**MANSFIELD DISTRICT COUNCIL: INTERVENTIONS USED TO ACHIEVE PERFORMANCE TARGETS**

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| Reference No. | | Corporate | Indicator Description | | **% of stage 1 complaints responded to within timescale**  **% of stage 2 complaints responded to within timescale** | | | | | | | |
| Lead Officer | | | James Biddlestone | | Date Plan Completed | | | 19.04.2022 | | | | |
| Performance Out-turn | | | **2020/2021** | | | | | **2021/2022** | | | | |
| **% of stage 1 complaints responded to within timescale**  **% of stage 2 complaints responded to within timescale** | | | **Q1** | **Q2** | **Q3** | **Q4** | **Full Year** | **Q1** | **Q2** | **Q3** | **Q4** | **Full Year** |
| Overall  Measure | Target | | - | - | - | - | - | **100%** | **100%** | **100%** | **100%** | **100%** |
| Actual Stage 1  Actual Stage 2 | | **N/A**  **N/A** | **N/A**  **N/A** | **N/A**  **N/A** | **N/A**  **N/A** | **N/A**  **N/A** | **44%**  **50%** | **40%**  **56%** | **52%**  **60%** | **88%**  **22%** | **56%**  **46%** |
| **Explanation of Current Performance** | | | All complaints are dealt with in line with Councils complaints procedure with timescales for responding to stage 1 complaints being within 10 working days and stage 2 complaints within 15 working days.  Individual service areas are responsible for responding to stage 1 complaints with the number of complaints received by individual service areas varying.  In the 1st quarter of 2021/22 a total of 110 formal stage 1 complaints were recorded.  In the 2nd quarter of 2021/22 a total of 214 formal stage 1 complaints were recorded.  In the 3rd quarter of 2021/22 a total of 136 formal stage 1 complaints were recorded  In the 4th quarter of 2021/22 a total of 149 formal stage 1 complaints were recorded.  **Table 1: The number of complaints recorded by service area for Q1, Q2, Q3 and Q4.**   |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | **Service Area** | **Q1** | **Q2** | **Q3** | **Q4** | **Q3 – Q4 +/-** | | Planning and Regeneration | 4 | 4 | 5 | 5 | 0 | | Housing | 36 | 40 | 36 | 30 | -6 | | Health & Communities | 5 | 7 | 10 | 9 | -1 | | Neighbourhood Services | 52 | 148 | 69 | 84 | +15 | | Law & Governance | 1 | 1 | 0 | 0 | 0 | | People & Transformation | 3 | 7 | 4 | 4 | 0 | | Finance | 9 | 7 | 12 | 17 | +5 | | **Totals** | **110** | **214** | **136** | **149** | **+13** |   As well as capturing the number of stage 1 complaints received by the council and departments monitor the % of complaints responded to within the policy defined timescale (10 working days). Please find below Table 2 for the corporate overview of % of stage 1 complaints responded to within timescale.  **Table 2: % of stage 1 complaints responded to within timescale by service area for Q1, Q2, Q3 & Q4.**   |  |  |  |  |  | | --- | --- | --- | --- | --- | | **Service Area** | **% responded to within timescale (Q1)** | **% responded to within timescale (Q2)** | **% responded to within timescale (Q3)** | **% responded to within timescale (Q4)** | | Planning and Regeneration | 0% | 50% | 80% | 100% | | Housing | 94% | 55% | 42% | 83% | | Health & Communities | 0% | 14% | 20% | 78% | | Neighbourhood Services | 71% | 41% | 52% | 72% | | Law & Governance | 0% | 0% | N/A | N/A | | People & Transformation | 67% | 48% | 75% | 100% | | Finance | 78% | 71% | 42% | 92% | | **Average** | **44%** | **40%** | **52%** | **88%** |   If a customer is dissatisfied by the investigation and/or response at stage 1, they can ask for the decision to be reviewed. The customer must provide detail on why they are dissatisfied and what action they would like to be taken.  Stage 2 complaints are investigated on behalf of the Co-Chief Executive Officers, by a nominated officer independent of the service being complained about.  The request to progress to stage 2 is acknowledged within 2 working days and a full investigation undertaken. The decision made and a response to the customer’s complaint will be issued by the relevant Head of Service within a further 15 working days.  **Table 3: The number of stage 2 complaints recorded by service area for Q1, Q2, Q3 & Q4.**   |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | **Service Area** | **Q1** | **Q2** | **Q3** | **Q4** | **Q3 – Q4 +/-** | | Planning and Regeneration | 1 | 3 | 1 | 0 | -1 | | Housing | 0 | 1 | 1 | 3 | +2 | | Health & Communities | 0 | 0 | 1 | 0 | -1 | | Neighbourhood Services | 4 | 2 | 4 | 5 | +1 | | Law & Governance | 0 | 0 | 0 | 1 | +1 | | People & Transformation | 0 | 0 | 0 | 0 | 0 | | Finance | 0 | 0 | 1 | 1 | 0 | | **Totals** | **5** | **6** | **8** | **10** | **+2** |   Within Quarter 4, a total of ten customers expressed they were dissatisfied with the response/findings of their stage 1 complaint. So out of the 149 stage 1 enquires 5% of those progressed into a stage 2 complaint and supporting investigation/response.  Of the ten stage 2 responses none of this complaints led to the customer progressing there complaint via either the Local Government or Social Care Ombudsman or as a social housing provider the Housing Ombudsman.    **Table 4: % of stage 2 complaints responded to within timescale by service area for Q1, Q2, Q3 & Q4.**   |  |  |  |  |  | | --- | --- | --- | --- | --- | | **Service Area** | **% responded to within timescale (Q1)** | **% responded to within timescale (Q2)** | **% responded to within timescale (Q3)** | **% responded to within timescale (Q4)** | | Planning and Regeneration | 0% | 67% | 0% | N/A | | Housing | N/A | 0% | 100% | 67% | | Health & Communities | N/A | N/A | 100% | N/A | | Neighbourhood Services | 100% | 100% | 100% | 20% | | Law & Governance | N/A | N/A | N/A | 0% | | People & Transformation | N/A | N/A | N/A | N/A | | Finance | N/A | N/A | 0% | 0% | | **Average** | **50%** | **56%** | **60%** | **22%** | | | | | | | | | | |
| **Interventions in the last 3 months and evaluation of impact** | | | The following corporate documents have been reviewed/refreshed:   * Complaints Policy * Complaints Procedure * Appendix 1 – What is not a complaint * Appendix 2 – Complaint examples * Appendix 3 – Handling complaints * Appendix 4 – Example response text * Appendix 5 – The Ombudsman Services * Appendix 6 – Designated Person   Reports are available within the corporate Jadu system to enable the management of complaints data, and this accessible to all officers who have accountability to investigate and respond to complaints.  Online training and guidance on complaints reporting continues to be offered and delivered to all appropriate staff.  The ICT, Business Transformation Unit and Customer Services teams have been working on the development of a complaints data dashboard. These dashboards will provide an efficient and effective tool for officers to analyse complaints data, so as to identify any trends or triggers which lead to customer complaints. Based on this data, services can then consider if service delivery or processes require review or improvement. | | | | | | | | | |

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| **MANSFIELD DISTRICT COUNCIL: INTERVENTION PLAN TO ACHIEVE PERFORMANCE TARGETS** | | | | | | | | |
|  | **Key Interventions to Achieve Performance** | **By When** | **By Who** | **Resource Implications** | **Most Significant Risk to Achievement of Intervention** | **Contingency Intervention for Most Significant Risk** | **Monitoring Process** | **Outcomes expected from intervention** |
| 1 | Monthly complaint reports will continue to be issued to Heads of Service and Service Managers | Ongoing | S Allman | Existing staff resources | No risk | No risk intervention required | CLT Performance Clinic | Any concerns regarding performance are picked up and resolved in a timely manner. |
| 2 | Complete the development of reporting tool via Jadu to enable service managers to run their own complaints performance reports via data dashboards | June 2022 | I Gregory | Existing staff resources | Developer resources available to make the changes on Jadu. | Ensure changes required to the system are scheduled into the developers work programme. | Monthly performance reports produced for CLT Performance clinic | Service Managers are able to monitor performance against complaints handling for their own service areas and take corrective action where required |
| 3 | Gather and analyse feedback on the online training and guidance that supports staff in complaints handling | May 2022 | S Allman / R Bean | Existing staff resources | No / limited feedback is available | Undertake direct user research to establish feedback | CLT Performance Clinic | Accessible and fit for purpose complaints training and guidance available to staff |
| 4 | Launch Customer Experience training module in my view | June 2022 | S Allman | Existing staff resources | No Risk | Compulsory module | CLT performance clinic | Improved knowledge for all employees dealing with customers. Putting customers at the heard of what we do |