

Intake Team Operations Manual

Last updated: October 2020

Version Control

Date	Version	Details
16 October 2013	1.0	Drafted by JB
13 February 2014	2.0	Added quality monitoring and CQC guidance.
15 May 2014	3.0	Amended wrap up reasons, CAU's, sickness absence and part time staff and public holiday entitlements
15 May 2015	4.0	General wording review; added flexible working, removed statement or reasons review, removed scanning, amended call flowchart; removed external hyperlinks
15 July 2016	5.0	General wording review; amended language regarding new phone system, added Administration Assistant Role and duties, added joint working instructions, moved quality definitions to Q&S manual
4 November 2016	5.1	Added section 5 regarding 'escalations' and 'managing individual behaviour'. Added section 4.2 regarding 'sending material'
5 April 2018	5.2	Added section 6.1 regarding representatives and persons affected. Amended logo and call outcomes.
7 July 2020	5.3	Amended overall workflow management and corresponding flowcharts / staff roles. Amended joint working process. Complete change of flexible working process. Removed references and practices related to Queuemetrics and HR21, replacing with Queuemetrics and Cascade. General wording review. Added prem enquiries
19 October 2020	5.4	Information added about making sure complainants are not driving (even hands-free) when we are talking to them (section 6.2)

Contents

1	Introduction	1
2	Managing Workflow	1
2.1	Introduction	1
2.2	Case Ownership	1
3	Handling Telephone Calls	1
3.1	Queue metrics	1
3.2	Advisor Status	2
3.3	Call Outcomes	2
3.4	Call Recording	2
4	Handling Electronic Contacts	2
4.1	Distribution and recording of electronic contacts	2
4.2	Accepting Web Complaint Forms	3
4.3	Recording/Reporting	4
5	Handling Written Correspondence	4
5.1	Distribution and recording of written correspondence	4
5.2	The Role of the Administrative Assistant (AA)	4
5.3	Sending material from Intake	5
5.4	New complaints received outside of Intake process	6
6	Managing Difficult Situations	6
6.1	Escalations	6
6.2	Managing Individual Behaviours	7
7	ECHO	7
7.1	Introduction	7
7.2	Recording Persons Affected and Representatives	7
7.3	The 'Reason for contacting the LGSCO'	8
7.4	Premature Enquiries	9
7.5	Notes and Analysis	9
7.6	Naming of documents	9
7.7	Linking/Relating Cases	10
7.8	'Child Involved' Button	10
7.9	Signposting	10
7.10	CQC Referrals	10
7.11	Joint Working Transfers	10
8	Quality Monitoring	11
8.1	Feedback and accountability	11
9	Managing Resource/Absence	12
9.1	The Working Day	12
9.2	Records	12
9.3	Breaks	12
9.4	Flexi-time Policy	13
9.5	Leave Guidance	14

9.6 Sickness Absence	15
10 Communication	16
10.1 Daily Communication.....	16
10.2 Team Meetings.....	16
11 Information Security.....	16
11.1 Overnight Processes	16
11.2 Call Recordings	17
Appendix.....	18
1 Workflow.....	18
2 Queuemetrics - Work Status	20
3 Call Outcomes.....	21

1 Introduction

This document is complimentary to the [Intake Manual](#). Whereas the Intake Manual provides the public with an overview of Intake decision making, this document also provides details of operational procedures within Intake.

Its purpose is to provide more detailed insight into to the distribution and handling of complaints within the Intake Team as well as guidance on specific Intake practices.

2 Managing Workflow

2.1 Introduction

The advisors cover a core set of telephone opening hours from 10am to 4pm Monday to Friday. The majority of the work during core hours is dealing with telephone calls. Either side of the core hours, Intake advisors are expected to carry out administration work.

The Intake Team Leaders (ITLs) manage the progression of the work and are accountable for ensuring that this work is completed within the agreed service standards/arrangements. They will respond to fluctuations in volumes as they see fit and will decide on how best to allocate resources in order to optimise performance.

In order to achieve this, particularly during busy periods, it is also expected that the ITLs will do a proportion of both the administration and the phone work. The type and volume of their work is discretionary but at the very least they are expected to make decisive interventions in order to support the advisors and maximise performance.

2.2 Case Ownership

Advisors do not have their own caseload. When an advisor creates a case in ECHO the case ownership is automatically assigned to that advisor. However, the advisor is not expected to deal with any subsequent calls or correspondence. advisors will ensure that comprehensive notes are recorded in 'Notes and Analysis'.

It is expected that the recipient of any additional communication will take the case and deal with it appropriately.

There is no requirement for advisors to amend case ownership at any stage.

3 Handling Telephone Calls

3.1 Queuemetrics

Queuemetrics is Intake's call management system. It controls the flow of calls to the team and all transactions are dealt with via this software. The following sections provide an overview of how Intake manages the calls they receive.

3.2 Advisor Status

Advisors are required to log in to Queuemetrics on arrival to coincide with their recorded shift start time and select the 'available' status. This should be their primary work status throughout their shift.

If an advisor needs to make themselves unavailable, such as for training or taking a break, then they must select the proper work status.

See also: [Appendix 2 - Table of work statuses](#)

3.3 Call Outcomes

At the end of each call, advisors will need to enter an 'outcome' on screen. This is done via their call outcomes lists in Queuemetrics. An advisor must select the appropriate outcome which best explains the reason for the last call.

Advisors should only choose one outcome reason per call. This is essential because the outcomes allow the creation of reports regarding the proportions of the types of calls received.

See also: [Appendix 3 - List of Outcomes](#)

3.4 Call Recording

Queuemetrics records all calls to and from Intake. Calls are retained in Queuemetrics for 30 days and are deleted automatically.

See also:

- [Section 11 – Information Security](#)
- [Retention & disposal of casework records policy](#)

4 Handling Electronic Contacts

4.1 Distribution and recording of electronic contacts

Completed online web complaint forms arrive into 'incoming forms' in ECHO. Advisors accept and administer these complaints giving priority to dealing with the oldest first.

A central 'Intake' Outlook mailbox directly receives other admin work such as joint working team transfers. There are also separate inboxes, including for consent forms, which are managed by the ITLs. When satisfied that these submissions are valid, the ITLs transfer them into the Intake mailbox. These contacts are dealt with by the advisors and again given work priority in date order.

The ITLs will regularly check the progress of the work in the Intake mailbox and incoming ECHO forms. ITLs are responsible for recording the volume of online correspondence received and the associated outcomes.

At the end of the shift each advisor will report the number and type of decisions to the ITL. This is recorded on the online complaints spreadsheet to ensure the completion of work and for reporting purposes.

If both ITLs are absent, an advisor will deputise.

4.2 Accepting Web Complaint Forms

The following is step by step guide to accepting web complaint forms.

- In ECHO click on incoming forms and the web-forms are displayed as a list.
- Before the web form is accepted, a postcode search must be completed to check for previous or continuing complaints.
- To accept a form, select the tick boxes next to the forms and click accept. This will create a reference and a new tab for each form.
- The contact details will need to be checked and corrected so they are displayed in the correct format.
- Any information entered into the 'Reasonable Adjustments' section will need checking and correcting so that it is in the correct format.

Sometimes a customer may enter their reason for contacting the LGSCO in the 'other' box. The advisor will need to copy this into 'Notes and Analysis' and ensure that the 'special requirements' box only shows special requirements.

If a complaint is being referred to the BinJ as premature, then the reason for contacting LGSCO will pull through to the correct letters and the reasons should not be amended. The advisor must ensure the letter to the BinJ states that the complaint has been received online and has not been amended.

If a web complaint is received that is the same as, similar to or related to a complaint that is already in ECHO, the following rules apply:

- If the old complaint reference has not been file managed any documents should be moved to this and the newly received case should be voided. Notes should be placed on the existing ECHO record to explain this.
- For complaints that are closed as 'premature/advice given' a complaint form will need to be created in the new case. This complaint form will then contain the new complaint details and should be moved to the old case reference. The new reference should then be voided and appropriate action taken with the old reference. If the existing 'premature' case is over 12 months old and has been subject to file management, then this should be treated as a new submission and the new case number used.
- If the previous complaint has gone through to the teams a complaint form should be created. This and all supporting documents should be transferred to the existing case and the new submission voided. A record of the voided case reference should be made in the notes and a task should be set on the case asking the previous investigator to review the new documents. The investigator will then decide if it is a new complaint and will advise accordingly.

- If a customer uses the web form to provide us with incidental correspondence then the documents should be moved to the old case reference and the new case reference should be voided.

See also: [Appendix 1 - Workflow](#)

4.3 Recording/Reporting

ITLs will be responsible for recording the volume of online correspondence received and the associated outcomes.

The advisors will communicate their outcomes to the ITL, who will then complete the online complaint spreadsheet.

5 Handling Written Correspondence

5.1 Distribution and recording of written correspondence

All correspondence sent to the LGSCO is received in the Coventry office. The Administration Assistant (AA) is the primary liaison for onsite post room staff.

The AA will be responsible for collecting post from building facilities. The AA will open all of the post and will separate casework and non-casework correspondence.

All correspondence relating to new complaints or ongoing cases will be scanned into the central Intake outlook mailbox by the AA. This will then be worked by the Intake advisors, giving priority to the oldest items first.

The ITL will regularly check the progress of the work in the mailbox.

At the end of each shift the advisors will then report the number and type decisions to the ITL. This is recorded on the written decisions spreadsheet to ensure completion of work and for reporting purposes.

5.2 The Role of the Administrative Assistant (AA)

The AA will forward any non-casework correspondence to the appropriate person.

The AA will maintain a record of post received via recorded delivery. For each recorded item, the AA must ensure the delivery number is marked off against the details in the recorded delivery book.

The AA uses the high-volume scanners to scan in all received documents. The AA will deal directly with all the correspondence that relates to AT / IT ongoing cases and provide the combined number of these received daily to the ITLs. The AA will scan these directly into ECHO and attach each one to the relevant case record. The documents will be renamed and placed into the Evidence/Investigation folder. A task will then be set for the case owner to alert them of the correspondence.

In the absence of the AA, the role will be completed by an advisor on weekly rotation.

5.2.1 Postal Archives

All casework correspondence will be retained in the archive store in Coventry for 12 weeks before being destroyed.

The documentation is stored in date stamp order.

For information security purposes there will be no access to the hard copy from the archive except under exceptional circumstances. Anyone wishing to access documents must task the AA with their request.

All casework correspondence must be sent by special delivery and a task set for the recipient to inform them that it has been dispatched.

If a mis-scan is identified, the investigator will task the AA who can access the archive and rescan accordingly.

See also: [Appendix 1 - Workflow](#)

5.3 Sending material from Intake

5.3.1 Distributing casework material

If there is a requirement to send a hard copy, in all circumstances it must be sent by special delivery.

This includes from office to office and to home-based workers.

The use of tasks in ECHO is also required to ensure that we can track when documentation is sent and received.

The sender must set a task on the case for the recipient. The task line should be amended to 'documents sent' and a note added if required. This will alert the recipient. The task must be completed upon receipt as a confirmation that correspondence has arrived.

The case history shows the setting and completing of tasks and therefore is indicative of our sending and receiving documentation.

If the correspondence does not arrive within a reasonable timeframe then the recipient can contact the sender who can then review the special delivery instructions

5.3.2 Distributing non-casework material

Items for the attention of HR comprise the majority of non-casework related items and can be passed directly to the HR team based at Earlsdon Park.

Other non-casework items should be sent directly using Royal Mail, again in the pre-addressed envelopes when sending between offices.

See also: [Information security policy](#)

5.4 New complaints received outside of Intake process

New complaints and resubmissions may arrive in the Assessment and Investigation Teams.

Below is a list of possible scenarios. If the Assessment or Investigation teams receive:

- A call direct to investigator because they had previously investigated a separate complaint.

The investigator will ask caller to contact Intake directly on 0300 061 0614 or to visit the website

- An email direct to investigator because they had previously investigated another complaint.

The email will be responded to asking the caller to contact Intake directly on 0300 061 0614 or to visit the website.

- New correspondence is attached to an ECHO record that it is considered to be a new premature complaint or a resubmission.

A task will be set on the current record for both the ITLs with an explanation of what is required, including identification of any documentation relating to the new complaint. The ITLs will either deal with the complaint or delegate accordingly.

- A new complaint that the investigator identifies needs to be raised and immediately allocated. The Team Co-ordinator will create the new case and arrange for allocation.

Team Co-ordinators will discuss anything out of the ordinary with the ITLs or the Customer Service Manager (CSM).

6 Managing Difficult Situations

6.1 Escalations

An escalation is defined as an 'unresolved dispute between staff and callers which requires intervention by a line manager'.

The method of escalation to the manager can be a call transfer or a call back request depending on the circumstances.

Before escalation, the staff member must be confident that they have explored all avenues with the caller to try to satisfactorily resolve any issues.

If the caller immediately requests a manager i.e. without any prior discussion or reasoning, then the person will offer to assist and try to resolve the situation.

If part way through a call the caller specifically requests a manager, and the advisor is unable to resolve the situation, then the escalation must happen.

Escalations may need to be dealt with according to our CAU procedures. In addition, if it is deemed that there was no requirement to escalate then this will be fed back to the individual

Prior instruction about managing a caller's behaviour must also be adhered to.

See also:

- [Intake's Manual guidance on unacceptable/unreasonable conduct](#)
- Guidance on managing unreasonable complainant conduct [available to Ombudsman staff on the intranet]

6.2 Managing Individual Behaviours

At times it is necessary for the LGSCO to take measures to ensure boundaries are in place for dealing with a particular person or scenario.

Intake line managers may also have to take separate decisions about managing behaviour. This may include restricting contact, tailoring messages or instructing staff to politely end calls.

Once a decision is taken, line managers will provide specific communication to the team at the earliest opportunity.

To ensure that a consistent approach, it is important that all staff adhere to the instruction.

At all times, the use of softer language is encouraged. Instead of saying 'I'm going to terminate the call', advisors should for example consider using language such as 'I'll have to bring the call to a close'

See also: Guidance on managing unreasonable complainant conduct [available to Ombudsman staff on the intranet]

We should ensure telephone discussions with complainants do not take place while they are driving vehicles. Even using hands-free equipment is likely to distract attention. We should therefore end calls where we believe the person is driving or riding, and politely ask the caller to call back when convenient and safe to do so. Where a caller persists, we should feel confident to bring the call to an end.

7 ECHO

7.1 Introduction

Advisors are expected where possible to create a new case in ECHO for all new enquiries.

For any enquiry that cannot be captured on ECHO, for example where a caller is unwilling to provide the relevant information, then the advisor must ensure that they select the correct Queuemetrics outcome reason. This is important because the outcome reports identify any shortfall in ECHO recording.

Any subsequent communication about an existing case will also be recorded and administered using ECHO. All actions on a case need to be recorded in notes and analysis.

7.2 Recording Persons Affected and Representatives

Where Intake receive clear information about the PA's and REP's claimed injustice they will record the PA's and REP's contact details according to the scenarios below.

The complainant is acting solely as the representative of the PA (and makes no claim of personal injustice for themselves)

- The complainant could be a professional REP (e.g. advocate, solicitor, LPA) or someone less formal (e.g. a family member, friend or neighbour)
- There should be a separate record for the REP and PA in ECHO contact details
- We need to ensure we have correctly recorded who we should correspond with

The complainants are jointly affected by the subject of complaint:

- Both individuals should be recorded as Joint PA in ECHO contact details screen
- For example, a married couple are jointly complaining about loss of amenity from a neighbouring extension – both are complaining about the same issue and are claiming the same/similar injustice

An individual complains on behalf of another person and themselves:

- If someone complains on behalf of another (e.g. daughter on behalf of mother) and claims or appears to have sustained a personal injustice and their injustice relates to the complaint made on behalf of the PA we should register them as Joint PA and REP in ECHO contact details
- We need to ensure we have correctly recorded who we should correspond with
- In such cases we should use one case reference number – this is better customer service for the complainant and BinJ who are likely to have dealt with all related issues as one complaint
- If the complainant claims an injustice in relation to an entirely different matter we should register them as PA on that issue under a separate reference number and register them as REP for the complaint made on behalf of the other PA

7.3 The 'Reason for contacting the LGSCO'

Intake will not send complaints to Assessment without a 'reason for contacting the LGSCO'.

Wherever possible this should include:

- the fault that they believe the service provider has caused
- the injustice that they claim to have suffered as a direct result of that fault, and
- the remedy that they are looking for.

This should be recorded as a clear, brief summary of the complaint issues as expressed by the customer.

In all cases this reason will be recorded directly in the 'Initial Information' screen on ECHO.

Advisors are not expected to filter or refine complaints received via the online form.

Where the reason for contacting us is already clearly set out in any accompanying documents, an advisor must insert a short summary of the issues complained about, whilst referencing the attached documents. This is essential because all other complaints data is deleted after a year.

7.4 Premature Enquiries

Where a complaint is not clearly OJ, but it is not clear whether the complaints process with the BinJ has been fully completed, the advisor will first seek to gather additional information from the complainant. If the status of prematurity still cannot be established, then a premature enquiry email should be sent to the BinJ.

The advisor will use the premature enquiry template to send the email to the BinJ and set the premature enquiry task for INTAKE. Nothing is sent to the person affected. The case should then be closed as Insufficient info.

If the BinJ do not respond the premature enquiry task will be picked up by an advisor and the chaser email sent to the BinJ. The advisor should also add the premature enquiry chaser task to the case again set for INTAKE.

If the BinJ fail to respond after the chaser then the case should be sent to AT with the usual documents sent to person affected/representative.

7.5 Notes and Analysis

All notes are recorded in the 'Notes and Analysis' page on ECHO.

Every action taken by an advisor must have an accompanying note. These notes must contain the date, the advisor's initials and a concise explanation of the action taken about that case.

These notes are essential in order to help others understand the progression of the complaint.

Advisors must remember that copies of notes can always be requested and therefore the tone and content must be professional and relevant.

7.6 Naming of documents

All casework handlers are required to rename documents in ECHO. The document name must begin with the date in reverse order i.e. year/month/day and it must clearly explain the contents. For example - 20 06 01 Prem decision letter to PA, would refer to a premature decision letter sent to the person affected on 1st June 2020.

Complaint documents should also be placed in the appropriate folder e.g. the substantive complaint should be retained in the folder called 'Complaint'

Confidential material must be scanned in separately and clearly named as 'do not disclose' and placed in the 'do not disclose' folder.

Documents that are emailed will automatically be marked as sent but all other letters will need to be marked as sent manually.

7.7 Linking/Relating Cases

Intake may identify a number of separate complaints about the same issue that are from different people. If this occurs, then all cases should be 'linked' together on ECHO using a name that references the common problem.

Preliminary post code searches may also identify customers who have made several separate complaints about different issues or BinJs. If this occurs, then the cases should always be 'related' on ECHO using the customers' postcode and initials. Cases should never be related using a customers' name, but the inclusion of initials will help differentiate between related groups in the same postcode area.

7.8 'Child Involved' Button

Advisors will, wherever possible, identify complaints received from Children and Young People (CYP). These complaints are from persons that are:

- aged 18 years or younger
- 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.

The 'child involved' flag in ECHO must be used where the complainant is a child or young person. This may mean that they are represented – by a solicitor, advocate, parent, friend etc but the fundamental point is that they are themselves complaining.

7.9 Signposting

Advisors are not expected to provide case reference numbers for telephone signposts unless this is specifically requested or would prove beneficial to the caller. The correct Queuemetrics call outcome should be used for reporting purposes.

See also: [Appendix 3 - List of outcomes](#)

7.10 CQC Referrals

The Local Government Ombudsman and the Care Quality Commission both have the remit to consider certain complaints within the adult social care sector.

Both organisations receive numerous contacts for the each other. As a result, there is an agreement in place that allows 'warm transfers' whereby customers are transferred between the two organisations.

See also: [CQC / LGSCO Information Sharing Agreement](#)

7.11 Joint Working Transfers

PHSO will send joint working transfers through Egress to the Intake Outlook Mailbox. An auto acknowledgement will confirm receipt to the PHSO. These will be dealt with by the advisors.

An ECHO record must be created, the documents must be attached and it will need to be allocated to the Joint Working Assessment (JWA) team. The appropriate letters and factsheets will be sent to the customer to confirm we have received the complaint and explain what happens next.

Intake will not accept any transfer forms that do not indicate that there is consent to share the information. A case must not be created and the documentation must be sent back to the staff member at the PHSO.

It may not be clear from the transfer form or the complaint documentation who the complaint is against. The advisor will send the complaint through to JWA without a BinJ and with a note to explain why.

The date received is recorded as the date the LGSCO receive the transfer form.

7.11.1 Allocating to the Joint Working Assessment Team

Unlike other complaints, for joint working cases advisors must allocate the cases to the Joint Working Assessment Team. The process is as follows.

After forwarding to Assessment the advisor will need to:

1. Go to the Joint Working screen
2. Save the case to the ownership of the JWA and exit the case

This automatically sets a task for the Team Co-ordinator and alerts them to the new case for the team.

8 Quality Monitoring

Intake operates in accordance with the organisation's Quality and Standards Framework. As part of that Framework, the team have their own process for Quality Monitoring which ensures accountability in achieving the business objectives.

8.1 Feedback and accountability

1-2-1's are to be arranged to coincide with the monitoring every three months. All samples and scores will be fed back accordingly. Line managers will use the standards, the definitions, the complaint record, the call recording and any other relevant documents to support the feedback.

All parties are accountable for maintaining and improving individual performance and this should be managed in line with our performance management guidance.

Individual results and feedback will only be shared with the advisor and any relevant managers. However, individual results will be collated to produce an overall team view of performance against the quality standards. Overall team performance will be published.

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

9 Managing Resource/Absence

9.1 The Working Day

The working day, for flexi-time purposes, is between 7.30am and 7.30pm.

The specific Intake business need is to ensure cover for a core set of telephone opening hours from 10am to 4pm Monday to Friday.

Advisors and ITLs are expected to cover those core hours of 10am to 4pm.

Outside of the core hours, staff have the autonomy to decide their own start and finish times. But staff must be mindful of the definitions of a 7 hour normal working day / 35 hour week / 140 hour month.

Staff should not accrue large credits or debits of hours outside of the parameters of the [flexi-time policy](#) in any four week period .

9.2 Records

Staff are responsible for the accurate recording of their working hours using the flexi-time spreadsheet.

The ITLS are responsible for signing off records of hours worked, hours owed for each staff member, and satisfying themselves in respect of their accuracy.

9.3 Breaks

Despite the lack of a set working day, breaks are rotated for advisors and ITLs based on an 'assumed' shift pattern which rotates each week. This is to ensure that maximum cover is always available during break periods.

The break rota is the responsibility of the ITLs. They will produce quarterly rotas at least two weeks in advance of the next rota period. Advisors and ITLs are allowed to take two 15-minute breaks and a 30-minute lunch break between the times outlined below:

Shift Start Time	0830 hrs	0930 hrs
Morning Break	1030 - 1100	1100 - 1130
Lunch	1200 – 1245	1300 - 1345
Afternoon Break	1415 – 1445	1500 - 1530

A 15-minute buffer is built into each timeslot to allow for advisors to complete calls. However, advisors are expected to be prompt with their start times so as not to cause a knock-on effect for the other breaks.

Depending on the intended working hours, staff can choose to take their 15-minute breaks outside of these hours instead. For example, an advisor may decide to take a break at 4pm because they are working later and it splits up their shift more evenly.

During this time advisors should choose 'Unavailable – Break' or 'Unavailable – Lunch' as the pause reason on Queuemetrics.

9.4 Flexi-time Policy

Flexi-time allows for 1 additional flexi-leave day to be taken in any given accounting period. The leave may be taken as one full day or two half days.

Arrangements for booking flexi-time leave are made in accordance with the procedures for booking annual leave.

Other parameters, including credits and debits are outlined in the flexi-policy.

Staff have the option not to participate in the scheme and to simply work their standard monthly hours as per their contract of employment.

9.4.1 Appointments

Advisors and ITLs should try to book medical appointments outside of core Intake hours and give as much notice as possible to their line manager. Time lost due to appointments should be managed in line with the flexi policy.

Any medical appointments that mean the majority / full day out of the office will need to be recorded as self-certificated sickness absence, flexi leave or annual leave as appropriate.

Managers may request to see appointment cards or letters.

9.4.2 Events outside of normal working arrangements

Advisors and ITLs are expected, where possible, to arrange 'outside events' around the core telephone opening hours of 10-4pm. However, it is recognised that this may not always be possible

Under exceptional circumstances, advisors and ITLs can request time off in small blocks of between 1 – 2 hours in line with flexible working policy. Anything more than this will need to be booked as half day leave.

The following parameters apply to both advisors and ITLs:

- The person must make the request (including reasons) to their line manager. This must also include a definitive time of departure and/or arrival.
- Authorisation will be given based on the guidance for booking annual leave. If necessary, it will be done on a first come first served basis.

- If the request for time off constitutes an exception i.e. there are already more than three advisors off or the second ITL is off, then ITLs / CSM will jointly assess the risk first before granting / refusing the request.
- ITLs / CSM will also need to consider whether the time has been or can be accrued.
- If granted, the leave will be recorded on the rota. Meaning that any subsequent leave requests from other advisors would be subject to the usual scrutiny under the leave booking arrangements.

See also: [Flexible Working Policy](#)

9.5 Leave Guidance

All requests for leave are completed using Cascade and are subject to the organisation's normal guidelines.

Intake staff will use the following notice periods when booking leave:

- 2 weeks' notice for absences over 5 days
- 3 days' notice for shorter absences

9.5.1 Leave requests outside of notice period

Although it should be avoided, it is recognised that staff may need to request leave at short notice. Leave may be granted at short notice but before doing so line managers need to ensure there is adequate cover and minimal threat to the performance of the team.

If there is concern that authorisation of leave will be detrimental to the team's performance, then there is an expectation that the line manager will discuss the request with the staff member. The discussion will alert the line manager as to the reasoning for the short notice and help them to make an informed decision.

If the same day is required staff are expected to hold a discussion with a line manager and it is unacceptable to leave a text or voice mail on the day that leave is required.

Leave may be refused if it's outside of the notice periods.

9.5.2 Leave allocation

Intake will only allow up to three advisors to take leave at any one time. A leave spreadsheet, visible to the advisors, is maintained by the ITLs to record confirmed requests and track availability.

Advisors may request that the ITL make an exception to the three advisor rule. The ITLs will make a joint decision based on acceptable risk. They will consider shift cover, resources and the impact on team performance.

The list of possible exceptions is not exhaustive, but leave will not be granted if there is deemed no substantial reason. ITLs will keep a note of the reasons for granting exceptions to ensure consistency when dealing with future requests.

Any advisor who is refused leave will be placed on the first refusal list on the calendar should a position become available.

ITLs are also expected to take separate periods of leave in order to ensure management availability.

9.5.2 Part time staff and public holidays

Part time workers may have to accrue hours in order to ensure that they meet with public holiday / concessionary day entitlements.

Staff are required to accumulate this time owed by working the extra hours. This must not conflict with annual leave entitlements. Therefore, advisors cannot, for example, book annual leave and attend work on those days to accrue the hours owed.

The arrangements must be discussed and agreed with line managers in advance. A spreadsheet will be monitored by the ITLs to ensure they balance correctly.

See also: [Leave and flexible working](#)

9.6 Sickness Absence

Intake will adhere to the principles set out in the organisation's [sickness absence policy](#).

9.6.1 Reporting

Advisors and ITLs must call the absence line (0330 403 XXXX) as soon as possible and leave a message to inform that they will be absent from work.

Text messaging, calls to ITLs on their personal mobiles or the use of social media is not acceptable. Third party messaging through work colleagues is also unacceptable.

9.6.2 Sickness and Annual Leave

If employees are sick during holiday absence, annual leave may be reinstated subject to the provision of a medical certificate from their GP that covers the period. The same rules apply regardless of whether the absence was originally booked using annual leave or flexi leave.

If staff report themselves as being sick from work, they will not be allowed to book leave retrospectively in order to cover their sickness absence.

9.6.3 Return to work

When returning to work from short periods of absence, all staff will need to complete the relevant self-certification form electronically in Cascade. This will have been created in advance by the relevant line manager.

For longer periods of absence, doctors' notes should be provided to the line manager on return to work. For lengthy periods absence involving multiple notes and where no immediate return is likely, staff should send the note to their line manager as soon as possible.

All staff can expect to receive a return to work interview on the morning of their return. These meetings will take place in a private meeting room.

The content of return to work discussions/interviews will vary depending upon the length, type of absence and concerns in relation to your sickness record. However, in principle the manager should:

- acknowledge and welcome back to work
- find out the reason and cause for absence
- ensure fitness to return to work
- identify whether there is any support we can provide, and
- provide update on any changes or news.

See also: [Health, safety and wellbeing](#)

10 Communication

10.1 Daily Communication

The ITL on the early shift will take responsibility for arranging the day's resources. Each morning the ITL will send out an email briefing the team on the following:

- Previous days/weeks performance
- Any work that may be outstanding
- Advisor absence
- Embedded investigator rota
- Rota responsibilities
- Any other business

10.2 Team Meetings

Team meetings will be held within one week of the Leadership Team meeting.

Agenda's will be circulated in advance and standing items will include the team brief (see above) and an update from the CSM in relation to the Leadership Team meeting.

Minutes and actions will be published and kept in the shared drives for everyone to access.

11 Information Security

Intake are expected to adhere to all of the LGSCO's policies relating information security and data handling.

However, there are some tasks that are specific to Intake.

11.1 Overnight Processes

All advisors should lock away any documentation in the designated cupboards. In turn, the keys to these drawers should be locked away in the central key safe.

No documentation should be left on desks, printers or scanners.

Outstanding internal and external post is to be locked away in the designated cupboards. Again, the keys to these cupboards will be locked away in the central key safe.

11.2 Call Recordings

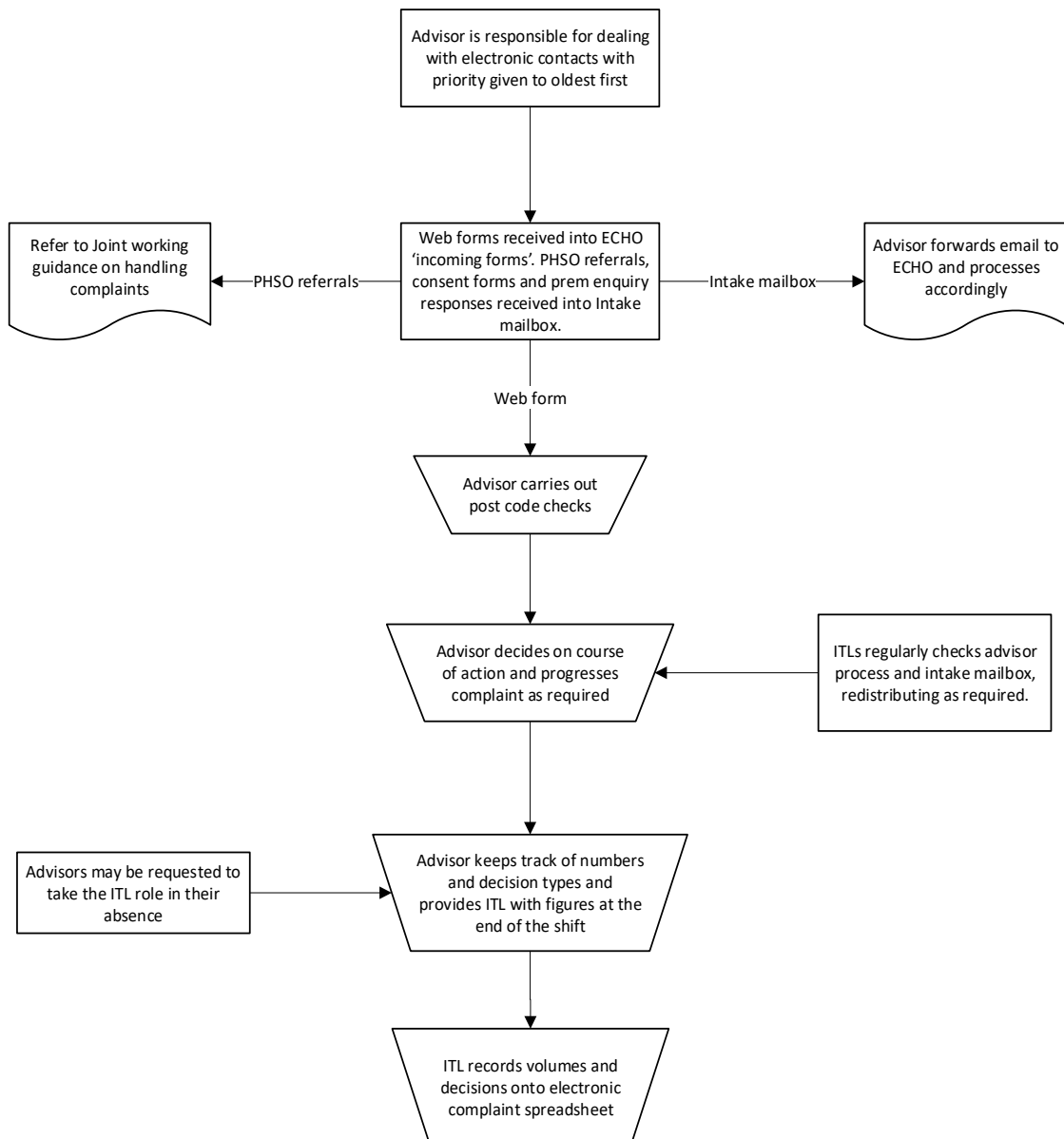
All outbound, inbound and internal calls are recorded for training and monitoring purposes. The calls are stored and retrieved from Queuemetrics.

The calls will be retained for no longer than 30 days and the deletion of calls is carried out automatically by the system.

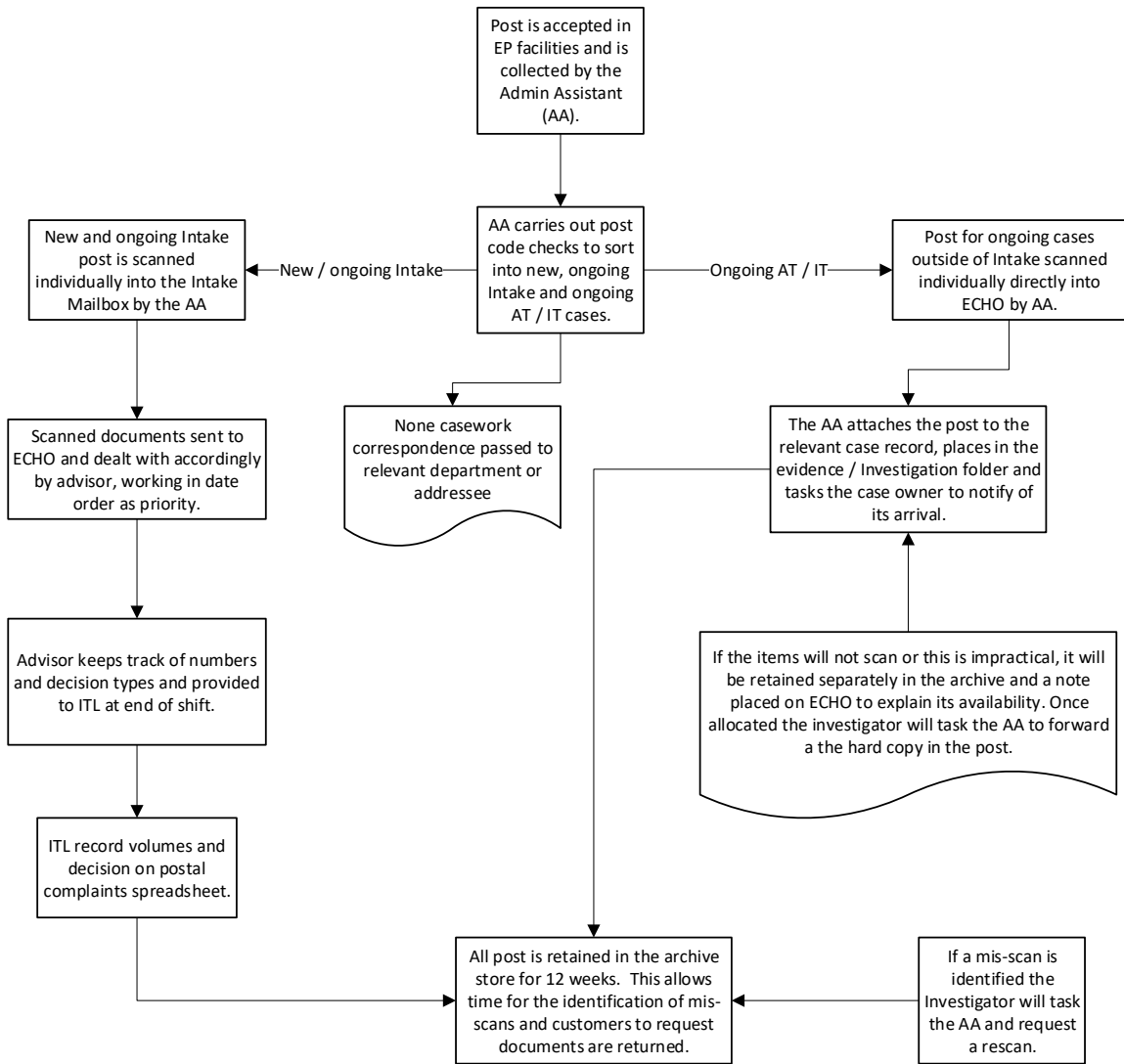
See also: [Retention & disposal of casework records policy](#)

1 Workflow

This flow chart outlines the process for dealing with electronic correspondence:



This flow chart outlines the process for dealing written correspondence:



2 Queuemetrics - Work Status

This table outlines the different work states and when to use them:

User State	When
Admin	To be used by advisors that have been given any personal administration time.
Available	All advisors in the phone pod should primarily log into this state and be ready to take a call
Call Work	If further work is required following on from a phone call then an advisor must select this user state
Meeting	All advisors are required to log into this user state when they are in a meeting
Training	All advisors are required to log into this user state when they are in training
Lunch	An advisor must long into this user state when they are on lunch
Break	An advisor must long into this user state when they are on a break
Comfort	An advisor must log into this user state for reasons that are outside the usual breaks for example toilet, drinks

3 Call Outcomes

On completing a call an advisor must enter an 'outcome reason'. These reasons describe the type of call they have just completed. For reporting purposes, it is essential that the advisor selects the correct outcome. The outcomes are listed below:

Wrap Up Reason	Used When
AT - Ongoing	Call either transferred to Assessment Team or relating to ongoing complaint at assessment phase
CQC – Not ECHO	Call transferred to the CQC
HOS – Not ECHO	Signposts to HOS where an ECHO record cannot be created
ECHO (FWD)	All NEW enquiries taken over the phone and forwarded to Assessment.
ECHO (Complained to BinJ)	Cases recorded on ECHO where the caller is already in the complaints process with BinJ
ECHO (Not Complained to BinJ)	Cases recorded on ECHO where the caller has never complained to the BinJ
NOT ECHO (Complained to BinJ)	Cases NOT recorded on ECHO where the caller is already in the complaints process with BinJ
NOT ECHO (Not Complained to BinJ)	Cases NOT recorded on ECHO where the caller has never complained to the BinJ
Intake – Ongoing / Resub / Fwd	Complaints already recorded at Intake stage. Including prems, resubs and forwards.
INV - Ongoing	Call either transferred to Investigation Team or relating to ongoing investigation
Not ECHO – Non LGSCO	Signpost to other organisations where and ECHO record cannot be created (apart from CQC and HOS)
Not ECHO - Post	Caller decides to submit complaint in writing
Not ECHO - Web	Caller decides to use web form
PHSO – Not ECHO	Signposts to PHSO where an ECHO record cannot be created

Wrap Up Reason	Used When
Terminated	Call ended by Intake advisor.
Transfer	Call transferred to non-Investigative function – i.e. Facilities, HR
AT – Unallocated delay	Call is regarding significant delays in allocation of a case by the Assessment team.
IT – Unallocated delay	Call is regarding significant delays in allocation of a case by the Investigation team.