 2020/21 saw statutory children’s complaints being recorded by fewer reasons (6) when compared to 2019/20 (10) and with only 5 or less complaints recorded by each of the reasons. The reason with most complaints was “Situation/incident handled incorrectly” (36% 5/14).

Figure 9: Children’s Statutory complaints: Breakdown by reason



5.5. Figure 10 breaks down Stage 1 outcome by reasons for children’s statutory complaints. It is noteworthy that none of the complaints were upheld. Out of the 10 partially upheld complaints, “Failed to take all information into account”, “Safeguarding” and “Services below standards” are the three reasons where 100% of complaints made were partially upheld. However, it should also be noted that very few complaints (1 or 2) were made against these reasons.

Figure 10: Children’s Stage 1 Statutory Complaints outcome by reason



Stage 1 Timeliness

5.6. The timescale for dealing with children’s statutory Stage 1 complaints is 10 working days. However, this can be extended to 20 working days for more complex complaints or if additional time is required. The timeliness of response for statutory complaints in 2020/21 was 50% (7/14) an increase from 2019/20 by 13 (37% 7/19) (Figure 11).

Figure 11: Percentage of Children's Statutory Complaints responded with timescales

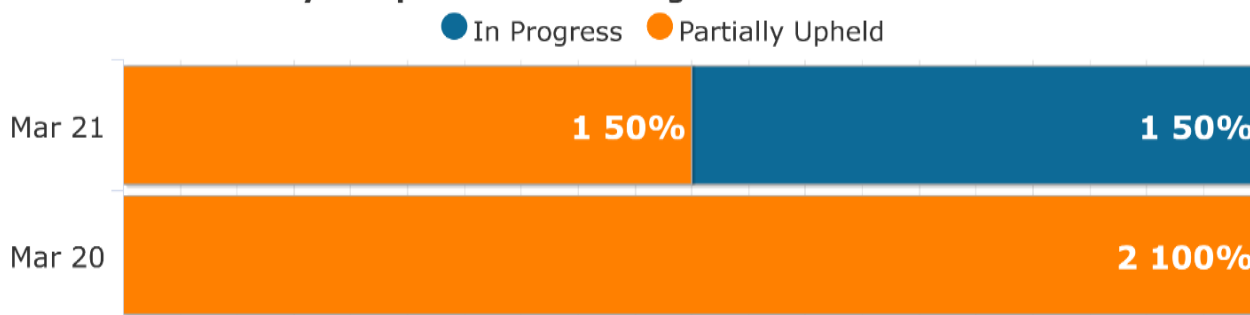


Stage 2 Outcome

- 5.7. At Stage 2, the complaints are investigated by an independent investigating officer (IO) who will work with an independent person (IP).
- 5.8. In 2020/21 only 2 complaints (14% 2/14) had progressed to Stage 2 which is the same number as in 2019/20 (11% 2/19).
- 5.9. Out of 2 complaints that had progressed to Stage 2, 1 had been partially upheld and 1 in progress at the time of data extract for preparation of this report. (Figure 12).

Figure 12: Children’s Stage 2 Statutory Complaints by outcome

Children's Statutory Complaints where Stage 2 Outcome has been recorded



Stage 2 Timeliness

- 5.10. The timescale for dealing with children’s statutory Stage 2 complaints is 25 to 65 working days. At the time of data extraction for preparation of this report, 1 complaint had been responded to within timescale and 1 was in progress making timeliness to respond 50% in 2020/21 when compared to 100% in 2019/20 (2/2). N.B. these are very low numbers, which clearly skew the percentages.

Stage 3

- 5.11. At Stage 3, complaints are reviewed to ensure the processes were followed at each stage by a panel comprising of three people, one of which will be appointed as the chair who is independent of the service that the complaint is about. The Panel produces a written report of what was discussed and provides recommendations for the resolution of the issues. One complaint progressed to Stage 3. This was a Stage 1 complaint made in July 2019 and the Stage 3 Panel review meeting took place in July 2020.

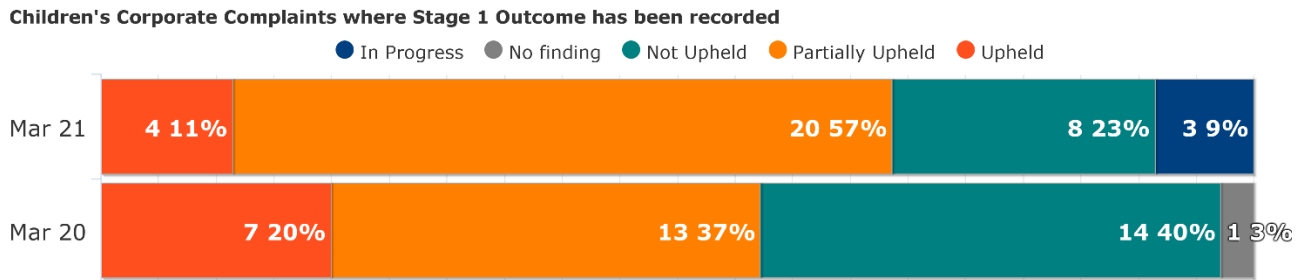
6. Children’s Corporate Complaints

- 6.1. Children’s complaints that are not taken through the statutory process will follow the corporate complaint route. In 2020/21 there were 36 corporate complaints 1 more than 2019/20 (35).

Stage 1 Outcome

- 6.2. At the time of data extraction for preparation of this report, 32 complaints had a Stage 1 outcome recorded and 3 were in progress.
- 6.3. Further breakdown of children’s corporate complaints shows 11% (4/35) were upheld, 57% (20/35) partially upheld, 23% (8/35) not upheld, 9% (3/35) in progress.
- 6.4. Figure 13 shows breakdown of complaints at Stage 1 by outcome. There has been lesser proportion of children’s corporate complaints upheld (11%) when compared to 2019/20 (20%), however a higher proportion of complaints partially upheld 57% (2019/20 37%).

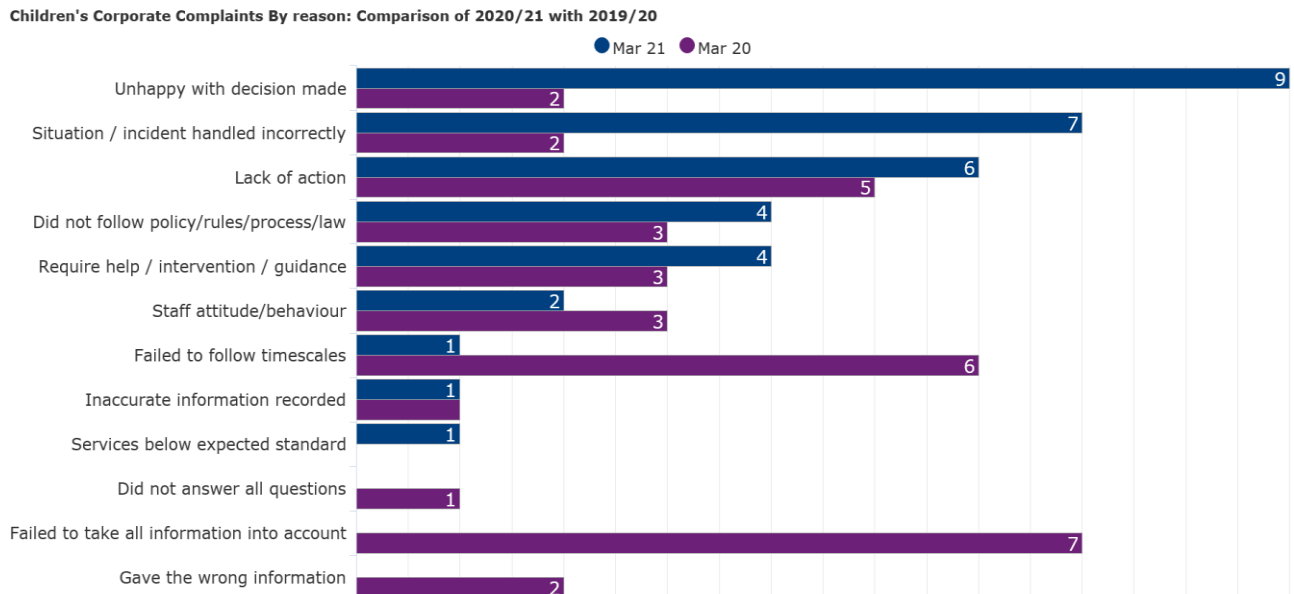
Figure 13 Children’s Corporate Complaints by Stage 1 Outcome



Reasons and Outcome

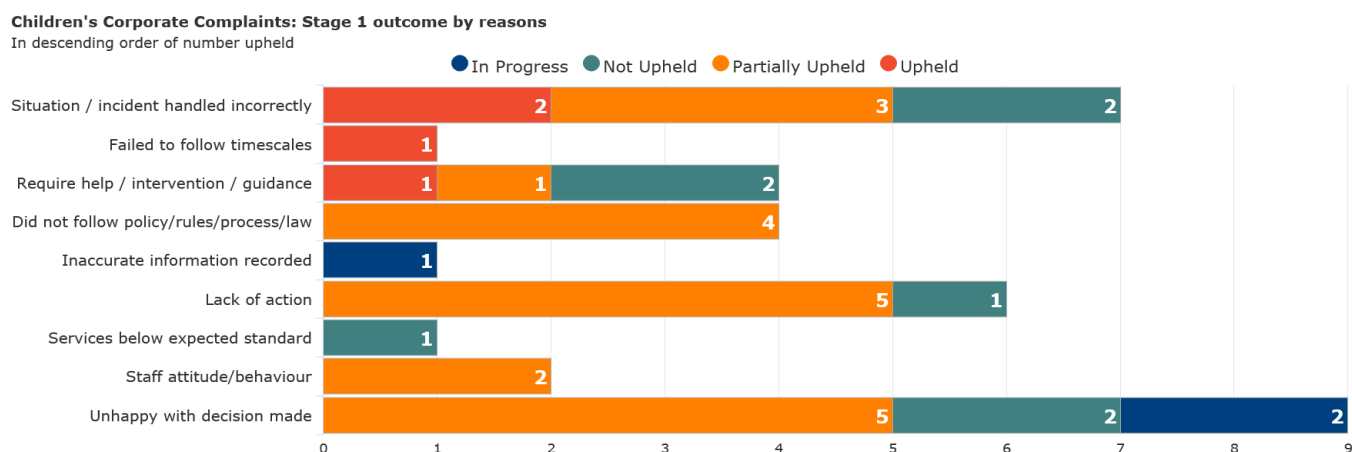
- 6.5. Figure 14 shows the breakdown of children’s corporate complaints made by reasons. 2020/21 saw children’s corporate complaints being recorded by fewer reasons (9) when compared to 2019/20 (11). The top 3 reasons in 2020/21 were “Unhappy with decision made” (26% 9/35), “Situation/incident handled incorrectly” (20%, 7/35) and “Lack of Action” (17% 6/35).

Figure 14: Children’s Corporate complaints: Breakdown by reason



- 6.6.
- 6.7.
- 6.8.
- 6.9. **Figure 15** shows the breakdown of outcome at Stage 1 by various reasons. Looking at the number of complaints upheld/partially upheld for the top 3 reasons, 56% (5/9) were partially upheld against “Unhappy with decision made”, 71% (5/7) were upheld/partially upheld against “Situation/incident handled incorrectly” and 83% (5/6) were partially upheld against “Lack of Action”.

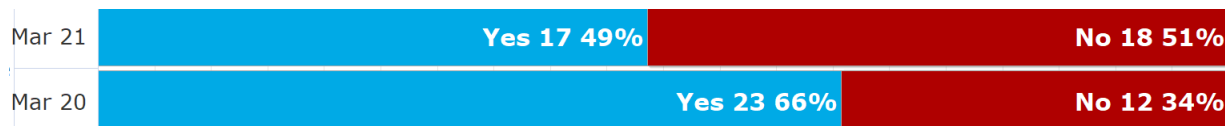
Figure 15: Children’s Stage 1 Corporate Complaints outcome by reason



Stage 1 Timeliness

- 6.6 The timescale for dealing with children’s corporate Stage 1 complaints is 10 working days. However, this can be extended to 20 working days for more complex complaints or if additional time is required. There has been a decrease in timeliness of response for Corporate complaints in 2020/21 (49% 17/35) in comparison to 2019/20 (66% 23/35). This decrease was an impact of the pandemic with staff self-isolating, being off sick etc, for example not being able to speak to particular individuals to process the complaint. Also there were issues with the process, which have resulted in the development of a revised process for dealing with Stage 1 complaints.
- 6.7 The decrease in timeliness in 2020/21 was because a significant number of the complaints were those where the resident was not happy with the decision made so efforts were made to find alternative solutions, particularly with SEND related complaints. The deadlines were not extended to ensure there was the shortest possible delay for these families.

Figure 16: Percentage of Children's Corporate Complaints responded to within timescales



Stage 2 Outcome

6.8 Out of the 35 children’s corporate complaints 11 (31%) had progressed to Stage 2 which is 6 more than 2019/20 (14% 5/35).

6.9

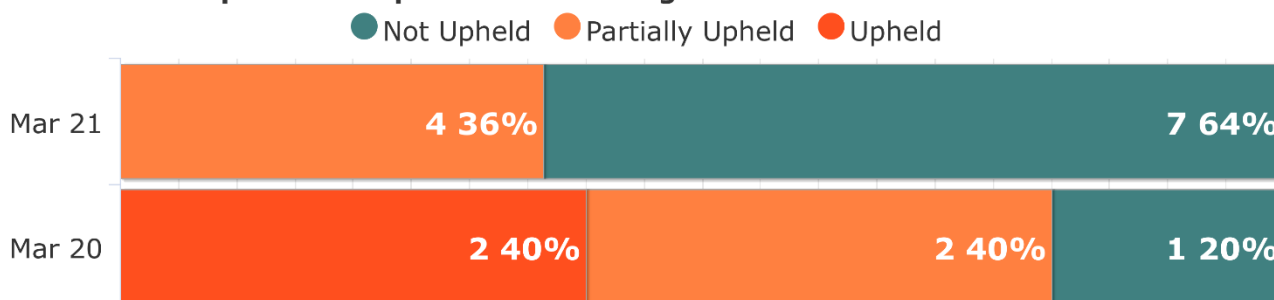
6.10

6.11

6.12 **Figure 17** breaks down the Stage 2 children’s corporate complaints by outcome showing that none were upheld, 36% (4/11) partially upheld and 64% (7/11) not upheld. This is very positive outcome when compared to 2019/20 where 80% of Stage 2 complaints were upheld/partially upheld.

Figure 17: Children’s Stage 2 Corporate Complaints by outcome

Children’s Corporate Complaints where Stage 2 Outcome has been recorded



Stage 2 Timeliness

6.13 The timescale for dealing with children’s corporate Stage 2 complaints is 20 working days. The percentage of Stage 2 children’s corporate complaints responded to within timescale was 91% (10/11) a considerable increase from 2019/20 (80% 4/5). This increase in timeliness to respond at Stage 2 when compared to Stage 1 could be attributed to lesser number of complaints progressing to Stage 2 and an increase in the timescale at Stage 2.

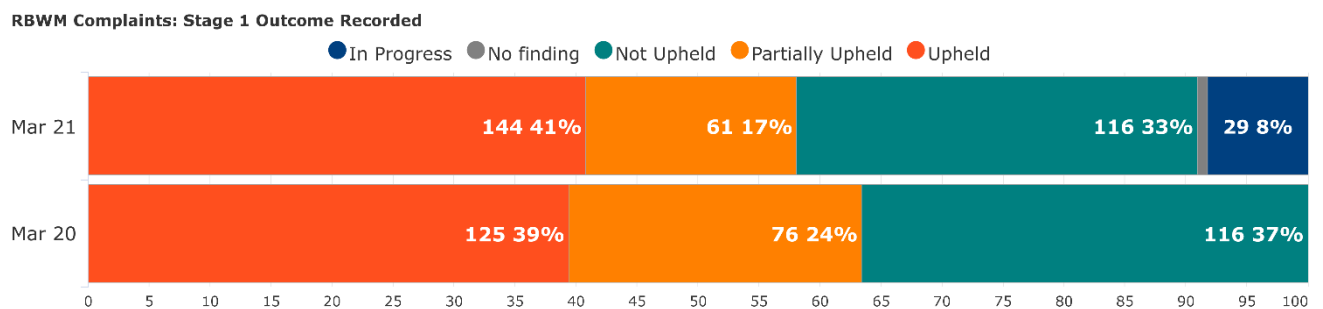
7. RBWM Formal Corporate Complaints Process

7.1. In 2020/21 85% (354/415) of all complaints were progressed as complaints under the formal corporate complaints process. This is an increase on 2019/20 (80%, 317/398).

Stage 1 Outcome

- 7.2. At the time of data extraction for preparation of this report, 324 complaints had a Stage 1 outcome recorded, 29 were in progress and an outcome had not yet been reached.
- 7.3. Figure 18 shows the breakdown of Stage 1 complaints by outcome recorded. 41% (144/353) complaints were upheld (39% in 2019/20), 17% (61/353) partially upheld (24% in 2019/20), 33% (116/353) not upheld (37% in 2019/20), 1% (3/353) where there was no finding; insufficient evidence to make a decision and 8% (29/353) in progress.
- 7.4. 2020/21 saw less proportion of complaints upheld/partially upheld (57%) when compared to 2019/20 (63% upheld/partially upheld).

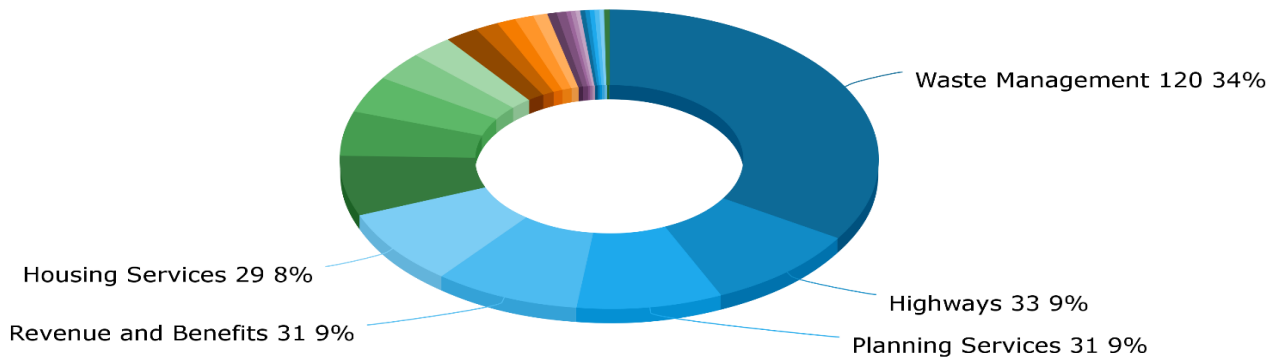
Figure 18: RBWM Formal Corporate Stage 1 complaints by outcome recorded



Top 5 service areas for complaints

- 7.5. Figure 19 shows the top 5 service areas for customer complaints in 2020/21 of which Waste Management is the highest (34%, 120/353) followed by Highways (9%, 33/353), Planning Services (9%, 31/353), Revenue and Benefits (9%, 31/353) and Housing Services (8%, 29/353).
- 7.6. The impact of Covid on the community and the economy has been felt in a number of areas of the council’s operations. Waste and recycling collections moved to alternate weekly collections from 6th April 2020 during the COVID-19 outbreak as there were reductions in staff availability due to ill health or needing to self-isolate. Weekly household waste and recycling collections resumed from 17 August 2020 with a review in collection routes to make them more efficient and environmentally friendly. However, this had significant and enduring problems causing disruption in waste collection mainly in the month of September 2020 leading to increase in the number of complaints. This also had a knock-on effect on the volume of calls to the Customer Contact Centre (18,671 in September) and total digital form submissions (16,649 in September).

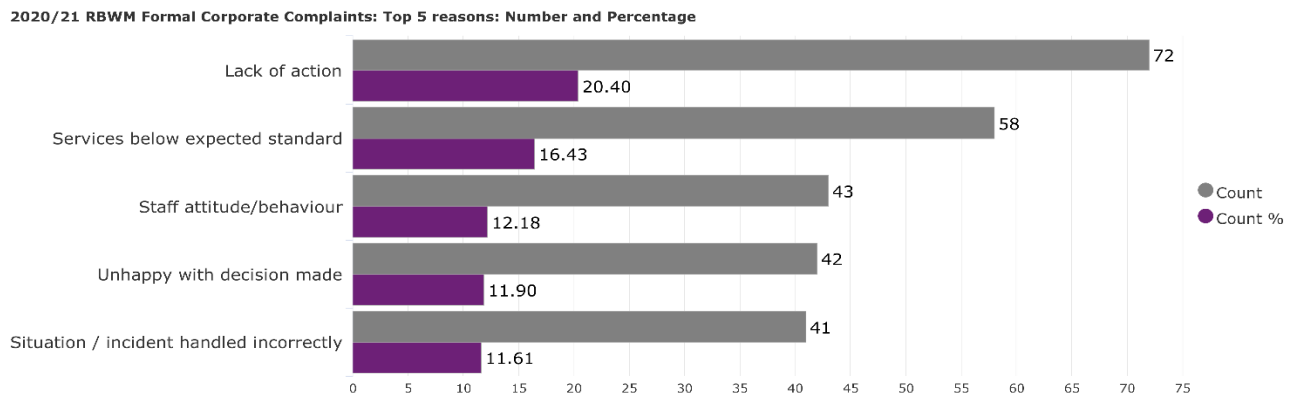
Figure 19: Top 5 service areas for RBWM Formal Corporate Complaints received



Reasons and outcomes

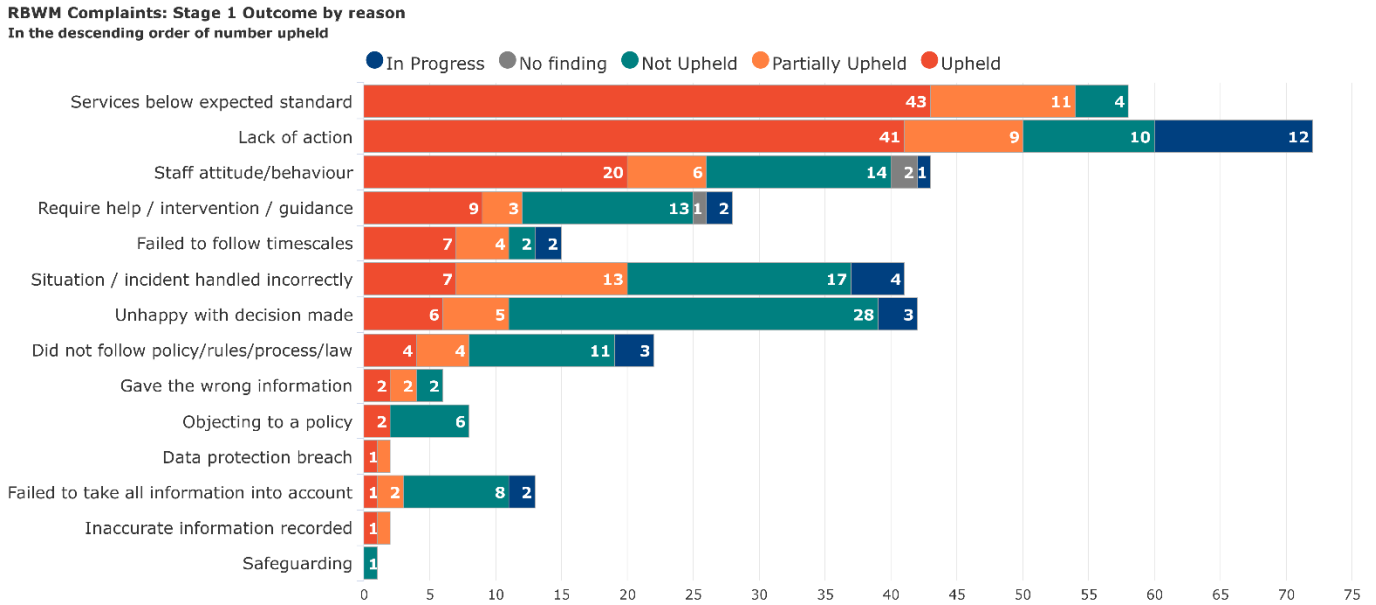
7.7. Figure 20 highlights the top 5 reasons for customer complaints in 2020/21 with one-fifth of the complaints being recorded against “Lack of Action” (20% 72/353).

Figure 20: 2020/21 Top 5 reasons for RBWM Formal Corporate Complaints



7.8. Figure 21 shows the breakdown of Stage 1 complaints outcome by the reason for the complaint. The Top 3 reasons where the most complaints were upheld/partially upheld are “Services below expected standard” (54), “Lack of action” (50) and “Staff attitude/behaviour (26).

Figure 21: RBWM Formal Corporate Complaints Stage 1 outcome by reason

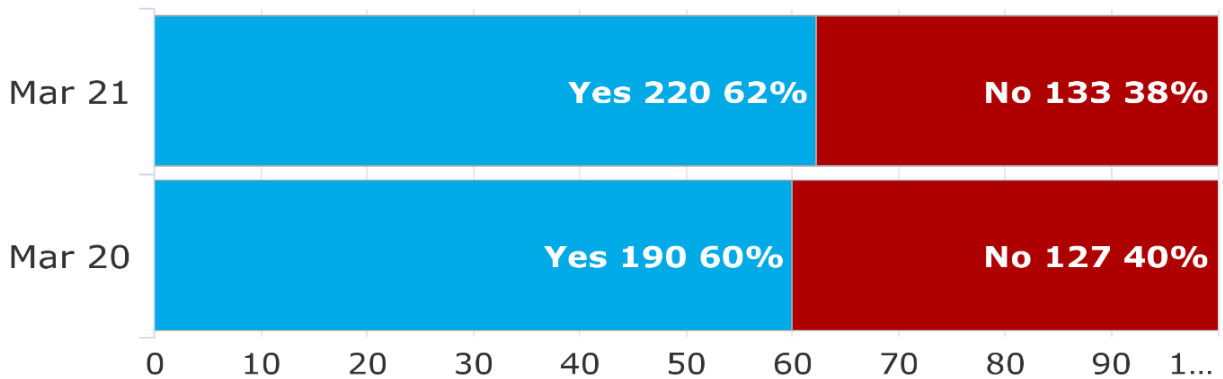


Timeliness at Stage 1

7.9. The timescale for responding to a Stage 1 RBWM formal corporate complaint is 10 working days. Figure 22 shows an increase in the percentage of complaints responded to within timescale (62% 220/353 in 2020/21) in comparison to 2019/20 (60% 190/317).

Figure 22: Percentage of RBWM Formal Corporate Stage 1 Complaints responded to within timescale

RBWM Stage 1 complaints responded to within timescale
Number and Percentage



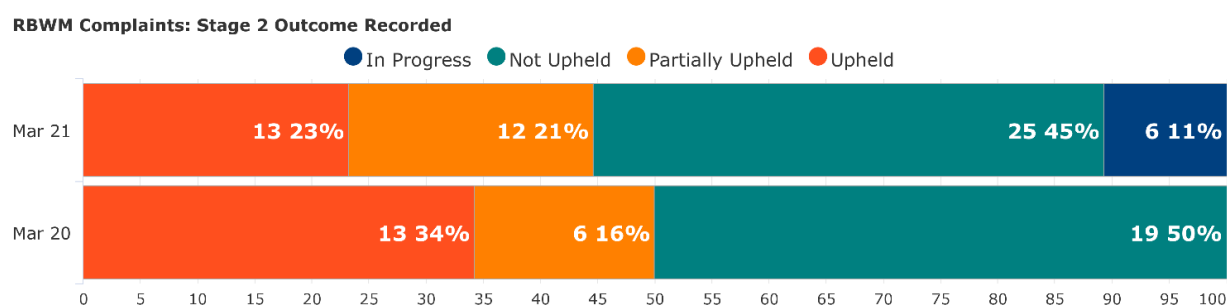
7.10. The previous complaints reporting system (JADU) would automatically send reminders to relevant teams or services with regard to any outstanding complaints or complaints due to expire soon. Since September 2020 a new complaint reporting system has been introduced and this facility is currently unavailable, however the compliments and complaints team continue to send a weekly report to relevant teams or services to ensure timescales are not missed.

7.11. A review of the timescales associated with Stage 1 of the RBWM formal corporate complaints process was undertaken in 2020/21 and from 2021/22 the timescales will be increased from 10 working days to 20 working days, with the ability to extend this by a further 20 working days if required. This change will allow officers more time to fully and robustly investigate complaints that are raised.

Stage 2 RBWM Formal Corporate Complaints

- 7.12. If a complainant feels certain areas have not been addressed after receiving a response at Stage 1 of the corporate complaints process, they may request a review by the director of the service. In 2020/21 16% (56/353) of Stage 1 complaints progressed to Stage 2, an increase from 2019/20 (12%, 38/317).
- 7.13. Breaking down the 56 Stage 2 complaints, 13 (23%) were upheld, 12 (21%) were partially upheld, 25 (45%) were not upheld and 6 (11%) were “In Progress” (Figure 23).
- 7.14. Even though 2020/21 saw an increase in the volumes of complaints progressing to Stage 2, only 44% of them were upheld/partially upheld when compared to 2019/20 (50%).

Figure 23: RBWM Formal Corporate Stage 2 complaints by outcome recorded



Timeliness at Stage 2

- 7.15. The percentage of complaints responded to within timescales at Stage 2 is 88% (49/56) 7 less than 2019/20 (94% 36/38). Timeliness of response at Stage 2 is better than at Stage 1 and this could be because there are fewer complaints progressing to Stage 2. Additionally, the timescale for response at Stage 2 is 20 working days whereas at Stage 1 is 10 working days.

Key learning from RBWM Formal Corporate Complaints

- 7.16. An important part of the complaints process is capturing the learning and embedding good practice across the council. Following are the learning that have been identified by various services areas.

Planning

- 7.17. A number of planning complaints tend to relate to customers who are dissatisfied with the decision for one reason or another, however the general theme emerging from complaints during this period is considered to be related to a lack of communication. This primarily appears to relate to lower staffing levels and more limited communications options during the period of remote working.
- 7.18. The service is seeking to address this emerging theme through a focus on recruitment. We are also reinforcing customer service expectations to existing staff, so that they communicate even if only to let customers know that more time is needed.

Waste

- 7.19. This was a challenging year for waste and recycling services, with two major service changes. In April 2020 the service moved to alternate weekly collections as a result of staff shortages due to Covid 19, with some disruption to the service as a result. In August 2020, the weekly waste and recycling collections were reinstated, and a new collection model was put in place. This new model was not effective and resulted in high numbers of missed collections. In October further collection day changes were made and a collection service over 6 days, including scheduled Saturday collections, was implemented.
- 7.20. Staff have worked very hard with Serco staff and customer services to put in place systems to identify issues and provide feedback quickly, using a shared daily issues sheet which is updated by council staff and Serco daily to update on outstanding collections and resolutions. A new contract manager and operations manager at Serco have been put in place and have made changes to improve the number of missed collections, which has helped to reduce complaints caused by problems with the service. The collections are now running within the expected KPIs and complaints are at a lower level.
- 7.21. Customer service centre staff were giving additional training to handle calls related to waste correctly in the first instance. Calls to customer service centre were temporarily transferred from 1 October 2020 to 15 January 2021 to resolve waste collection complaints straightway and to ease pressure on them.

Housing

- 7.22. Housing have recognised the challenges of the current telephony system and are working with the transformation team to ensure a streamlined process is made available to enable all calls to be captured and responded to in a timely manner.
- 7.23. The housing service also recognises the need for ongoing training, which is now factored into the working week and takes place every Wednesday afternoon, conducted by internal and external providers.

Revenues, Benefits, Libraries and Resident Services

- 7.24. During 2020/21, as a result of the pandemic, a number of complaints were received in connection with the Registration Service's inability to conduct certain ceremonies such as weddings. This was not a service area which previously routinely received complaints, but couples were understandably frustrated at the restrictions imposed, either not being able to have any ceremony at all, or as a result of the limited numbers able to attend. RBWM chose to adapt policies covering this situation to be more flexible with regard to re-booking but did not offer refunds. The majority of complaints, associated with the Registration Service, were in connection with this.
- 7.25. Other areas within the Revenues, Benefits, Libraries and Resident Services area, such as Council Tax and Business Rates, had to adapt to the changing support announced by Central Government but the criteria for such support did not always meet the expectations of our residents.

Highways

7.26. Highway Services deliver a number of resident facing services which impact upon every resident, household, business and visitor to the Royal Borough. Services are often delivered which cause disruption (for example road works), these are essential and widespread as the council continues to invest in infrastructure across the Borough.

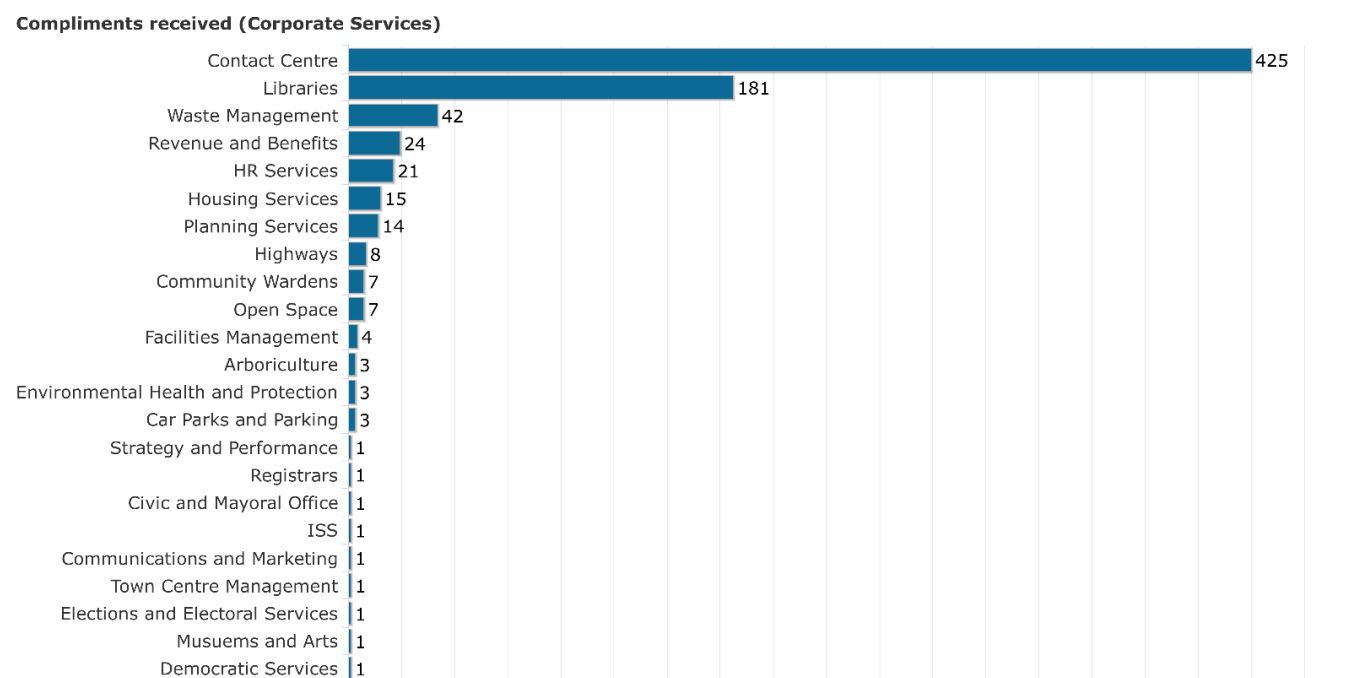
7.27. As a result, the number of complaints received by this service area would be expected to be high when compared to other service areas. In order to manage this, the Highways service area has worked closely with the Complaints team to streamline the allocation of complaints, regularly monitor progress and reduce the number of complaints not responded to within set timescales.

8. Compliments received

8.1. In 2020/21 RBWM Corporate services received 766 compliments which is a 116% increase compared to 2019/20 (355).

8.2. Figure 24 sets out the volume of compliments received by teams. The team in receipt of the most compliments was the Customer Contact Centre (56%, 425/766), followed by Libraries (24%, 181/766) and Waste Management (6%, 42/766).

Figure 24: Compliments received by teams



8.3. From the outset of the pandemic, call centre staff were engaged in setting up and training council staff in the use of new technologies to support engagement with local community groups and also local residents who may be shielded as a result of particular vulnerabilities to the virus. More than half of the compliments to Customer Contact Centre (56% 425/766) evidences a positive community engagement which was a key focus during the pandemic.

8.4. Libraries had a particular focus on the growth of the service's digital offer to support home-based leisure and learning and to mitigate the risk of a widening digital divide. The

introduction of “click and collect” and “click and deliver” services has maintained a physical link between the service and communities throughout the year. Libraries received nearly a quarter of the compliments (24% 181/766).

- 8.5. Waste management being in the top 3 teams receiving compliments (42) shows that despite disruption in waste collection for a short period of time the service was quick to recover to meet customer expectations.
- 8.6. The variety of compliments across different teams show the breadth of work carried out by the council and the positive difference it makes to the residents.
- 8.7. In general the overall response to the council’s management of the borough’s COVID response was outstanding. RBWM's COVID-19 community response focused on supporting a network of dozens of local voluntary efforts, maximising the local help available to vulnerable and shielding residents. Our centralised call centre acted as a conduit for support, using both Amazon Connect and our Lyon 2.0 system to connect those looking for help to those readily delivering it in the community.
- 8.8. With a greater than 90% success rate of contacting residents in need of help, we received dozens of written and verbal compliments from residents on the helpfulness of staff and our ability to work closely with the community. Indeed many staff went above and beyond, personally helping residents well outside of working hours, which didn't go unnoticed.
- 8.9. Such was the success of our facilitatory approach, partners at MHCLG asked us for written case-studies and interviews on how we'd worked successfully alongside our communities. There were articles in the Maidenhead Advertiser, the video sponsored by Amazon AWS on our approach, an invitation to submit written evidence to the Kruger Commission, an invite to speak at a national community learning event and even a phone-call with one of the MHCLG advisers in Downing Street who'd become aware of our work in RBWM. This feedback has since reminded us of the power of working in tandem with our local communities - not trying to enforce 'command and control', 'top down', bureaucratic interventions on communities, but instead working with local people, developing on local strengths, and instead taking a facilitatory role.

9. Appendices

Appendix A: LGSCO Annual Review letter 2021



21 July 2021

By email

Mr Sharkey
Managing Director
Royal Borough of Windsor and Maidenhead Council

Dear Mr Sharkey

Annual Review letter 2021

I write to you with our annual summary of statistics on the decisions made by the Local Government and Social Care Ombudsman about your authority for the year ending 31 March 2021. At the end of a challenging year, we maintain that good public administration is more important than ever and I hope this feedback provides you with both the opportunity to reflect on your Council's performance and plan for the future.

You will be aware that, at the end of March 2020 we took the unprecedented step of temporarily stopping our casework, in the wider public interest, to allow authorities to concentrate efforts on vital frontline services during the first wave of the Covid-19 outbreak. We restarted casework in late June 2020, after a three month pause.

We listened to your feedback and decided it was unnecessary to pause our casework again during further waves of the pandemic. Instead, we have encouraged authorities to talk to us on an individual basis about difficulties responding to any stage of an investigation, including implementing our recommendations. We continue this approach and urge you to maintain clear communication with us.

Complaint statistics

This year, we continue to focus on the outcomes of complaints and what can be learned from them. We want to provide you with the most insightful information we can and have focused statistics on three key areas:

Complaints upheld - We uphold complaints when we find some form of fault in an authority's actions, including where the authority accepted fault before we investigated.

Compliance with recommendations - We recommend ways for authorities to put things right when faults have caused injustice and monitor their compliance with our recommendations. Failure to comply is rare and a compliance rate below 100% is a cause for concern.

Satisfactory remedy provided by the authority - In these cases, the authority upheld the complaint and we agreed with how it offered to put things right. We encourage the early resolution of complaints and credit authorities that accept fault and find appropriate ways to put things right.

Finally, we compare the three key annual statistics for your authority with similar types of authorities to work out an average level of performance. We do this for County Councils, District Councils, Metropolitan Boroughs, Unitary Councils, and London Boroughs.

Your annual data will be uploaded to our interactive map, [Your council's performance](#), along with a copy of this letter on 28 July 2021. This useful tool places all our data and information about councils in one place. You can find the decisions we have made about your Council, public reports we have issued, and the service improvements your Council has agreed to make as a result of our investigations, as well as previous annual review letters.

I would encourage you to share the resource with colleagues and elected members; the information can provide valuable insights into service areas, early warning signs of problems and is a key source of information for governance, audit, risk and scrutiny functions.

As you would expect, data has been impacted by the pause to casework in the first quarter of the year. This should be considered when making comparisons with previous year's data.

This year, we issued a public report about your Council after we found it did not do enough to consider a couple's circumstances who required social care support. Our investigation found the Council did not properly consider whether the couple could continue to live at home with live-in care workers after the woman had a stay in hospital. The woman was moved to a care home; a decision that was made permanent without any formal best interest decision and little regard to the couple's dignity or basic human rights. The man, left at home without visits to his wife, quickly deteriorated. The Council did not assess his needs properly and the care he received at home, from two care providers, was not adequate. He died before the Council belatedly responded to family concerns.

It was disappointing the Council initially failed to respond properly to our enquiries in this case, but I am pleased to note it accepted fault on receipt of our draft report and agreed to all our recommendations. The Council's response to the public report was excellent. As we recommended, it gave a fulsome and proper apology to the family and paid them £2,000 in recognition of the distress it caused and the time and trouble in bringing the complaint. It also provided evidence it had implemented the recommended service improvements. These included reviewing other cases where couples had been separated by their care needs, making sure assessment practice is consistent and Care Act compliant, reviewing commissioning practice, and following up to ensure care providers sustain improvements following complaints of poor practice.

I am pleased to note the Council gave clear public recognition that what had happened was unacceptable and welcome the Council's willingness to learn lessons from this case and complete the actions we agreed.

Supporting complaint and service improvement

I am increasingly concerned about the evidence I see of the erosion of effective complaint functions in local authorities. While no doubt the result of considerable and prolonged budget

and demand pressures, the Covid-19 pandemic appears to have amplified the problems and my concerns. With much greater frequency, we find poor local complaint handling practices when investigating substantive service issues and see evidence of reductions in the overall capacity, status and visibility of local redress systems.

With this context in mind, we are developing a new programme of work that will utilise complaints to drive improvements in both local complaint systems and services. We want to use the rich evidence of our casework to better identify authorities that need support to improve their complaint handling and target specific support to them. We are at the start of this ambitious work and there will be opportunities for local authorities to shape it over the coming months and years.

An already established tool we have for supporting improvements in local complaint handling is our successful training programme. During the year, we successfully adapted our face-to-face courses for online delivery. We provided 79 online workshops during the year, reaching more than 1,100 people. To find out more visit www.lgo.org.uk/training.

Yours sincerely,

A handwritten signature in black ink, appearing to read 'M King', with a horizontal line underneath.

Michael King
Local Government and Social Care Ombudsman
Chair, Commission for Local Administration in England

Appendix B: Council's complaints process and procedures

The principle behind the council's complaints procedure is to ensure that every opportunity for resolution is sought through dialogue or local resolution before a complaint is submitted. Where agreement is not achieved someone has the right to complain and the complaints process has different stages dependant on the area of service the complaint is about.

Complaints made about the council's services are dealt with under three processes. The formal corporate complaints process for general council activity such as: council tax; housing; highways; communications; democratic services and so on; and the statutory adult and statutory children's processes.

The different complaint processes have different stages, however 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 and Social Care Ombudsman. The different stages are:

- The formal corporate complaints process contains two stages.
- The adult complaints process contains one stage
- The children's complaints process contains three stages.

Although customers can refer complaints to the Local Government and Social Care Ombudsman (LGSCO) at any stage, the LGSCO will not normally investigate until the council have exhausted their complaints processes.

Complaints are made by email, phone call, letter, face to face or by logging the complaint online. All complaints received, along with comments and compliments, are recorded on the council's complaints database (Jadu). The Jadu system provides for compliments and complaints to be captured by number, types, themes, postal address and timeliness of complaint.

The council's complaints policies are intended for use by service users, customers, residents, businesses and visitors or their chosen representatives, which may include councillors.

The council's complaints process is managed through one team. This means the team is independent of the two statutory adult and children's services, ensures independence from services, removes the possibility of conflicts of interest and secures impartial challenges.

Quality assurance

Effective complaint management is crucial to allow confidence on the part of complainants to submit complaints in the understanding that the council will take these seriously and respond.

When a complaint is received the complaints and compliments team focus on ensuring:

- The process for investigating the complaint is followed and on time.
- Complaint responses answer the questions asked and are clear and easy to read.
- Lessons learned and recommendations are captured to secure continual improvement – this includes one to one training/advice/meetings with relevant employees providing them with support and guidance on how best to resolve a complaint.
- Any actions or recommendations are noted on Jadu and monitored.

Complaints processes – March 2021

Initially once received via online form, email, telephone call or face to face contact all complaints are logged on the complaints database (Drupal) for monitoring and tracking.

Once logged the complaint is acknowledged within 3 working days and customer informed whether this will be taken as a complaint and if so, under which complaints process

Internal process

	Adult services complaints	Children's services complaints	Corporate complaints	Not within the formal complaints process
Stage 1	Statutory No specific timescale but aim to respond within 10 working days. Response from Service Manager or higher.	Statutory Up to 10 working days. Can agree extension for a further 10 working days. Response from Head of Service.	Up to 10 working days. Can agree extension for a further 10 working days. Response from Head of Service.	N/A
Stage 2	N/A	Statutory 25-65 working days. Completed by independent complaints investigators and report produced. Adjudicating letter in response to report completed by Children's Director of Social Care.	Up to 20 working days. Review of stage 1 complaint and response by Director.	N/A
Stage 3	N/A	Statutory Stage 3 independent panel. Up to 70 working days. Panel of three independent members who produce a report. Letter in response to the report completed by the Directors of Children's Services.	N/A	N/A
Alternative appeal process	N/A	N/A	N/A	Customer given timescales for response

External process

LGSCO - Can complain to the Local Government and Social Care Ombudsman

Appendix C: National and legislative context – March 2021

Formal corporate complaints

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

Adult services

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.

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

The procedure for dealing with children's statutory complaints and representations is determined by the following legislation:

- The Children Act 1989, Representations Procedure (England) Regulations 2006.
- The Children & Adoption Act 2002 and Children (Leaving Care) Act 2000 and
- The accompanying guidance 'Getting the Best from Complaints' (DfE July 2006).

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.'

Under the regulations, the council is required to produce and publish an annual report.

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WORK PROGRAMME - CORPORATE OVERVIEW AND SCRUTINY PANEL

EXECUTIVE DIRECTORS	<ul style="list-style-type: none"> • Duncan Sharkey (Chief Executive) • Andrew Durrant (Executive Director of Place) • Adele Taylor (Executive Director of Resources and S151 Officer) • Emma Duncan (Monitoring Officer and Deputy Director of Law and Strategy) • Hilary Hall (Executive Director of Adults, Health and Housing)
LINK OFFICERS & HEADS OF SERVICES	<ul style="list-style-type: none"> • Elaine Browne (Head of Law) • Nikki Craig (Head of HR, Corporate Projects & ICT) • Ruth Watkins (Chief Accountant) • Karen Shepherd (Head of Governance) • Andrew Vallance (Head of Finance and Deputy S151 Officer)

MEETING: 11th OCTOBER 2021

ITEM	RESPONSIBLE OFFICER
Corporate Plan	Corporate Leadership Team and Cabinet Members
Work Programme	Panel clerk

MEETING: 29th NOVEMBER 2021

ITEM	RESPONSIBLE OFFICER
Council Trusts Report	Karen Shepherd, Head of Governance
Corporate Transformation Strategy and Action Plan	Dan Brookman, Head of Transformation
Resident Suggestion – RBWM App	Dan Brookman, Head of Transformation
Work Programme	Panel clerk

MEETING: 26th JANUARY 2022

ITEM	RESPONSIBLE OFFICER
Budget 2022/23	Lead Officers and Finance
Q2 Performance Report	Nikki Craig, Head of HR, Corporate Projects and ICT
Annual Scrutiny Report (Draft)	Chairman and Panel
Work Programme	Panel clerk

MEETING: 4th APRIL 2022

ITEM	RESPONSIBLE OFFICER
Q3 Performance Report	Nikki Craig, Head of HR, Corporate Projects and ICT
Annual Scrutiny Report (Final Version)	Chairman and Panel
Work Programme	Panel Clerk

ITEMS SUGGESTED BUT NOT YET PROGRAMMED

ITEM	RESPONSIBLE OFFICER
Customer Journey	

[Terms of Reference for the Corporate Overview and Scrutiny Panel](#)