

Report to Governance, Strategy and Resources Scrutiny Board

Customer Feedback: Annual Report 2024-25

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Executive Summary

This report presents Oldham Council's annual overview of complaints received between 1 April 2024 and 31 March 2025. It provides the Council's first single view of performance across Adult Social Care, Children's Services, and Corporate Services, reflecting Oldham's commitment to work with a resident focus.

During the year, 387 formal complaints were recorded. The majority originated within the People Directorate, reflecting the scale, complexity, and sensitivity of social care casework.

While 39% of complaints were completed within target timescales, timeliness remains a key area for development and is a key focus within the Complaints Recovery Plan. The primary factors contributing to delay include case complexity, inter-agency dependencies, and capacity pressures.

48% of all complaints were upheld or partially upheld, demonstrating an organisational culture that values fairness, accountability, and continuous learning. This openness to challenge ensures that resident concerns directly inform service improvement.

Common themes remain consistent with previous trends: clarity of decision-making, communication, and staff conduct which have informed directorate-specific actions such as refreshed guidance, strengthened quality assurance, and improved signposting for residents.

Overall, this data provides a comprehensive and joined-up picture of resident feedback across the Council. It marks a significant step in embedding a consistent, resident-focused approach to complaint handling and service learning and improvement.

Recommendations

It is recommended that Elected Members consider the report and comment as appropriate.

1 Background

- 1.1 Oldham Council is committed to listening to residents, acting on feedback, and learning from complaints to improve the quality, timeliness, and accessibility of services as part of our commitment to work with a resident focus.
- 1.2 This Annual Complaints Report provides an overview of all complaints received and managed by the Council between 1 April 2024 and 31 March 2025 across the People, Place, and Resources directorates.
- 1.3 The report fulfils statutory requirements to produce annual summaries for social care complaints, while extending the same transparency and learning principles to all council services. It also supports the Council's ambition to be a resident-focused and learning organisation.

2 Purpose of the Report

- 2.1 The purpose of this report is to:
 - Provide a transparent account of how the Council has handled complaints, compliments, and service requests during 2024–2025.
 - Identify key trends, outcomes, and learning themes across all directorates.
 - Demonstrate compliance with statutory duties and best practice standards.
 - Support continuous improvement in line with the Complaints Recovery Plan, which aims to improve timeliness, learning culture, and resident communication.

3 Legislative and Procedural Framework

- 3.1 Complaints are handled in accordance with the relevant statutory and corporate procedures:
 - Adult Social Care complaints are managed under the *Local Authority Social Services and NHS Complaints Regulations 2009*, which require a single-stage process focused on early resolution, investigation, and learning.
 - Children's Social Care complaints are managed under the *Children Act 1989 Representations Procedure (England) Regulations 2006*, a three-stage process allowing formal escalation and independent review.
 - Housing Complaints are managed under the Housing Ombudsman Scheme and the Council's Housing Complaints Policy, which follows the requirements set out in the *Housing Act 1996* and the *Housing Ombudsman's Complaint Handling Code (2022)*.
 - Corporate Complaints are handled under Oldham Council's *Complaints Policy*, which is based on the *Local Government Act 1974* and the *Local Government and Social Care Ombudsman's (LGSCO) Principles of Good Administration*.

4 Governance and Oversight

- 4.1 The Customer Feedback Team, located within the Customer Experience Service as part of the Resources directorate is responsible for coordinating complaint handling across all

directorates. The team ensures consistency in process, performance monitoring, and compliance with statutory and corporate standards.

4.2 Regular performance reports are shared with:

- Directorate Management Teams (DMTs)
- Management Board
- Leadership
- Elected Members via Scrutiny Board(s) and
- the LGSCO Annual Review Report

4.3 This ensures that complaint data informs service planning, quality assurance, and workforce development. Learning from complaints is routinely linked to wider improvement programmes across the Council.

5 Comparison of 2023-2024 vs 2024-2025

5.1 The following table sets out key data comparing 2024-2025 with 2023-2024 with the change column illustrating the movement between the years.

5.2 Table 1 (Comparison data):

Measure	2023/2024	2024/2025	Change
Total complaints	401	387	▼ Slight decrease (-3.5%)
All contacts (complaints and service requests)	2,618	2,284	▼ 13% fewer overall contacts
Average handling time – complaints	62 days	40 days	▲ Improved by 22 days
% complaints responded to within timescale	32.9%	39%	▲ 6.1% improvement, but considerable progress to be made
Children's Services complaints	117	110	▼ 7 fewer complaints
Children's Services timeliness	31% in time	34% in time	▲ 3% improvement
Children's upheld/partially upheld rate	47% overall	41% overall	▼ 6% decrease

Adults Social Care complaints	87	117	▲ Increase of 30 complaints (reflecting demand and complexity)
Adult Social Care timeliness	35% in time	36% in time	▲ 1% increase
Adults Social Care upheld/partially upheld	52%	57%	▲ Increase in upheld rate
Place complaints	154	109	▼ Decrease of 45 complaints, 35% reduction
Place timeliness	36% in time	50% in time	▲ 14% improvement
Resources complaints	43	39	▼ Decrease of complaints
Resources timeliness	41.9% in time	41% in time	▼ 0.9% decrease
Compliments (all directorates)	111	171	▲ Increase of 60 compliments
Top themes	<ul style="list-style-type: none"> • Staff conduct • Communication delays • Missed collections • Inadequate information about charges 	<ul style="list-style-type: none"> • Decision clarity • Communication • Staff conduct • Delay • Charging queries 	▶ similar, more clarity-related themes emerging

- 5.3 Overall complaint volumes remained broadly stable (401 to 387), while total contacts reduced by 13%, suggesting improved early resolution.
- 5.4 Timeliness improved but remains the main challenge. In 2023/24, 33% of complaints were completed in time compared with 39% in 2024/25. Average handling time reduced significantly from 62 days to 40 days, demonstrating faster timeliness and stronger operational oversight.
- 5.5 Directorate trends show mixed movements. Children's Services complaints slightly decreased (117 to 110), alongside similar upheld levels and marginal improvements in timeliness. Adult Social Care complaints rose (87 to 117), with upheld rates increasing from 52% to 57%. Place saw a notable reduction in complaints (154 to 109) and clear improvement in timeliness (36% to 50%). Resources remained stable in both volume and performance.
- 5.6 Themes were consistent across both years: clarity of decision-making, communication, delays in support, staff conduct, and issues linked to charging and financial assessments.

Compliments increased from approximately 150 to 171, reflecting improved resident experience across several frontline services.

- 5.7 Overall, 2024-25 shows some progress in complaint handling speed, governance, and consistency, with timeliness remaining the key priority to address in 2025-26.

6 Summary Position for 2024-2025

- 6.1 The following section provides a high-level summary of complaint, compliment, and service request activity across Oldham Council during 2024-2025.

- 6.2 Table 2 (Highlights):

Area	Headline Data
Total complaints received	<p>387 formal complaints were recorded across all Council directorates.</p> <p>Of the 387 complaints, 56 were reviewed by the Ombudsman, a decrease from 71 in 2023/24. Of the 56, 11 proceeded to formal investigation by the Ombudsman of which 8 were upheld and 3 were not. Further detail is included at <i>Appendix A: Local Government and Social Care Ombudsman: Annual Review of Complaints 2024/25</i>.</p>
Complaint stages	<p>Stage 1: 360 - Initial service investigation and local resolution.</p> <p>Stage 2: 25 - Request for review by complainant, completed by independent investigator or senior manager (Adult Social Care: 4, Corporate: 4, Children's Social Care: 17).</p> <p>Stage 3: 2 - Children's Services only (independent review panel). Reflects escalation allowed under the statutory Children Act procedure.</p>
Directorate breakdown	<p>People – 239 (62%)</p> <p>Place – 109 (28%)</p> <p>Resources – 39 (10%)</p>
Timeliness of responses	<p>Complaints completed within target timescales – 152, 39%.</p> <p>Timeliness remains a key focus under the Complaints Recovery Plan.</p>
Complaint outcomes	<p>Complaints upheld - 185 complaints, 48%.</p> <p>This reflects a culture of transparency and fair resolution. This learning continues to shape policy, process, and practice improvements across services.</p>
Common themes	<p>The top five themes recorded were:</p> <p>1. Disagree with a decision</p>

	2. Staff conduct or attitude 3. Disagreement about a person's care 4. Inadequate information about charges 5. Delay in providing support These issues are being addressed through local improvement actions and staff learning.
Service requests	Customer Feedback handled 1,475 service requests during the year, in addition to formal complaints. These include issues such as missed collections, fly-tipping, tree maintenance, and street cleaning. Service requests are monitored separately but provide valuable insight into resident experience and service demand.
Compliments	171 compliments were formally recorded across all directorates, recognising positive experiences, staff professionalism, and good communication. Compliments are used to highlight excellence and share best practice within teams.
Learning and Improvement	Key actions delivered include improved case monitoring through Power BI dashboards, strengthened directorate accountability, and a focus on communication quality. Learning themes are reviewed through Directorate Management Teams.
Forward priorities for 2025–2026	<ul style="list-style-type: none"> • Improve timeliness and throughput across all complaint types. • Implement a new case management system. • Embed a stronger learning framework and consistent QA. • Enhance accessibility, communication, and resident trust through the Complaints Recovery Plan. • Ultimately leading to a significant and sustained improvement in complaints performance.

7 Volume and Trends

7.1 During 2024-2025, the Customer Feedback team handled resident contacts and formal complaints across all directorates. The breakdown of formal complaints by Directorate is as follows:

- People Directorate: 239 (62%)
- Place Directorate: 109 (28%)
- Resources Directorate: 39 (10%)

7.2 The following sections provide a summary of performance, themes, and learning for each Directorate.

People Directorate

7.3 The People Directorate received 239 complaints during 2024-2025, accounting for 62% of all Council complaints. This includes 117 Adult Social Care, 110 Children's Social Care, and 12 Education complaints. In addition, 102 children's representations were managed separately under the statutory Children Act procedure.

7.4 Across the directorate, 82 complaints (34%) were completed within target timescales, with timeliness continuing to be a focus for improvement through the Complaints Recovery Plan. A total of 115 complaints (48%) were upheld, demonstrating an open and learning culture across services.

7.5 Table 3 (People Directorate Overview):

Service Area	Complaints Received	% Completed Within Timescale	% Upheld or Partially Upheld
Adult Social Care	117	36%	57%
Children's Social Care	110	34%	41%
Education	12	25%	25%
Total / Average	239	34%	48%

7.6 Table 4 (People Complaint Categories):

Key Theme	Adult Social Care	Children's Social Care	Education	Total
Disagreement with a decision / care plan	22	30	0	52
Staff conduct or attitude	0	25	2	27
Delay in service / support	11	11	0	22
Poor communication / inadequate information	0	9	0	9
Inadequate information about charges	14	0	0	14
Invoicing errors	12	0	0	12
Quality of care	12	0	0	12
SEN support issues	0	0	4	4
Complaints about school staff	0	0	1	1
Other (miscellaneous)	0	0	5	5

7.7 Adult Social Care performance remains impacted by complex financial assessments and multi-agency dependencies. Learning actions include clearer communication on charging decisions, stronger provider feedback loops, and improved recording of care-quality concerns.

- 7.8 Children's Social Care complaints predominantly related to safeguarding and permanence teams, reflecting the sensitive nature of children's social care. Actions taken include reinforcing communication standards, embedding reflective supervision, and clarifying decision rationale with families.
- 7.9 Education-related complaints mainly involved SEND provision and school transport. Learning has focused on strengthening communication between schools and families and ensuring consistency in responses to SEND queries.

Place Directorate

- 7.10 The Place Directorate received 109 complaints during 2024-2025, representing 28% of all Council complaints. Complaints received related to the following areas:
- Environment (50): This service includes Environmental Services, Environmental Health, Building Control, Licensing, Highways, and Waste.
 - Communities (40): This service includes Housing Needs, Community Safety, Heritage, Libraries and Arts and Youth Services.
 - Economy (19): This service includes Parking, Planning, Housing Delivery, and Markets.
- 7.11 A total of 54 complaints (50%) were completed within target timescales. 50 complaints (46%) were upheld, indicating a continued commitment to acknowledging and addressing issues raised by residents.
- 7.12 Table 5 (Place Directorate Overview):

Service Area	Complaints Received	% Completed Within Timescale	% Upheld or Partially Upheld
Communities	40	40%	53%
Economy	19	42%	32%
Environment	50	60%	46%
Total / Average	109	50%	46%

- 7.13 Table 6 (Place Complaint Categories):

Key Theme	Communities	Economy	Environment	Total
Communication issues or delay	9	0	0	9
Service provision delay	7	0	0	7
Quality / suitability of temporary accommodation – casework?	6	0	0	6
Staff conduct or attitude	6	2	7	15
Disagreement with a decision (housing, planning, enforcement)	4	8	4	16

Disagreement with parking charges or penalties	0	2	0	2
Delay in dealing with enquiry or request	0	0	6	6
Failure to take enforcement action	0	0	4	4
Missed collections / service failure	0	0	4	4
Other (miscellaneous)	0	0	15	15

- 7.14 Communities' complaints related to Housing Needs (37), with smaller volumes in Community Safety, Heritage, Libraries and Arts and Youth Services. Themes largely reflected challenges around housing supply, temporary accommodation, and the speed of service responses. Learning actions included improving resident communication during housing applications, reviewing case allocation processes, and strengthening joint working between Housing and Homelessness services to reduce response times.
- 7.15 Economy complaints mainly concerned Planning, Parking, and Markets, where outcomes often involved differing interpretations of policy and enforcement decisions. Learning has focused on providing clearer explanations of decision rationale, improved communication with residents on planning outcomes, and stronger internal consistency when handling parking challenges.
- 7.16 Environment complaints were primarily linked to Waste Management (12), Highways and Engineering (13), Environmental Health (15), and Street Cleansing (8). Timeliness in this area was stronger than other directorates. Learning actions have included reinforcement of customer service standards, targeted refresher training on communication and enforcement, and improved coordination between Environmental Services and Contact Centre teams to reduce duplication of resident contact.

Resources and Corporate Services Directorate

- 7.17 The Resources and Corporate Services Directorate received 39 complaints during 2024-2025, accounting for 10% of all Council complaints.
- 7.18 Across the directorate, 16 complaints (41%) were completed within target timescales, while 20 (51%) were upheld or partially upheld. Complaints within this directorate generally related to service delivery, communication, and disagreement with financial or procedural decisions.
- 7.19 Table 7 (Resources and Corporate Services Directorate Overview):

Service Area	Complaints Received	% Completed Within Timescale	% Upheld or Partially Upheld
Resources and Corporate Services	39	41%	51%

- 7.20 Table 8 (Resources and Corporate Services Complaint Categories):

Key Theme	Total
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Disagreement with recovery or enforcement action	9
Disagreement with council tax liability	5
Poor quality of service	3
Failure to update account details	3
Lack of contact or communication	3
Delay in dealing with enquiry or request	2
Blue Badge delays or outcomes	2
Staff conduct or attitude	1
Event management issues	1

- 7.21 Complaints within the Resources and Corporate Services Directorate were primarily received across Revenues (Council Tax) with smaller volumes in Benefits, Legal, Customer Services, Registrars, Welfare Rights, Elections, and Communications.
- 7.22 The main issues related to the speed of service, clarity of decisions, and communication during applications, registration processes, and council tax recovery activity. Learning has focused on improving correspondence clarity, tracking and updating customer enquiries, and strengthening signposting for residents experiencing financial difficulty.
- 7.23 These improvements are being supported through enhanced oversight via regular Contact Centre meetings with services and alignment with the Council's Resident Focus guide to ensure tone, empathy, and fairness in all communication.

8 Outcomes and Learning

- 8.1 Across 387 complaints, 39% were completed within target and 48% were upheld. Taken together, this indicates we are willing to acknowledge when practice could be better, while timeliness remains our biggest improvement priority. This aligns with the Complaints Recovery Plan's focus on ownership, early resolution and learning at service level.
- 8.2 From themes recurring across People, Place and Resources and Corporate Services, four corporate learning needs stand out:
- Decision clarity and rationale: residents want plain-English explanations of decisions (care, housing, enforcement, recovery) and what will happen next.
 - Communication and updates: delays in responses/updates drive dissatisfaction and escalation; proactive updates reduce repeat chasing.
 - Process timeliness and handoffs: multi-team and partner dependencies can create delays; earlier triage and clearer ownership improve pace.
 - Tone, conduct and empathy: a small but material subset concerns staff attitude; quality assurance and coaching may support in keeping tone consistently understanding and empathetic
- 8.3 How learning is being embedded:

- Governance and transparency: Weekly operational tracking, DMT reporting, and quarterly Scrutiny updates are in place, with live Power BI dashboards for Members and officers to see volumes, timeliness and outcomes.
- Quality Assurance: Corporate quality assurance of draft responses and feedback loops with services are now routine, improving clarity, tone and consistency.
- Early Resolution culture: Emphasis on solving issues at first contact and reducing escalation is a core part of the Complaints Team business plan.
- Learning Framework: A council-wide Complaints Learning Framework will be launched in 2026 which will set out how themes translate into tangible “You said, we did” improvements and service changes. Implementation is scheduled from Spring 2026.
- Outcomes at Ombudsman: Half of upheld LGSCO cases already had a satisfactory remedy in place before investigation, well above national and metro averages, indicating stronger early ownership and fair remedies. Compliance with recommendations is 100%.

9 Compliments for 2024-2025

9.1 During 2024-2025, the Council recorded 171 formal compliments across all directorates, providing valuable positive feedback on service quality, staff professionalism, and resident experience. Compliments are an important part of the Council’s learning framework, offering insight into what residents value and reinforcing good practice.

9.2 The highest volumes of compliments were received within the People Directorate (87), followed by Place (54) and Resources (30). This distribution reflects both the direct nature of social care and housing services, where staff build strong personal relationships with residents, and the high levels of daily contact within operational and customer-facing teams

9.3 Table 9 (Compliments Breakdown):

Directorate / Service Area	Compliments Received	Examples of Positive Feedback
Adult Social Care	46	Appreciation for care workers, social workers, and reablement teams who provided timely, compassionate support.
Children’s Social Care	29	Recognition of consistent communication, kindness, and advocacy for children and families.
Education	12	Positive comments on SEN support, early years advice, and communication with families.
Communities: Housing and Homelessness	28	Praise for staff providing proactive housing advice and resolving accommodation issues quickly.
Environment: Waste and Street Cleansing	20	Feedback highlights helpfulness of collection crews, street-cleansing staff, and rapid response to service requests.

Economy: Planning, Markets)	6	Acknowledgment of clear guidance and supportive communication from planning and markets teams.
Corporate: Revenues and Benefits	16	Recognition for staff resolving council tax queries quickly and providing courteous support.
Corporate: Customer Services	14	Praise for Registrars, Customer Services, and Blue Badge teams for efficient, friendly service.

9.4 Analysis of compliments shows that residents most frequently recognised:

- Professionalism and empathy: particularly in front-line social care and customer-facing roles.
- Effective communication: clear, timely updates and staff taking time to explain processes.
- Responsiveness: issues being resolved quickly or beyond expectation.
- Personal impact: residents feeling supported, respected, and listened to.

9.5 Compliments are routinely shared in team meetings and via internal communications to reinforce a culture of appreciation and good customer service.

10 **Summary and Conclusion - Reflection on overall performance and progress for 2024-2025:**

10.1 During 2024-2025, Oldham Council made tangible progress in strengthening its approach to complaint handling and resident feedback. The creation of a single, council-wide report has provided a clear picture of performance across People, Place, and Resources, improving visibility, accountability, and learning.

10.2 A total of 387 formal complaints, 1,475 service requests, and 171 compliments were managed during the year. While timeliness remains the most significant challenge, with 39% completed within target, the overall upheld rate of 48% demonstrates openness to acknowledging where practice can improve and ensuring fair resolution.

10.3 Effective complaint handling is a cornerstone of Oldham's Resident Focus agenda. Feedback from residents, both positive and negative, now directly informs policy review, training, and service redesign. Themes arising from complaints are considered alongside performance and inspection outcomes to ensure a single, evidence-based view of quality and impact.

10.4 This shift from reactive handling to proactive learning reflects the Council's ambition to become a genuinely resident-focused and learning organisation.

10.5 In 2025-2026, we will:

- Continue quarterly performance reporting to Scrutiny Board(s).
- Publish annual data and learning summaries to strengthen transparency.
- Integrate complaint, compliment, and service-request data into the Customer Experience Dashboard for a single view of customer experience.
- Launch a new case management system which will provide stronger reporting and learning from key themes and trends.

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- 10.6 Overall, 2024-2025 represents a turning point for Oldham Council's complaint handling, moving from fragmented systems toward a cohesive, insight-driven model. The groundwork laid through the Complaint Recovery Plan, improved governance, and clearer resident communication provides a strong foundation for sustained improvement in 2025-2026 and beyond.

11 Recommendation

- 11.1 It is recommended that Governance, Strategy and Resources Scrutiny Committee considers the report and comments as appropriate.

12 Appendices

- 12.1 Appendix A: LGSCO Annual Review Report (published separately)

<https://committees.oldham.gov.uk/documents/s154091/LGSCO%20Annual%20report%202024-25%20Final.pdf>