

Calderdale Council Complaints and Compliments Annual Report 2024/2025

1. Executive Summary

This report provides a comprehensive overview of Calderdale Council's handling of complaints and compliments during 2024/25. The Complaints and Compliments team is dedicated to managing feedback professionally, fostering continuous improvement and a strong customer focus across all services.

This new process sees the council move from a one stage complaint process to a two-stage process in which the council has implemented since April 2025, this is ahead of the deadline set by the Local Government and Social Care Ombudsman of 2026. This gives our complainants a fair opportunity to ensure their concerns have been addressed thoroughly with the right outcome.

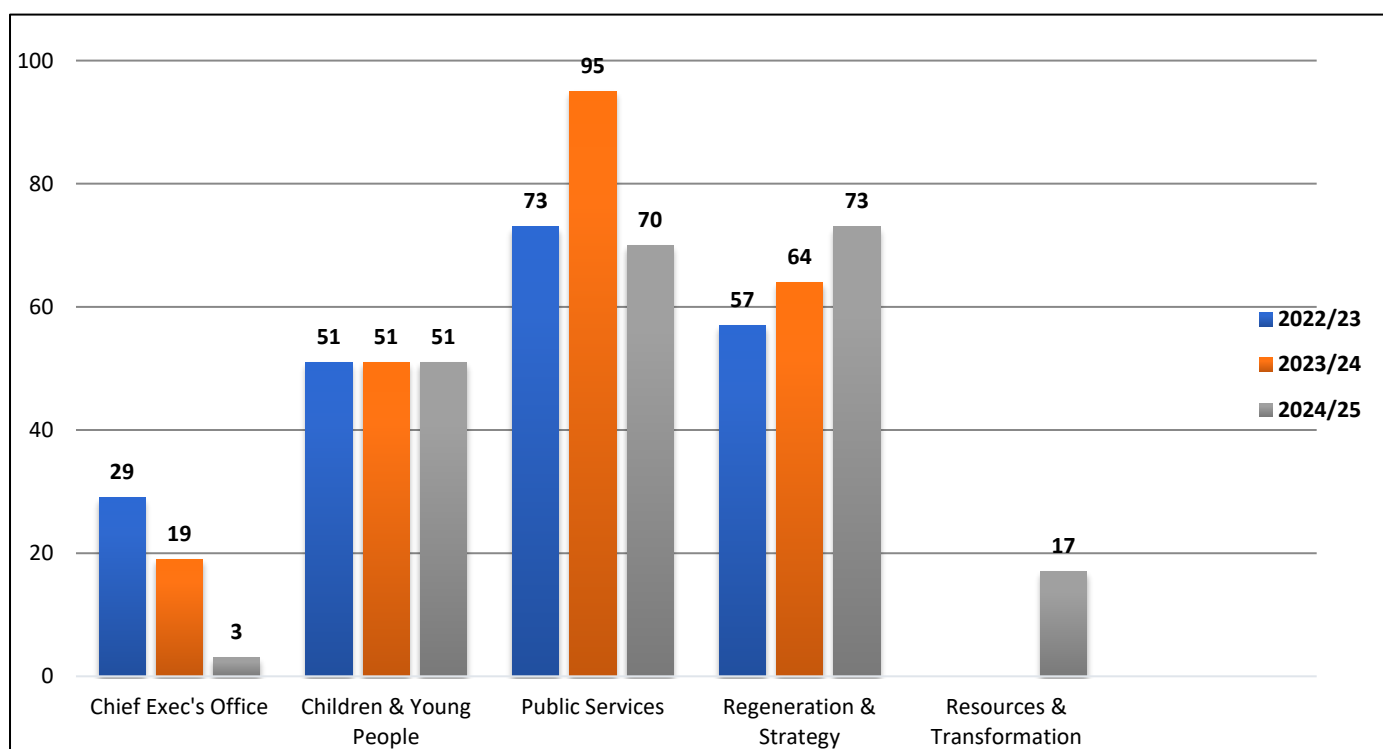
The Council manages thousands of customer interactions each year across various channels, with only a small proportion leading to formal complaints. This reflects a high standard of service. This reporting year we received a total of 529 contacts within the complaints team which were reviewed at service level rather than investigated as a complaint.

2. Corporate Complaints Overview

Please note, Adult Health and Social Care and Children's Social Care is not included in this section and is reported on further in the report.

2.1 Complaints Summary

Between 1 April 2024 and 31 March 2025, we received **214 complaints**. These are broken down by directorate:



The Resources and Transformation directorate, which was added in September 2023, is included for the first time this year. As a result, historical data for this directorate is not available.

The Children and Young People does not include complaints in relation to Children's Social Care and this is reported separately later in the report.

	2022/23	2023/24	2024/25
Chief Exec's Office	29	19	3
Children & Young People	51	51	51
Public Services	73	95	70
Regeneration & Strategy	57	64	73
Resources and Transformation – added in September 2023	N/A	N/A	17

Complaints rose in Regeneration & Strategy, especially in Design and Asset Management. There were reductions in Public Services and the Chief Executive's Office, while Children & Young People's Services remained stable.

2.2 Complaint Outcomes

Of the 214 complaints received:

- 50% were **upheld or partially upheld**
- 47% were **not upheld**
- 3% were **withdrawn**

Complaint outcomes by year and directorate are detailed in full in the original tables. The balance of upheld vs. not upheld has remained broadly stable over the past three years.

	Upheld			Partially Upheld			Not Upheld			Withdrawn		
	22/23	23/24	24/25	22/23	23/24	24/25	22/23	23/24	24/25	22/23	23/24	24/25
Chief Execs	6	4	0	6	3	2	14	10	1	3	2	0
CYPS	9	6	12	23	20	18	16	24	20	3	1	1
Public Services	16	31	15	17	22	24	31	36	28	9	5	3
Regen & Strategy	7	7	14	19	12	14	26	40	44	5	5	1
Resources & Transformation	N/A	N/A	1	N/A	N/A	7	N/A	N/A	8	N/A	N/A	1
Total	38	48	42	65	57	65	87	110	101	20	13	6

2.3 Type of Complaint

From the 208 complaints investigated (excluding withdrawals), the most common issues were:

- **Service level or quality:** 68 cases
- **Communication:** 64 (up from 20 last year due to improved recording methods)
- **Policy/decision making:** 53
- **Staff conduct:** 35
- **Service delay:** 19

Many complaints involved more than one issue, therefore the total is more than 208.

Summary of Key Themes by Directorate:

Children & Young People's Services

- Delays in EHCPs and education provision
- Concerns about communication, safeguarding, and emotional distress for families

Public Services

- Missed bin collections and poor follow-up
- Reports of discrimination and inconsistent treatment
- Accessibility challenges for disabled residents

Regeneration & Strategy

- Poor road conditions and flood response
- Delays in planning decisions and enforcement
- Issues in temporary housing and complaints about discrimination

Resources & Transformation

- Billing errors in council tax and business rates
- Problems with enforcement, probate-related charges, and communication breakdowns

3. Overview of Children's Social Care

3.1 Summary of Representations

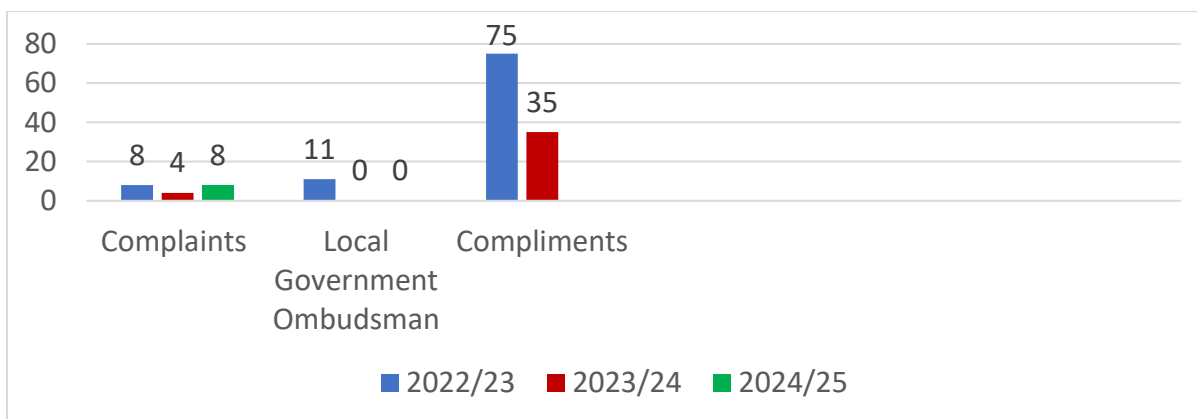
In 2024/25, Children's Social Care received:

- 8 complaints
- 19 compliments

No complaints progressed to the Ombudsman.

3.2 Year-on-Year Comparison

The graph below illustrates a three-year comparison of the representations received. The data shows an increase in the number of complaints from the previous year



	2022/23	2023/24	2024/25
Complaints	8	4	8
Local Government Ombudsman	11	0	0
Compliments	75	35	19

3.3 Statutory Complaints Process

The statutory complaints process for Children's and Young People's Social Care is designed to ensure thorough and fair handling at every stage. It consists of three stages:

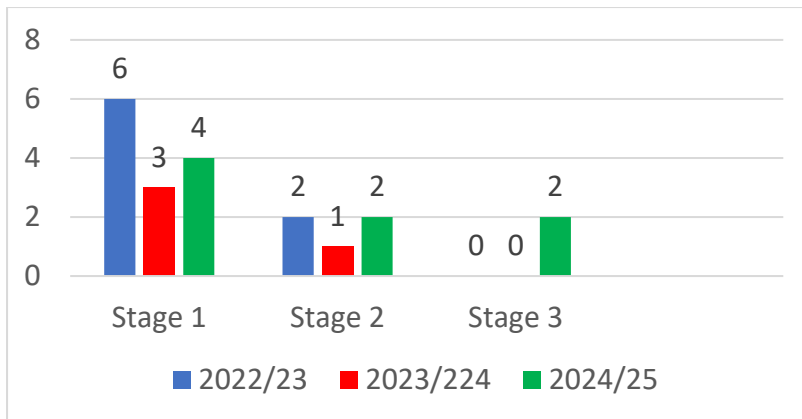
- **Stage 1:** An investigation is conducted by the relevant service area. If the complainant is dissatisfied with the outcome, they may escalate the complaint to Stage 2.
- **Stage 2:** An Independent Investigator and an officer not associated with the service area in question conduct the investigation. If the complainant remains unsatisfied, the complaint can proceed to Stage 3.
- **Stage 3:** This involves a review chaired by an Independent Chairperson, along with the Independent Investigator, the Independent Officer, two Independent Panel Members, and the Assistant Director.

3.4 Complaint Resolution

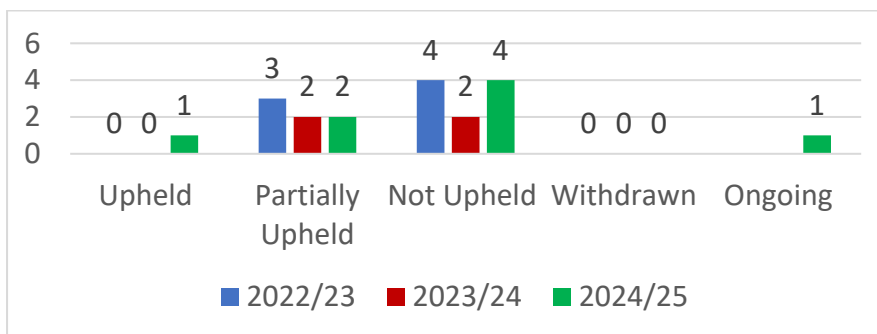
Of the 8 complaints received during 2024/25:

- **4 complaints were resolved at Stage 1:**
 - 2 complaints were partially upheld.
 - 2 complaints were not upheld.
- **2 complaints proceeded to Stage 2:**
 - 1 complaint was not upheld.
 - 1 complaint was upheld.
- **2 complaints proceeded to stage 3:**
 - 1 complaint was not upheld.
 - 1 complaint is ongoing

The accompanying graphs detail the number of complaints investigated and their outcomes over the last three years, providing insight into the effectiveness of the resolution process at each stage.



	2022/23	2023/2024	2024/2025
Stage 1	6	3	4
Stage 2	2	1	2
Stage 3	0	0	2



	2022/23	2023/24	2024/25
Upheld	0	0	1
Partially Upheld	3	2	2
Not Upheld	4	2	4
Withdrawn	0	0	0
Ongoing	0	0	1

4. Overview of Adult Services and Wellbeing

4.1 Summary of Representations

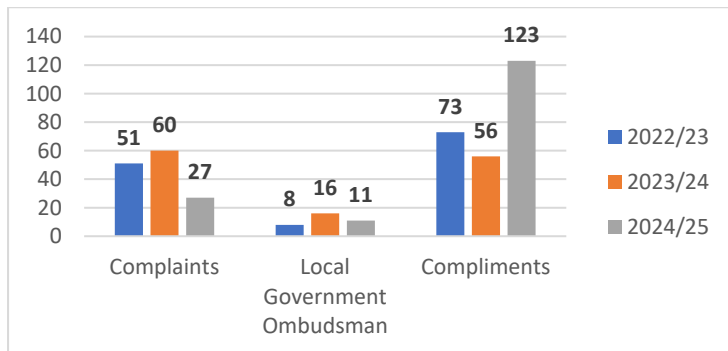
The Care Act 2014 requires local authorities to have procedures in place for managing representations about Adult Social Care services, whether raised directly by service users or by those acting on their behalf. It also places a duty on councils to ensure that learning from complaints is shared with management to support continuous service improvement.

In 2024/25, the service received:

- 27 complaints

- 123 compliments

11 complaints were referred to the Ombudsman.

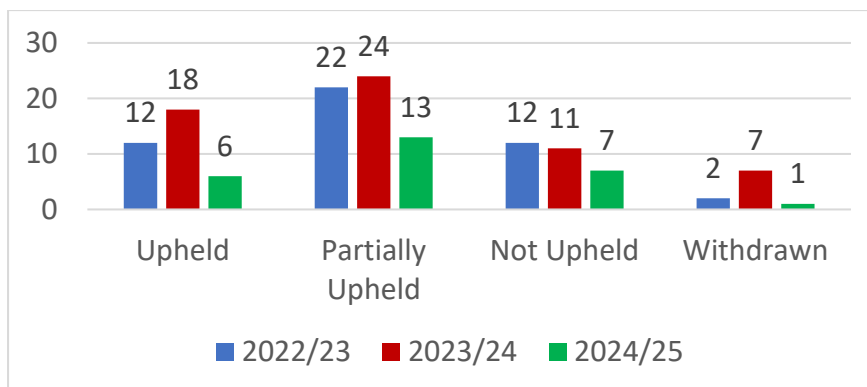


	2022/23	2023/24	2024/25
Complaints	51	60	27
Local Government Ombudsman	8	16	11
Compliments	73	56	123

4.2 Complaint Outcomes

Of the 27 complaints received:

- 19 were upheld or partially upheld.
- 7 were not upheld.
- 1 was withdrawn by the complainant.

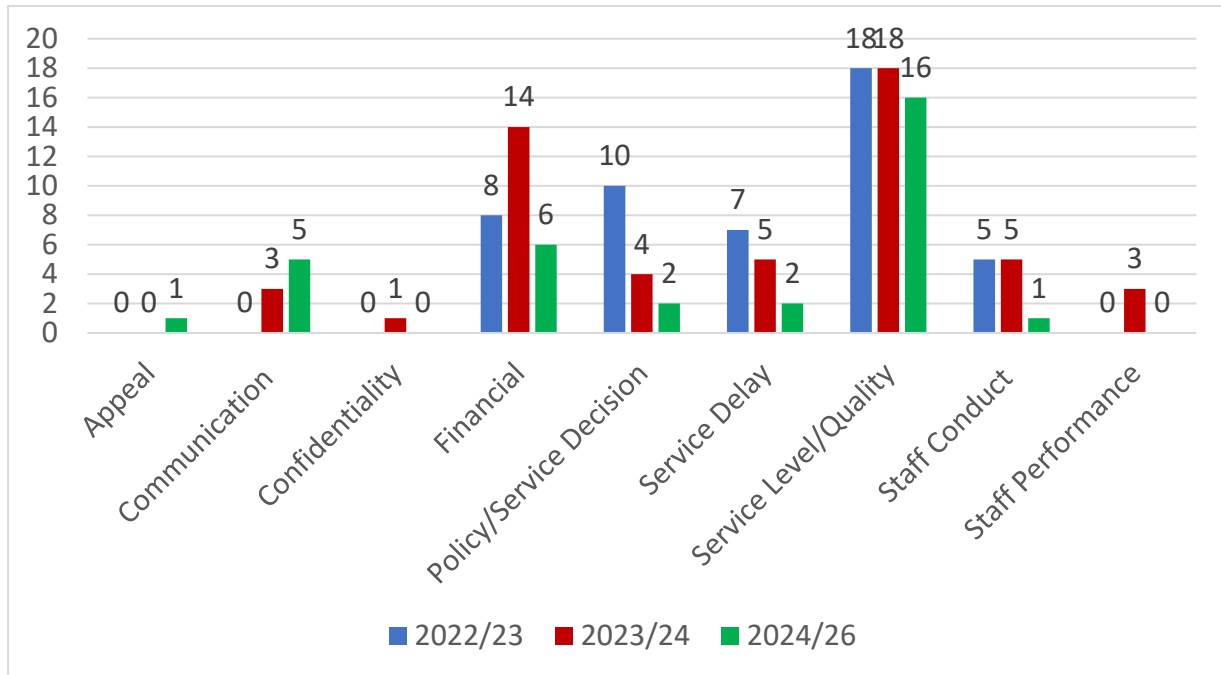


	2022/23	2023/24	2024/25
Upheld	12	18	6
Partially Upheld	22	24	13
Not Upheld	15	11	7
Withdrawn	2	7	1

4.3 Type of Complaint

The chart below categorises the types of complaints that were investigated (excluding the 1 that was withdrawn) and compares these categories against the previous three years.

Please note from April 2024, complaints may have more than one complaint category and therefore the total exceeds the number of complaints.



	2022/23	2023/24	2024/25
Appeal	0	0	1
Communication		0	3
Confidentiality		0	1
Financial		8	14
Policy/Service Decision		10	4
Service Delay		7	5
Service Level/Quality		18	18
Staff Conduct		5	5
Staff Performance		0	3

Service level/quality remains the most common complaint type, with 16 reported this year—similar to last year—and 12 of these were upheld or partially upheld. Communication complaints have increased slightly from 3 to 5 but remain low overall and will continue to be monitored. Financial complaints have decreased since last year, while policy, delay, and staff-related complaints have also declined.

This data helps target improvements and monitor ongoing issues, with the new multi-category approach from April 2024 providing more detailed insight going forward.

5. Introduction to Response Times

Timely and effective complaint resolution is a Council priority. The Complaints and Compliments Team collaborates with service managers to monitor performance, address delays, and drive improvements through regular reviews.

The Complaints and Compliments Lead attends Performance Board meetings, using complaint data to identify trends and support early intervention for better responsiveness.

The complaints database is being enhanced with features like automated email alerts to keep investigations on schedule and improve response times.

The team regularly monitors complaint resolution times and provides support or training when needed, ensuring efficient, professional handling that aligns with the Council’s commitment to excellent customer service and continuous improvement.

5.1 Corporate Response Times

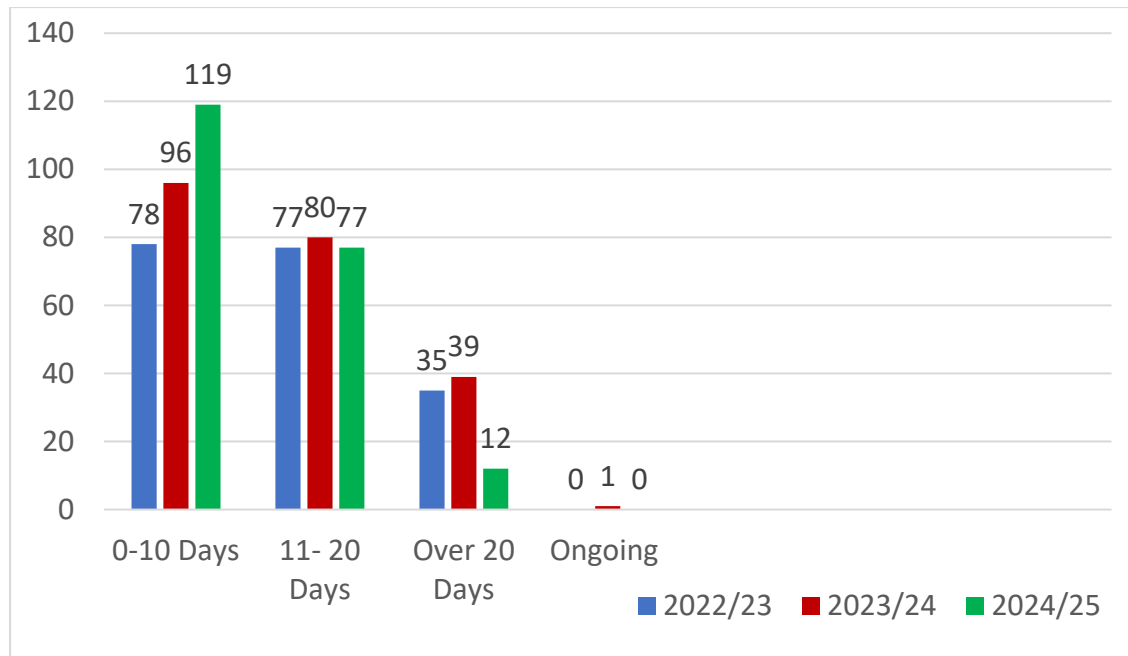
The Council is committed to resolving complaints promptly to maintain public trust. Investigators are expected to respond to the Complaints Team within 8 working days, ensuring the complainant receives a reply within the 10-working-day target. Extensions are rare and only for complex cases, with proactive communication to agree revised deadlines.

In 2024/25, average response times improved from 17 to 12 working days due to stronger monitoring, better case management, and cross-service collaboration.

Of 208 complaints investigated:

- 57% were resolved within 10 working days
- 37% took 11–20 working days
- 6% took over 20 working days

The Council will continue improving response times through targeted training stronger case management.



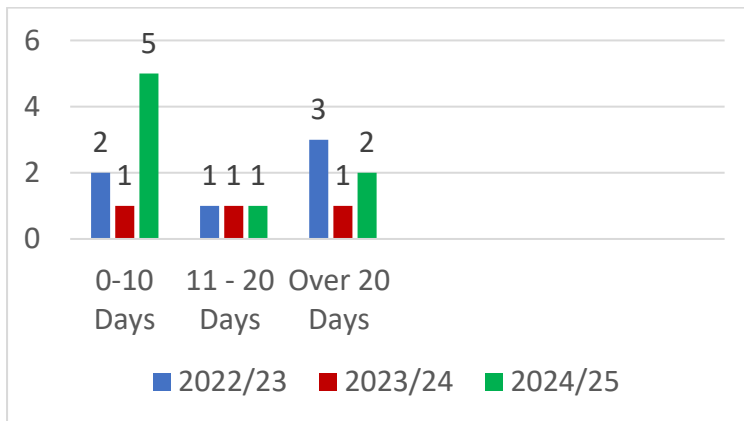
	2022/23	2023/24	2024/25
0-10 Days	78	96	119
11- 20 Days	77	80	77
Over 20 Days	35	39	12

Ongoing	0	1	0
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5.2 Children's Response Times

The Council prioritises prompt complaint responses to ensure fairness and maintain public confidence. Stage 1 Investigating Officers aim to respond within 10 working days, with extensions up to 20 days allowed only in complex cases, accompanied by clear communication to the complainant.

The graph below illustrates Stage 1 response times over the past three years, showing trends that guide ongoing service improvements.

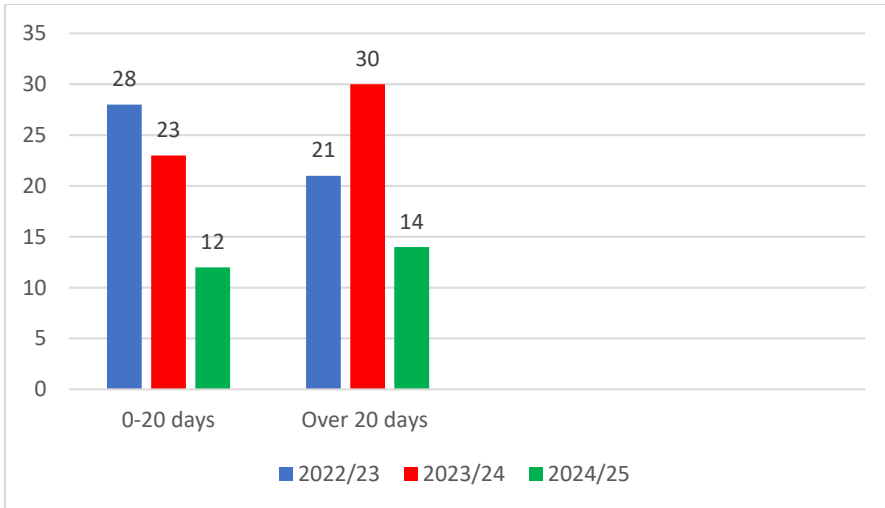


	2022/23	2023/24	2024/25
0-10 Days	2	1	5
11 - 20 Days	1	1	1
Over 20 Days	3	2	2

5.3 Adults Services and Wellbeing Response Times

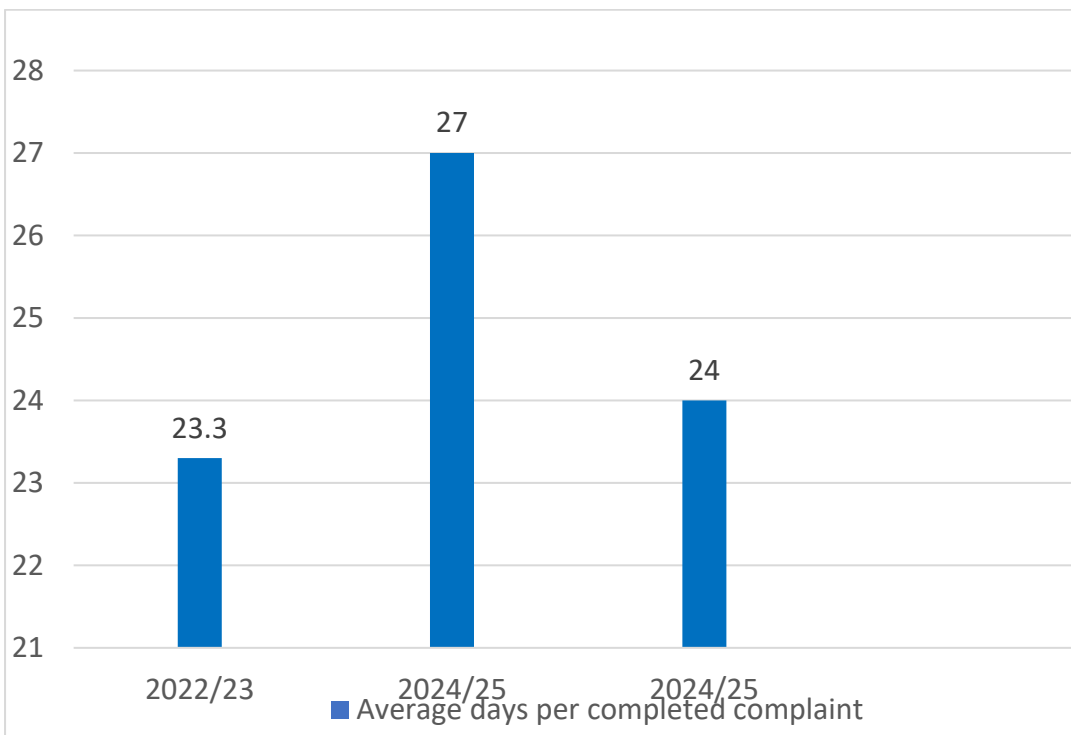
The statutory response time for Adult Health and Social Care complaints is set at 20 working days.

The accompanying graph shows the distribution of complaint resolutions over the past three years, highlighting the number of complaints concluded within 20 days versus those that extended beyond this period.



	2022/23	2023/24	2024/25
0-20 Days	28	23	12
Over 20 days	21	30	14

Additionally, the chart below provides a detailed comparison of the overall average response times for completed complaints across the service over the last three years. This data shows response times have improved this reporting period.

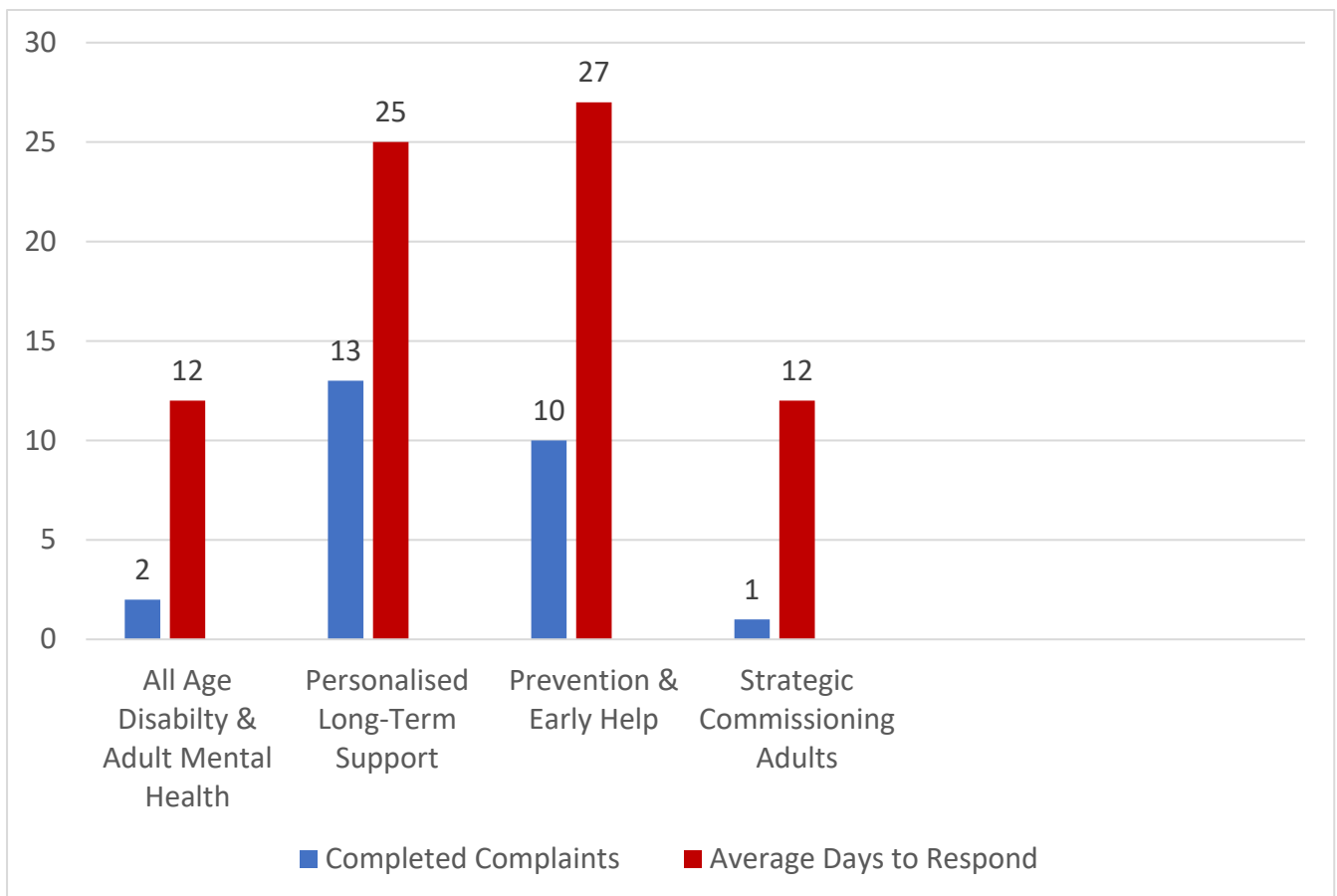


	Average days per completed complaint
2022/23	23.3
2023/24	27
2024/25	24

For the 2024/25 period, the analysis of the 26 (1 withdrawn) investigated complaints reveals the following:

- 12 cases were resolved within the 20-day statutory period.
- 14 cases required more than 20 days to reach a conclusion.

Of the 26 completed investigations, the average response times by service are displayed in the following graph:



	Completed Complaints	Average Days to Respond
All Age Disability & Adult Mental Health	2	12
Personalised Long-Term Support	13	25
Prevention & Early Help	10	27
Strategic Commissioning Adults	1	12

Further analysis shows Prevention and Early Help still has the longest average response times, as last year. Ongoing discussions with the directorate aim to identify ways to reduce these delays, which often stem from operational pressures and the need for thorough evidence gathering.

In contrast, the All-Age Disability & Adult Mental Health and Strategic Commissioning Adults teams consistently meet the 20-day response target, reflecting strong complaint management.

6. Compliments

The Council places great value on all forms of customer feedback, recognising that while resolving complaints is essential, it is equally important to celebrate the positive feedback we receive. Compliments not only highlight areas where we are performing well but also boost morale and reinforce good practices across our services.

To ensure that every piece of positive feedback is captured and recognised, the Complaints and Compliments team regularly sends reminders to all departments. These reminders encourage staff to forward any compliments they receive, ensuring that these acknowledgments are logged and shared appropriately. This process helps maintain a culture of appreciation and continuous improvement within the Council.

The continued emphasis on capturing and recognising compliments ensures that positive feedback remains an integral part of our Customer Experience Framework, helping to reinforce the practices that lead to excellent service delivery.

6.1 Corporate Compliments

During the reporting period, a total of 305 compliments were received across various directorates. The table below provides a breakdown of compliments by directorate, compared with data from the previous two years:

Directorate	Compliments 2022/23	Compliments 2023/24	Compliments 2024/25
Chief Executives Office	3	3	2
Children & Young People Service (Not Social Care)	14	35	25
Public Services	219	77	206
Regeneration & Strategy	25	35	54
Resources & Transformation	N/A	8	18
Total	261	158	305

6.2 Children's Social Care Compliments

In 2023/24, Children's Services received 35 compliments, reflecting the positive impact of the services provided. The table below shows the number of compliments received over the last three years:

	2022/23	2023/24	2024/25
Children's Social Care	75	35	19

6.3 Adults Services and Wellbeing Compliments

Adult Services and Wellbeing received 56 compliments during this reporting period.

	2022/23	2023/24	2024/25
Adult Services and Wellbeing	73	56	123

7. Training and Development

Since September 2024, mandatory training for all investigating officers has focused on effective complaint handling and compliance with the Local Government and Social Care Ombudsman (LGO) code.

Key objectives include:

- Empowering staff to resolve issues early and reduce complaints.
- Increasing local resolutions to limit LGO involvement.
- Speeding up complaint resolution for better outcomes.
- Implementing the new two-stage complaint process from April 2025.

Additionally, the Council is developing training on Customer Excellence and Preventing Complaints, aligned with the Customer Experience Framework, to promote “getting it right first time” through improved customer service and early issue prevention.

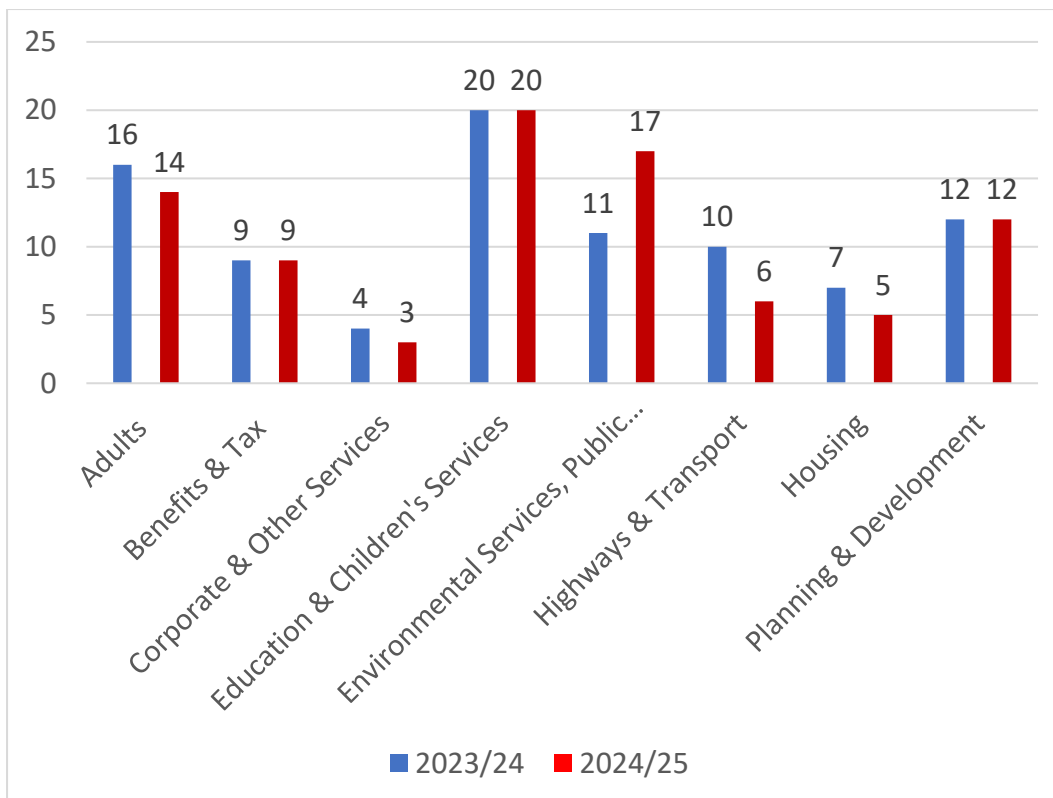
These programs will be regularly updated to maintain relevance and best practice, aiming to enhance complaint resolution quality and reduce escalation.

8. LGO (Local Government Ombudsman) Complaints Summary 2024/2025

8.1 Overview of LGO Complaints

Summary:

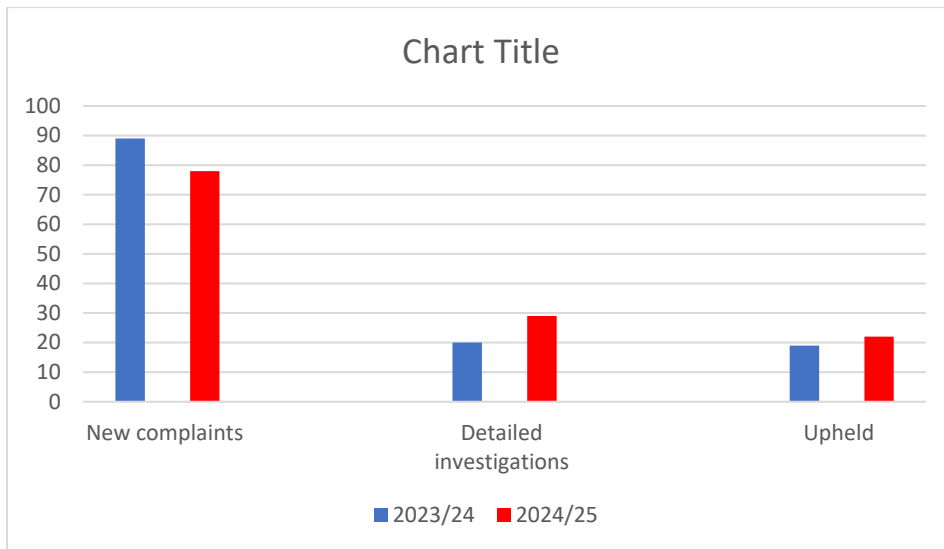
In the 2024/25 period, there was a decrease in the number of complaints and inquiries received by the LGO, decreasing from 89 in 2023/24 to 86 in 2024/25. The below graph provides a detailed breakdown of these complaints by service type.



	2023/24	2024/25
Adults	16	14
Benefits & Tax	9	9
Corporate & Other Services	4	3
Education & Children's Services	20	20
Environmental Services, Public Protection & Regulation	11	17
Highways & Transport	10	6
Housing	7	5
Planning & Development	12	12

Key Points:

- **Complexity of Cases:** Some complaints require extensive input from external parties and the LGO, causing delays in closure across reporting periods—consistent with last year.
- **Detailed Investigations:** The LGO conducted 29 detailed investigations in 2024/25, up from 20 the previous year. The uphold rate decreased from 95% to 76%, reflecting a stronger commitment to resolving issues effectively at the local level.
- **Comparison with National Averages:** Calderdale's 76% uphold rate is below the national average of 81% for similar authorities. The accompanying graph shows year-on-year trends.



	New complaints	Detailed investigations	Upheld
2023/24	89	20	19
2024/25	78	29	22

- Some complaints fall outside the Ombudsman’s jurisdiction due to governance or legal frameworks.
- Complaints may be referred back to the Council if the complainant hasn’t first used the Council’s complaint process.

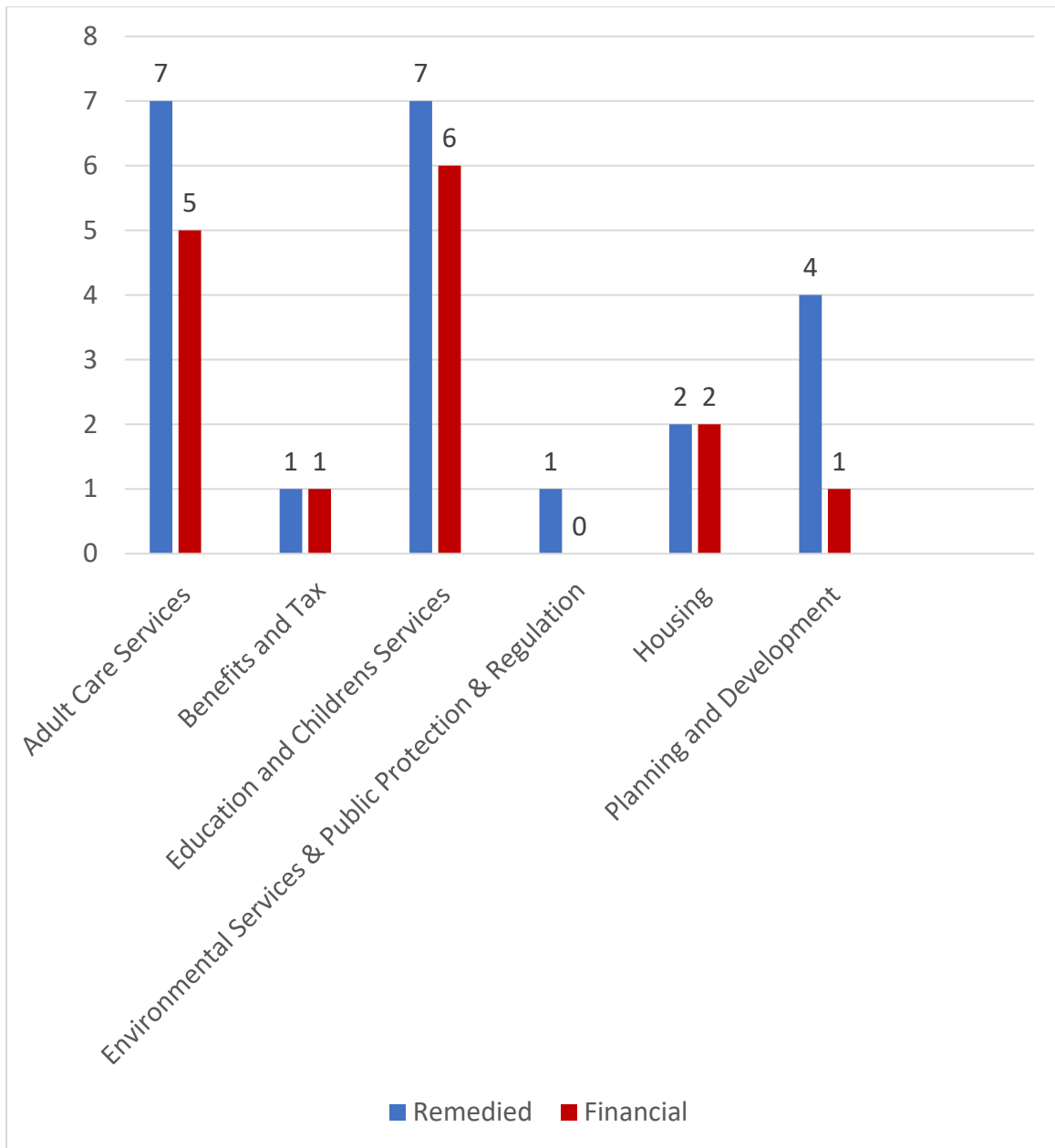
8.2 Remedies for Upheld Complaints

Summary:

In 2024/25, the Local Government and Social Care Ombudsman (LGO) upheld 22 complaints. Of these, 20 included specific recommendations for remedy, while 2 were resolved satisfactorily at the assessment stage but are still recorded in official statistics.

Key Points:

- Remedies included apologies, staff training, procedure reviews, and policy changes.
- Financial remedies were recommended in 68% of upheld cases (15 out of 22), down from 94% the previous year.



	Remedied	Financial
Adult Care Services	7	5
Benefits and Tax	1	1
Education and Children's Services	7	6
Environmental Services, Public Protections and Regulation	1	0
Housing	2	2
Planning and Development	4	1

Case Examples:

- **Adult Health and Social Care:** Fault found due to delays and failure to properly assess care needs.
- **Children and Young People’s Services:** Failure to consider duties under Section 19 of the Education Act when a child couldn’t attend school full time.
- **Housing:** A complainant was kept in bed and breakfast accommodation beyond policy limits and moved to unsuitable temporary housing before returning.
- **Planning:** Failure to keep the complainant informed about enforcement decisions.

8.3 Late Compliance

Summary:

The LGO reports 19 remedies, of which 16 (84%) were completed on time. Three remedies were implemented after the required deadline.

Action Taken:

Following this, the Council has implemented an internal action plan to reduce the risk of late compliance. This includes:

- The Complaints and Compliments Lead Officer now monitors all Ombudsman recommendations and deadlines.
- A tracking process has been established to ensure timely responses and early intervention if delays are anticipated.

8.4 Feedback from the Ombudsman

There were several occasions during the year where LGO investigations were delayed by our failure to provide information on time. Eight extension requests were made, including six from Adult Social Care, due to case complexity. All were agreed with the Ombudsman, and responses were provided within the revised deadlines, though still marked as 'late' in the LGO reporting.

This has been clearly communicated by the Complaints Team in training, updates, and service briefings to ensure staff understand the reputational impact and the importance of minimising delays wherever possible.

Two complaints highlighted process failings, including a case where the Children’s Statutory Complaints Procedure was not correctly followed. This is being addressed through targeted procedural training and review.

8.5 Performance Comparison

Summary:

Calderdale’s uphold rate of 76% is lower than the national average of 81%

Local Authority	Detailed Investigations	Investigations Upheld	% Upheld
Leeds	68	62	91%
Bradford	34	26	76%
Calderdale	29	22	76%
Kirklees	17	16	94%
Wakefield	10	6	60%

8.5 Actions:

The Complaints and Compliments Lead and Customer Access Manager have identified priority areas to improve performance and reduce uphold rates. Proposed focus areas include:

- **Enhancing Early Resolution:**

Resolving issues before escalation to the Ombudsman through proactive engagement and local settlement. This includes reviewing Adult Social Care's resourcing and capacity for complaint handling,

- **Improving Decision Quality:**

Regular internal audits of upheld complaints to identify root causes and systemic gaps, supported by ongoing LGO updates and learning reports to the Corporate Leadership Team.

- **Targeted Training:**

Developing training modules based on past LGO findings, especially for teams with higher uphold rates, and offering LGO complaint handling training to key officers by October 2025.

- **Clear Communication:**

Ensuring decision letters and service explanations are easily understood and fully reasoned.

- **Benchmarking:**

Monitoring performance against regional peers and national data to identify areas of strength and concern.

- **Timeliness and Expectations:**

Continuing to reinforce LGO expectations on timescales and appropriate use of extensions through regular training and briefings.

8.6 Conclusion

This year's review demonstrates that Calderdale is moving in the right direction: fewer complaints upheld, continued service-wide learning, and a proactive approach to reform. While we have areas to improve — particularly regarding early-stage remedies — we are well positioned to build on this progress through ongoing training, strengthened governance, and continued cross-service commitment.