

# **Intake Team Manual**

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## Version Control

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1 January 2013	1.0	Drafted by JB
1 February 2013	2.0	Added workflow, quality, complaints and flowcharts
25 February 2013	3.0	Added CYP, tasks, amended flowcharts and reasons
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# 1 The Intake Team

## 1.1 Purpose

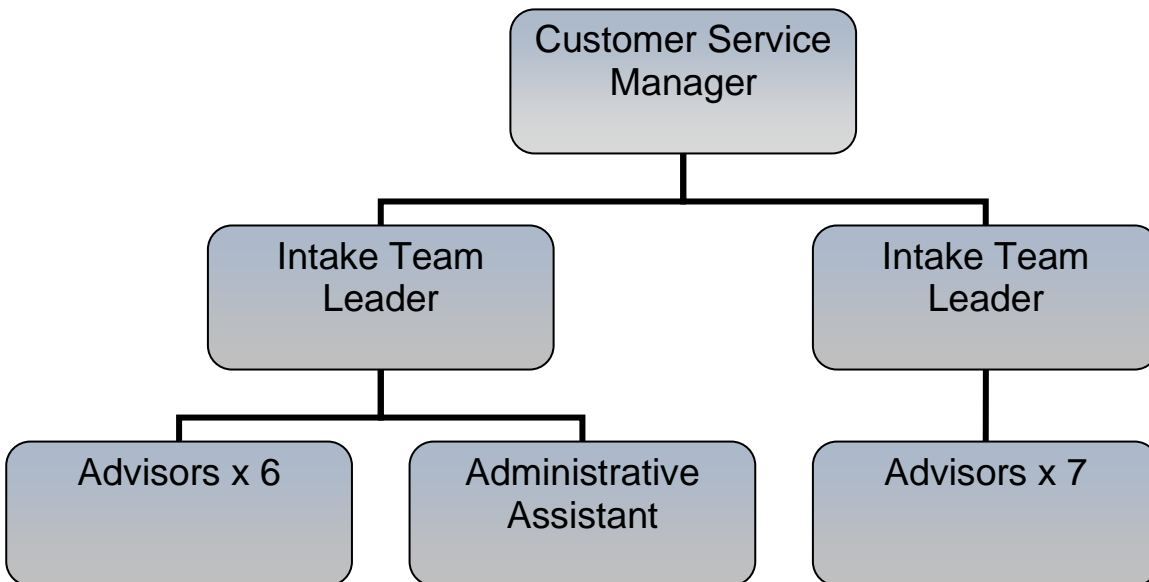
The Intake team are the gateway to accessing the services of the Local Government and Social Care Ombudsman.

The objective is to provide an accessible and knowledgeable front-line service to members of the public. The team handle all new enquiries and re-submitted complaints via phone, online and post.

Their role is to identify premature complaints, to filter out all misdirected and incomplete contacts and to send viable complaints to the Assessment Team.

## 1.2 Structure

The Customer Service Manager leads two Intake Team Leaders (ITLs) and 13 Complaints Advisors (CAs) and one Administrative Assistant. The ITLs supervise the advisors and lead day-to-day operations, as well as delivering a personal share of the team's first contact work.



There are two reporting lines for management purposes, however the team will act as one unit. There are three major tasks – phones, post, and electronic correspondence. The ITLs will assign and rotate these responsibilities daily or weekly according to resource and demand.

Advisors will deliver all aspects of the role to maximise flexibility to respond to changing patterns of demand.

## 2 Scope of Intake Work

### 2.1 Introduction

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The team will address three key questions about every enquiry:

- is it a matter that might be for the LGSCO (rather than another body)?
- is it obviously premature? and
- is there enough basic information to make it viable to pass on to the Assessment Team?

Intake will also:

- Enter all new enquiry details onto ECHO
- Robustly filter out all misdirected, incomplete and incomprehensible contacts
- Identify and screen out most premature complaints
- Make enquires to BinJs regarding prematurity
- Handle the majority of re-submitted complaints
- Will seek consent to handle complaints from anyone other than the PA
- Process joint working referrals from the Parliamentary and Health Service Ombudsman
- Manage expectations about the role of the LGSCO
- Pass on complaints containing enough information to Assessment

Intake will *not*:

- Provide an update and enquiry service about continuing complaints that are elsewhere in the LGSCO process.
- Have personal caseloads.
- Seek any documents from the complainant other than consent forms. A note will be recorded in the 'Notes and Analysis' section to highlight availability of other documents.
- Refer premature complaints to the BinJ, other than in a few exceptional cases.

### 2.2 Delegated Authority

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ITLs and Advisors have delegated authority to decide whether a complaint is premature.

They also have the authority to accept complaints orally and to override the need for complaints to be made in writing.

### 2.3 Outputs from the Intake Team

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The possible outcomes to any new enquiries are:

- **Premature** – complaints that are clearly premature based on the evidence presented by, the complainant or received following enquiries with the BINJ
- **Non LGSCO** – complaints that are 'not for us' eg consumer complaints for trading standards, utility complaints, or complaints that are for other ombudsman schemes, such as FOS.
- An **Incomplete enquiry** – complaints where we do not have enough information to continue and where we cannot get it from a single outbound call.

- A **Viable enquiry** – complaints that may be ‘for us’, are not obviously premature, and have enough information to continue to the next stage.

The decision making process is also described in flow chart format in the [appendix](#) of this document.

### **2.3.1 Premature complaints**

For telephone enquiries, the advisor will explore whether the complaint is premature in direct conversation with the complainant.

If the complaint is clearly premature, the advisor will make a formal premature decision and advise the caller to contact the BinJ directly. Where a case record is required, the advisor will send a premature decision letter and a factsheet to the caller as confirmation.

When complaints are presented by web-form or post, the advisor will judge prematurity based on the information supplied by the complainant.

Where prematurity is clear, the advisor will send a premature decision letter and factsheet to the complainant confirming the complaint is premature.

If the status of a complaint cannot be established, then the advisor can make an enquiry to the binj to establish prematurity.

#### **2.3.1.1 Premature referrals to the BinJ**

Intake will not refer premature complaints to the BinJ for the person affected (PA) other than in a few exceptional cases. For example, where the complainant cannot make the complaint to the BinJ or where there would be merit in our referring it on their behalf.

### **2.3.2 ‘Non LGSCO’ complaints**

Intake will assess each enquiry to consider whether it is for the LGSCO or whether it is a misdirected enquiry regarding a body that is not within jurisdiction.

Where the matter is not for us (e.g. complaints that are entirely for other Ombudsman schemes, such as PHSO or HOS,) then a basic signposting service will be offered to the complainant.

See also: [Section 2.5 - Signposting](#)

### **2.3.3 ‘Incomplete Enquiries’**

Where there is not enough information to make a decision, the advisor will make a single outbound call to try to establish the missing information.

If that call is not successful, the advisor will, wherever possible, send the complainant a ‘please phone’ email/letter asking the complainant to contact us. The complaint will be closed on ECHO as ‘insufficient information to proceed and PA advised’

When the complainant later calls back to provide the necessary information, the advisor will re-open the case and treat it accordingly.

See also: [Section 2.4 - Outbound Calls](#)

### 2.3.4 'Viable Enquiries'

Intake will only transfer 'viable enquiries' to Assessment. A 'viable enquiry' is a complaint that contains enough information to enable it to be processed at the next stage. This means that no complaint will go to Assessment from Intake unless, as a minimum, it contains:

- enough contact details to get in touch with the complainant (name and either: phone number, email or postal address – ideally all of these)
- a 'reason for contacting the LGSCO' showing the complaint 'may be for us'. The reason is recorded directly in the 'Initial Information' screen on ECHO
- Consent from the PA where applicable
- a BinJ, and
- an assigned top-level complaint category (and wherever possible a second level category).

#### 2.3.4.1 Re-Submissions

Intake will only accept re-submissions of premature complaints when either:

- the BinJ's complaints process is complete, and the complainant can tell us the result of that process, or
- sufficient time has elapsed with no reasonable progress made towards resolving the complaint. The complainant's own failure or refusal to cooperate with the BinJ's complaints process will not be an acceptable reason to accept re-submission.

With regard to resubmitted complaints, if the complainant:

- Contacts Intake with a final response then – regardless of who took the premature decision – the advisor will resubmit the complaint and send it to Assessment
- Contacts Intake and Assessment took the original decision but there is no final response - then the advisor will set a task for the Team Coordinator
- Contacts Assessment directly because they took the original premature decision - then Assessment should treat the complaint as resubmitted.

#### 2.3.4.2 Complaints that are perceived to be urgent

Intake should not send complaints to Assessment based on a complaints perceived urgency. The LGSCO is not an emergency service and often a BinJ is usually in the best position to help resolve a complaint.

Advisors have the discretion to decide whether a complainant needs help and can assist them to make their complaint to the BinJ. They may also seek advice from the Assessment Team's embedded investigator if they are unsure about any particular issues.

However, there may be exceptional circumstances whereby the advisor considers that there is merit in an Assessment investigator making further enquiries. The advisor can then send the complaint to Assessment but there needs to be a full explanation on the case as to the reasons why.

### 2.3.5 Additional Correspondence

Intake will strongly discourage complainants from sending unsolicited documents. In addition, we will make it clear that we will not usually return any correspondence and that no original or valuable documents should be sent to us unless specified.

Complainants will be requested to only attach their last letter from the BinJ to their complaint. Where complainants say that they have extra material, a note will be made by the advisor to show what is

available – they will not ask for documents to be sent to them and will tell complainants to only send material if it is specifically requested.

Incidental material sent by the complainant or the BinJ will be added to the case record but will not respond unless it fulfils the criteria for any other action.

## 2.4 Outbound Calls

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If the contents or status of a complaint cannot be established from the information presented, the advisor will where possible, try a single outbound phone call to the complainant to clarify the position.

This call will (as needed):

- clarify the complainant's contact details and the reason they have contacted us
- check for, and remove, obvious premature cases
- check consent status and ask for relevant consent docs where applicable
- seek to clarify enquiries which are incomplete or incomprehensible
- identify and remove enquiries which are clearly for other bodies ('not for us' complaints), and
- where the complaint looks like it is 'for us', it will also check for reasonable adjustments, manage expectations, and send fact sheets where appropriate.

If a call is unsuccessful and there is not enough information to form a 'viable enquiry' then the advisor will send out a 'please phone' letter as required.

The notes and analysis screen will show all actions made in relation to the enquiry.

Where the complainant's details, the prematurity status of the complaint, and the 'reason for contacting the LGSCO', are clear then no outbound call is needed.

## 2.5 Signposting

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We do not offer a general advice service for the public and we will only provide a limited signposting service for callers who are 'not for us'.

Intake will provide complainants with the contact details for the most frequently signposted organisations. In all other cases, advisors will signpost complainants to Gov.uk and Citizen's Advice to continue their complaint elsewhere. Standard auto texts are available to provide this advice by post or email.

## 2.6 Dealing with representatives

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Intake may receive complaints from people acting on behalf of the PA. These persons may be nominated representatives, advocate services, solicitors or MPs.

Advisors will where possible discuss with the representative whether the PA has capacity to provide consent and send consent forms. The question of consent and capacity should always be asked but if the PA does not have capacity to provide consent then the case can go to AT with a task for ATC to make them aware of the consent issue.

### 2.6.1 Advocates and representatives

The advisor should deal with the advocate or representative directly unless otherwise specified.



If the advisor is sending a complaint to the body in jurisdiction as premature (consent must be in place beforehand) then it is important to highlight that the complaint is being made on behalf of the complainant. This is best communicated by amending the first line of the Council's letter as follows:

*“A complaint against your Council has been received from x on behalf of z”*

## 2.6.2 Solicitors

The service that the LGSCO provide is free and accessible therefore it is not deemed necessary for a person to present a complaint to us via a solicitor.

If the Ombudsman was to uphold a complaint, it is unlikely that the solicitor's fees will be included in any recommended remedy, unless there were exceptional circumstances.

This should be explained in the initial correspondence if sent to a solicitor.

## 2.6.3 MPs

MPs often refer complaints to the LGSCO on behalf of their constituents. Unless otherwise specified, we will deal directly with the PA and send copies of the correspondence with a covering letter to the MP.

# 3 Record Keeping and ECHO

## 3.1 Introduction

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ECHO is our case management system and is the primary record for all complaints. All material which may be relevant to our decision making will be retained within ECHO.

Case emails will be sent from ECHO.

Confidential material must be scanned in separately, with DO NOT DISCLOSE in the name and placed in the relevant virtual folder.

Incidental, unsolicited and irrelevant material will be added to the ECHO record but not responded to.

All staff are responsible for the security of information relating to complaints.

## 3.2 Call Recording

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Voxivo is Intake's call management system. All calls to and from the Intake Team are recorded for training and monitoring purposes.

All calls are retained for 30 days before being automatically deleted by the Voxivo system.

See also: [Retention and disposal of casework records policy](#)

# 4 Managing Expectations

Intake are expected to manage the expectations of all complainants.

Advisors must provide a clear explanation of our processes, any timescales involved or anything else that may affect the handling of a complaint.

This includes identifying any potential jurisdictional issues. However, Intake only have delegated authority to decide whether a complaint is premature and to accept a complaint orally rather than in writing.

If potential jurisdictional issues are identified, then the complaint should be sent straight to the Assessment Team. Advisors should do this by explaining that an Assessment investigator will need to review the case in order to make the necessary judgement about jurisdiction (and prematurity if applicable)

In these circumstances, advisor's need to be careful to use 'non-committal' wording so as not to create any formal decisions on their part or to raise the complainant's expectations.

## 5 Reasonable Adjustments

Intake are expected to identify and act on any reasonable adjustments that are required by the complainant to access our services.

Any reasonable adjustments that have been identified must be entered into the Reasonable Adjustments screen on ECHO. This information will appear in red on the header of the case summary screen.

See also: Reasonable Adjustments [available to Ombudsman staff on the intranet]

## 6 Children and Young People

Advisors will, wherever possible, identify complaints received from Children and Young People.

These complaints are from persons that are:

- younger than 18 years
- aged between 18 years and 25 years where there are special features in the matter indicating vulnerability (such as disability)

Where a CYP complaint is identified, the advisor will apply the usual procedures for processing the complaint. It is accepted that an advisor may not always be able to identify whether a complainant falls into these categories.

Complaints made by persons with parental responsibility, foster carers or those who have 'sufficient interest in the child's welfare' may not be CYP complaints.

## 7 Inappropriate behaviour

### 7.1 Unreasonable behaviour

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Unreasonably persistent behaviour is characterised by someone trying to dominate our attention with frequent, lengthy contacts and repetitive information.

If an advisor thinks the nature or frequency of a complainant's contact is unwarranted and unhelpful they should normally flag the case to an ITL who will consider appropriate steps towards moderating the complainant's behaviour.

Notes should also be placed on ECHO to alert the next person who may have to deal with the person in question.

If a complainant persists it should be discussed with the Customer Service Manager who will decide on the next course of action which could include restricting access.

## 7.2 Unacceptable Behaviour

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Unacceptable behaviour includes deceitful, abusive, threatening or similar actions that adversely affect the capacity and well being of staff.

Intake may receive written or email correspondence that contains offensive material. If this happens it should be brought to the attention of a Team Leader. The Team Leader will then consider whether it is necessary to write to the person to draw attention to the offensive remarks and ask them to stop.

In addition, the oral behaviour of complainants may be deemed to be unacceptable. Where offensive or abusive remarks are made over the telephone, the advisor should try to control the situation by asking the caller to stop making such remarks otherwise their call may be terminated.

If the offensive language continues then it is acceptable for the advisor to prematurely finish the call if they see fit.

If an advisor ends a call for these reasons, the advisor will record the incident and flag it to the ITL who will then decide if further action is required.

Wherever possible, notes should also be placed on ECHO to alert the next person who may have to deal with the person in question.

For further guidance on how to deal with these situations see: Guidance on managing unreasonable complainant conduct [available to Ombudsman staff on the intranet]

## 8 The welfare of staff and inappropriate and disruptive behaviour

We take the welfare of staff seriously and will make all reasonable efforts to protect them from potential harm. Sometimes we receive offensive material and comments or face inappropriate or disruptive behaviour.

For further guidance on how to deal with these situations see:

- Instructions on health and safety [available to Ombudsman staff on the intranet]
- Guidance on managing unreasonable complainant conduct [available to Ombudsman staff on the intranet]

## 9 Safeguarding

Safeguarding concerns may arise at any stage of the investigation process and may not have been evident to staff in Intake or Assessment. All staff must be aware of safeguarding protocols and make referrals in all appropriate cases. Guidance on safeguarding is available [to Ombudsman staff on the intranet].

## 10 Challenges and Staff Conduct Complaints

### 10.1 Introduction

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All complaints and comebacks about Intake will be dealt with in accordance with the organisation's policy for dealing with complaints.

Complaints can be presented to us orally or in writing and can be administered by any member of Intake staff. If the complainant prefers to email their complaint they can do so by emailing [intakemanagers@lgo.org.uk](mailto:intakemanagers@lgo.org.uk)

Regardless of whether it is a challenge to a decision or a service complaint, the matter then will be dealt with by the individual's line manager in the first instance.

Any challenge to a decision or complaint about staff conduct should be made to us within one month of the event being complained about.

### 10.2 Challenges to Intake decisions

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The advisor taking the complaint will record the contact on the existing ECHO record and set the 'Intake Comeback' task for the relevant ITL with a five working day target date.

If the line manager is absent, then it will be for the second ITL to deal with. In the unlikely absence of both ITLs, then the CSM will respond.

Challenges to decisions fall under the normal timescales of 5 working days to acknowledge and 20 working days to provide a full response.

The ITL will then review the complaint and will decide whether they can respond quickly to resolve the issue.

If the complaint can be responded to fully within 5 working days then there is no requirement for an acknowledgement letter. If extra time is needed, a holding letter should be sent within the 20 working day deadline.

If extra time is needed, they will need to send a standard acknowledgement letter.

The acknowledgment letter will explain why that person is responding and that a full response can be expected within 20 working days. This letter should be sent within five working days of receipt of the challenge.

If extra time is needed, a holding letter should be sent within the 20 working day deadline.

The second ITL will review the first ITL's decision if that decision was made upon the complainant's first contact (e.g. the first ITL made the initial decision that a case was premature).

If the ITL has already had significant involvement (i.e. the complaint is a second challenge to a decision) then the recipient of the complaint should task the CSM to ask them to review the challenge.

At any point the ITL may also request that the CSM respond.

Any further complaints in relation to these matters will then be escalated to the CSM who will apply the same principles in their own response. Unless the CSM disagrees with the action taken then the response will be concise and supportive of the decision.

The CSM is the final stage of the process and no further challenges about the same issues will be considered.

### 10.3 Service complaints about advisors

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The advisor taking the complaint will record the contact on the existing ECHO record and set the 'PA call back required' task for the relevant ITL with a five day target date.

If the line manager is absent, then it will be for the second ITL to deal with. In the unlikely absence of both ITL's, then the CSM will respond.

ITL's are committed to contacting the complainant within 24 hours of them making the complaint. If the ITL is unable to resolve the complaint at this early stage then the complaint will fall under the normal timescales. Those timescales being 5 working days for acknowledging the complaint and 20 working days to provide a full response.

An acknowledgment letter will explain why that person is responding and that a full response can be expected within 20 working days. This letter should be sent within five working days of receipt of the service complaint.

If the complaint can be responded to fully within 5 working days then there is no requirement for an acknowledgment letter. If extra time is needed, a holding letter should be sent within the 20 working day deadline.

At any point the ITL may also request that the CSM respond.

Any further complaints in relation to these matters will then be escalated to the CSM who will apply the same principles in their own response. Unless the CSM disagrees with the action taken then the response will be concise and supportive of the decision.

### 10.4 Service complaints about Intake Team Leaders

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The advisor/ITL taking the complaint will record the contact on the existing ECHO record set the 'Contact PA' task for the CSM with a twenty day target date.

The complaint falls under the normal timescales and the CSM will acknowledge the complaint within 5 working days and provide a full response within 20 working days.

See also: [PDR and Service Complaints Manual](#)

## 11 Targets and Performance Indicators

### 11.1 Introduction

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Service standards and performance indicators are as follows:

- Answer 95% of calls within 1 minute
- Answer 98% of calls presented to Intake Team
- Monthly monitoring of average call handling times
- All postal and online complaints must be accepted, recorded and a decision made against one of the four outputs within one day of receipt.

- Carry out four quality monitoring reviews per advisor and ITL per business year.
- Monthly volumes and SLAs to be reported to the Executive Team

## 11.2 Quality Monitoring

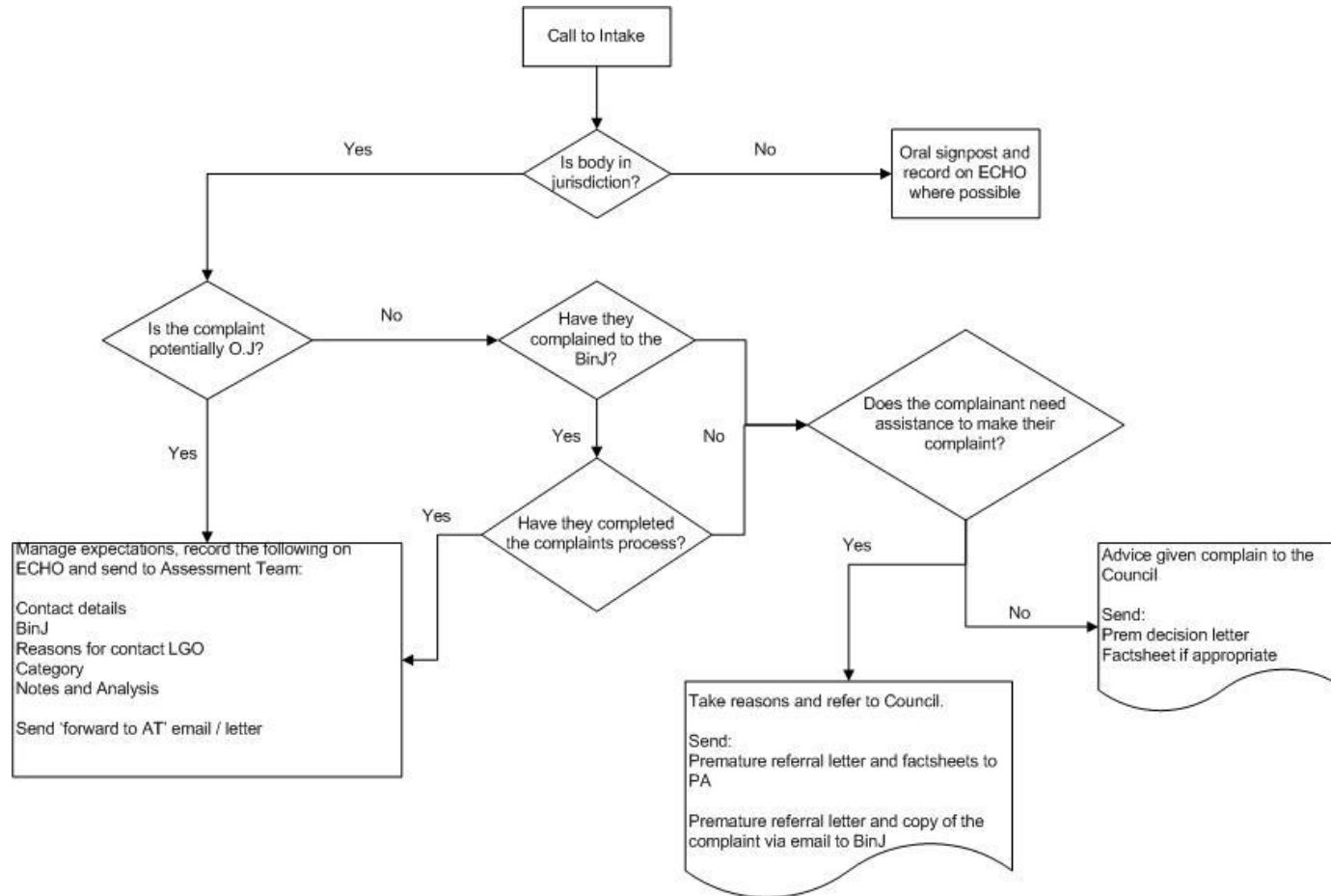
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Intake will operate in accordance with the organisation's Quality Framework. The team have their own process for Quality Monitoring which ensures accountability in achieving the business objectives. The required criteria also demonstrates adherence to the organisation's service standards and the advisor behaviours

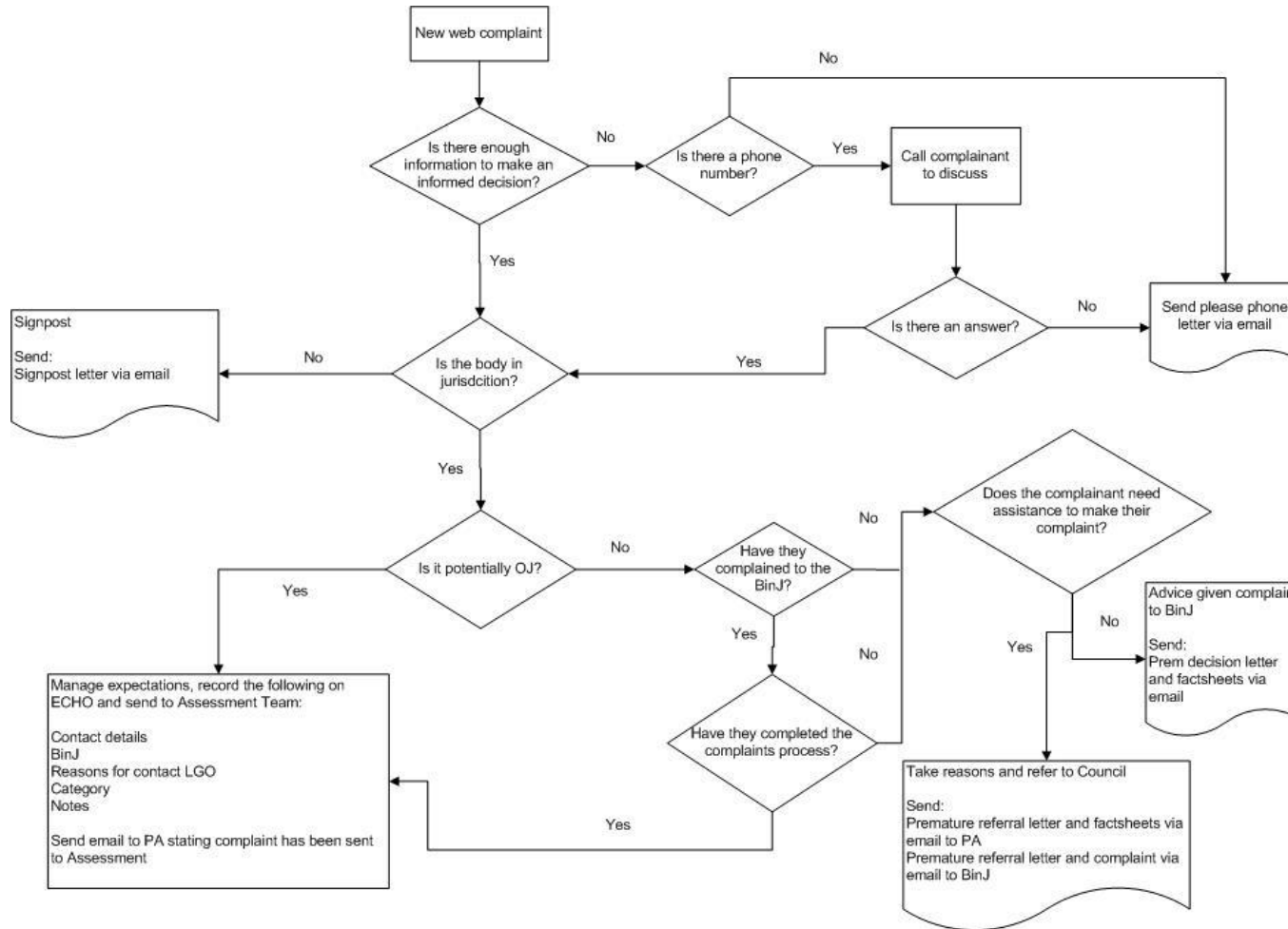
Quality monitoring will be carried out every three months. The results are used to quantify the performance of both the individual and the team. After each set of reviews, the results will be presented to the Executive Team for consideration.

See also: Quality and Standards Manual [available to Ombudsman staff on the intranet]

1 Decision Making – Phone Enquiries



## 2 Decision Making – Online Enquiries





### 3 Decision Making – Written Enquiries

