



## **Audit Committee**

Date: Tuesday, 15 October 2019

Time: 10.00 am

Venue: Council Antechamber, Level 2, Town Hall Extension,  
Manchester

This is a **supplementary agenda** containing additional information about the business of the meeting that was not available when the agenda was published.

### **Access to the Council Antechamber**

Public access to the Council Antechamber is on Level 2 of the Town Hall Extension, using the lift or stairs in the lobby of the Mount Street entrance to the Extension. That lobby can also be reached from the St. Peter's Square entrance and from Library Walk. **There is no public access from the Lloyd Street entrances of the Extension.**

### **Filming and broadcast of the meeting**

Meetings of the Audit Committee are 'webcast'. These meetings are filmed and broadcast live on the Internet. If you attend this meeting you should be aware that you might be filmed and included in that transmission.

## **Membership of the Audit Committee**

**Councillors** - Ahmed Ali (Chair), Clay, Lanchbury, Russell, Stanton and Watson

**Independent Co-opted Members** - Mrs Downs and Dr D Barker

## Supplementary Agenda

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|--|---------|
| <b>7. Risk Review Item - Adults Improvement Plan and Assurance Update</b><br>The report is to follow (and is now published).   | 3 - 20  |
| <b>8. Risk Review Item - Manchester Salford Inner Relief Route Lessons Learned</b><br>The report is to follow (and is now published).  | 21 - 36 |
| <b>9. Annual Complaints Report</b><br>The report is to follow (and is now published).  | 37 - 70 |
| <b>11. Exclusion of Press and Public</b><br>The officers consider that the following item contains confidential information as provided for in the Local Government Access to Information Act and that the public interest in maintaining the exemption outweighs the public interest in disclosing the information. The Audit Committee is recommended to agree the necessary resolution to exclude the public from the meeting during consideration of the item. |         |
| <b>12. Annual Counter Fraud Report - PART B</b><br>The report is to follow (and has now been distributed to the Committee members).  | 71 - 90 |

## Further Information

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For help, advice and information about this meeting please contact the Committee Officer:

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This supplementary agenda was issued on **Friday, 11 October 2019** by the Governance and Scrutiny Support Unit, Manchester City Council, Level 3, Town Hall Extension (Lloyd Street Elevation), Manchester M60 2LA

**Manchester City Council  
Report for Information**

**Report to:** Audit Committee - 15 October 2019

**Subject:** Adult Social Care Improvement Programme

**Report of:** Executive Director Adult Social Services

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**Summary**

This report provides an assurance update on progress made in responding to issues arising from Internal Audit reports and planned actions to address areas of risk.

Many of the planned actions agreed in response to audit work are being delivered through the Adults Social Care Improvement Programme. This Programme incorporates findings and areas for improvement identified through audit work as well as a range of other sources including management review, partner engagement and staff feedback. It is driving systemic change across adults social care services.

The report therefore provides, for context, an overview of the Improvement Programme which has been established in order to improve the core delivery of adult social care services in Manchester through improvements in process, systems, practice and culture.

**Recommendations**

Audit Committee is asked to:

1. consider the assurance provided by the update in respect of internal audit recommendations; and
  2. to note for context the actions being taken through the Adults Social Care Improvement Programme.
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**Wards Affected:** All

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**Background documents (available for public inspection):**

The following documents disclose important facts on which the report is based and have been relied upon in preparing the report. Copies of the background documents are available up to 4 years after the date of the meeting. If you would like a copy please contact one of the contact officers above.

## **1. Introduction**

- 1.1 Adult Social Care services are a core part of the integrated health and care services provided by Manchester City Council through the Manchester Local Care Organisation (MLCO) partnership and play a key role in the delivery of the Our Manchester Strategy and the Locality Plan, 'Our Healthier Manchester'.
- 1.2 The 'Manchester Health and Care Commissioning - Adult Social Care Business Plan and Pooled Budget contribution 2019/20' report to Health Scrutiny and Executive in February 2019 described Adult Social Care's priorities for 2019/20. This included the improvement work which commenced this year to improve citizen outcomes and to maximise the safety and effectiveness of the service in the context of health and social care reform and integration.
- 1.3 An update to Health Scrutiny on 18 June 2019 provided a more detailed description of the programme, and updated on progress to date.
- 1.4 This report provides an overview of the ongoing programme of improvement work for Audit Committee, and in particular to highlight that work to respond to risks confirmed through a number of internal audits undertaken in recent years now forms part of the wider programme.

## **2. Context**

- 2.1 A key priority of the Our Manchester Strategy is to radically improve health and care outcomes, through public services coming together in new ways to transform and integrate services. This involves putting people at the heart of these joined-up services, a greater focus on preventing illness, helping older people to stay independent for longer, and recognising the importance of work as a health outcome and health as a work outcome. The Locality Plan, 'Our Healthier Manchester', represents the first five years of transformational change needed to deliver this vision.
- 2.2 Manchester has some of the poorest health outcomes in the country, and there are very significant health inequalities within the city. The Locality Plan was produced with the express intention of addressing these inequalities and to provide the framework through which the Manchester system aims to overcome the significant financial and capacity challenges facing health and social care in doing so.
- 2.3 Across the country there are well documented challenges to adult social care services due to ever reducing local authority budgets. In public consultations including the Our Manchester Strategy and the 2017-20 budget conversation, Manchester people consistently feedback on the importance of protecting the most vulnerable.

- 2.4 The plan sets out the complex, ambitious set of reforms that are needed to integrate services for citizens. This included developing a new public sector partnership, the Manchester Local Care Organisation for integrating out-of-hospital care, a single hospital service for integrating in-hospital care, and a single commissioning function for health and social care.
- 2.5 In March 2018 each partner organisation of the MLCO: Manchester City Council (MCC); Manchester University NHS Foundation Trust (MFT); Manchester Primary Care Partnership (MPCP); Greater Manchester Mental Health NHS Foundation Trust (GMMH); and, Manchester Clinical Commissioning Group (CCG part of MHCC) signed the Partnering Agreement which established the MLCO from 1st April 2018.
- 2.6 Whilst integration at neighbourhood level is progressing at pace, there is still significant work to do in order to fully assimilate existing governance arrangements that support ASC into MLCO governance as part of the delivery of the Partnering Agreement described above.

### **3. Background to the Improvement Programme**

- 3.1 Alongside the work to develop the MLCO, a diagnostic piece of work was undertaken on Adult Social Care in late 2018 by the now Executive Director of Adult Social Services which identified long standing challenges associated with increased demand across all services, increase in safeguarding enquiries, increase in Deprivation of Liberty Safeguards referrals and associated challenges keeping waiting lists low for assessments, reassessments and reviews.
- 3.2 A number of internal audits had also identified wider, related risks and areas for improvement in the design and delivery of services. The key points from these audits were as described below.
- 3.3 Internal Audit also independently assess and validate the status of actions agreed in response to recommendations and report onward to Adults Leadership Team, Strategic Management Team and Audit Committee. The current status of actions agreed in all of the reports is also captured below:

#### **3.4 Transition to Adult Services**

- A report from February 2018 provided limited assurance that effective arrangements were in place to support young people transitioning from Children's to Adults' Services.
- Service management had identified that there were issues with some of the processes in relation to transition and had commissioned a project manager to help identify where improvements could be made, the outcomes of which fed into a work stream development report. However, due to the volume of work the team were dealing with, the implementation of actions identified had not been followed through. This was reflected in the audit findings.

- The report recognised the scale of work required to make the suggested changes and improvements, and management commitment was to implement these by the end of October 2018.
- The audit made 5 recommendations, of which 2 are now fully implemented. The remaining 3 recommendations relate to the development of a clear transitions strategy and vision, putting an operational plan in place for delivery of the transition offer, and the introduction of key performance indicators. These actions have yet to be fully implemented and are between 11 and 17 months overdue.
- Details on the approach being taken to develop the approach to transition are set out in the improvement plan and referred to at paragraph 6.35 below.

### **3.5 Homecare Contracts**

- The limited assurance report on homecare contract governance was finalised on 7 March 2018. This was an area where a need for improvement had been acknowledged by service management and the audit assessment helped focus improvement actions.
- The report confirmed that the level of scrutiny and payment to providers on and off framework was not always equitable, that not all suppliers were being monitored as required, and monitoring focused on organisations' records and not quality of care.
- Volumes of payments going through the manual system meant that levels of validation checks were less than audit would expect and full reporting of variances between commissioned and invoiced hours did not take place.
- Improvement actions were agreed and included the retender of the homecare contract initially scheduled for completion by the end of October 2018.
- In total 6 recommendations were made all of one of which have been implemented. The remaining recommendation in relation to the consistent checking of variances, has been assessed by Internal Audit as 'partially implemented'. Since Internal Audit's last review further actions have been taken and evidence will be provided to confirm this is the case and with Internal Audit agreement this action will be confirmed in November as fully complete.
- Further detail on the approach being taken to homecare is reflected in paragraphs 6.3 and 6.17 below.

### **3.6 Disability Supported Accommodation Services Quality Assurance (QA)**

- This report was issued in February 2018, and provided limited assurance that the Quality Assurance Framework was operating effectively and in accordance with expectations to support delivery in line with legislation.
- The concerns noted in the report were that the overall completion rate of audits for the year was around 40%; the audit tool coverage was too broad and did not provide management with the best available evidence to confirm compliance with the Care Act; follow up processes were insufficient to confirm improvement actions had been implemented or how they informed lessons learned; and that the wider improvement arrangements

described in the Framework were not in place, including moderation, which impacted on effectiveness.

- Given the need for a full review and revision of the framework, the report made two recommendations. The first was for management to consider which key areas of the Care Act registered managers and support coordinators should provide assurance over for all citizens in their properties; and for senior management to consider integrating oversight of the Supported Living QA process into the role of the Adults QA team and revise the content of the Framework.
- Actions agreed in response to the report were planned for completion by August 2018 and updates on progress have been reported to the Audit Committee over the last 12 months. A formal follow up audit report was issued in September 2019, which noted that despite some positive actions having been taken, the recommendations remained incomplete. Service managers understand that further action is required and a series of specific actions have been agreed for completion and are referred to in paragraphs 6.5 and 6.47 below.

### **3.7 Management Oversight and Supervisions**

- Limited assurance was provided in April 2019 over the arrangements in place for management oversight and supervision. This was mainly due to the insufficient frequency of supervisions held with social work staff which was not in line with Council requirements, and a lack of clarity over when and where discussions should be recorded. There were risks identified about the lack of supervision training for managers, the need for a monitoring and quality assurance framework over supervisions, and recognition that there was a need to improve record keeping to ensure that decisions were clearly recorded.
- These were issues that were understood across the service and at the time of the audit, actions were already underway to address them, and have been built into the Improvement Plan.
- The report made 7 recommendations in total, of which 3 are now overdue. These are to review the Supervisions Policy, ensure clarity over how the Council's 'About You' arrangements fit in with professional supervisions, and to establish a means of monitoring actual frequency of supervisions. Evidence will be provided to Internal Audit to validate this position and the actions being taken as set out in paragraph 6.29. Subject to audit review will be confirmed as implemented in their November Audit Recommendations Monitoring report.

### **3.8 Deprivation of Liberty Safeguarding**

- A limited assurance opinion was provided from an audit of DoLS Urgent and Standard Authorisations. DoLS assessments were often significantly outside the timescales required, and although referrals were screened and prioritized for allocation, there were significant delays in assessments for low priority cases and in some cases an absence of DoLS reviews.
- The report context noted a significant increase in numbers and the inability to meet statutory deadlines was not unique to Manchester. The audit was



completed during a period of changes, including management changes and the development of the Liquid Logic system, which directly impacted the service. A new DoLS Manager was recruited just prior to completing the audit and audit acknowledged that plans and proposals appeared logical and were likely to achieve improvements on some of the issues found.

- The report made 2 major risk recommendations, one of which, in relation to completing service efficiency and additional recruitment activity, has been confirmed as fully implemented. The other recommendation has not yet passed its target implementation date and actions to address this are underway. Internal Audit are due to meet with management during October to review evidence of implementation as described in paragraph 6.38 and will complete a follow up audit report to confirm progress following this meeting.

### **3.9 Mental Health Casework Compliance**

- The Mental Health Casework Compliance audit was finalised in April 2019 and reported limited assurance over the Greater Manchester Mental Health Foundation Trust's delivery of delegated statutory social care functions, specifically safeguarding and annual reviews, in line with relevant policies and procedures.
- The opinion was impacted by the need to strengthen controls over timeliness, record keeping, management oversight, and reporting. It was recognised that an effective response to this audit and the findings reported required positive cooperation and collaboration between the Council and GMMH colleagues and as such joint responses were provided to agreed actions.
- The report made a total of 8 major or significant risk recommendations. Regular partnership meetings between Council and Trust officers have been held at which progress is monitored. The Trust have self-assessed five of the recommendations as fully complete and one as partially complete. A date for carrying out a follow-up audit, which will include a review of the Trust's new case management system and revised policies and procedure as referenced in paragraph 6.36; and sample testing to confirm compliance, has been arranged by Internal Audit for 18 October 2019.

- 3.10 Whilst Internal Audit continue to monitor individual agreed actions, the approach to implement is part of the wider improvement programme as set out below.

## **4. Improvement Programme**

- 4.1 In order to address the challenges described above, and to ensure that the service was safe, effective and efficient, the Adult Social Care Improvement Programme was established.

- 4.2 The programme is focused on ensuring the basics are in place for adult social care to deliver high quality services for our residents and to successfully deliver health and social care reform and integration. There is a need to ensure the right foundations are in place by embedding streamlined process, effective practice, and an enabled workforce with the right resources in place to manage demand.
- 4.3 The programme plan for this work has been developed based on the outcomes of diagnostic work and the internal audits completed. The programme includes workstreams on:
- 4.4 **Assessment function** including social work and primary assessment teams. This work is focused on putting the right processes in place to ensure efficient and effective delivery of Care Act assessments and reviews, alongside improvements to practice. Work to improve transition and our oversight of mental health services is included as part of this workstream.
- 4.5 **Safeguarding and Quality Assurance functions.** This work is focused on areas where specific pressure is felt (e.g. Deprivation of Liberty Safeguards) as well as reviewing our approach to quality assurance.
- 4.6 **Provider services** including our supported accommodation, reablement and supporting independence services. This work is focused on maximising our resources and strengthening the service, including use of technology
- 4.7 **Workforce skill and capacity.** This work is focused on strengthening our workforce across adult social care including improving the social work career pathway and supporting staff to develop
- 4.8 **Adult social care commissioning.** This work is in development and is focused on improving our approach to commissioning and contracting in adult social care as it pertains to our statutory duties
- 4.9 **Front door.** This work is in development and includes focusing on the front door offer and Command Centre, improving use of information to support prevention and maximising independence of citizens
- 4.10 As part of additional overall investment of £11.4million to meet increased need for adult social care, it was agreed by Executive in February that additional resources of £4.225m in 2019/20 rising to £4.8m for 2020/21 and 2021/22 be invested into the service to support the delivery of the improvement programme through increased capacity in front-line roles. This includes areas of the service where capacity has been met by temporary posts and short term contracts as recurrent funding has not been in place.
- 4.11 The additional resources were identified to meet a need for additional capacity across social work, safeguarding, the Citywide Care Homes Team, the Learning Disability service and other specialist services including delivery of Deprivation of Liberty Safeguards through internal Best Interest Assessor capacity. In addition it was agreed to make permanent some of the social care

capacity to support the prevention of delayed transfers of care from hospital. These priority areas were identified in part as a bridging position as further work is progressed on an integrated health and social care service in partnership with MLCO.

## **5. Governance and monitoring**

- 5.1 The programme is governed by the Adult Social Care Improvement Board, chaired by the Executive Director of Adult Social Services which meets fortnightly and comprises senior officers from the service and MLCO with support from the corporate core. The Board reports to the MLCO Executive through the Executive Director of Adult Social Services, and provides assurance to Manchester City Council's Strategic Management Team and the MHCC Executive on a quarterly basis. Further integration of governance is underway including MLCO's Quality and Safety Committee. The City Council's monthly integrated reporting captures key Adult Social Care metrics and spend to budget.
- 5.2 A new Performance Board has also been established on an interim basis, reporting to the MLCO Finance, Contracting and Performance Committee and Quality and Safety Committee. This group is working on ensuring the correct performance metrics are in place for monitoring delivery of the programme, alongside business as usual and the delivery of the new models of care. This Performance Board will provide recommendations to the Improvement Board for consideration and will provide a means of offering an overview on adult social care performance to MHCC.
- 5.3 Workstream groups for each of the key workstreams meet fortnightly led by the relevant Assistant Director/Strategic Lead, reporting to the Board and taking ownership for a detailed programme plan which sets out immediate and future priorities. Specific task and finish groups have been formed for pieces of work in the improvement programme where appropriate.
- 5.4 This governance is all made possible by the strengthened senior leadership in the directorate including the Executive Director, Assistant Directors, Strategic Leads and incoming Deputy DASS.
- 5.5 The Adult Social Care Risk Register is updated on a quarterly basis following significant work to review adult social care risk management arrangements. The register links to the Improvement Programme and is reported to the MLCO Risk Committee and through MCC's risk management processes.

## **6. Progress to date on the programme**

- 6.1 A number of key priorities have progressed successfully which are described below. Reference to internal audits undertaken and progress to date on recommendations made are underlined.

### **6.2 Recruitment and workforce**

- 6.3 Following the decision made by the Executive to invest £4.225million into the service to support delivery of the improvement programme, a large scale recruitment campaign has been underway in order to secure additional posts into the service to start to tackle key challenges identified, alongside existing (mainstream) roles. These posts are being embedded across teams, with the additional resources helping to address some of the issues identified in the homecare audit surrounding reviews.
- 6.4 The campaign has included positive messaging and marketing of joining Manchester, targeting qualified and newly qualified candidates(the latter via Manchester Metropolitan University). The campaign has been successful, at the time of writing, 75.5 FTE additional social worker posts have been recruited to and 46 have started in post with a further 10 due to start in October. Remaining posts are being recruited to alongside mainstream vacancies.
- 6.5 Alongside the social work recruitment the Disability Supported Accommodation Service are undertaking a mass recruitment exercise and have completed Phases 1 and 2. So far, the service has recruited to 31 positions with all now in post. Phase 3 is now underway with a further 63.5 FTE posts being recruited to. Also ongoing are 8 placements with Care Leavers where work is underway to offer apprenticeships. The increase in permanent staff in the service and more appropriate spans of management control will contribute to further embedding the QA approach in DSAS.
- 6.6 The Reablement service has had ongoing recruitment for the past 12 months to recruit to the 93 FTE additional permanent roles created in January 2018 utilising Greater Manchester Transformation Fund/Investment monies, as well as mainstream funded vacancies to account for turnover. This recruitment has been very successful, with 79 FTE currently in post, and the remaining posts out to recruitment.
- 6.7 The Activator programme continues across the directorate made up of c.60 staff volunteers “owning it” and getting involved in improvement and transformation activity.
- 6.8 The Strengths Based Development Programme is being rolled out across the directorate. As an immersive, creative programme it enables staff to understand Our Manchester strengths based approach, create an emotional connection to it and learn practical tools and techniques to put it into practice. The programme is being rolled out across the Manchester system but has initially focused on adults assessment teams.
- 6.9 The Social Work apprenticeship programme launched and first cohort recruited for September start. Meanwhile an Adult Social Care Induction programme has been developed with staff for staff
- 6.10 A Team Manager development programme is planned to build capacity and confidence in delivering the basics. A bespoke Assisted Supported Year in Employment (ASYE) programme is also in developed for newly recruited,

newly qualified social workers alongside the development of a new career pathway for social work as first step in developing comprehensive career pathway for all staff.

### **6.11 Strength-based Care Act Assessment and Support Planning**

- 6.12 An initial priority of the programme was to put in place a new approach to Care Act Assessment and Support Planning. The diagnostic work clearly identified that the legacy process, aligned to the Resource Allocation System, was not fit for purpose due to the length of the form, the assessment being needs (not strengths) based, the prescriptive method of assessment, numerous panels driven by in appropriate RAS and delays in completing assessments as a result.
- 6.13 A new strengths based approach to assessment and support planning was designed to respond to these challenges building on best practice research from other local authorities, practitioner feedback and engagement and work with legal to ensure the new approach was Care Act compliant.
- 6.14 The new approach has been designed into the new case management system (LiquidLogic) and
- Focuses on strengths
  - Includes fewer, more meaningful questions in the forms, designed to focus on the individual - based on what matters, not what's the matter
  - Requires fewer sign-offs/authorising steps
  - Replaces the current outdated resource allocation system with a costed support plan function which establishes indicative budget at support planning stage, based on real costs of care
- 6.15 The new model encourages practitioners to think first about what residents can do for themselves and with the support of their families and carers, what activities they could access within their communities and how Technology Enabled Care (TEC) can play a role in improving their outcomes. Only then, once these things have been considered, does the practitioner look to paid for services.
- 6.16 In designing the new process it has been recognised that the direction of travel is towards a confident and accountable service where decision-making is delegated wherever possible. However, given the need to manage any potential risk as the new approach is implemented proportionate management controls have been retained. To support practitioners in delivering this new model, a package of support has been put in place.
- 6.17 Work to evaluate the approach is also underway now that LiquidLogic has gone live, with the intention of reviewing over the next 6 months to ensure the benefits identified are delivered. The new model includes our approach to assessments and reviews for citizens in need of and/or in receipt of homecare services, and will therefore help to ensure more timely review and appropriateness of care packages.

## **6.18 Technology enabled care (TEC)**

- 6.19 Over the last few months, the review team working with the medicines optimisation team have prioritised reviewing those citizens with medicines dispensers (Pivotel devices) managed by an outgoing provider. This significant piece of work reviewing c.150 citizens has now been completed
- 6.20 A project plan now in place for phase 2 - operationalising TEC into the business as usual. This has so far included design, test and amend of TEC awareness training with TSA (TEC Services Association) and delivery of training and briefings, recruitment of 17 TEC champions and working with them to develop a range of supporting materials
- 6.21 TEC is embedded into the new strengths based assessment process and has its own forms in the system to enable practitioners to assess for TEC.

## **6.22 Front door**

- 6.23 This project is the first phase of developing an integrated LCO control room. This first phase will establish an ASC multidisciplinary service for the Front Door which will increase earlier intervention and prevention and manage demand better resulting in delivering quicker, more appropriate and timely responses. Ultimately, the intention is to reduce the level of inappropriate work going to the Integrated Neighbourhood Teams and Manchester Community Response. A project group has been established reporting into the improvement board to drive this work forward

## **6.24 Waiting lists**

- 6.25 Reducing waiting lists remains a key priority. Most significant progress has been made on the waiting list for ongoing work which has seen a 43% reduction between May-July (more recent data is not currently available as the new case management LiquidLogic is embedded). The waiting list for reviews has reduced by 9% in the same time period.

## **6.26 Communications, engagement and policies**

- 6.27 A key part of the improvement programme continues to focus on staff communications and engagement. A quarterly ASC forum is now in place which has met three times with good attendance and positive feedback at all sessions.
- 6.28 A management team information cascade has also now been established which is sent out weekly to all ASC staff. This has received a 85.2% click through rate which is very positive. On a monthly basis a more detailed bulletin providing an overview of progress against the improvement programme is shared with all staff which has a 45.7% click through rate which again is significant given the size of the directorate. Feedback has been very positive: e.g. 'Just wanted to say thank you for the update as it I think it reinforces to staff that things are changing for the better'.

6.29 Work is also underway on tightening up a number of key policies and procedures. Most significantly this includes an updated supervision policy which combines the need for professional supervision in some parts of the service (including caseload management) with the wider About You process. A process for recording supervision has been included which will ensure good information for performance and assurance purposes. Also a wider strength based supervision training programme linked to Manchester University will be offered to all first line Managers, supporting the further development of a consistent, evidence based supervision offer. Once fully embedded, this will directly address issues raised in the Internal Audit completed in 2018.

6.30 A new procedure for serious incidents is also close to being finalised which has been co-produced with staff and will strengthen support to staff, management assurance and escalation

### **6.31 Integration**

6.32 Work continues on the establishment of the Integrated Neighbourhood Teams. A social work team manager is now in place for all 12 teams which is both strengthening managing oversight of ASC in neighbourhoods, as well as beginning to work with the INT leads to join up services locally alongside wider work on Bringing Services Together for People in Places. The most tangible outcomes have been related to joint visits improved communication between health and Social care (i.e District nurses, social workers, GPs, Care navigators etc), streamlined referral process (e.g quick referrals to the District Nurses) and the Multi agency meetings being established within the Integrated Neighbourhood teams.

6.33 In addition, the emerging outcomes from the wider evaluation of the new models of care is showing that where integration is part of the new model, service delivery (and outcome) is better; however where integration is absent or operating on a different timeline, then this limits the implementation and impact of individual new care models.

6.34 Learning Disability services are beginning a programme around integration as part of the wider work to improve outcomes for adults with learning disabilities. The approach will be 'bottom up' with three co-production workshops now having taken place for North, Central and South to start to build relationships across the health and social care teams and identify a programme of work which fully integrates the two services as part of the MLCO. Early practical work is already reaping benefits as waiting lists are reviewed together and joint duty systems have been established.

6.35 Improvement activity is also underway in transition - with joint process design sessions completed with children's services in September as well as the establishment of the Transition Board to provide system wide and strategic leadership where a number of key priorities have been agreed. The process design will by the end of 2019/20 focus on ensuring that there is clarity of process and pathway for young people between children's and adults services

and key performance indicators in place. Following finalising of the design, communications will be co produced with young people, parents/carers and practitioners across the system. A better understanding of demand is also a priority for the board to enable services to respond more effectively to changing needs.

- 6.36 Work is also underway with Greater Manchester Mental Health Trust to mental health social care services including professional support to the lead social worker, more joined up work on process, performance and commissioning and oversight through the Assistant Director for Complex needs. This includes the development of a monthly Partnership meeting between GMMH and ASC to improve communication and assurance in terms of the delivery of ASC statutory functions. Introduction of PARIS has improved the trust's ability to audit and track compliance with safeguarding processes and systems are in place to capture, report and act on this to improve performance. A review team was established and the backlog of out of date reviews is almost complete. Further discussion is underway with GMMH as to how performance and quality can be sustained in the longer term. Improvements to the panel approval processes were introduced and this has improved consistency, quality assurance and timeliness of decision making.

### **6.37 Safeguarding and DoLS**

- 6.38 Alongside wider work to reduce waiting lists across the neighbourhood and LD teams, there has been significant work to reduce waiting lists for screening and assessment for Deprivation of Liberty Safeguards. The Team Manager has implemented new systems and processes that have dramatically improved how the service operates. There has been ongoing focused work from the whole team, supported by the improvement work stream.
- 6.39 Recruitment of qualified BIAs has been challenging so work is underway to train existing and new starters as BIAs with an expectation of delivering best interest assessments alongside normal caseload. The pool of authorisers is also being strengthened with all senior managers in the directorate being added to the rota
- 6.40 Issues with LiquidLogic are affecting progress at present, but longer term work is commencing on understand the impact of the new Liberty Protection Safeguards legislation which will be introduced in October 2020 and will have a major impact on process and responsibilities. Work is also underway on reviewing MCC safeguarding policies and procedures alongside the implementation of the Multi-agency Safeguarding Arrangements (MASA)
- 6.41 A new interim approach to quality assurance (more widely) has been introduced which is proportionate and supportive of team managers and social workers. It introduces a conversational approach to quality assurance and a tracker has been developed to follow up improvements and recommendations, this is to help staff as they manage a number of competing demands. Longer term, initial work has commenced with MLCO on a wider approach to quality



across community health services and ASC - what this looks like will be worked through in the forthcoming months.

#### **6.42 Provider services**

- 6.43 Work to increase the impact of the reablement service continues with a current focus on maximising the reablement rota including consultation with staff on weekend working
- 6.44 The evaluation to date has shown that for the cohort of people who have had the reablement service during 2018/19 financial year and went on to have a home care package after leaving Reablement had, on average, 26% fewer homecare visits and 22% fewer homecare hours during the 6 months post reablement. The service has taken time to mobilise partly due to the time taken to recruit.
- 6.45 In addition, the evaluation to date is showing that comparing the people who were referred to Reablement from hospital, those who were accepted into the service had, on average a shorter length of stay in hospital than people who did not access the service due to lack of capacity. This shorter length of stay results in an average of 6 excess bed days being saved for each person going into Reablement
- 6.46 Electronic time recording (Tanda) in Disability Supported Accommodation Service is providing more intelligence on agency usage and more efficient management of staff whilst there is continued focus (alongside the social work service) on the 70 new builds (Disability Supported Accommodation Service).
- 6.47 The Disability Supported Accommodation Service delivered workshops with support from Audit Colleagues to review the whole QA process and documentation. Changes have now been made to the online audit tool and guidance. The new documentation and tools have been tested and the feedback utilised to make further revisions to the Audit Tool & Guidance. A large number of audits have been completed. Work to embed this systematically across the service is ongoing and will ensure there is a robust system of monitoring and reviewing the quality of audits undertaken and the resulting action plans actioned.
- 6.48 Focused work with wider partners is ensuring that roles within our provider services are being offered to Manchester residents who need them most, including 8 care leavers on placement. Work in particular with Manchester Adult Education Services is leading to positive outcomes both in filling vacancies and offering a career pathway. In general, there has been an increase in collaboration between provider services and the assessment function including on the new builds project, as well as with complex reablement

#### **6.49 Commissioning and contracting**

- 6.50 This workstream is in development alongside the implementation of phase 2 of MHCC/MLCO. The current priority is ensuring that staff transferring from MHCC to MLCO who delivery operational commissioning are supported in the transition and that business as usual continues
- 6.51 Alongside this, the workstream is being designed with a focus on developing a fit for purpose approach to contracting and commissioning and the associated improvements needed across market management, contract management and the development of wider commissioning strategies
- 6.52 Work to date has fed into the MLCO business case process including the benefits of ASC commissioning forming part of the wider responsibility of MLCO. Significant progress has also been made on the contracts register and planning for re-procurement in year

## **7. Upcoming priorities**

- 7.1 As described, the improvement programme continues to develop as activities are delivered. The focus for the next quarter is on:
- Bringing the new recruits into post, ensuring a clear induction into MLCO and MCC and appropriate team manager support
  - Further roll-out of the new strengths based approach to assessment and support planning and further progress on reducing waiting lists
  - Further operationalisation of technology enabled care including maximising use of existing technology through embedding into the core assessment process and further development of new and emerging technologies
  - Further work to align resources to the Integrated Neighbourhood Teams and maximising opportunities through working in an integrated service, including in the Learning Disability Service for which there is a new strategy and action plan being developed.
  - Handover and transition of new build sites for citizens with a learning disability
  - Further strengthening of our approach to managing performance with a focus on monitoring of key indicators linked to the improvement programme.
  - Increased workforce engagement and ownership across the service of the improvement programme through for a, supervision, and the activator programme.
  - Develop a Workforce Strategy for Adult Social Care and design and implement a development programme for middle managers which will be an essential element of moving to a culture of accountable and confident social care
  - Further development of the Front Door offer and Command Centre, improving use of information to support prevention and maximising independence of citizens
  - Development of more effective integrated hospital discharge services
- 7.2 All of the above priorities will be delivered alongside ongoing work to further integrate adult social care into the MLCO both corporately and at

neighbourhood level, strengthening clarity on the location and discharge of duties through the partnership arrangements in place.

## **8. Conclusion**

- 8.1 The issues raised through Internal Audit work as reported to Audit Committee in the last 24 months have highlighted areas of concern and resulted in limited assurance opinions across a range of Adults Services activities. Management actions were agreed in response to all of these reports but it was recognised that issues from audit, as well as management's own assessment of systems and services, had highlighted a number of interdependencies and underlying root causes.
- 8.2 To address these root causes and interdependencies; and to provide a solid basis for development of a successful and sustainable, system wide approach to health and social required a robust, coordinated based approach and this is set out in the Improvement Programme. Actions agreed in response to audit reports will be progressed and the evidence to confirm implementation will be tested by Internal Audit and outcomes will continue to be reported to Audit Committee. These actions are taking longer than originally planned but the approach should ensure that change and improvement is embedded and sustained.
- 8.3 The issues raised through audit work have therefore been integrated into the Social Care Improvement Programme alongside other priorities and areas for identified improvement, within the overall context of wider integration and reform of health and social care in the City. This programme of work is driving sustained improvements to ensure we are able to deliver safe, effective, efficient services to the people of Manchester.

## **9. Recommendations**

- 9.1 Audit Committee is asked to:
  - consider the assurance provided by the update in respect of internal audit recommendations; and
  - to note for context the actions being taken through the Adults Social Care Improvement Programme.

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## Manchester City Council Report for Information

**Report to:** Audit Committee 15 October 2019

**Subject:** Manchester Salford Inner Relief Route: Lessons Learned

**Report of:** Director of Highways and Head of Audit and Risk Management

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### Summary

In March 2019 works unexpectedly ceased on the Manchester Salford Inner Relief Route (MSIRR) highways programme. It became evident that the Principal contractor (Dawnus) was in financial failure and subsequently went into administration.

In response to these events an incident management approach was adopted to deal with immediate risks and issues; and the process of procuring a new contractor to urgently recommence works was completed.

The new contractor started on site in April 2019.

This report summarises the key events surrounding this incident and associated lessons learned.

### Recommendations

Audit Committee are asked to note the lessons learned from the MSIRR programme.

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**Wards Affected:** All

### Contact Officers:

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### Background documents (available for public inspection):

Documents used in the development of this report include:

- Manchester City Council Contract Terms and Conditions
- Government Commercial Function Guidance on Assessing and Monitoring the Economic and Financial Standing of Suppliers and Guidance on Corporate Financial Distress (available on gov.uk website)
- MSIRR Re-procurement - Contract Award Notice

## **1 Introduction**

- 1.1 The Manchester Salford Inner Relief Route (MSIRR) is a key route in and out of the City Centre, and includes sections of Trinity Way, Mancunian Way and Great Ancoats Street. As a consequence of congestion Manchester City Council and Salford Council developed a programme of improvement works, funded through the Greater Manchester Combined Authority and Transport for Greater Manchester.
- 1.2 Dawnus Construction Holdings Ltd were appointed as the project contractor after a tender process using the Council's Construction Framework TC886. Work started in August 2018 and was expected to last for up to 12 months.
- 1.3 On 12 March 2019 a plant supplier blocked Chester Road and staff from the principal contractor failed to attend site. This was widely reported in the media and resulted in urgent actions to maintain immediate traffic flow on the highway, ensure safety of pedestrians and road users and progress the re-procurement of a contractor for completion of the planned works. The principal contractor subsequently went into administration and works were completed to procure contracts for the completion of works.
- 1.4 Works to complete the MSIRR programme were procured at pace and a new contractor started on site on 2 April, within three weeks of the initial incident. These works are ongoing and given the risks associated with the incident in March 2019 Audit Committee requested a report on lessons learned.

## **2 Purpose of Report**

- 2.1 To provide Audit Committee with
  - A brief summary of the events that resulted in the cessation of works on MSIRR in March 2019 and the approach taken to restart and procure the programme of works required for completion.
  - Lessons learned from the cessation of works and the financial failure of the principal contractor; and the re-procurement of works.
  - Broader lessons learned for consideration in wider Council procurement, commissioning and contract management activities
- 2.2 This report focuses on the governance, risk management and control aspects of the incident and the subsequent re-procurement of works. Whilst providing a short update on scheme progress for context, review of delivery of the scheme and the costs associated with this are a function of the relevant scrutiny committees.

## **3 Background**

- 3.1 In October 2017 a framework agreement (TC886) for major highways works was let that provided a pre-tendered framework with subsequent awards of major works based on a process of mini-competition. In June 2018, a contract for improvements to the Manchester Salford Inner Relief Route (MSIRR) was awarded to Dawnus as principal contractor following mini-competition under this

framework. This was for improvement works at six junctions (A-F) in and around Regent Road, Trinity Way and the Mancunian Way. Works started on site in August 2018 with an overall completion date of 7 August 2019.

- 3.2 Whilst there was understandable focus on the works impacting main arterial routes into the City Centre, Dawnus appeared to have made good progress and by February 2019 there was no indication that this would not continue to be the case. Monthly progress meetings were held between the contractor and project team and summer 2019 remained the target for programme completion.
- 3.3 In March 2019, the project team observed that works began to slow down and the MSIRR site became untidy. This caused the Highways Service to become concerned that this might be a symptom of something wider. A contractor credit check was undertaken and a site meeting between Highways senior management and Dawnus was arranged. The credit check focused on the latest publically reported financial position and performance of the company (15 months old at the time) and returned an assessment of low risk.
- 3.4 On the morning of 12 March 2019 the Highways Service were contacted by TfGM to advise that subcontractor plant vehicles were blocking traffic on Chester Road. GM Police were called and the blockage removed by 10.20am. On the same morning Dawnus management failed to attend a planned site meeting.

#### **4 Incident Management**

- 4.1 Given the online reports, road blockage and feedback of inactivity on site an Incident Management Team (IMT) was called in line with the Council's Corporate Business Continuity Plan. This followed an urgent 10am highways meeting at TfGM that was called specifically in response to the reported blockage of the road.
- 4.2 The first IMT (11am on 12 March) was attended the Deputy Chief Executive and City Treasurer; Executive Director of Neighbourhoods and Director of Highways as well as senior officers of the Council representing the following services as well as a representative from TfGM:
  - Audit and Risk Management
  - Highways
  - Legal Services
  - Finance
  - Press and Media
  - GM Civil Contingencies
- 4.3 The initial IMT focused on understanding:
  - The current position, key risks and issues (including safety)
  - Current planned actions
  - Further planned actions
  - Communications

- 4.4 Much of the immediate response was to understand the current position as there were no formal communications from Dawnus representatives and no staff on site. Informal discussions with Dawnus management indicated that they were in a legal process and implied financial difficulty but the nature of this could not be confirmed. Site safety was a key focus and teams were immediately deployed with support from the traffic management, surfacing and vehicle recovery sub-contractors who remained on site to ensure appropriate arrangements to safeguard pedestrians and road users. TfGM retained CCTV coverage of the site to identify and update on any issues.
- 4.5 IMTs continued twice daily for two weeks with interim updates between meetings. All meetings were recorded and action notes agreed and followed up at each meeting. Officer focus at these IMTs included:
- writing formally to Dawnus to seek to understand the issues preventing their return to site and their plans for the project;
  - reviewing legal provisions in contracts and assessment of continuity options should Dawnus not return to site;
  - overseeing site safety and traffic management;
  - reviewing procurement options for the recommencement of works;
  - agreeing the deployment of Manchester contracts and surfacing and traffic management suppliers to complete limited urgent works and maintain traffic flow;
  - reaching out to staff on site and the supply chain, including the sub contractor whose staff had blocked the road on 12 March, to understand if they had been paid; and
  - updating officers, Members, bus companies, local businesses and the public.
- 4.6 By 15 March, despite reports in the media that an administrator had been appointed, there remained no formal contact from an administrator or Dawnus. As absence from site was not a recognised contract termination event and Dawnus thus remained the contractor for the programme, legal options available to appoint alternative contractors or terminate the contract were limited. Planning for this eventuality continued but no decision could be taken or public announcement made without prejudicing the Council's legal and contractual position.
- 4.7 A range of options to secure a new contractor were developed and appraised through the IMT, with agreement on three phases to restart works:
- Interim arrangements with Manchester Contracts and Tarmac to deliver some immediate work on site to lay kerbs, surface pavements and fill holes.
  - Repackage the programme for Regent Road (Junctions A-D)
  - Repackage the remaining elements of the programme (junctions E and F)
- 4.8 Junctions A-D were the focus of the initial re-procurement and detailed procurement and delivery options were considered, assessed and evaluated on the basis of cost, speed to mobilise and minimising ongoing traffic disruption; with speed being of great value due to the works being part completed. It was agreed that two companies would be asked to bid for the completion of works:
- (i) the second ranked bidder from the original procurement exercise (John Sisk



& Son Holdings Ltd); and (ii) the existing surfacing sub-contractor Tarmac who had remained on-site and completed some further works following the 12 March incident.

- 4.9 In this period officers from the Highways Service attended site to check current status, take photographs and collate records to produce a high level assessment of works completed, to inform both an assessment of costs incurred and to inform conversations with bidders for the completion of works. These records would also form part of any discussions with the administrators.
- 4.10 It was accepted and agreed by officers that difficulties in assessing accurate progress on site would present a significant challenge to bidders being able to submit a fixed price bid to complete works and could result in further delay of at least 12 weeks. This would have meant start on site would have been delayed until around the middle of June. As such the option of a traditional procurement, leaving the site inactive for this length of time, was assessed as presenting a major risk to the programme and to the City. Given the imperative to restart works to minimise disruption it was agreed that a NEC Option E contract (under which the contractor is reimbursed the actual costs they incur in carrying out the works, plus an additional fee) would be used and bidders asked to submit cost and fee estimates. As NEC Option E is not a form of contract used by the Council, external legal advice was secured to support Legal Services in drawing up proposed terms, conditions and contract document. All involved recognised that Option E presented a risk in terms of cost certainty and additional contractor management requirements, but this was balanced against the urgent need to restart works and complete the priority programme as soon as possible.
- 4.11 Confirmation that Dawnus had entered administration was received on 18 March. This enabled the formal process of procurement to start. This process confirmed appointment of John Sisk as principal contractor for the completion of works on junctions A-D (with a total estimated contract sum of £3m-£4m). The initial, planned date for completion set out in the tender response and based on basic site and works information was 30 May 2019 although, due to the uncertainties over works in progress, this cost and timescale were acknowledged to be estimations. Four weeks from contract award and as agreed with the Council's Project Management Team, the principal contractor submitted a more accurate and agreed programme plan with an end date of 20 August.
- 4.12 In advance of contract award officers completed detailed financial due diligence on the proposed contractor as well as key sub-contractors and obtained additional assurance over arrangements for payments to sub contractors and alignment of the contractor terms and conditions with the Unite Construction Charter.
- 4.13 Formal appointment was confirmed to John Sisk and immediate steps taken to restart works on site. On 2 April the works on site were restarted. This was less than three weeks from the 12 March incident and reflected a significant

amount of effort from a range of services and with contractors to manage the incident and successfully procure a new contract.

- 4.14 The completion of works for junctions E and F was based on a traditional fixed-price lump sum contract (NEC Option A). This contract was separately awarded to John Sisk as principal contractor in August 2019. This was approved as a direct appointment given the benefits of maintaining the same principal contractor for completion of the final two junctions on the overall MSIRR programme and the need to complete works on a timely basis. This work is scheduled to complete by December 2019.

## **Lessons Learned**

### **5 Incident Management**

- 5.1 The management of the incident was done in accordance with the principles and processes set out in the Council's Corporate Business Continuity Plan.
- 5.2 Following notification of the highway incident on the morning of 12 March, the IMT was mobilised immediately and attended by relevant senior officers able to support and take decisions. Officers re-prioritised to ensure that appropriate capacity and expertise was allocated to the incident response. The group focused on key issues, with an initial focus on safety, information gathering and communications; then increasingly on completion of urgent works, actions required to restart the programme and the procurement of a new contractor. The twice daily tempo and focus of IMTs was effective and supported active action planning and communications.
- 5.3 It is notable that on 12 March there was also an ICT outage affecting accessibility of the Council's core financial system and as such two incident management teams were running at the same time, with a number of officers from finance, procurement and the audit and risk management teams supporting the successful resolution of both incidents.
- 5.4 The Highways Service, with support from TfGM, took appropriate, immediate actions with remaining subcontractors to try and maintain traffic flow through the roadworks and make good any areas of concern. This quickly minimised the immediate impacts of the incident.
- 5.5 The IMT quickly became aware of the likely financial failure and potential administration of Dawnus and steps were taken to determine, assess and evaluate options for the re-procurement of works to ensure programme completion. Prior to formal notification of administration these steps were limited to internal proposals but actions were taken to utilise Manchester Contracts and the surfacing subcontractor to undertake some appropriate, limited works in the absence of Dawnus on site.
- 5.6 As the incident continued during the week, the IMT was extended to include further Legal Services, Finance and Procurement officers to support the development of options that could be used for the re-procurement of contractors

for completion of works. The IMT continued to meet until the procurement of contractors was agreed and approved.

- 5.7 The IMT was an appropriate and effective mechanism to respond to the incident and was successful in responding to the immediate issues on Chester Road and subsequent management of risks and issues. Officers worked flexibly to respond to emerging issues, maintaining visibility of site risks and acting to address these on a timely basis.

## **6 Procurement and Contract Management**

- 6.1 On site and progress meetings took place with Dawnus throughout the contract, focused on delivery of the scheme. It was not evident from these meetings or from the standard requests for payment that the company was in financial difficulties. There were no indications in the wider trade press or other intelligence to indicate that Dawnus were in difficulty and they appeared to be delivering on a range of other schemes including major works supported by the Welsh Assembly Government.
- 6.2 Whilst media reports claimed that the initial road blocking incident on 12 March was a result of non-payment of subcontractors; there had been no reports into the Council or the Highways Service that subcontractors were not being paid or that Dawnus were in financial difficulty.
- 6.3 Whilst there are existing routes for raising concerns, consideration will be given to how sub-contractors can be further enabled to raise genuine concerns that have not been reasonably addressed through their engagement with principal contractors.
- 6.4 For the new contract from April 2019, a project team with additional resources was deployed to manage the contract with a focus on working with the principal contractor to oversee the delivery of works. The Programme continued to be overseen by a Project Board attended by a business Senior Responsible Officer, Highways, Finance and TfGM; and reports on programme completion dates and cost forecasts have been presented to this Board.
- 6.5 There have been known causes for delays in the project particular linked to wet weather impacting on the completion of surfacing works and the need to rework aspects of the construction that were completed by Dawnus but were assessed as being of sub-standard quality. There have been agreed variations in working hours with shifts reducing from 12 to 10 hours and limitations on night works due to the disruption caused to business and residents. These have impacted on the forecast completion date and have been reported to Project Board. Since August there have been significant extensions of time and subsequent cost reported that the Project Team is exploring further with the principal contractor. It is evident with this project, particularly given the nature of an NEC Option E (cost plus) contract where a significant element of the risk in not meeting time and cost deadlines is passed to the client, that tight project management, accurate contractor forecasting and cost control is critical and this is a lesson learned for any potential future projects of this type.

## 7 Financial and Cost Control

- 7.1 Despite reports in the media, Dawnus were not paid in accordance with a schedule, but on the basis of interim payment applications, in arrears, for completed works. At the time of administration there were variations and changes that needed to be finalised but these could only be resolved with the administrator once Dawnus ceased to trade.
- 7.2 Options for the completion of works for Junctions A-D were considered and assessed by appropriate senior officers with Legal, Finance and Procurement involved from the outset. Given the speed and fluidity of the developing situation with Dawnus and the lack of information emerging from the company it was not possible to take definitive decisions as this could have resulted in a breach of contract.
- 7.3 The elapsed time required to measure, specify, tender, evaluate and award a contract for the completion of works on Junctions A-D using a standard contract approach was assessed by officers as upwards of 12 weeks and thus works would not have started until around mid June. This delay was considered an unacceptable risk to the programme given the ongoing impact on residents and businesses and the need to complete the scheme as a key Council priority. As a consequence, senior officers agreed that the contract for the completion of works should be let in accordance with NEC Option E. All officers were in agreement that this was not a preferred form of contract as payments are based on 'cost reimbursement plus overheads and profit' which transfers a greater level of financial risk to the Council than with a more traditional form of contract; and there is no certainty or fixing of price at the time of entering into the contract or commencing works.
- 7.4 This form of contract required additional assurances over the approach to on-site contract management by the Highways Service and additional resources to ensure that costs claimed for labour, plant and materials on site were evidenced. The form of contract also allowed the contractor to claim a forecast of future costs, which created added complexity in the validation of applications for payment. This was not a type of contract used previously by members of the Project Team or other Council officers so significant efforts went into ensuring an understanding of the contract type and the steps required to manage this appropriately in advance of project start.
- 7.5 Applications for payment have been reviewed by the Principal Contractor as well as the Council Project Team and Internal Audit Team. The scale of these checks given the Option E contract have rightly been substantial, detailed and rigorous. This has highlighted a number of concerns over the inclusion of some costs in applications for payment and weaknesses in the quality and completeness of evidence provided. This has led to concerns escalated with John Sisk and deductions from the applications for payment. A thorough final account review is planned to obtain appropriate assurance over the validity, accuracy and completeness of the final account and total costs claimed.

- 7.6 Officers all agreed that the NEC Option E contract is problematic and where possible should be avoided. It requires additional resources, processes and evidence to support payments that have not been consistently evident through this project. It is acknowledged by officers that such a form of contract would only be used in extenuating circumstances and was only used given the very specific and particular events that occurred on MISIRR and the intolerable risk of further, significant details on the programme following the unexpected collapse of Dawnus. In the unlikely event this form of contract be needed in future there is a clear requirement to strengthen project management arrangements and ensure very clear evidence expectations at the outset over allowable costs and the quality of records required to support requests for payment.

## **8 Due Diligence**

- 8.1 The framework agreement (TC886) was let in October 2017 and contractors appointed following completion of financial due diligence. The award of the contract for MSIRR to Dawnus in May 2018 followed a refresh of this due diligence. The due diligence was based on standard financial reporting and credit reports and thus based on historic, published financial information. This highlighted no areas of concern.
- 8.2 An additional credit check was requested by the Director of Highways in February 2019 when he and the Project Team became concerned over activity on site. This again returned a report that was positive and did not highlight financial risks. On further accountant examination of the accounts used in producing this report there was indication of changes in company fudging that, whilst not highlighting immediate risks, could in hindsight have formed the basis for further discussion with the company over their financial stability and resilience. Nonetheless, this external report was very clear in concluding that Dawnus were low risk and despite this within 4 weeks they were in administration.
- 8.3 It is evident that these historic credit and financial due diligence checks have inherent limitations and as part of the re-procurement in 2019, additional checks were undertaken to obtain more current, up to date information from suppliers.
- 8.4 These additional checks have been undertaken in a number of other procurement activities since the MSIRR incident in cases where financial due diligence or credit checks have highlighted potential concerns. Consideration is also being given as part of the risk assessment and prioritisation of contracts whether increased frequency of formal financial due diligence should take place during the period of contract and not just prior to or at contract award.
- 8.5 Ongoing market intelligence is obtained through a range of sources including subscription to 'Strategic Supplier Updates' issued by the Cabinet Office. These cover a range of sectors and are distributed by the Council's Integrated Commissioning and Procurement Group to relevant procurement officers, budget holders and contract managers. These highlight activity in various sectors and provide indication of potential risks for contract managers to

consider in their areas of responsibility, although it is noted that, as with the credit checks, these did not highlight any key risks or issues with Dawnus.

- 8.6 The Procurement and Strategic Commissioning Team provide a range of tools and guidance to services that set out key responsibilities for example around risk management and performance management that need to be met. Guidance affirms that the required level of monitoring needs to be especially rigorous when the contract in question is classified as Gold (high risk, value or criticality). Templates and tools are provided that can be tailored by services to reflect the diverse range of goods, works and services commissioned across the Council.
- 8.7 Following the Dawnus incident and given other supply chain issues impacting the Council including the earlier collapse of Carillion, the Procurement and Commissioning Team circulated the Cabinet Office outsourcing playbook, as well as Government Commercial Function Guidance on Assessing and Monitoring the Economic and Financial Standing of Suppliers and Guidance on Corporate Financial Distress. The Government guidance was published in July 2019 and included guidance on potential indicators of future financial distress based on industry best practice and Government learning from high profile corporate supplier failures. This guidance was circulated to all commissioning and contract management leads with an email reminding officers to focus attention on the due diligence at contract commencement and on an ongoing basis.

## **9 Current Programme Status**

- 9.1 The forecast completion date and final cost of the contract for the urgent works to complete junctions A-D, has exceeded the planned completion date of 20 August 2019 and the cost estimate / budget of up to £4m. These were estimates developed in April and were recognised as being based on a range of assumptions around the state of the works in progress and works required to complete.

### Programme

- 9.2 Sisk was appointed on 29 March with a request to provide an immediate site presence and produce a programme by the end of month one after surveying the site and having obtained a better understanding the scope of the remaining works.
- 9.3 This programme provided a more realistic, revised completion date of 20 August than the May end date submitted in their tender. The most recent forecast completion is early November and the extended duration of works has significantly impacted on the cost of the scheme.
- 9.4 The programme and associated cost risk were first identified by the Council's site team and Project Manager in the June report to Project Board. This noted a red risk for programme and budget despite contractor assurances of an August completion. The Project Manager's quantitative risk assessment in July indicated that an overrun of at least a month was likely based on progress at

this stage and that programme targets for Junction D would be missed partly due to focusing on Junction A-C completion. Since that date he has continued to report this project as a red risk and has challenged the contractor on their schedule for completion and cost forecasts.

### Costs

- 9.5 The forecast final cost at September 2019 is £5.75m. This compares to the contractor forecast of £3.730m submitted in April.
- 9.6 At September there had been 37 compensation events issued by the Project Manager that relate to agreed variations and extensions of time on the project and the principal contractor has been instructed to provide quotations to confirm how these events have impacted on the overall cost and programme timescales.
- 9.7 One of the reasons for the programme overrun is that the tender required operatives to work 12 hour shifts and the programme timescales were based on this assumption. The Project Team directed that these shifts be reduced to 10 hours from 11 July as it was evident that productivity was diminishing in later hours of the shift. Whilst this reduced the daily cost per operative it has contributed in delays to the overall programme.
- 9.8 The costs of the project have increased most significantly due to the cost of subcontractors. In summary the reported reasons for this increase in costs are:
- Delays in surfacing works due to heavy rain.
  - Lower numbers of night hours worked than planned as later start and earlier finish time were agreed due to traffic constraints and noise concerns on Regent Road.
  - Junction D being more complex to construct than initially envisaged and left late in the programme due to focusing on Junction A-C completion
  - Junction A requiring various drainage re-design existing services that presented obstructions to planned the works.
  - More rework of defective Dawnus and contractor works than initially envisaged
  - Increase in the number of traffic management crews due to inability of a single crew to manage all junctions effectively; and increased traffic management provision for night time surfacing operations.
  - Increase in subcontractor plant and labour costs due to programme overrun.
- 9.9 The Council's project team and Internal Audit Service have a large number of outstanding concerns and queries on records provided to support this element of the account and the Council is withholding sums from payment requests pending further information. These queries are being actively reviewed by the principal contractor.

### Funding

- 9.10 As a result of cost increases, the overall scheme is forecast to exceed the approved budget of £14.692m. Council officers are applying to TfGM to secure the £1.54m TfGM contingency. The forecast cost remains £1.362m above the TfGM approved funding level and scheme budget and options to address this shortfall are currently being explored. This will be reported through the Council's capital approvals process.

## **10 Summary Conclusion and Actions**

- 10.1 As with any major incident the Council seeks to reflect on what went well and any lessons learned. There are a number of positive aspects that the team have reflected on and these include:

- The incident on 12 March and thereafter was managed effectively by a range of appropriate officers with the requisite skills, competency and commitment to address immediate risks and issues. This was done at the same time as managing the response to a major ICT incident.
- The IMT, through supporting services and with assistance from TfGM and subcontractors, took immediate action to address safety risks, maintain traffic flow and reallocate resources to complete some limited works on site.
- Despite a lack of communication from Dawnus and consequent limitations in what the Council could say, there were regular communications to stakeholders and the public.
- Early steps were taken to appraise options to procure a new contractor and these options were robustly assessed and evaluated before a determination on the proposed way forward was agreed.
- Additional expertise and support was secured in areas where there were recognised limitations in Council experience; particularly in the development of the NEC Option E contract approach.
- The procurement process was completed at speed but with effective oversight and engagement of legal, procurement and finance teams. Officers worked hard to assess the site and then develop a specification, scoring, evaluation and award approach to enable a contractor to be on site within three weeks of the 12 March incident.
- Resources were increased to manage the new Option E contract for MSIRR and officers have provided robust challenge to the contractor over the delivery of the programme and related costs incurred.

- 10.2 Nonetheless there are always areas that in hindsight could have been done differently. Areas to consider that have arisen from the lessons learned on MSIRR are as follows:

- Clarity over the scope of financial due diligence to ensure that, as far as possible, the financial position and performance of proposed contractors is understood and appropriate mitigating actions are taken where required.
- Increased frequency of due diligence in high priority or high risk contracts.
- Approach to communications so that sub-contractors and supply chain are aware of routes for escalating appropriate concerns that are not being addressed through their engagement with the principal contractor.



- Process to control use of NEC Option E contracts and confirm early expectations of contractors in such contracts; noting that such form of contract is only likely to be considered in very specific and rare occasions.
- Strengthening standard contract terms and conditions to support timely termination should contractors fail to deliver services or attend site.
- Confirming allowable costs and supporting evidence expectations with contractors. Whilst this was noted as a lesson learned in respect of NEC Option E the same principle applies to all contracts.
- Reinforcing arrangements for project management and cost control, change control and the management of variations; and the requirement for accurate and timely cost forecasts from contractors given the late notification of significant increased forecast costs on this scheme.

10.3 The proposed actions are as follows. These will be overseen by the Head of Integrated Commissioning and Procurement with a small task group representing procurement, commissioning, audit, finance and legal services.

Ref	Action	Owner and Timescale
1	Procurement guidance to be updated to emphasise that effective financial due diligence must be completed and signed off in advance of (i) inclusion on framework contracts; and (ii) in advance of awards from frameworks. To consider and reflect relative risks in contracts based on criticality, materiality and nature of market; and could include third party credit checks of financial position / performance.	Head of Integrated Commissioning and Procurement, with support from Finance By end January 2020
2	<p>Develop current contract management guide to include a section on ongoing due diligence to include formal financial due diligence and:</p> <p>Market Intelligence: Given the diversity of Council contracts and commissions this will need to be flexible to reflect sectoral intelligence but could include for example:</p> <ul style="list-style-type: none"> <li>• GM or Core Cities Networks</li> <li>• Professional Networks (ADASS etc.)</li> <li>• Central Government Bulletins</li> <li>• Trade and Financial Press</li> </ul> <p>Local Intelligence: To consider red flags or lead indicators that could suggest potential financial failure or non-delivery. Indicators could include:</p> <ul style="list-style-type: none"> <li>• Non / reduced attendance on site</li> <li>• Slowing of work or unexplained delays in deliverables</li> <li>• Sub-contractor complaints over payments</li> </ul>	Head of Integrated Commissioning and Procurement (to develop guidance for all services)

Ref	Action	Owner and Timescale
	<p>The level of ongoing due diligence should be proportionate to the nature of the contract in terms of value, criticality and market context; and be informed by whether individual contracts are classified as Gold, Silver, Bronze in line with the Council's agreed contract impact and risk assessment process.</p> <p>Highways to establish regular due diligence on its contracts, appropriate to contract criticality.</p>	<p>Director of Highways with support from Head of Audit and Risk Management to confirm approach to practical collection and application of local intelligence for highways contracts.</p> <p>By end January 2020</p>
3	<p>Standard terms and conditions for suppliers were updated in June 2019 to make more overt reference to the need for contractors to operate effective whistleblowing arrangements. The Council's whistleblowing policy also includes provisions for the public and contractors to raise concerns with Internal Audit.</p> <p>Officers will further review and amend where necessary Council standard commissioning / procurement documentation and guidance in respect of mobilisation arrangements with contractors to confirm that they make their staff and sub-contractors aware of the main contractor issue reporting and whistleblowing arrangements, but also signpost the Council's contract management lead and/or whistleblowing policy as additional mechanisms to raise concerns if all other avenues for issue resolution have been exhausted.</p> <p>Highways to build the above into their mobilisation of future contracts.</p>	<p>Head of Integrated Commissioning and Procurement and Head of Audit and Risk Management</p> <p>By end January 2020</p> <p>Director of Highways</p> <p>By end January 2020</p>
4	<p>Confirmation in procurement guidance that NEC Option E contracts require advance approval of the DCE and City Treasurer; and /or the City Solicitor.</p> <p>Significant concerns with this contract type were raised at the time and this risk was balanced with the need for rapid progress as the scheme was in progress. If ever in this position there will be an</p>	<p>Head of Integrated Commissioning and Procurement</p> <p>By end January 2020</p>

Ref	Action	Owner and Timescale
	immediate, corresponding increase to the client project, contract and cost management approach.	
5	Review of contract terms and conditions to strengthen and clarify the Council's position in respect of contractor non delivery or failure, recognising that this will need to be guided by and reflect legal requirements and constraints.	Head of Integrated Commissioning and Procurement, with support from Legal Services  By end January 2020
6	Use the contract management manual to confirm the expectation of contract managers to determine and obtain appropriate evidence to support applications for payment and agree this as part of contract terms and mobilisation.  Highways to review and strengthen where necessary arrangements to ensure appropriate evidence is submitted in support of applications for payment.	Head of Integrated Commissioning and Procurement  By end January 2020  Director of Highways  By end January 2020
7	Final account audit of the MISIRR Junctions A-D contract to ensure that final payments reflect agreed, allowable costs only.	Director of Highways and Head of Audit and Risk Management  By end November 2019

## 11 Recommendations

- 11.1 Audit Committee are asked to note the lessons learned from the MSIRR programme.

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## Manchester City Council Report for Information

**Report to:** Audit Committee – 15 October 2019

**Subject:** Annual Complaints, Enquiries and Information Compliance Report 2018/19

**Report of:** Deputy Chief Executive and City Treasurer, City Solicitor

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### Summary

This report presents the complaints, enquiries and information request dashboard, which sets out the Council's annual performance for 2018/19 in the management of corporate and social care complaints, Councillor and MP enquiries, as well as information requests. It also provides information on how the Council has used this information to influence service improvements.

### Recommendations

Audit Committee Members are asked to note the report and the key messages in relation to the Council's performance in these areas of Complaints and Enquiry management service and legal compliance.

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**Wards Affected**     All

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## 1.0 Purpose of report

- 1.1 This report to members outlines the Council's performance in relation to a number of complaints and related metrics, as well as the performance management of information requests, during the course of the 2018-19 financial year.
- 1.2 Attached to this report at **Appendix 1** is the complaints and information request dashboard which covers data for the financial year 2018/19. Performance in responding to complaints is published regularly on the Council's website and can be viewed online at:  
[http://www.manchester.gov.uk/info/200025/complaints\\_comments\\_and\\_questions/4218/complaints\\_performance](http://www.manchester.gov.uk/info/200025/complaints_comments_and_questions/4218/complaints_performance)
- 1.3 In accordance with the Code of Practice issued under s.45 of the Freedom of Information Act 2000 ('the Act') the Council is planning to start publishing details of its performance on handling requests for information under the Act in the near future. The statistics will be published on the open data pages of the Council's website.

## 2.0 Complaints and Enquiries Management

- 2.1 Whilst the accompanying dashboard highlights performance for each measurable indicator in more detail, in summary, the table below shows the annual performance for 2018/19, when compared with previous years:

Period	Stage one complaints	Performance target 96% within 10 working days	Social Care	Performance target 96% within 20 working days	MP Enquiries	Performance target 96% within 10 working days	Ombudsman Enquiries	Performance target average response within 28 calendar days)
2014/15	1864	89%	314	55%	1321	82%	39	28 (26% upheld)
2015/16	1841	85%	220	70%	1331	80%	27	28 (44% upheld)
2016/17	2243	81%	285	80%	1537	83%	17	27 (10% upheld)
2017/18	2013	87%	343	81%	1545	76%	22	27 (44% upheld)
2018/19	2253	80%	305	84%	1577	83%	35	26 (22% upheld)

## 3.0 Performance Management of Corporate Complaints

- 3.1 **Expected standard - 96% of Stage one complaints responded to within ten working days**
- 3.1.1 The Council has received 2,253 Stage one complaints this financial year, which compares to 2,013 in 2017-18, an increase of 12%. This increase

entirely reverses the reductions in numbers of complaints seen in 2017/18 which arose as a result of reducing the complaints process from three stages to two.

- 3.1.2 The Neighbourhoods Service have seen the most pronounced increase in Stage one complaints received from the previous year at 45%; an additional 437 complaints. In fact, the Neighbourhoods Service received 62% of all Stage one complaints in 2018-19, a total of 1,401.
- 3.1.3 Highways Services transferred to the Neighbourhoods Service from the Corporate Core on 1 April 2018 and this has impacted upon the Neighbourhoods Service's performance for the 2018/19 financial year<sup>1</sup> This has been compounded by a substantial increase in complaints received relating to Highways and Parking, from 264 in 2017/18 to 639 in 2018/19 - an increase of 240%.
- 3.1.4 Children and Families has seen an increase in Stage one corporate complaints of 70 additional complaints, or 42%. This has taken their totals from 164 in 2017/18 to 234 in 2018/19. The biggest contributor to this was an increase of 37 corporate complaints for Children's Care and were for causes such as lack of communication with the service user. This increase is primarily due to a change in the rationale for the processing of those complaints; whilst they might be care related, when they are not raised on behalf of the child they are more accurately dealt with under the Council's own complaints procedure.
- 3.1.5 In comparison to the above, both the Corporate Core and Growth and Development saw substantial reductions of 31% and 30% respectively.
- 3.1.6 The Council as a whole is 16% from achieving its target for responding to complaints on time (96% within 10 working days), with a fall in performance of 7% on the previous year (from 87% to 80%). The most significant factor in this fall in performance is the 12% reduction in cases handled on time by the Neighbourhoods Service, predominantly caused by Highways Services' (including Parking and Bus Lanes which at the time did form part of this service). They have seen a drop in performance for Stage one complaints responded to on time from 77% in 2017/18 to 59% in 2018/19. Excluding Highways Services, the Neighbourhoods Service saw performance in this metric of 89%, 7% from target.
- 3.1.7 It is accepted that performance in relation to the number of Parking Services complaints responded to on time in 2018/2019 was unsatisfactory and there is still work to do to improve performance. The performance issues were due to a significant increase in demand and workload placed on the service for both parking and bus lane penalty charge notices, in particular, around the Oxford Road Bus Gate. This, along with backlogs in other areas of work, created capacity issues and prevented a number of responses being handled on time. On 1 April 2019, Parking and Bus Lane transactional services transferred from

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<sup>1</sup> There has since been a further structural change with the Parking and Bus Lanes element of the previous Highways Service transferring back into the Corporate Core under the Director of Customer Services and Transactions.

the Highways Service to the portfolio of the Director of Customer Services and Transactions under the strategic leadership of the Head of Customer Services. Additional investment is currently being progressed and ratified to support an overarching improvement and transformation programme across the service which will include creating additional capacity.

3.1.8 Similarly, for Highways, the Manchester Salford Inner Ring Road (MSIRR) has brought comparable challenges in terms of volume of complaints received. To deal with this, resources have been reviewed, to ensure the service has enough capacity to manage the volume of complaints being received. This resulted in the creation of 13 new permanent posts, recruitment to these posts and a training and development programme. During this time, work also commenced to review business processes with a view to streamlining and improving the experience have of the Service.

3.1.9 Growth and Development saw a small reduction in the percentage of cases responded to on time, as well as a 30% reduction in cases received, from 124 to 87 cases. The Corporate Core saw a 30% fall in cases received, from 761 to 531, and a 1% improvement in cases responded to on time, making this the only directorate to hit the 96% target. Children and Families also saw improvements in the percentage of cases responded to on time, with a 14% improvement, despite a 42% increase in cases. The Council's Complaints Team has fostered a strong relationship with School Admissions who generate a significant number of corporate complaints for Children's Services, which ensures proactive deadline management and caseload monitoring, and this is reflected in the improvements seen over the last two years.

### **3.2 Expected standard - 10% of corporate Stage one complaints escalated to Stage two**

3.2.1 Complaints escalated to Stage two are managed by the Council's centralised Complaints Team (Manchester Feedback and Complaints Service, based in Performance Research and Intelligence). This provides an independent review of how the complaint has been dealt with at Stage one, and provides the final opportunity to investigate before the complainant is referred to the Local Government and Social Care Ombudsman.

3.2.2 The Council as a whole has seen a 1% decrease in the proportion of complaints escalated to the final stage of the complaints process, albeit because of the larger number of complaints, this has translated into a slightly larger number of Stage two complaints overall, from 329 to 331. The escalation rate is within 5% of target, at 15%, which indicates that most complainants are satisfied with the investigation undertaken at Stage one.

3.2.3 In reviewing each Directorate's performance, both Children and Families and the Corporate Core have maintained their performance from 2017/18 at 13% and 14% respectively. The Neighbourhoods Service have seen a 3% reduction in escalated complaints, despite the very significant increase in the number of complaints received. The only Directorate to see an increase in the percentage of cases escalated to Stage two is Growth and Development,



however as Growth and Development receive a comparatively very small number of complaints (87 for the year when compared to Neighbourhoods' 1,401), their performance can be disproportionately affected by a small number of escalated cases.

3.2.4 As part of the transition to a two stage complaints process, the Complaints Team was granted the discretion to decline to investigate Stage two complaints where it is clear that a Stage two investigation will not bring about a different outcome or where the outcomes sought by the complainant are not reasonable or achievable. Examples of such cases include complaints of officer misconduct where there is no evidence beyond the complainant's and officer's accounts to allow an investigator determine which account is more accurate. In such cases, it is not possible to safely reach a finding as to what happened. In 2017-18 the Corporate Complaints Team declined to investigate 22 complaints and in 2018-19, the Corporate Complaints Team declined to investigate 14 complaints:

- Children and Families - 1
- Corporate Core - 4
- The Neighbourhoods Service - 7
- Growth and Development - 2

Each complainant received a detailed explanation as to why the Council did not believe further investigation would change the outcome of the Stage one response. In summary the reasons for the Complaints Team refusing to investigate further are set out below:

- Two conflicting accounts provided with no evidence as to which is correct (3)
- Laws, Regulations and Professional Legal opinions or concrete facts disputed (3)
- Historical case, already considered by LGSCO and Valuation Tribunal (1)
- Complaint process cannot achieve desired outcome (cancelling of PCN, resolving a civil dispute) (4)
- Despite assistance, Complainant unable to explain what they remained dissatisfied with from Stage one (2)
- Case subject to Legal proceedings (1)

Only one of these complainants escalated their complaint to the Local Government and Social Care Ombudsman, but this was not upheld.

### 3.3 **Expected standard - 96% of corporate Stage two complaints responded to within ten working days**

3.3.1 The total number of Stage two cases received is similar to the previous year, 329 in 2017/18 compared with 331 in 2018/19. Whilst in 2017/18, the largest distributions were in the Corporate Core (106) and Neighbourhoods (163), in 2018/19, the largest volume is by far with Neighbourhoods at 193, with the Core reduced significantly to 73.

- 3.3.2 The Council as a whole has seen a 4% fall in the percentage of Stage two complaints responded to within ten working days, taking this to within 20% of target at 76%. The Complaints Team will continue to proactively monitor internal deadlines and to pursue services for their responses to investigation questions. Where complaints cannot be responded to within ten working days, the Complaints Team will proactively notify the complainant to advise of the delay and offer a revised date when they should expect a full response. There will also be continued use of escalation procedures within services to prevent delays in meeting the response deadline, where the expectation is that senior managers (i.e. Head of Service or Strategic Directors) will become involved in progressing matters where there are delays.
- 3.3.3 The Neighbourhoods Service have usually had the majority of Stage two complaints but this proportion has grown substantially, from 49% (163) of all Stage two complaints in 2017-18 to 58% (193) in 2018-19. As set out above, 62% of all corporate Stage one complaints in 2018-19 were for the Neighbourhoods Service. In 2016-17, the Neighbourhoods Service received 58 Stage two complaints, which demonstrates how profoundly this metric has changed. Growth and Development has seen a modest increase in eight additional Stage two complaints this year, whereas Children and Families have seen a very small decrease of three Stage two complaints. The Corporate Core has seen a substantial fall in the number of Stage two complaints, falling by 31% over the course of the year, from 106 to 73. This is the result of the transfer of Highways from the Core at the end of the 2017-18 financial year to the Neighbourhoods Service and given the transfer of Parking Services back to the Core at the end of this financial year, it is likely that the increase in Neighbourhoods Stage two complaints will be partially returned to the Core. In all Directorates but the Neighbourhoods Service, the percentage of complaints responded to on time has modestly improved.
- 3.4 **Expected standard - 20% of corporate Stage one and two complaints upheld**
- 3.4.1 The Council has seen a modest decrease in the percentage of complaints upheld from 2017-18 to the last financial year, with a 3% decrease (41% down to 38%, against a target of 20%); however, the Complaints Team has emphasised that whilst it is important to be robust where the Council is not at fault, it is more important that investigations are thorough and non-defensive. This stance leads to a higher calibre of complaint response but also leads to an increase in the percentage of complaints being upheld.
- 3.4.2 The Neighbourhood Service have the highest percentage of cases upheld by a significant factor at 532 upheld or partially upheld cases (44%). This is 12% higher than the Corporate Core with 48 upheld or partially upheld cases (32%). This can be explained in part due to the nature of the service the Neighbourhood Service offers and the complaints received; specifically around failed bin collections, where there is limited scope for investigation and where it is often more expedient to accept that a failed collection is the result of crew error rather than residents' failing to present the bin. The Neighbourhood

Service have however seen a 1% decrease in the number of complaints upheld from the previous year.

- 3.4.3 Corporate Core has seen both a decrease in its complaints decisions and its percentage of upheld complaints. This is, in part, due to the transfer of Highways from the Corporate Core on 1 April 2018. As expected, this led to changes in the performance of both the Corporate Core and The Neighbourhoods Service. Children and Families have significantly improved their performance with a 10% reduction in the percentage of corporate decisions upheld despite a 35% increase in decisions made.

#### **4.0 Performance Management of Councillor and MP enquiries**

##### **4.1 Expected standard - 96% of Councillor and MP enquiries responded to within ten working days**

- 4.1.1 The Council's performance against this metric fell from 83% to 76% in 2017-18 and has now returned to 83% in 2018-19. The overall number of enquiries received is materially unchanged, with all Directorates but Children and Families showing only minor deviations in the number of enquiries received (1545 in 2017/18 compared with 1577 in 2018/19) and in the percentage of cases responded to on time (76% in 2017/18 compared with 83% in 2018/19). It is noteworthy that Children and Families have seen a 14% improvement in enquiries responded to on time, despite a 16% increase in the number of enquiries received. This is due to there being a more settled senior management structure, with significant support being offered by Senior Managers to support the Complaints Team's efforts to drive up performance and ensure that staff understand the importance of these enquiries. This approach is leading to notable improvements.

#### **5.0 Performance Management of Social Care Complaints**

##### **5.1 Expected standard - 96% of social care complaints handled within timescale**

- 5.1.1 Although legislation sets timescales for Children's Social care complaints (Stage one, maximum of 20 working days, Stage two, maximum of 65 working days and Stage three Review Panel, must be organised within 30 working days), Adult social care legislation does not, but states timescales must be negotiated with the complainant. That said, the Council aims to complete Adults complaint responses within 20 working days, in line with the process for Children's Services complaints.
- 5.1.2 Children's Services have seen a 1% increase in their performance on this metric, taking them to within 13% of target (at 83%). This has been supported by a 29% reduction in social care complaints received, which as noted earlier in this response, is because of more accurate recording of corporate versus social care complaints. Adults by contrast have seen a 21% increase in social care complaints received, due to an increase in concerns regarding residential and at home care, along with issues with communication between families and

professionals. Despite the increase in volume received, there is an 8% improvement in performance in the percentage handled within timescale (up from 78% in 2017/18 to 86% in 2018/19). This takes the Council's overall performance for social care responses to 84% against the previous year's performance of 81%.

## **5.2 Expected standard - 20% of social care decisions upheld**

- 5.2.1 In 2017-18, the Council saw a noted improvement in the percentage of social care decisions upheld, seeing a fall from 43% to 32%. This has increased slightly in 2018-19 to 35% but remains 15% from target.

## **6.0 Performance Management of Local Government and Social Care Ombudsman (LGSCO) Enquiries**

### **6.1 Expected standard - Local Government and Social Care Ombudsman enquiries responded to within 28 days**

- 6.1.1 The Council received 35 enquiries from the LGSCO this year, an increase of 13 (59%) from the previous year. The Council has however improved its performance with regard to timely responses, with an average response time of 26 days to enquiries. The only Directorate not to meet this was Children's and Families, which had an average of 31 days. This was due in large part to a highly complex case that required the input of many services and partner organisations as well as detailed review of historic records. Additionally this was being considered over the Christmas/New Year period which introduced additional delays. This case therefore took 42 calendar days.

### **6.2 Expected standard - 10% of Local Government and Social Care Ombudsman decisions upheld**

- 6.2.1 In 2017-18, the Council saw a marked increase in both the number of decisions made by the Ombudsman and the number of adverse decisions, taking the percentage of adverse decisions from 10% in 2016/17 to 43.5%\* (26 decisions out of 62 were upheld) in 2017/18. The number of decisions received has continued to increase in 2018/19, from 62 to 81, however the percentage of upheld cases has nearly halved from 2017/18, and now stands at 22.2%, a total of 18 upheld decisions. Whilst still twice the target, this is good progress and the Complaints Team will seek to build on this success.
- 6.2.2 The Committee should note that the Ombudsman still records a complaint as upheld even where the Council has already acknowledged the fault and upheld it through our own complaints procedures.
- 6.2.3 However, in response to last year's challenging performance on this metric, the previous Audit Committee report highlighted a number of improvement areas to focus on, including more consistent application of remedies (including financial redress, and being more open with apologies), challenging the Ombudsman's findings where appropriate and development of robust learning action plans to prevent reoccurrence of faults.

6.2.4 This approach appears to have had some success; in last year's report it was highlighted that, of the 26 upheld decisions, there were lost opportunities to resolve cases through our own complaints process in 18 of them. This year, of the 18 upheld decisions, lost opportunities to resolve are evident in only 11 cases. A detailed breakdown of all upheld decisions, and where the Council considers there were lost opportunities to resolve cases is attached at **Appendix 2**.

6.2.5 Whilst the Council must accept that complaints may still be pursued with the Ombudsman, it is anticipated that consistent application of the Council's complaints remedy policy will continue to assist in reducing the number of cases where the Ombudsman upholds complaints, or adds to the remedies the Council has already proposed.

6.2.6 It should also be noted that the Ombudsman has more recently focussed its attention away from measuring timescales of response towards the remedying complaints, and the Council's compliance with its recommendations, and has piloted a new way of measuring this, with an interactive map available on their website, showing comparisons with other authorities. In this, Manchester is shown to have the following performance highlights, which are an encouraging indicator of performance when compared with similar authorities:

- 55% of complaints investigated were upheld<sup>2</sup>, compared with an average of 61% in similar authorities
- in 100% of cases, they were satisfied the Council had successfully implemented their recommendations, compared with an average of 99% in similar authorities
- in 29% of upheld cases they found the Council has provided a satisfactory remedy before the complaint reached the Ombudsman, compared with an average of 14% in similar authorities

6.2.7 The interactive map can be found at:

<https://www.lgo.org.uk/your-councils-performance/manchester-city-council/statistics>

## **7.0 Learning from complaints**

### **7.1 Low risk cases - Learning**

7.1.1 This year has seen a 13% increase in learning from complaints across the Council which is considered to be low risk, which indicates better recording of learning from complaints. The predominant cause of learning in these cases is recorded as a failure to follow processes or procedures and these have been remedied by staff briefings, one to one discussions with staff and by changing

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<sup>2</sup> Note: this percentage does not match the Council's metric\* (43.5% upheld - see 5.21 above) due to different methods of recording. The Council records complaints where the Ombudsman does not investigate as 'not upheld', whereas they record these separately.

procedures. Staffing levels and workload reviews are also used to remedy these learning points.

## 7.2 Critical Learning and Learning Action Plans

7.2.1 Where complaints are received that are a concern in terms of risk and impact on the complainant, a *Learning Action Plan* will be developed and monitored by the Corporate Complaints Team, working with the service manager, to secure ownership and commitment to the actions and timescales. Once the plan is signed off as completed, the key actions and learning outcomes will be shared in a communication bulletin across the service, and beyond if necessary, to ensure that the impact of the learning improves practice and performance in the future.

7.2.2 This year has seen a further reduction in critical learning points, from 25 in 2016-17, 22 in 2017-18 and 18 in 2018-19. Children and Families had the highest number of points at 10 and primarily related to issues within social care cases. Actions have been recorded against each of these critical learning cases and the Corporate Complaints Team continues to monitor compliance with these actions.

7.2.3 A total of 13 Learning Action Plans have been launched in 2018/19:

- Children's: 6
- Adults: 2
- Core: 1
- Neighbourhoods: 3
- Strategic Development: 1

7.2.4 Actions in a number of these learning plans resulted in changes to processes or procedures, examples of which are set out below:

- Changes in the wording of Penalty Charge Notices to make it clear that any payment received within 28 days will remove the recipient's right of appeal as well as make it clear that if recipients make an appeal which is rejected, they will still have 14 days to make a payment at the reduced rate (Parking Services)
- Changes to the Free Travel to school policy to state that where a child in receipt of a free travel pass, if their personal circumstances have not changed, this will be renewed without assessment (Children's Services)
- Referrals to the Transition Planning Team will always result in a joint visit to families between Children's and Adults' social workers to walk families through the process of transfer between services. There will also be a statutory review for those young people subject to education and health care planning. (Adults and Children's Services).
- A formal annual review of the Council's Code of Practice for Enforcement Agents (Parking Services).
- The development of a dedicated Highways Hub to monitor and ensure responses are sent to all reports, correspondence, complaints and social media communications (Highways Services)

7.2.5 Learning Plans also recorded themes around training, development and actions taken with staff, some examples of which are below:

- Lessons learned have been shared Adult Social Care and Adults Finance Departments regarding a case where a person lost capacity and the Council did not then involve the person's adult child in decision making. As a result, arrears accrued on their account (Adults Services)
- A reflective learning session was held with a number of teams to discuss a case where there were delays in making contact and to discuss the impact this had upon the family, in order to prevent a reoccurrence of the issues (Adults Services)
- Managers have reminded staff that they need to ensure that contact arrangements between young people and their families are monitored and supported (Children's Services)
- Managers have reminded staff to ensure that there are detailed records kept on Looked After Children documentation and foster carer reviews of any agreed financial arrangements, such as pocket money and travel costs (Children's Services)

7.2.6 It is clear that the process of learning and developing actions to prevent reoccurrence of the fault is a beneficial process for the Council and that these actions demonstrate there have been a number of key changes to services and development areas for staff as a result of complaints.

## 8.0 Praise

8.1 Praise recorded for employees has decreased by 14% across the Council, from 663 to 573. Praise remains highest for Children and Families, however the Neighbourhoods Service has seen increases in praise recorded. **Appendix 3** highlights some examples of praise received this financial year.

## 9.0 Freedom of Information and Data Protection Act requests

### 9.1 Expected standard - 90% of Data Protection Act requests responded to within 40 calendar days

9.1.1 The Council has received the same number of DPA requests in 2018-19 as in the previous financial year, however the percentage of cases responded to within deadline has fallen from 93% to 89%, just below target. The 90% target has been met on this metric in all but Children and Families, which saw a 41% increase in requests but a 2% fall in requests responded to on time.

### 9.2 Expected standard - 90% of Freedom of Information Act requests responded to within 20 working days

9.2.1 There has been a 24% increase in FOIA requests received, which has contributed to a 4% fall in the number responded to on time. Only Corporate Core met this target at 92%. The Neighbourhoods Service has seen a marked

fall in performance at 14%, however it should also be noted that they have received 69% more requests than in 2017-18.

## **10.0 Conclusion**

- 10.1 Members are asked to note the Council's performance in managing complaints and enquiries in 2018/19, along with the positive contribution that complaints information is making to service improvement and the actions to improve this further.
- 10.2 Members are also asked to note the key messages that are emerging in relation to the management of information requests
- 10.3 Strategic Directors are asked to take responsibility for sharing their own performance dashboards with their associated Executive Member on a quarterly basis.

## **11.0 Recommendations**

- 11.1 The recommendations appear at the front of this report.





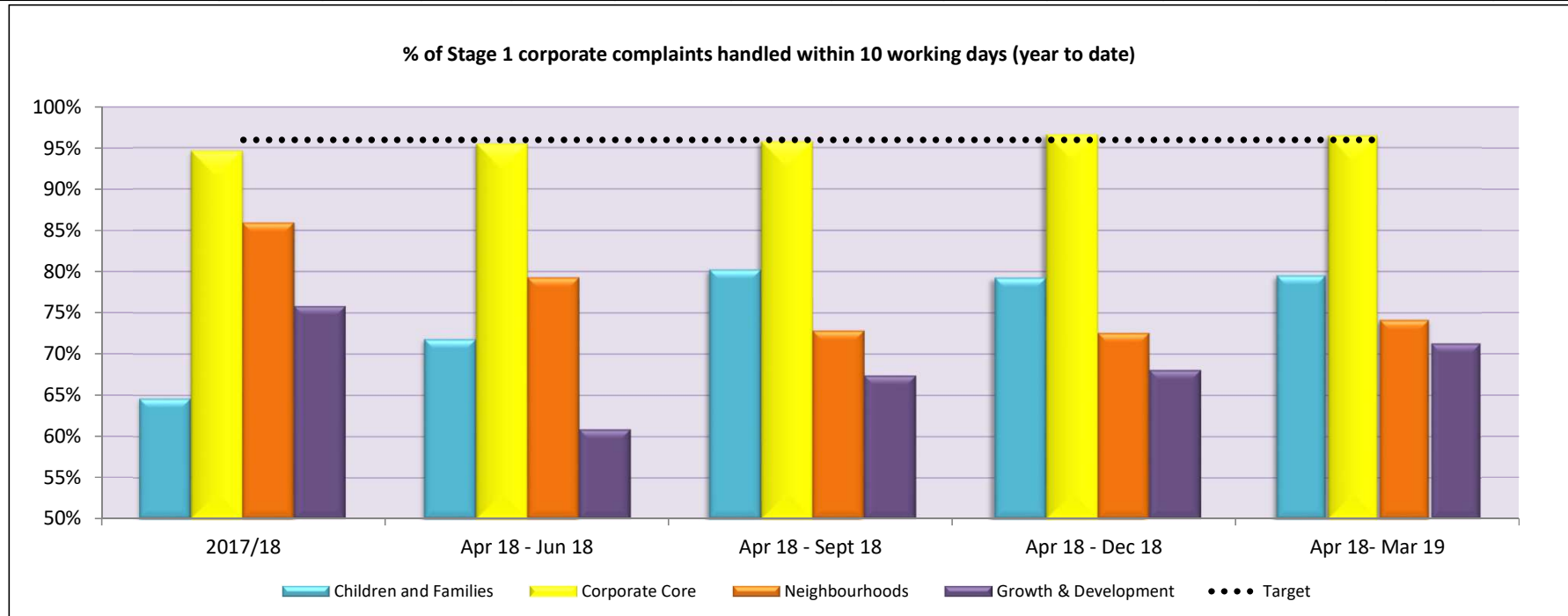
## **Manchester City Council - Audit Committee Complaints and Information Requests Dashboard 2018/19**

**Produced by Corporate Complaints, Performance and Intelligence**

Performance Management Framework

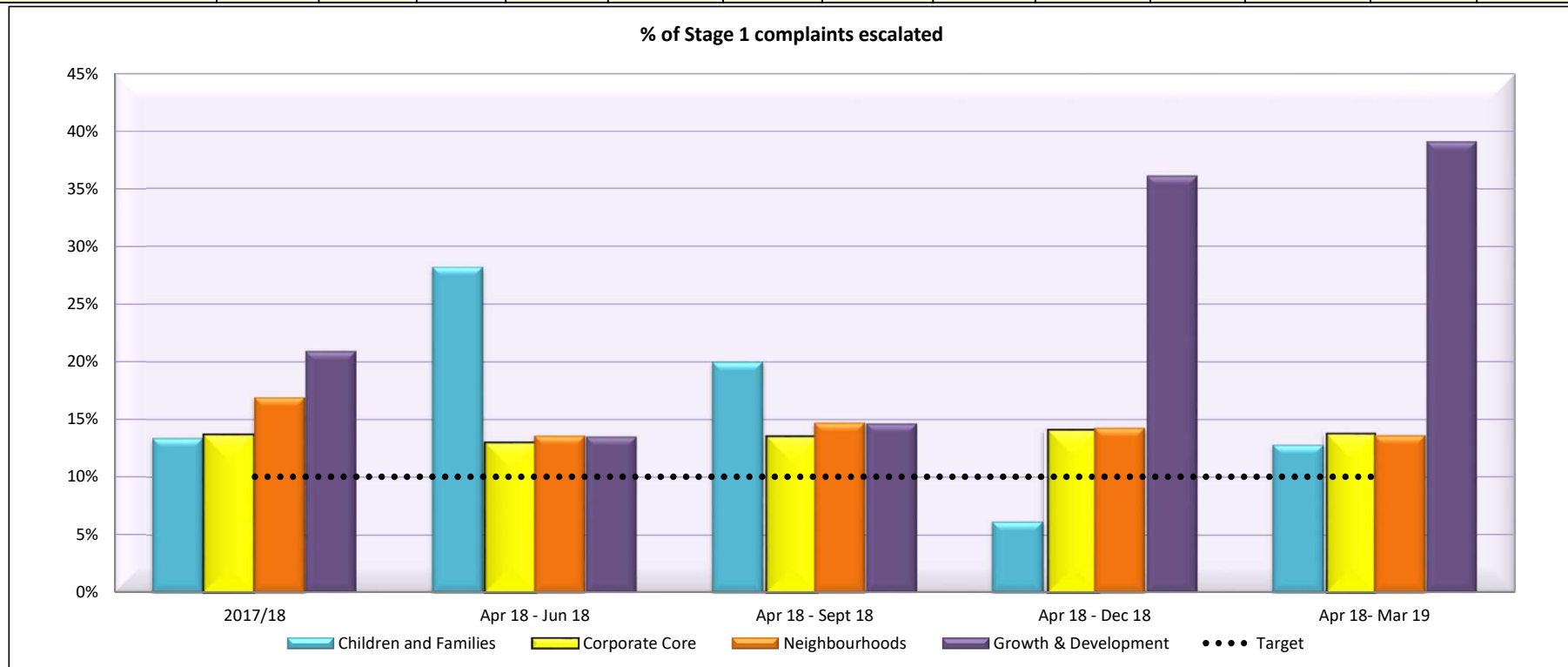
## Complaints and Information Request Dashboard

Number of combined stage 1 corporate complaints and % handled within 10 working days												Year To Date:	
Directorates	1 Apr 17 - 31 Mar 18		Target 18/19	1 Apr 18 - 30 Jun 18		1 Jul 18 - 30 Sep 18		1 Oct 18 - 31 Dec 18		1 Jan 19 - 31 Mar 19		1 Apr 18 - 31 Mar 19	
	No.	%		No.	%	No.	%	No.	%	No.	%	No.	%
Children and Families	164	65%	96%	39	72%	52	87%	87	78%	56	80%	234	79%
Corporate Core	761	95%		154	95%	127	96%	131	98%	119	95.8%	531	96%
N'bourhoods	964	86%		309	79%	384	68%	379	72%	329	79.3%	1,401	74%
Growth & Development	124	76%		23	61%	23	74%	26	69%	15	86.7%	87	71%
All Directorates	2,013	87%		525	83%	586	76%	623	78%	519	83%	2,253	80%



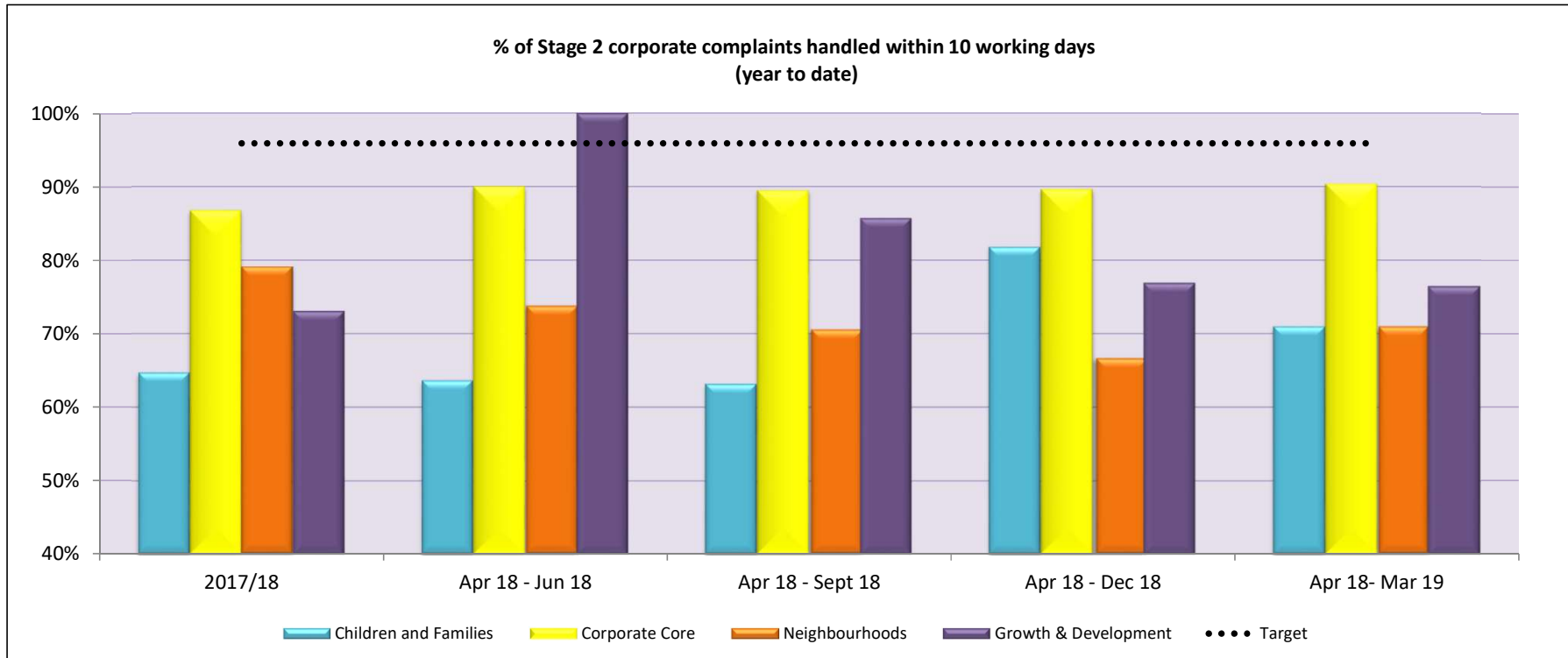
## Complaints and Information Request Dashboard

Number of Corporate Stage 1 complaints % escalated												Year To Date:	
Directorates	1 Apr 17 - 31 Mar 18		Target 18/19	1 Apr 18 - 30 Jun 18		1 Jul 18 - 30 Sep 18		1 Oct 18 - 31 Dec 18		1 Jan 19 - 31 Mar 19		1 Apr 18 - 31 Mar 19	
	No.	%		No.	%	No.	%	No.	%	No.	%	No.	%
Children and Families	164	⊗ 13%	10%	39	⊗ 28%	52	⊗ 13%	87	✓ 2%	56	⊗ 17.9%	234	⊗ 13%
Corporate Core	761	⊗ 14%		154	⊗ 13%	127	⊗ 14%	131	⊗ 15%	119	⊗ 12.6%	531	⊗ 14%
N'bourhoods	964	⊗ 17%		309	⊗ 14%	384	⊗ 16%	379	⊗ 13%	329	⊗ 11.6%	1,401	⊗ 14%
Growth & Development	124	⊗ 21%		23	⊗ 30%	23	⊗ 30%	26	⊗ 46%	15	⊗ 53.3%	87	⊗ 39%
All Directorates	2,013	⊗ 16%		525	⊗ 15%	586	⊗ 16%	623	⊗ 14%	519	⊗ 13.7%	2,253	⊗ 15%



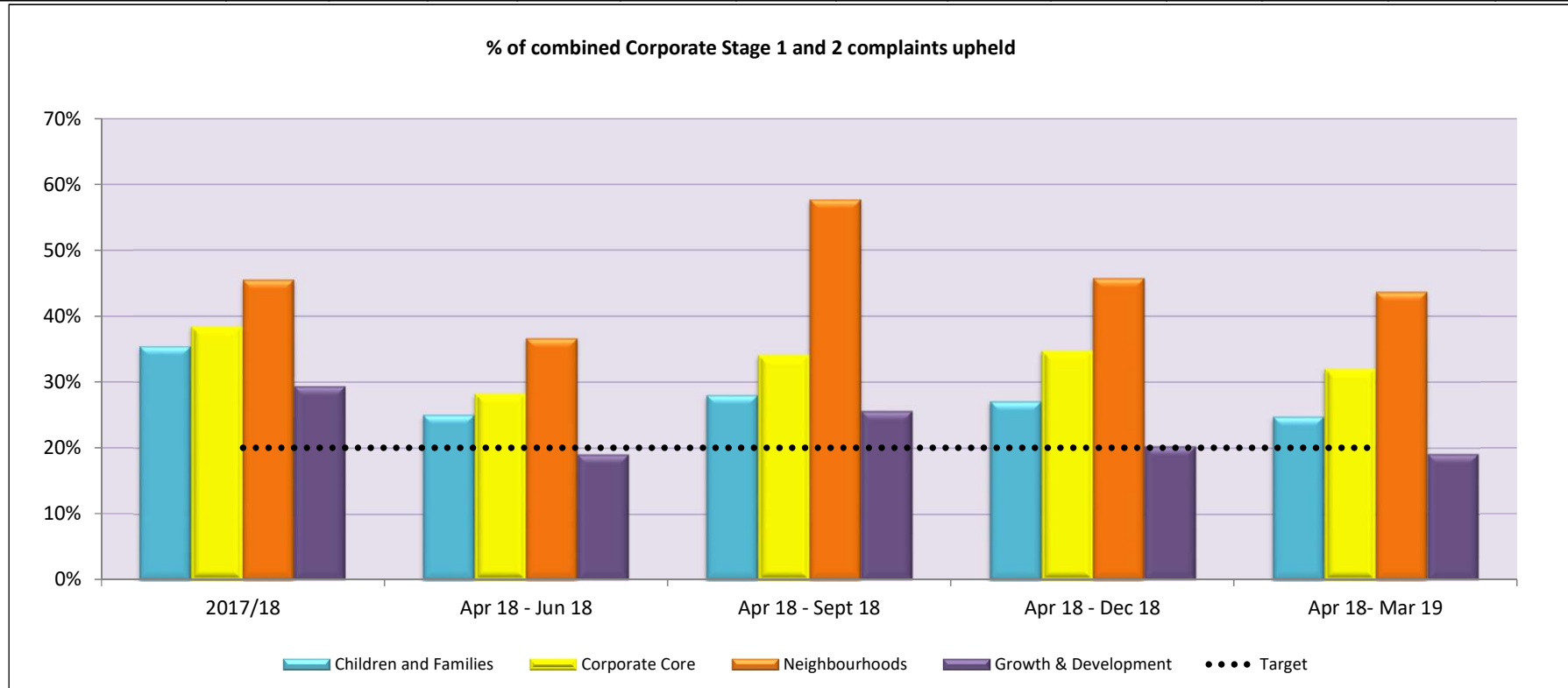
## Complaints and Information Request Dashboard

Number of stage 2 corporate complaint responses and % handled within 10 working days												Year To Date:	
Directorates	1 Apr 17 - 31 Mar 18		Target 18/19	1 Apr 18 - 30 Jun 18		1 Jul 18 - 30 Sep 18		1 Oct 18 - 31 Dec 18		1 Jan 19 - 31 Mar 19		1 Apr 18 - 31 Mar 19	
	No.	%		No.	%	No.	%	No.	%	No.	%	No.	%
Children and Families	34	🔴 65%	96%	11	🔴 64%	8	🔴 63%	2	🟢 100%	10	🔴 80%	31	🔴 71%
Corporate Core	106	🟡 87%		20	🟡 90%	18	🟡 89%	20	🟡 90%	15	🟡 93%	73	🟡 90%
N'bourhoods	163	🔴 79%		42	🔴 74%	60	🔴 68%	51	🔴 59%	40	🟡 88%	193	🔴 71%
Growth & Development	26	🔴 73%		7	🟢 100%	7	🔴 71%	12	🔴 67%	8	🔴 75%	34	🔴 76%
All Directorates	329	🔴 80%		80	🔴 79%	93	🔴 72%	85	🔴 68%	73	🔴 86%	331	🔴 76%



## Complaints and Information Request Dashboard

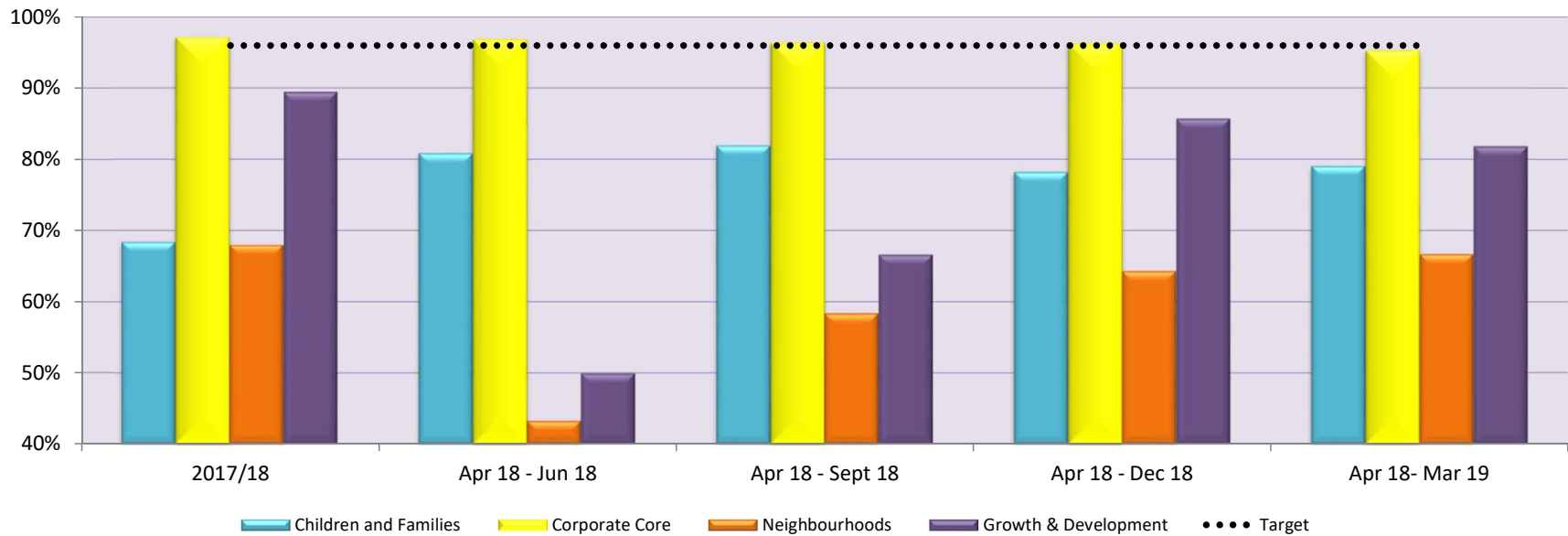
Number of Corporate Stage 1 and 2 decisions and % upheld												Year To Date:	
Directorates	1 Apr 17 - 31 Mar 18		Target 18/19	1 Apr 18 - 30 Jun 18		1 Jul 18 - 30 Sep 18		1 Oct 18 - 31 Dec 18		1 Jan 19 - 31 Mar 19		1 Apr 18 - 31 Mar 19	
	No.	%		No.	%	No.	%	No.	%	No.	%	No.	%
Children and Families	144	❌ 35%	20%	36	❌ 25%	39	❌ 31%	73	❌ 26%	46	✅ 17%	194	❌ 25%
Corporate Core	839	❌ 38%		170	❌ 28%	141	❌ 41%	147	❌ 36%	130	❌ 22%	588	❌ 32%
N'bourhoods	1086	❌ 45%		303	❌ 37%	150	❌ 100%	407	❌ 32%	359	❌ 39%	1219	❌ 44%
Growth & Development	109	❌ 29%		21	✅ 19%	22	❌ 32%	31	✅ 13%	15	✅ 13%	89	✅ 19%
All Directorates	2178	❌ 41%		530	❌ 32%	352	❌ 64%	658	❌ 32%	550	❌ 32%	2090	❌ 38%



## Complaints and Information Request Dashboard

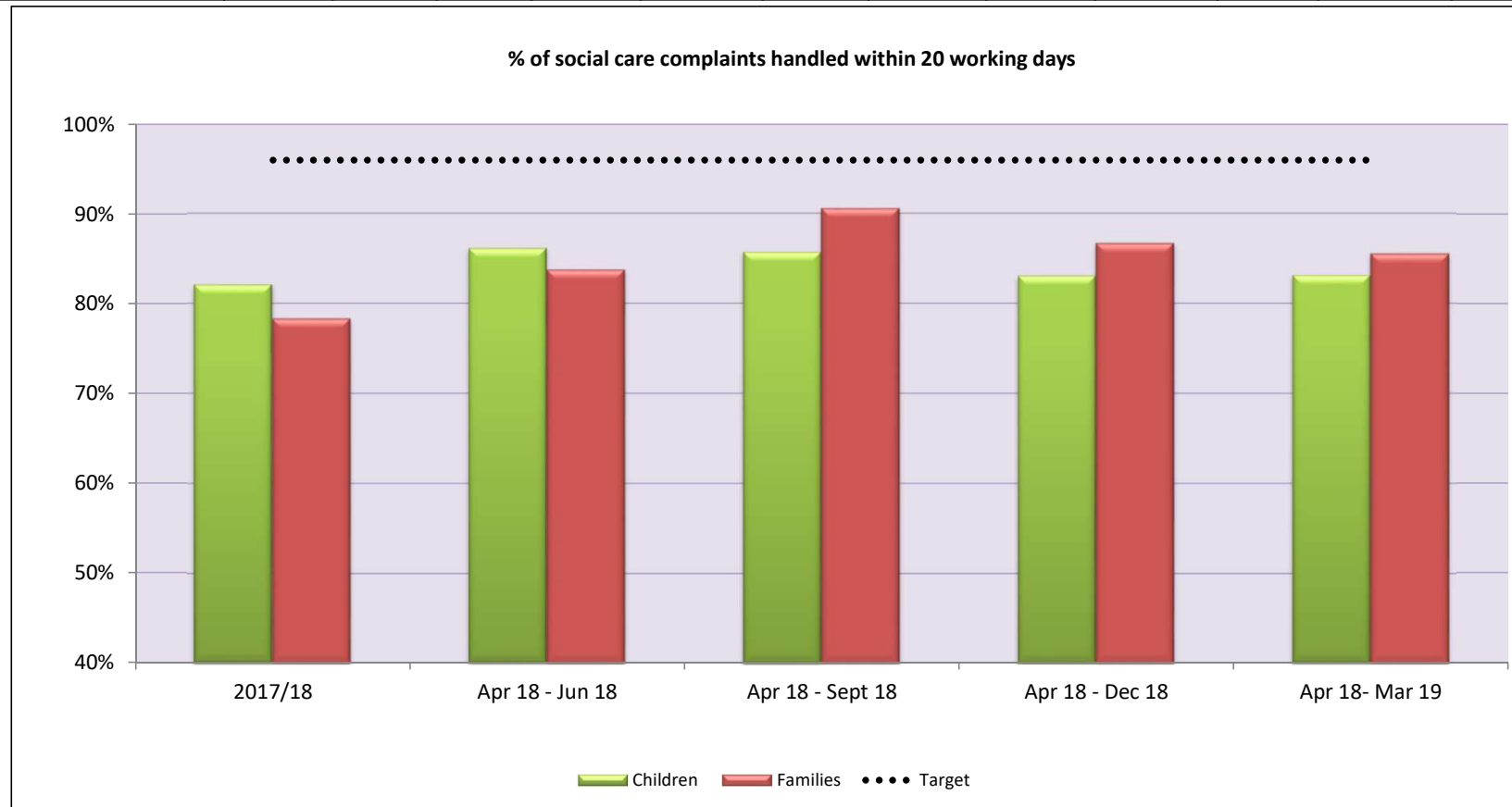
Number of Councillor and MP enquiries and % handled within 10 working days												Year To Date:	
Directorates	1 Apr 17 - 31 Mar 18		Target 18/19	1 Apr 18 - 30 Jun 18		1 Jul 18 - 30 Sep 18		1 Oct 18 - 31 Dec 18		1 Jan 19 - 31 Mar 19		1 Apr 18 - 31 Mar 19	
	No.	%		No.	%	No.	%	No.	%	No.	%	No.	%
Children and Families	829	✗ 68%	96%	198	✗ 81%	217	✗ 83%	263	✗ 78%	285	✗ 85%	963	✗ 82%
Corporate Core	416	✓ 97%		94	✓ 97%	96	⚠ 96%	103	✓ 96%	85	⚠ 92%	378	⚠ 95%
N'bourhoods	281	✗ 68%		67	✗ 43%	70	✗ 73%	45	✗ 82%	43	✗ 77%	225	✗ 67%
Growth & Development	19	⚠ 89%		2	✗ 50%	1	✓ 100%	4	✓ 100%	4	✗ 75%	11	✗ 82%
All Directorates	1,545	✗ 76%		361	✗ 78%	384	✗ 84%	415	✗ 83%	417	✗ 85%	1,577	✗ 83%

% of Councillor and MP enquiries handled within 10 working days  
(year to date)



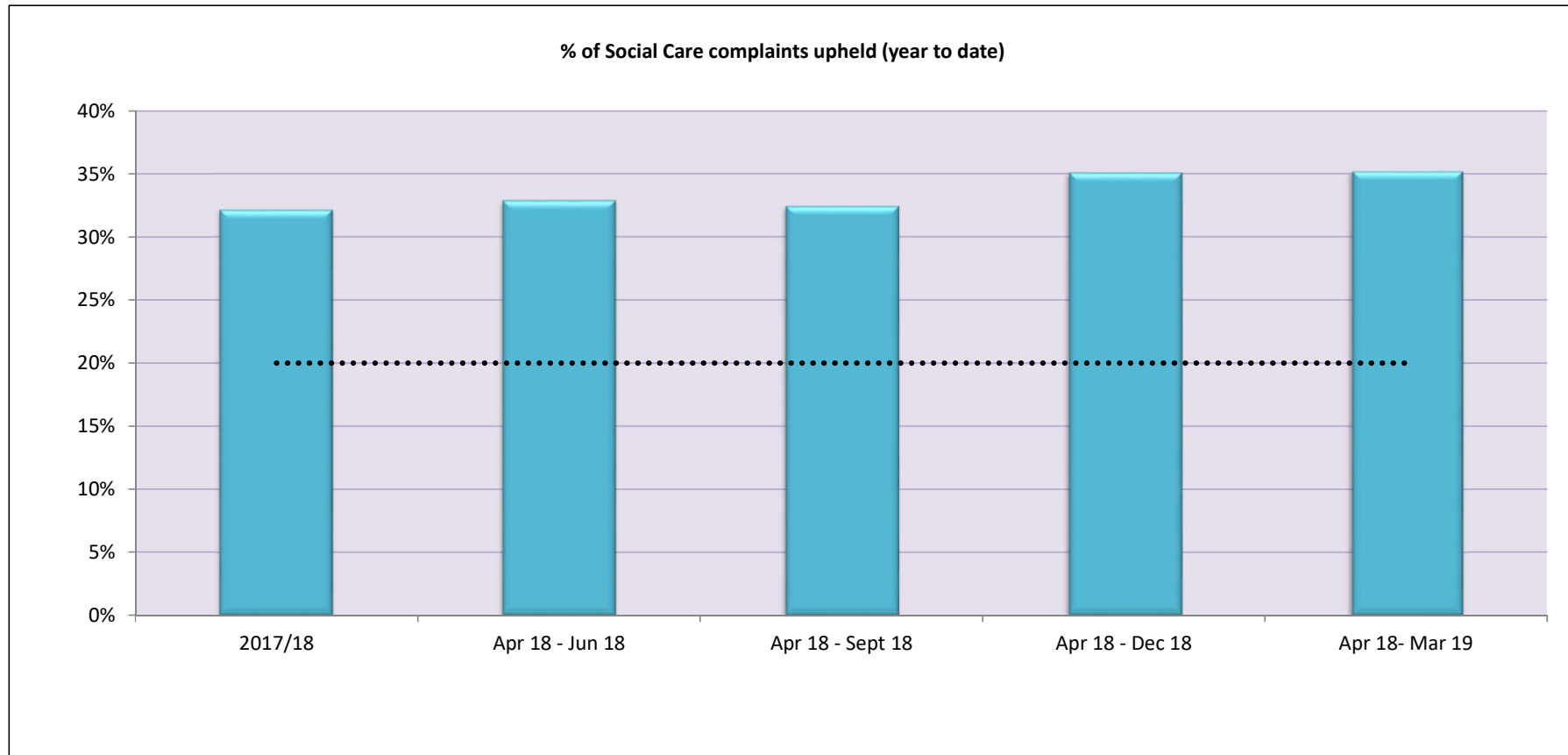
## Complaints and Information Request Dashboard

Number of Social Care Complaints and % handled within target												Year To Date:	
Directorates	1 Apr 17 - 31 Mar 18		Target 18/19	1 Apr 18 - 30 Jun 18		1 Jul 18 - 30 Sep 18		1 Oct 18 - 31 Dec 18		1 Jan 19 - 31 Mar 19		1 Apr 18 - 31 Mar 19	
	No.	%		No.	%	No.	%	No.	%	No.	%	No.	%
Childrens	223	✗ 82%	96%	36	✗ 86%	41	✗ 85%	47	✗ 79%	36	✗ 83%	160	✗ 83%
Adults	120	✗ 78%		43	✗ 84%	31	✓ 100%	31	✗ 77%	40	✗ 83%	145	✗ 86%
Total Social Care	343	✗ 81%		79	✗ 85%	72	⚠ 92%	78	✗ 78%	76	✗ 83%	305	✗ 84%



## Complaints and Information Request Dashboard

Number of Social Care decisions and % upheld												Year To Date:	
Directorates	1 Apr 17 - 31 Mar 18		Target 18/19	1 Apr 18 - 30 Jun 18		1 Jul 18 - 30 Sep 18		1 Oct 18 - 31 Dec 18		1 Jan 19 - 31 Mar 19		1 Apr 18 - 31 Mar 19	
	No.	%		No.	%	No.	%	No.	%	No.	%	No.	%
Total	342	❌ 32%	20%	79	❌ 33%	72	❌ 32%	77	❌ 40%	76	❌ 36%	304	❌ 35%

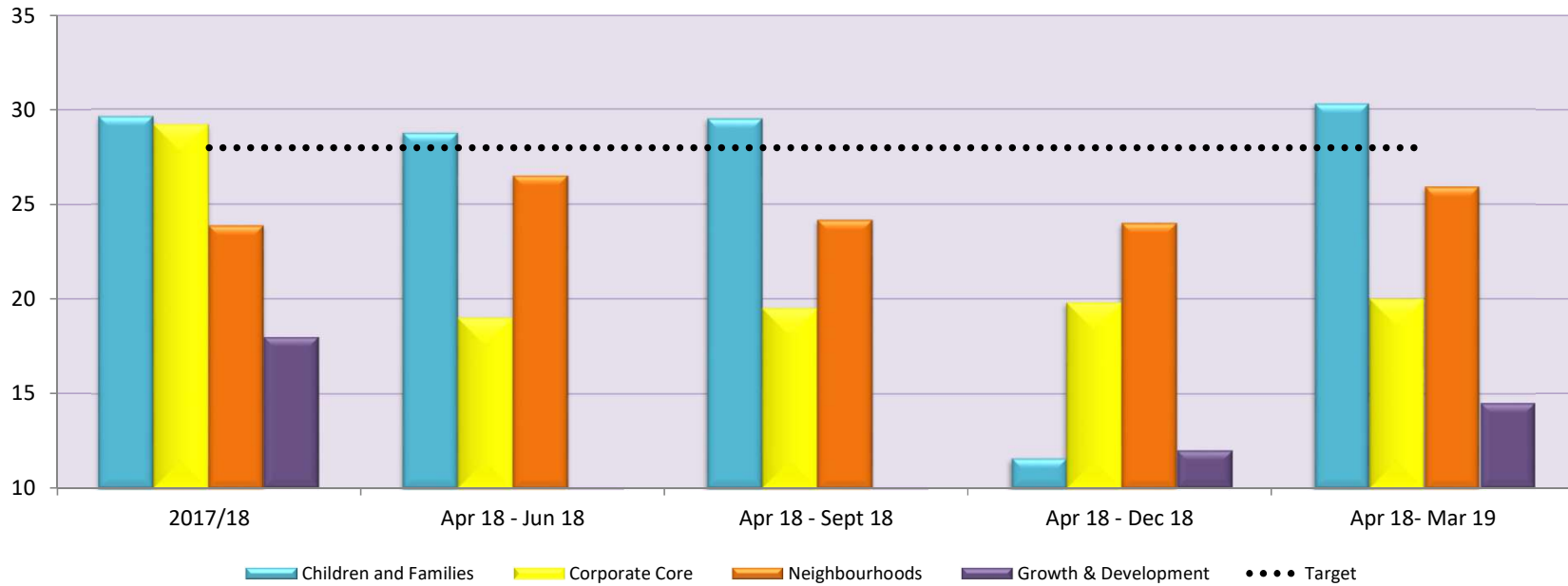




## Complaints and Information Request Dashboard

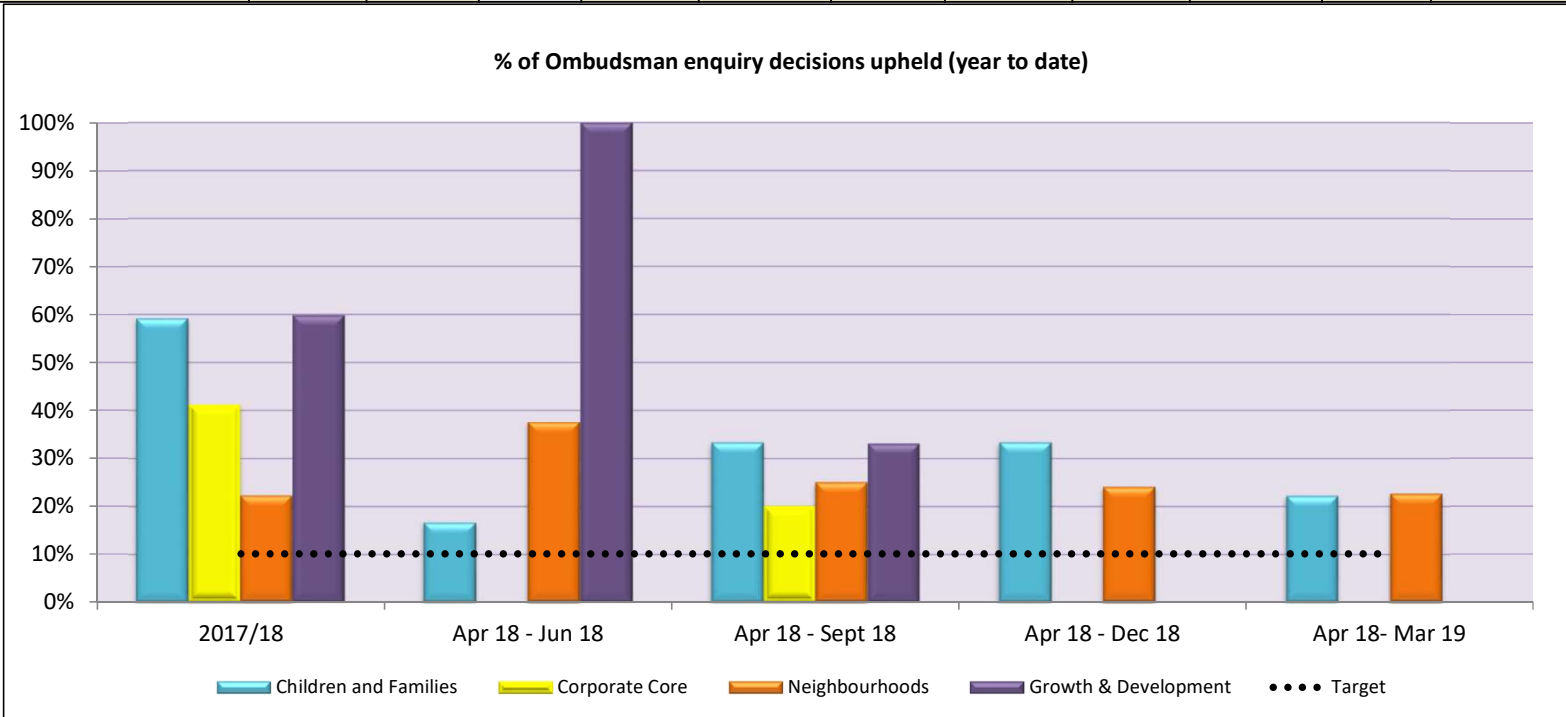
Number and average response times of Ombudsman enquiries (in calendar days)												Year To Date:	
Directorates	1 Apr 17 - 31 Mar 18		Target 18/19	1 Apr 18 - 30 Jun 18		1 Jul 18 - 30 Sep 18		1 Oct 18 - 31 Dec 18		1 Jan 19 - 31 Mar 19		1 Apr 18 - 31 Mar 19	
	No.	Avg Days		No.	Avg Days	No.	Avg Days	No.	Avg Days	No.	Avg Days	No.	%
Children and Families	8	30	28	4	29	4	30	2	17	5	39.0	15	31
Corporate Core	5	29		3	19	1	21	1	21	1	21.0	6	20
N'bourhoods	8	24		4	27	2	20	5	24	1	47.0	12	26
Growth & Development	1	18		0	-		-	1	12	1	17.0	2	15
All Directorates	22	27		11	25	7	26	9	21	8	35.0	35	26

Average response times of Ombudsman enquiries calendar days  
(year to date)



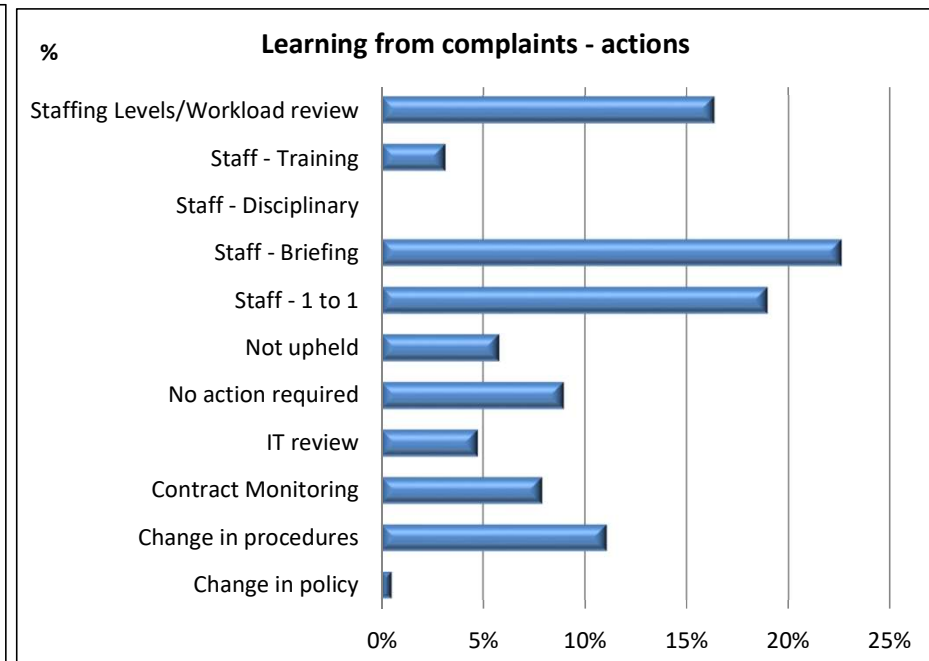
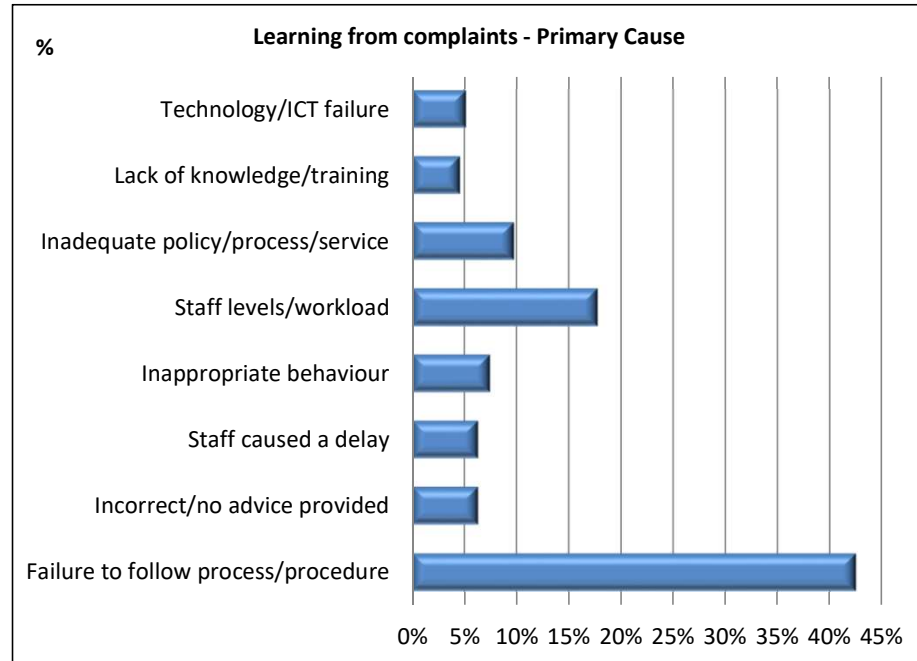
## Complaints and Information Request Dashboard

Number of Ombudsman enquiry decisions and % upheld												Year To Date:	
Directorates	1 Apr 17 - 31 Mar 18		Target 18/19	1 Apr 18 - 30 Jun 18		1 Jul 18 - 30 Sep 18		1 Oct 18 - 31 Dec 18		1 Jan 19 - 31 Mar 19		1 Apr 18 - 31 Mar 19	
	No.	%		No.	%	No.	%	No.	%	No.	%	No.	%
Children and Families	22	✗ 59%	10%	6	✗ 17%	9	✗ 44%	7	✗ 29%	6	✗ 17%	27	✗ 30%
Corporate Core	17	✗ 41%		4	✓ 0%	6	✗ 33%	5	✓ 0%	-	-	15	✗ 13%
N'bourhoods	18	✗ 22%		8	✗ 38%	8	✗ 13%	9	✗ 22%	6	✗ 17%	31	✗ 23%
Growth & Development	5	✗ 60%		1	✗ 100%	2	✓ 0%	2	✓ 0%	2	✓ 0%	7	✗ 14%
All Directorates	62	✗ 44%		19	✗ 26%	25	✗ 28%	23	✗ 17%	14	✗ 14%	81	✗ 22%



## Complaints and Information Request Dashboard

Learning from complaints												Year To Date:	
Directorates	1 Apr 17 - 31 Mar 18		Target 18/19	1 Apr 18 - 30 Jun 18		1 Jul 18 - 30 Sep 18		1 Oct 18 - 31 Dec 18		1 Jan 19 - 31 Mar 19		1 Apr 18 - 31 Mar 19	
	Minor	Critical		Minor	Critical	Minor	Critical	Minor	Critical	Minor	Critical	Minor	Critical
Children and Families	144	18	n/a	26	3	24	4	38	2	14	1	102	10
Corporate Core	294	2		52	0	53		49		30		184	0
N'bourhoods	223	2		101	3	100	3	142		101	1	444	7
Growth & Development	6	1		3	1			20		1		24	1
All Directorates	667	23		182	7	177	7	249	2	146	2	754	18

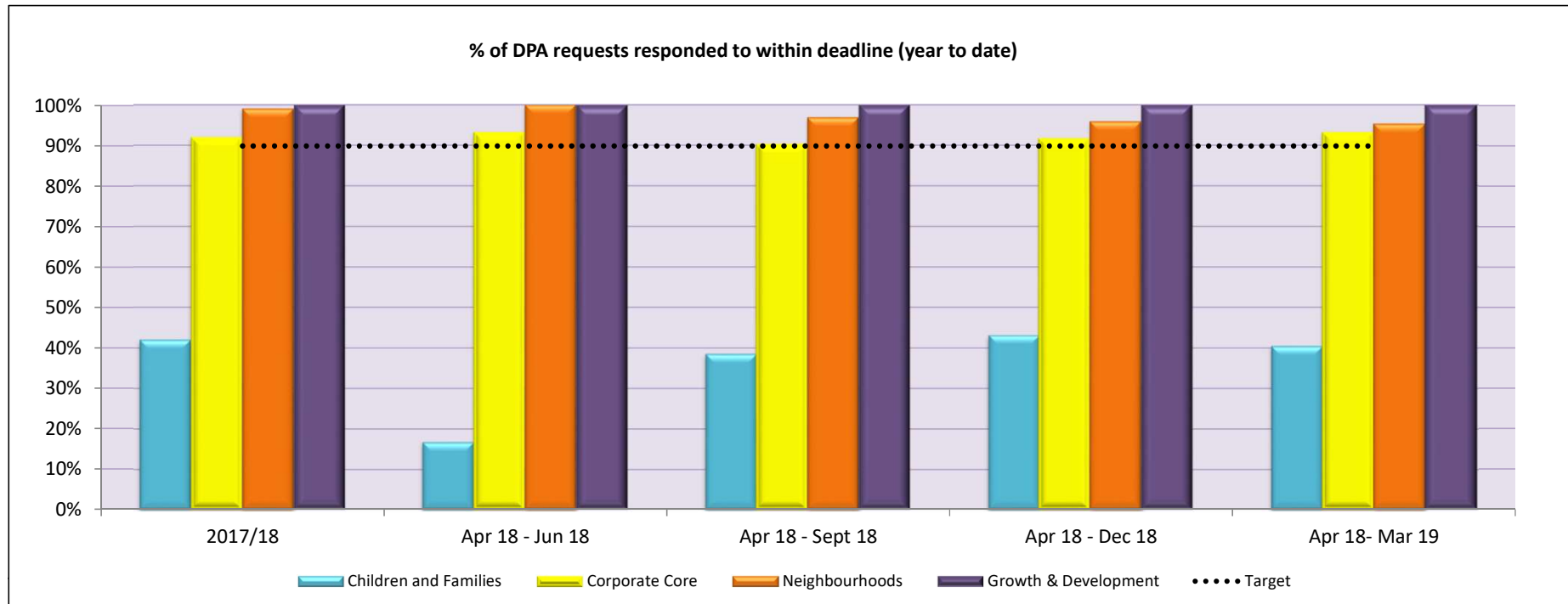


## Complaints and Information Request Dashboard

Service Areas	1 Apr 17 - 31 Mar 18	Target 18/19	Praise				Year To Date:
	Number		1 Apr 18 - 30 Jun 18	1 Jul 18 - 30 Sep 18	1 Oct 18 - 31 Dec 18	1 Jan 19 - 31 Mar 19	1 Apr 18 - 31 Mar 19
			Number	Number	Number	Number	Number
Children and Families	249	N/A	62	57	21	74	214
Corporate Core	39		10	6	7	8	31
Neighbourhoods	77		20	18	21	23	82
Growth & Development	25		1	7	4	5	17
All Directorates	663		156	146	79	192	573

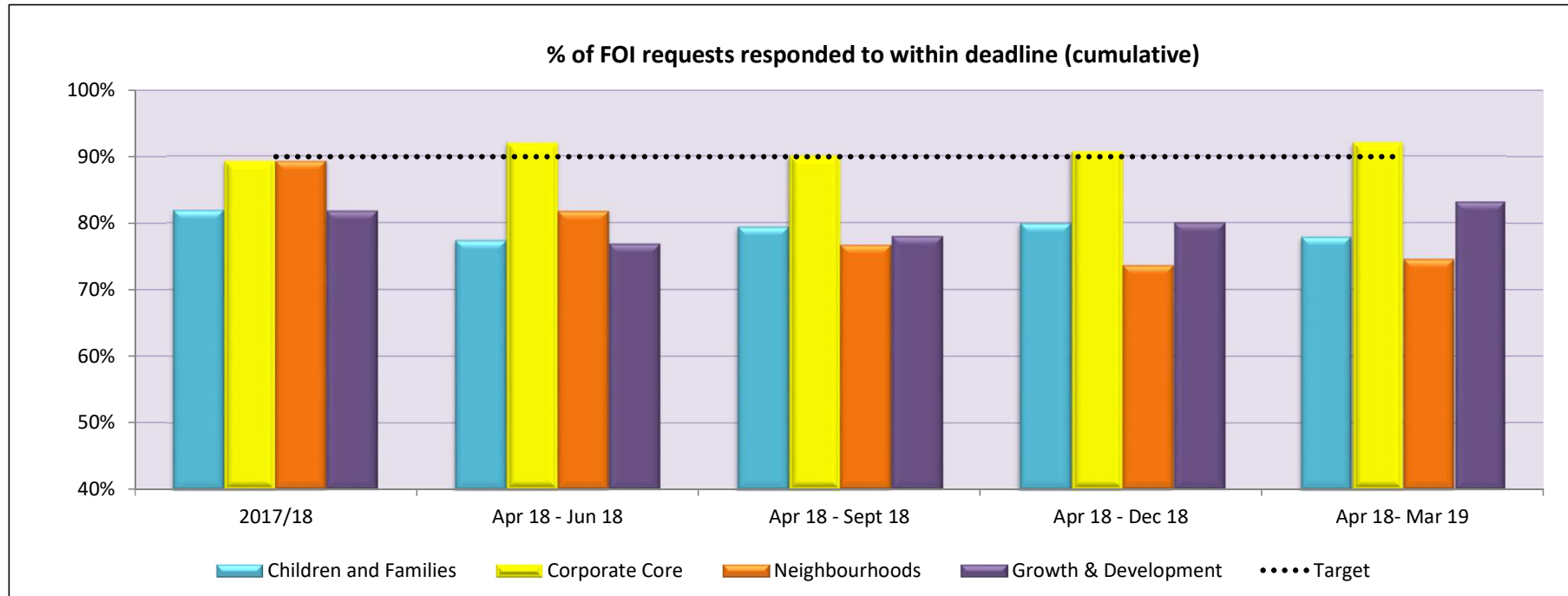
## Complaints and Information Request Dashboard

Data Protection Request (DPA/GDPR/Disclosure) Number % responded to by SLA (40 working days)												Year To Date:	
Directorates	1 Apr 17 - 31 Mar 18		Target 18/19	1 Apr 18 - 30 Jun 18		1 Jul 18 - 30 Sep 18		1 Oct 18 - 31 Dec 18		1 Jan 19 - 31 Mar 19		1 Apr 18 - 31 Mar 19	
	No.	%		No.	%	No.	%	No.	%	No.	%	No.	%
Children and Families	100	✗ 42%	90%	18	✗ 17%	34	✗ 50%	43	✗ 49%	46	✗ 35%	141	✗ 40%
Corporate Core	212	✓ 92%		45	✓ 93%	48	⚠ 88%	52	✓ 94%	34	✓ 100%	179	✓ 93%
N'bourhoods	592	✓ 99%		144	✓ 100%	140	✓ 94%	149	✓ 94%	137	✓ 93%	570	✓ 95%
Growth & Development	263	✓ 100%		75	✓ 100%	70	✓ 100%	64	✓ 100%	68	✓ 100%	277	✓ 100%
All Directorates	1167	✓ 93%		282	✓ 94%	292	⚠ 89%	308	⚠ 89%	285	⚠ 86%	1167	⚠ 89%



## Complaints and Information Request Dashboard

Number FOI requests and % within deadline (20 working days)												Year To Date:	
Directorates	1 Apr 17 - 31 Mar 18		Target 18/19	1 Apr 18 - 30 Jun 18		1 Jul 18 - 30 Sep 18		1 Oct 18 - 31 Dec 18		1 Jan 19 - 31 Mar 19		1 Apr 18 - 31 Mar 19	
	No.	%		No.	%	No.	%	No.	%	No.	%	No.	%
Children and Families	441	🟡 82%	90%	141	🔴 77%	159	🟡 81%	132	🟡 81%	123	🔴 70.7%	555	🔴 78%
Corporate Core	695	🟡 89%		186	🟢 92%	184	🟡 88%	195	🟢 92%	208	🟢 96%	773	🟢 92%
Neighbourhoods	492	🟡 89%		197	🟡 82%	223	🔴 72%	244	🔴 68%	169	🔴 78%	833	🔴 75%
Growth & Development	362	🟡 82%		82	🔴 77%	86	🔴 79%	72	🟡 85%	68	🟢 94%	308	🟡 83%
All Directorates	1990	🟡 86%		606	🟡 83%	652	🔴 80%	643	🔴 80%	568	🟡 85%	2469	🟡 82%



## Appendix 2 - Lost opportunities to resolve complaints before progression to the Ombudsman

Case	Council Decision	Council remedy	LGO decision	LGO remedy	Decision challenged
<b>1. Highways - Citywide Highways -</b> Failure to unblock a drainage gully for 14 months, causing repeat flooding to a resident's driveway	Upheld	Apology, explanation of why there have been delays, prioritising works, £50 compensation	The LGO found fault in the failure to resolve the blocked gully, the substantial delay in doing so and the Council's failure to correctly process her complaints as complaints instead of repeat requests for service	£300 compensation and a review of procedures	No
<b>2. Highways - Parking Services -</b> Enforcement of a Fixed Penalty Notice against a different person who happened to have the same name	Upheld	Apology, explanation of the chain of events, refund of fees of £100, compensation of £300 from the bailiffs and a change in procedures in relation to complaints relating to bailiffs	The bailiffs did not obtain sufficient information to verify that the registered keeper and complainant were the same person. The bailiffs also did not notify the Council of the Stage one complaint the complainant made directly to the bailiffs. The Council failed to respond to correspondence the complainant sent to it	Agreed with the refund of £100, £300 compensation from the bailiffs, but made a recommendation for an additional compensation of £250 from the Council, and an apology	No
<b>3. Children's Services - Access and Inclusion -</b> Resident denied a Free Travel pass in 2017/18 academic year when it was granted for the previous academic year	Heard through appeals process, not as a complaint	Appeal declined	The Council's policy suggests that children who are about to enter Years 8-11, in the same school that they have attended in the previous year(s), should be prepared to change to a nearer school if an appropriate place has become available there. However, this is not explained in its local policy, nor is it an approach supported by the statutory guidance. This is fault.	£100 and review of policy	Yes

Case	Council Decision	Council remedy	LGO decision	LGO remedy	Decision challenged
<b>4. Strategic Development - Strategic Housing</b> - Application of housing policy vis overcrowding	Heard by Wythenshawe Community Housing Group - not upheld	Explanation	The Ombudsman considered the Housing Allocations Policy so unclear that it could not assess whether the family had been wrongly denied a larger property or not	£500 compensation and review of policy	Yes
<b>5. Children's Services - Localities</b> - Guardianship allowance dispute	Partially upheld	Complainant should be financially assessed retrospectively for this period. Written explanation what the SGO allowance is for. Assessment of the family's needs to confirm the family are receiving all they are entitled to. £250 time and trouble payment.	The Council should have paid the special guardianship allowance earlier and its calculation of the allowance was wrong. The Council agreed the allowance should be backdated to November 2013 but the amount was calculated correctly. The Ombudsman agrees with this assessment.	No further remedy recommended	No
<b>6. Children's Services - Localities</b> - Failure to assess and address child's needs whilst in care, leading to lost education, distress and inconvenience	No fault	Explanation	The Council acted with fault in that it failed to: <ul style="list-style-type: none"> <li>• Properly explain to Ms X in writing why it needed to place Y on a school roll to fund the college placement she and Y had chosen and why therefore independent funding could not be approved or sought;</li> <li>• Provide Y with consistent alternative educational provision while a Looked After Child and give clear advice on who had responsibility for provision and support.</li> </ul>	Apologise; put measures in place to restore relationships between the parent, child, educational establishments and the Council; fund additional educational provision; £150 time and trouble payment	Yes



Case	Council Decision	Council remedy	LGO decision	LGO remedy	Decision challenged
<b>7. Children's Services - Access and Inclusion</b> - School transport appeal	Considered through appeals process	Considered through appeals process	The Council could not evidence that its panels had considered all the evidence provided by the applicant.	Hold a fresh Stage one appeal. Revision of process to ensure appropriate consideration and recording of all evidence	No
<b>8. Adult Social Care</b> - complainant's mother accumulated a debt of unpaid care contributions. Complainant says this is because the Council did not consider mother's capacity	Not upheld	Explanation	The Ombudsman did not find fault in the way in which the Council assessed the couple's capacity to manage her contribution towards her care package, the Council should have involved the daughter in her mother's financial assessment when her mother moved into residential care.	Send a written apology to the daughter; share the lessons learned above with staff within its adult social care and finance departments.	No
<b>9. City Treasurers - Revenues and Benefits</b> - Housing Benefit claim dispute from 2014/15	Not upheld	Explanation	Subsequent to the Stage 2, further information was found that demonstrated that the complainant was correct.	£250, removal of summons costs and plain English explanation of how entitlement has been calculated	No
<b>10. Children's - Social Care</b> - Parent complains about a perceived lack of action taken/ communication regarding safeguarding concerns	Not upheld	Explanation	There is no evidence of fault in the Council's actions to respond to safeguarding concerns but it gave confusing information about the status of the case.	Apologise for not contacting him as agreed, and for the inaccuracies/ lack of clarity in its complaint response letters; explain the current status his daughter's case.	No

Case	Council Decision	Council remedy	LGO decision	LGO remedy	Decision challenged
<b>11. Highways - Parking Services -</b> Council's refusal to hear a representation after the Penalty Charge Notice has been paid	Considered through representations process	Considered through representations process	The Ombudsman has found the Council was at fault as the PCN did not make it clear that Mr X could not pay the discounted charge and make a formal representation within 28 days.	Refund the £30 and allow an appeal; change of wording on PCNs	Yes

## **Appendix 3 - Examples of praise recorded for 2018-19**

### **Children and Families**

#### **Praise for a Social Worker**

"I just wanted to compliment REDACTED on these reports. I felt as if I knew the young person and her family before I had met them and felt very well-prepared for the meeting having read the information."

#### **Praise for a Social Worker**

"I had some really positive feedback from a young person. She said REDACTED is the best social worker she has ever had. That she scored her as 10 out of 10. That she appreciates that REDACTED has been there for her and feels she can trust her and she is not just doing her job which is how she felt with other social workers."

#### **Praise for a Social Worker**

"I want to compliment Mark. Not only was his report very detailed and comprehensive, but also I was extremely impressed at the way he had her next placement staff going into her current placement at North Manchester General Hospital to see them deliver all aspects of her daily care. This will have been an invaluable insight for them and for the young person, it means she knows each staff member before [the move]. I can't recall a better planned move. It must have been hard work but I'm sure it will all be worth it for the young person"..

#### **Praise for a Social Worker**

"REDACTED has received some lovely feedback from a child she is working with. REDACTED, this is wonderful to see the positive impact your work has had on these children".

#### **Praise for a Social Worker from a barrister**

"In my opinion the social worker provided clear and succinct evidence. She withstood the challenges from both the mother's and children's advocates and maintained her strong and heartfelt view about the LA's position and the reasons why. She came across as completely committed to ensuring that the children she is responsible for, from a safeguarding perspective, are her primary focus. It did not appear to any observer that this was the first occasion that she had given evidence!"

#### **Praise for an Early Help Worker from a young person**

"Means so much Thank you.without u I wouldn't of gone u don't no how thankful I am to have u in my life Thank u so much u r helping me become better n better each day. I can do this n I will."

#### **Praise for a Social Worker from a foster carer following a successful transition of placement:**

"I'm very grateful for everything you did for this child and will be forever thankful.We deffinatly got the best outcome for her and I look forward to watching her grow into an even more amazing little girl than she is already."

## **Corporate Core**

### **Praise for two Revenues and Benefits Customer Contact Centre agents**

REDACTED called a resident back and during the call complimented both REDACTED and REDACTED. He said they were both helpful and understanding and he appreciated that REDACTED sent him a link to claim Council Tax Support and that REDACTED put the account on hold.

### **Praise for an Environment on Call agent**

I had an issue with my bins, the problem went on for over 4 weeks. I had sent three email requests on the online service, but the situation remained unrectified. I phoned and wanted to thank your staff member on the refuse dept, she was amazing rectifying the problem almost immediately. She handled the problem sympathetically and I'd like to say she was extremely helpful and sorted my issue.

### **Praise for a Customer Service Centre agent**

REDACTED was very helpful and polite while dealing with my query in the customer service centre.

### **Praise for an Environment on Call agent**

Positive feedback from REDACTED. Asked on Monday for the grass to be cut near his home, spoke to a very polite lady and grass was cut this morning. REDACTED said "Fantastic job, very fast service, well done to Manchester City Council."

### **Praise for a Complaints and Information Compliance Coordinator**

REDACTED wishes to address praise to REDACTED for being so helpful with making the arrangements to have the requested disabled bay made. REDACTED is thankful for REDACTED's efficiency and working professionalism towards this request.

## **Neighbourhoods**

### **Praise for a member of staff at Central Library**

Many thanks to REDACTED for all his help and patience with two old people. He is a very polite and patient person and so friendly, he deserves a pat on the back! Hope you keep him and take care of him!

### **Praise for a member of staff at Venue Library**

Praise for REDACTED - because he did way more than his job in helping me photo copying. Without his help I would never have managed. I was very stressed and he took control and sorted everything. Absolutely wonderful man, a credit to you.

### **Praise for Parking Services officers**

Praise for REDACTED - Christie Parking Scheme. He was very helpful.

### **Praise for Bereavement Services**

Card from REDACTED: "Thank you so much for all your help in arranging to scatter REDACTED'S ashes beside our son REDACTED. Your care and compassion made this difficult time so much easier to handle. Please also thank REDACTED for her help."

**Praise for Compliance and Enforcement Officers**

I just wanted to drop you both a line and say a huge thank you for the enforcement operation you ran for us at REDACTED this weekend. It's fantastic that you were able to seize more than 400 items and the deterrent effect that the operation will have had on sellers is enormous... We sincerely appreciate your support.

**Praise for Waste and Recycling Strategy Officers**

I would be grateful if you could pass on my thanks to the person in Waste and Recycling

Neighbourhood's Directorate who dealt with my complaint and arranged for a new grey waste bin to be delivered this morning. Thank you.

**Praise for Bereavement Services Officers**

"I would just like to say a huge thank you to you for all of your assistance in dealing with the transfer of the grave papers and the arrangement of the internment of my mother's ashes yesterday. Your colleagues at the grave side were very helpful and discreet and we all very much appreciate what you and they have done for all of us."

**Praise for a Private Sector Housing Compliance and Enforcement Officer**

Firstly, the contracts have been exchanged today on the property. Secondly, I thank you for your guidance thro a sale and granting me an exemption. Forgive me for this generalisation but historically, I have not found Local Council easy or receptive to work with - you have been helpful, consistent and reliable to communicate with. So refreshing and for which I am most grateful. A credit to your job. Should you be party to appraisals, you deserve this documented. Thank you.

**Praise for a Parking Services Officer**

I'd just like to thank Manchester city council and REDACTED for listening and helping me with a recent bus lane fine..thank you

**Praise for Biffa**

Wanted to thank everybody for removal of the fly-tipping - believes they did a good job and really does appreciate it.

**Praise for Neighbourhood Officers**

Thank you so much that you solve this big problem for rubbish on the corner. And thank you so much that you cleaned the whole territory. I am grateful for your hard work thank you so much.

**Growth and Development****Praise for Planning Services**

Many Thanks . Most helpful . Please record that on your Corporate Feedback Thank You.

**Praise for Planning Services**

I would like to express my gratitude to a member of your staff. I was given incorrect advice by some planners and I phoned REDACTED to explain my frustration with the planners regarding the pre-planning application. REDACTED transferred me to

REDACTED and I was very grateful that you had a planner like REDACTED as she is a 'star' of the planners who gave me very helpful advice; I changed an unused building with a right of permitted development into dwellings for three families. In this economic climate this was the only way they could find accommodation, and this was all thanks to REDACTED and her honest and true advice. I would truly like to thank you for employing REDACTED on your team.

**Praise for Premises Licensing Services**

Thank you for your very detailed response. It is good to see the people in Manchester are in safe hands.

By virtue of paragraph(s) 7 of Part 1 of Schedule 12A  
of the Local Government Act 1972.

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