



INTERNAL AUDIT REPORT	
Area of Review	Complaint Handling
Contact Officer	Audit Manager
Date	October 2021
Version	Final

1. **BACKGROUND**

As part of the 2021/22 Internal Audit plan, we carried out a review of the key controls in place around the way in which the Council handles complaints from residents and other stakeholders.

Complaint handling is the responsibility of all services. The purpose of this audit is to review controls in place, highlighting any weaknesses in process or compliance and making recommendations where improvements could be implemented. Testing has been carried out on a sample basis.

2. **SCOPE OF THE REVIEW**

We have reviewed the policies and processes in place for officers to guide them when dealing with complaints. We have performed walkthrough testing, where appropriate, and assessed the effectiveness of internal controls and ensure risk is managed effectively.

Specific elements of the review have included:

- Staff understanding of complaints policy.
- Availability of the policy
- Complaint statistics and reporting
- Review lessons learnt by services from the complaints process.
- Communication and signposting of the process to the public
- The actual receiving and recording of complaints
- We have reviewed a sample of complaints and check compliance with the policy
- We have reviewed the policy around vexatious complaints
- We have reviewed ombudsman complaints raised in the last 12 months.
- We have reviewed the Council's definition of complaints

3. CONTROL OBJECTIVES

The scope of this review has encompassed the following control objectives:

Control Objectives	
1	To ensure that officers are aware of the complaints policy and can explain and signpost service users to the procedures.
2	To review the means by which complaints are received and recorded.
3	To ensure that the 'step system' for complaints is being followed, documented and the timescales adhered to
4	To ensure that vexatious, persistent, and unreasonable complaints are dealt with as per policy.
5	To ensure that Ombudsman complaints are dealt with as per policy.
6	To review complaint statistics and ensure that these are reviewed, reported and lessons learnt are implemented.

4. AUDIT APPROACH

Our audit approach to this review has been to:

- Obtain and understand the relevant processes through discussions with key personnel, review of systems documentation and perform walkthrough tests where appropriate.
- Identify the key risks within the function.
- Evaluate and test the effectiveness of the controls in place to address these risks.
- This review has been undertaken in compliance with the Internal Audit Public Sector Standards.

5. OPINION ON CONTROL FRAMEWORK

The overall level of opinion that can be provided on the internal control framework for this review is:

Levels of Assurance	
Substantial	Substantial assurance given where there is a sound system of controls in place, which applied consistently to enable achievement of the intended objective.
Satisfactory	Satisfactory assurance given where there is generally a sound system of internal control in place with only minor lapses, and in general, objectives achieved.
Limited	Limited assurance is given where controls in place are not always applied and objectives may not be achieved, meaning the Council is exposed to the risk of financial loss, fraud or the loss of reputation.
None	No assurance is given where weaknesses in control has resulted if a failure to achieve objectives

5.1. The level of assurance of this review is **limited assurance**.

This level of assurance is based on the following key findings:

- We did not find a consistent and corporate approach to identifying and recording complaints
- Some officers appeared unconfident in executing the complaints process
- Our sample testing found that complaints were not always dealt with in a timely manner
- Our testing found that complaints were not always addressed effectively at the first stage
- There is no corporate monitoring of or reporting of complaint statistics
- Lessons learnt and best practice are not considered as part of the complaints process

5.1.2 This report seeks to highlight some of the main issues and assist in the development of an improvement plan.

6. SUMMARY OF IDENTIFIED RISKS AND RECOMMENDATIONS TO BE AGREED WITH MANAGEMENT

#	Risk	Issue identified	Risk Assessment	Recommendation	Management Response / Mitigation	Responsible Officer	Target Date
1	Inconsistent Complaint handling	<p>The current policy needs to be reviewed and updated</p> <p>This review should consider complaints received via social media</p> <p>There are no complaint handling process maps in place for officers to work to and use for reference</p>	Medium	<p>It is recommended that when the policy is updated that the feedback from the change champions is taken into consideration in the re-draft of the policy.</p> <p>Review the need for a process map for officers to use</p>	<p>Agree to be reviewed</p> <p>In the first instance the Change Champions will review ahead of consideration by Management Team.</p> <p>Will be brought to Cabinet for approval</p>	Joint Chief Executive	April 2022
2	Inconsistent complaint handling	The complaints policy is not easily accessible to officers on SharePoint	Low	Ensure that the policy is accessible and that officers know where to find it	<p>Actioned</p> <p>This will also be covered in the training</p>	Joint Chief Executive	Completed
3	Complaints are not identified, recorded and monitored	<p>There are inconsistencies in the recording of complaints with records not kept up to date and evidence of response not readily available.</p> <p>Vexatious complaints are not recorded centrally.</p> <p>There is no central record monitoring complaints</p>	Medium	That a corporate review of how complaints are recorded and monitored	<p>This flows on from an update and refresh to the complaint policy.</p> <p>Identification of appropriate mechanisms across the organisation have already identified and need to be progressed</p>	Change and Digital Manager	April 2022

Complaint Handling V2.1 updated 27/09/21

4	Complaints are not dealt with effectively	Not all officers are aware of their responsibility to be aware of and use the complaints policy Complaints training has not been undertaken in recent years.	Medium	Once the complaints process and policy has been reviewed that officer training takes place on complaint handling	Once the Policy has been updated and refreshed, the Council will provide training to all staff	Joint Chief Executive	April 2022
5	Complaints are not dealt with in a timely manner and in line with the complaints policy	There was evidence to suggest that complaints were not being responded to in a timely manner or in some cases no evidence of a response	Medium	Officers are reminded of their responsibilities in the handling of complaints	The training to all staff (action 4) will highlight the expectations and obligations on staff to respond in a timely manner. Additionally, it is anticipated that the new system for recording and monitoring complaints will highlight any complaints not responded to in an appropriate timescale (with escalations where necessary)	Joint Chief Executive	April 2022
6	Poor governance and reporting of complaints	Currently there is no reporting of complaint statistics to either management or members	Medium	Introduce complaint reporting and monitoring in Management meetings and in service panels	The system (action 3) will provide for monitoring and reporting on complaint processes	Change and Digital Manager	April 2022
7	Service improvements not recognised or implemented	There is a lack of awareness in teams of service complaints Trends are not monitored Lessons learnt and service improvements are not	Medium	Include the need for reviewing complaints in any officer training Review how to best share trends	The system (action 3) will provide for trend monitoring as will any key learnings from complaints.	Change and Digital Manager	April 2022

		reviewed and shared as best practice					
8	Customers are not clear on the complaints process	Officers do not readily offer the opportunity of formalising a complaint The complaint information on the Hart website is in the 'Feedback' section and it is not obvious that this is where you would go to find information on how to make a complaint.	Low	Include this topic in complaints training Consider the current location of the complaint information on the website and assess if this is accessible for residents	The training to all staff (action 4) will highlight to staff the need to share with our customers our complaints policy as part of the appropriate feedback from our residents. The location of the complaint information will be reviewed as part of the action plan	Joint Chief Executive	April 2022
9	Non-compliance with GDPR	The data retention does not specify the amount of time complaint records should be held for	Medium	Specify the data retention for complaints on the data retention schedule	The data retention policy has been updated to include retention for complaints (Sept 21)	Data Protection Officer	Closed
10	Inconsistent complaint handling standards	Where services are outsourced, there is no consistent approach to ensuring complaints are handled as per the Hart complaints policy – consideration should be given to how officer awareness, recording, monitoring and reporting of these complaints	Medium	Ensure that as part of the governance processes for outsourced services that complaint handling is recorded monitored and reported correctly	Once the policy has been refreshed and updated, it will be shared with all key partners who provide services on behalf of Hart District Council	Joint Chief Executive	February 2022

7. SUMMARY OF FINDINGS

7.1 Control Objective One:

To ensure that officers are aware of the complaints policy and can explain and signpost service users to procedures.

7.1.1 There is a Compliments, Comments and Complaints policy in place created December 2012 with an effective date of February 2019 - review date of March 2021.

7.1.2 The Change Champions reviewed the complaints process in June 2021 their findings are shown below:

- There is an inconsistency in the management of complaints - some areas send letters, others provide an acknowledgement, others not reflecting the diversity of the services provided.
- The variety of channels which receive complaints results in a differing service level, lack of visibility and in some cases reliance on diligence of individuals to respond.
- There is an inconsistency in the way records are kept, with some services using excel spreadsheets and others using databases.
- Due to the diversity of recording systems, there is a lack of statistical information on the number of complaints and the reporting to management and councillors
- Whilst individual services may improve as a result of feedback, the Council cannot corporately evidence lessons learnt, review of outcomes or changes implemented
- There is a level of confusion over logging of complaints at each stage
- The Joint Chief Executive are often approached by complainants requesting that they deal with complaints often without prior investigation
- Whilst the definition of complaint is clear on the policy, there is a lack of clarity on how this is implemented in practice.
- MP's letters received direct to the Joint Chief Executives are in effect, complaints. However, they are not treated as such under the policy and are as a result, hidden from the broader complaint workload.
- Complaints processes on website is difficult to find and is confused with the feedback form and compliments.

It is recommended that when the policy is updated that the feedback from the change champions is taken into consideration in the re-draft of the policy.

<Recommendation One>

7.1.3 There is a Feedback page on the Hart District Council website which provides links to the complaints policy and ombudsman procedures. [Feedback Page](#)

7.1.4 A survey was undertaken by members of Change Champions Group to ascertain if they knew where to find the policy and had they seen it. 11 Officers responded – 9 had seen it and were able to locate it, 2 were not aware and were unable to locate.

7.1.5 Audit testing confirmed that the policy was difficult to locate on SharePoint and there were several versions identified when using the search function.

<Recommendation two>

7.1.6 The survey amongst officers highlighted that some officers are comfortable with offering the complaints policy to members of the public others less so. It is important that all officers are confident in the complaints process and not be afraid of inviting a complaint if appropriate. It is recommended once the complaints process and policy has been reviewed that officer training takes place on complaint handling. **<Recommendation four>**

7.1.7 There is a complaints policy which details the three stages of the complaints process. Best practice would be to provide a clear flow chart or working instructions in place for officers to follow through the various stages of the complaints process. **<Recommendation one>**

7.1.8 Recent training has not taken place for staff on the complaints process. **<Recommendation four>**

7.1.9 Where services are delivered by outsourced organisations there is a lack of clarity how these are recorded and reported to Hart District Council and at what stage they need to be handed over to HDC officers. **<Recommendation ten >**

7.2 Control Objective Two:

To review the means by which complaints are received and recorded.

7.2.1 Complaints and comments are received in a variety of methods. These include: email to joint inboxes, emails to officer email, e-forms from the website, social media, Councillors, letters and in person. Complaint records held do not identify method of receipt.

7.2.2 Each service has a method of recording complaints that come in – these are excel spreadsheets and are not consistent in design. **<Recommendation three>**

7.2.3 Monitoring of complaints relies on a manual review to check when responses are required. Calendar reminders are not used to remind officers of when deadlines for response will be breached. **<Recommendation three>**

7.2.4 Having spoken with a number of officers there are differing views on how complaints are categorised which means that not all potential complaints are always captured, some of which are considered to be feedback.

<Recommendation one>

7.2.5 One area of ambiguity is when a statutory decision is made, and a member of the public is not happy with the decision, and it is often not dealt with as a complaint. There may be a need to address the issue in order to clarify the understanding of the process. Consideration should be given to the recording this type of correspondence. **<Recommendation one>**

7.2.6 Social media is a channel for many complaints and comments. The recent update to the Customer Service standards considers social media. The complaints policy should also be updated to reflect how complaints received by this method are recorded and dealt with. **<Recommendation one>**

7.2.7 Some services are outsourced or shared with other Councils. Complaints are generally sent to Hart District Council rather than the outsourced provider but this is not consistent. Where complaints are sent directly to the outsourced service area there is no standard way of recording of these complaints or keeping track to the replies sent.

<Recommendation ten >

7.3 Control Objective Three:

To ensure that the 'step system' for complaints is being followed, documented and the timescales adhered to according to the policy

7.3.1 There are three stages of the complaints process these are:

Step 1 – This is the initial stage where concerns should be raised with the service to deal the matter directly – The council is committed to try to resolve the complaint at this stage.

Step 2 – If the customer is still unhappy with the complaint the matter should be raised in writing and will be dealt with by a senior member of staff – response should be within 10 days

Step 3 - If the customer disagrees with the Step 2 decision, then the complaint can be escalated to the Joint Chief Executives. Responses should be sent within 20 working days

7.3.3 Officers advised that there were complaints that had been escalated by Councillors and MP's with the Joint Chief Executive that had not been dealt with when they were initially received in line with the complaints process or recorded as such.

7.3.4 Testing was completed to verify that the response times prescribed in the complaint's procedure was being adhered to:

A sample of 25 complaint records from April and May 2021

Number of Complaint records reviewed	No of complaints acknowledged (as per records)	No of replies (as per records)	Notes
25	13	7/ 25 complaints had a response date annotated on the complaint records	18 records unable to verify if a response had been sent as records did not indicate a response had been sent

The average time taken for the 7 responses recorded as having a response was 4 days

A further sample was taken in September 2021 – A sample of 22 complaints received across services (including outsourced services) between June and August 2021 was reviewed

Number of Complaint records reviewed	No of complaints acknowledged (as per records)	No of replies (as per records)	Notes
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22	13	15 had a response recorded on the complaint records 7 did not have a response recorded	Further detail was requested from services to verify if a response had been sent and had not been recorded 5/7 had had a response sent. It should be noted that the 2 outstanding had been actioned but there was no evidence of a response to customer
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The average time to respond was 10 days - However there was evidence of 1 complaint taking 39 days to reply and in the sample 3 responses were replied to within 1 day.

7.3.5 The complaints records were incomplete and, in some cases, indicated that no response had been sent. **<recommendation three>**

7.3.6 Testing indicated that there were records of complaints dating back to 2013 – There is no specific data retention shown for complaints – Only Ombudsman case retention is detailed. This should be reviewed, and the data retention schedule updated
[Data Retention Schedule](#) **<recommendation nine>**

7.3.7 There are a couple of officers who take responsibility for recording and monitoring complaints in specific areas. A dedicated officer is not assigned in all service areas.

7.4 Control Objective Four:**To ensure that vexatious, persistent and unreasonable complaints are dealt with as per policy.**

- 7.4.1 The Policy and Guidance for Dealing with Unreasonable Customer Behaviour has recently been reviewed and updated to include guidance from the Local Government Ombudsman. It makes specific reference to the use of racist, sexist, homophobic or other discriminatory language as being unacceptable. It also widens the application of this policy to our social media channels.
- 7.4.2 The policy was approved by Cabinet in July 2021 and officers made aware of the policy via 'Hart Beat' newsletter.
- 7.4.3 As noted earlier there is currently no corporate area to record complaints which will aid in the identification of persistent, unreasonable and vexatious complaints.

<Recommendation Three>**7.5 Control Objective Five:****To ensure that Ombudsman complaints are dealt with as per policy.**

- 7.5.1 Ombudsman Complaints are received from the Ombudsman via a dedicated inbox managed by the Personal Assistant to the Joint Chief Executive. All cases are recorded on a specific spreadsheet held in the audit confidential area of SharePoint. Cases are then distributed by corporate support and deadlines given to respond. Responses are monitored by corporate support and audit.
- 7.5.2 The annual letter provided by the ombudsman gives feedback to individual local authorities on cases dealt with during the year and provides trends and common weaknesses in complaints processes across all Local Authorities. The latest report was received in July and was taken to the Overview & Scrutiny Committee for review in August 2021.
- 7.5.3 The Annual review letter for 2020/21 provided information about two detailed investigations. One complaint was upheld and in this case it was deemed that the authority had successfully implemented recommendations.

- 7.5.4 Review of recorded information found that there was no central complaints record in place which means that should an ombudsman complaint come in there is no central place to find the information of how the complaint has been dealt with in earlier stages or whether the complaint was premature as it had not been through the earlier staged complaint process.
<Recommendation Three>
- 7.5.5 In addition to the findings raised in 7.5.4 above it should be noted that the Ombudsman requires a full evidence trail of the complaint being dealt with. The current complaint recording method does not log complaints with copies of responses. This could make the process more efficient if this was implemented. **<Recommendation Three>**
- 7.5.6 The Annual review letter 2020/21 makes a general reference to all local authorities and the quality of complaint handling. This letter was sent to all Heads of Service by the Monitoring Officer for review and learning.
- 7.5.7 Discussion with management and review of policies and process notes revealed that there are no specific procedures relating to the handling of Ombudsman Complaints. However, it is noted that the Monitoring Officer oversees all of these complaints and there is a consistent approach.
- 7.5.8 As at August 2021 there is currently one Ombudsman case being investigated, this is at the initial evidence gathering stage.

**7.6 Control Objective Six:
To review complaint statistics and ensure that these are reviewed, reported and lessons learned are implemented.**

- 7.6.1 It was noted that some of the sheets that record complaints had a section available to review the lessons learnt – in the sample of 25 reviewed none of these columns were populated.

<Recommendation seven>

- 7.6.2 From discussions with officers and evidence from the change champion survey it was found that complaint findings are not shared and discussed within teams **<Recommendation seven>**

- 7.6.3 Where services are outsourced there is no consistent approach to

ensuring complaints are handled as per the Hart complaint policy

<Recommendation ten>

7.6.4 There was no evidence of complaint statistics being collated, monitored and reported to management or members

<Recommendation ten>