

Compliance Manual

This is an internal policy which we have published for transparency. It may contain links or references to other internal guidance which is not published.

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Introduction

1. Where we find evidence of fault causing injustice, we make recommendations to put things right for the affected person(s). In addition to remedying personal injustice, we must also look carefully into the root causes of problems, and make recommendations to improve systems and processes so that others do not suffer from the same problems in future. Our principles and framework for recommendations is set out in our [Guidance on Remedies](#).
2. However, our investigations do not end at the point we issue our final decision. To ensure we are seen to be an effective and trusted complaint handler, it is important the Ombudsman can demonstrate that bodies in jurisdiction comply with our recommendations, and that we are seen to use our statutory powers accordingly when faced with cases of non-compliance.
3. We also publish annual performance data about compliance with our recommendations, as well as publishing summaries of all the recommendations we make for improvements to services. It is therefore important that the information we record on ECHO is accurate and fit for publication.
4. This guidance explains the steps investigators must take when recording remedies on ECHO when they close cases. It also explains the important role of Team Co-ordinators in gathering and recording evidence of compliance, and ensuring our data is fit for publication. Finally, the guidance explains the steps we take in the rare cases when bodies in jurisdiction fail to comply with our recommendations, and the options available to us at each stage of the investigation process.

Recording remedies on ECHO after a final decision

5. When an Investigator issues a final decision with recommendations, they are responsible for completing the **remedies screen**.
6. The Investigator must first select the category (or categories) of remedy they have recommended. Multiple categories can be selected where necessary. [Guidance on remedy categories](#), and when to use them, is available in Appendix 1 of this manual.

Personal remedies

7. The personal remedy box should include details of the actions we have recommended to put things right for the person affected, and other relevant parties. Details of any financial remedies should also be included in this box. Recommendations must align with the [SMART principles](#) and our [Guidance on Remedies](#). The Investigator must make it clear what we expect to see from the body in jurisdiction in order to satisfy the recommendation.
8. This box can contain personal information about the complainant (and others), as information about personal remedies is not put in the public domain.

Service improvements

9. Recommendations for service improvements must be placed in the 'service improvements' text boxes. In cases where there are multiple recommendations, they should be placed in separate boxes. If there are more than five service improvements, they can be grouped together in boxes by theme.
10. The service improvement box(es) should include a short summary of the action the Council has agreed to take to improve services following our investigation.
11. **The text from these boxes will be published on our interactive map of local authority performance and in annual letters to bodies in jurisdiction.** The information must be easily understood by any reader, without reference to the decision statement, and **must not:**
 - contain any jargon, acronyms, abbreviations or ambiguities;
 - contain typographical or formatting errors;
 - contain any information which would identify the complainant, or a third party;
 - provide details of the timescales for compliance;
 - begin with bullet points or paragraph numbers.

Examples of well-written service improvements:

The Council was at fault in the way it dealt with an application for a vehicle crossover. The Council has agreed to provide information to all staff within the highways department that pillars and other decorative aspects of a wall may require planning permission, and that this should be communicated to applicants where appropriate.

The Council will review its processes for in-year admissions to ensure that it makes a best-interests decision in accordance with the School Admissions Code where a parent makes a request for their child to be educated in a different year group.

The Council will review its procedures for dealing with applications for disabled parking bays to ensure officers consider if an applicant's circumstances warrant a departure from its eligibility criteria.

The Council agreed to review how its benefits service records information it receives and its timescales for updating records and carrying out reviews. It will create an action plan to prevent inaccurate recording and delays.

Examples of unpublishable service improvements:

I recommended the Council undertake that, if it says it will monitor someone's refuse collections in future, the Council will ensure it keeps that promise.

This first example is vague. Recommending that a Council does not act with fault is unrealistic, and does not provide us with anything measurable against which to judge the effectiveness of the service improvement.

BinJ has already put new system in place to avoid recurrence: Commissioning Manager to review referral criteria and referral approaches with referral agencies... to ensure inappropriate referrals are not sent through for delivery & thus raising client expectations;

The second example uses an acronym (BinJ) which is unintelligible to any external reader, and uses jargon, such as commissioning manager, referral approaches, and referral agencies, which the general public would be unfamiliar with.

Within three months of my final decision, the Council should: Provide training to all relevant staff about recognising potential continuous care duty needs when presented. Provide evidence to the Ombudsman that this has been done.

The third example talks about time scales, and the need for the Council to provide evidence of compliance, which is superfluous information. The reference to continuing care duty is vague, and unlikely to be understood by an external audience.

The Council will discuss the lessons that can be learned from this case and provide evidence about how it will ensure its children's and housing teams work together effectively in future.

The fourth example talks about 'lessons learned from this case'. This is also vague, and would benefit from more information about the faults we found.

Setting due dates for compliance and tasking Team Co-ordinators

12. Investigators must set a due date on the ECHO remedy screen for the body in jurisdiction to implement the remedy. This will automatically create a task for the investigator called 'Remedy due'. The Investigator must reassign the task to their Team Co-ordinator.
13. There might be multiple parts to a remedy with different deadlines (for example, four weeks to provide an apology and payment, and three months to revise a policy). **In these cases, the Investigator should record the longest-due date as the 'due date' on ECHO, and set additional tasks for their Team Co-ordinator to check the more immediate remedies.**
14. The amount of time provided to bodies in jurisdiction to implement remedies will depend on the complexity of the agreed actions. We generally expect a body in jurisdiction to complete straightforward recommendations (such as a written apology and financial payment) within four weeks of the final decision.
15. More complex remedies (such as changes to policy, or staff training) will take longer to implement. In these cases, it may be reasonable to provide a body in jurisdiction three

months to provide evidence of compliance.

16. In some cases, a body in jurisdiction might ask for longer to implement a recommendation following the final decision (for example, where a change to policy requires cabinet approval). Investigators should deal with such requests on a case by case basis, and consult with their manager where necessary. In doing so, we should bear in mind that delays in providing a remedy may cause additional injustice to the complainant.

Compliance and post-decision reviews

17. A complainant might request compliance is placed on hold, pending the outcome of a post-decision review in which the remedy is contested.
18. When this happens, the investigator should contact the body in jurisdiction and ask that it pauses any aspects of the remedy which are subject to the review. The investigator must alert the reviewer to this in the post-decision review information form.
19. If the post decision review does not lead to any changes to the recommendations, the reviewer should inform the body in jurisdiction to continue with compliance.
20. The Team Co-ordinator should change the compliance timeframe to start from the date the post decision review is complete.

Team Co-ordinators' role: obtaining evidence of compliance and quality assurance

Checking the remedies screen

21. Team Co-ordinators are responsible for obtaining evidence of compliance with recommendations. They also help ensure the remedy screen is completed properly. This is a vital part of our quality assurance process, to ensure the information we publish about remedies is accurate and easy to understand.
22. When the investigator reassigns a remedy due task to their Team Co-ordinator, the Team Co-ordinator should check the remedy screen to ensure it is clear:
 - what the investigator has recommended;
 - when we expect compliance with any specific parts of the recommendations; and
 - what evidence we expect from the body in jurisdiction to demonstrate compliance with the recommendations.
23. The Team Co-ordinator will also correct any cases where:
 - the investigator has not selected the correct remedy category/categories; and
 - the service improvement summary/summaries are unfit for publication.

24. The Team Co-ordinator should speak with their manager if they find investigators repeatedly fail to complete the remedies screen correctly.
25. It is also important to remember the Investigator may be on leave or may no longer work for the Ombudsman when the time comes to check compliance. It is therefore important for the Team Co-ordinator to check at an early stage if anything is unclear.

Cases with multiple deadlines

26. If there are multiple recommendations with different deadlines the investigator should set separate tasks for each deadline. Where this has not happened, the Team Co-ordinator should set separate tasks to check after the body in jurisdiction has complied with the recommendations. The original 'Remedy due' task should always be for the part of the remedy with the longest due date.
27. For example, a recommendation consists of:
 - an immediate payment of £500 for six month's delay;
 - a reassessment of social care needs (due within one month); and
 - a change to the Council's procedures for dealing with requests for reassessments (due in three months).
28. It would be generally right to check the body in jurisdiction has completed the reassessment and payment after a month, rather than after three months had passed for all items to be completed.

Recording compliance dates

29. When the body in jurisdiction provides evidence of compliance with all parts of our recommendations the Team Co-ordinator will enter the date into the '**Due Date: Actual**' field on the ECHO Remedy Details screen.
30. If recommendations contain several actions with different compliance dates the Team Co-ordinator can note the date of compliance for individual parts in the '**Remedy checking comments**' field on ECHO. However, the '**Due Date: Actual**' field must only be completed when all aspect of the remedy are complete.

Recording compliance outcomes

31. The Team Co-ordinator must record an outcome to show whether or not we are satisfied with the actions of the body in jurisdiction. These are found in the drop-down list, titled 'LGO satisfied with BinJ actions'.

Remedy complete and satisfied should be used when the body in jurisdiction provides evidence it complied with all the recommendations within the agreed time. The relevant date is the date it complies with the recommendations (for example, the date on an apology letter) rather than the date it provides evidence to the Ombudsman.

Remedy not complete but satisfied should be used where body in jurisdiction has offered to arrange the remedy in the agreed time but the complainant refuses to accept the remedy (for example, a fresh school admissions appeal or a new assessment of social care needs).

This category can also be used when a long-running remedy remains incomplete, but where we are satisfied the actions will be fulfilled (for example, development work which spans several months).

This category can also be used when a care provider ceases trading following a decision, meaning there is no body in jurisdiction to chase.

Remedy completed late should be used where the body in jurisdiction provides satisfactory evidence of compliance, but where it failed to do so within the agreed time frame. The relevant date for recording 'late' remedies is the date at which the remedy was implemented, rather than the date we receive of evidence.

Remedy not complete and not satisfied should be used after attempts to chase for compliance has proved unsuccessful. If evidence of compliance is provided after this point, we might change the decision to 'remedy completed late'. **The Director of Investigation must be involved in a decision to record an outcome of *Remedy not complete and not satisfied*.**

Notifying the body in jurisdiction of compliance

32. The Team Co-ordinator should send a letter to the body in jurisdiction once a compliance outcome is recorded, to notify it of our decision on compliance. A template is included in the decision folder on ECHO titled '*Remedy satisfaction letter to BinJ*'.

Escalating non-compliance to Casework Managers

33. If the body in jurisdiction has not provided evidence of compliance by the due date, the Team Co-ordinator will carry out the following actions:

Date	Action
Remedy due date	Email the BinJ asking for evidence of compliance within 10 working days
10 days after due date	If evidence remains outstanding, send a further email asking for evidence of compliance within five working days

15 days after due date	The Team Co-ordinator should notify the casework manager (an Assistant Ombudsman or Assessment Manager) of non-compliance.
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34. If the body in jurisdiction request a further extension of time during this period, it should be discussed with the Casework Manager.

The role of Casework Managers

35. When a case of non-compliance is escalated to a casework manager, they should:

- review the 'BinJ Information Screen' report and/or interactive map to check for patterns of non-compliance;
- take account of the reasons provided by the body in jurisdiction for non-compliance;
- consider whether the outstanding remedy is proportionate and achievable.

36. The Casework Manager must decide what the appropriate next steps are. This might include (but is not limited to):

- writing to the Chief Executive/Head of the organisation to highlight concern at the delay;
- arranging a meeting with the body in jurisdiction;
- agreeing additional time for the body in jurisdiction to arrange the remedy;
- writing to the complainant to explain the reason for the delay in compliance;
- holding a case conference with the Investigator to discuss the recommended actions (particularly if the recommendations seem unrealistic/unachievable);
- considering the potential for a public interest report;
- ceasing the compliance process if the recommendations are unachievable, or where a public report would be disproportionate to the outstanding actions.

37. If the timescale for providing a remedy is extended by agreement, the remedy due date must be amended to reflect this.

38. In cases where follow-up actions have failed and the body in jurisdiction has not provided satisfactory evidence of compliance, the Casework Manager should task the Director of Investigations to record an outcome of **Remedy not complete and not satisfied**.

39. Details of the body in jurisdiction's failure to provide the remedy should be entered on to the BinJ handling screen by the Casework Manager.

40. Where a body in jurisdiction fails to provide an agreed remedy, the Casework Manager will generally open a new case, to consider the failure to provide an agreed remedy. The new investigation may also consider substantive issues where appropriate. The complaint does not need to be considered by the intake or assessment teams, and should be opened by a Team Co-ordinator and allocated directly within an investigation team.

Document retention with remedies over 12 months old

41. In cases where a remedy is being chased for more than 12 months following the final decision, the original documents should be preserved on ECHO until a satisfaction outcome is recorded. This will enable us to refer back to the original documentation, should it be necessary.
42. When a case is approaching 12 months following a decision, with compliance outstanding, the Team Co-ordinator should inform the Casework Manager and create an entry on the 'Other contact' screen.
43. 'Delayed remedy' should be selected from the 'Nature of contact' drop down list, and the expected date of compliance put in the 'Date due field'. If the expected date for compliance changes, the due date must be updated accordingly.
44. Once the satisfaction outcome has been recorded on the remedies screen (see above), an outcome date can be recorded on the 'Other contact screen'.

Non-compliance with draft decisions and draft reports

General principles

45. We should not 'give in' to a body in jurisdiction when we get pushback following draft decisions. We should properly consider their argument and then make a decision on what it means for our view, taking advice as appropriate. Similarly, we should not re-negotiate our decision on remedy unless the body in jurisdiction puts up an argument which shakes our view
46. As a general rule, we will only go back to a body in jurisdiction once if it does not accept recommendations at draft decision or draft report stage (if that is the first time it has seen it). However there may be circumstances where we will allow further correspondence (eg if a body in jurisdiction seeks counsel's advice). In this case the investigator should speak to their casework manager to agree our approach and involve the Ombudsman at an early stage

47. If a case looks as if it will go to report, investigators should flag this possibility as early as possible (to both the body in jurisdiction and the Ombudsman). If we know the body in jurisdiction is unlikely to accept the proposed remedy at report we need to carefully manage the complainant's expectations, given that our recommendations are not binding.
48. Throughout this process, we must be able to evidence we have properly considered the body in jurisdiction's arguments and explain how these impact on our view at each stage. Equally, we must explain to the body in jurisdiction why their argument is or is not persuasive and give it an opportunity to respond at each stage

Where the body in jurisdiction responds to draft decision and does not agree remedy

49. If there is merit in the body in jurisdiction's comments we should issue revised draft decision to all parties. However, if there is no merit, we should write to the body in jurisdiction explaining why its comments do not change our view. Depending on the circumstances we may amend draft decision to respond to comments and/or write a letter doing so.
50. If the investigator is unsure or the case is particularly complex or sensitive, they should discuss with their casework manager and seek further advice from a relevant forum, Ombudsman, or our legal advisors.
51. If, following a further letter, the body in jurisdiction still does not agree, we should propose a draft report on the basis of non-compliance with proposed remedy. In part 3A cases, we will issue Statement with Recommendations

Where the body in jurisdiction agrees remedy at draft report stage

52. If a body in jurisdiction agrees the recommendations following a draft report, the investigator should consider whether there is sufficient public interest in issuing a final report. The Ombudsman will decide whether to issue a final decision as a statement. In such cases, we should explain what has happened in the BinJ handling screen so we can identify any patterns in the body in jurisdiction's "behaviour".
53. If the Ombudsman decides there is still sufficient public interest in publishing our findings as a final report, we should acknowledge in the summary and body of the report that the body in jurisdiction accepted the findings and agreed the remedy. The report (and media coverage) should have a more positive tone.

If the body in jurisdiction does not agree findings at draft report and there has been no earlier draft decision (Part III complaints only)

54. At the casework manager and investigator's discretion, we may decide to write to the body in jurisdiction again to explain why its arguments do not change the recommended remedy. Then, if the body in jurisdiction still does not agree, move to final report.

Non-compliance with final reports

Part III cases where the body in jurisdiction refuses to agree remedy after final report issued (response to be received within 3 months)

55. We should write to the body in jurisdiction explaining the options available to it. This should make it clear it can only challenge our findings by judicial review; that has to give clear reasons why not implementing our recommended remedy and these should be agreed at senior member level.
56. If the body in jurisdiction still refuse remedy, consider moving to further report. This decision should be made in consultation with the Ombudsman.
57. If after further report the body in jurisdiction still refuses remedy (at this stage the further report has to be considered by full council) consider moving to Statement (again subject to the “satisfaction” test).
58. While a further report must still be laid before Full Council, the initial report can now be laid before a committee.

Non compliance on Part 3A cases

Part 3A cases where the body in jurisdiction refuses to agree remedy after Statement with Recommendations

59. We should consider the body in jurisdiction response and, unless it changes our view, we will issue an adverse findings notice. This should be done following consultation with the Ombudsman, and in line with our reports and adverse findings process.
60. Depending on the circumstances you may consider responding to the body in jurisdiction by letter if its response indicates it has not fully understood our conclusions and there is a possibility that explaining something further will secure agreement.

Appendix 1 - Remedy categories

When we close a complaint, individual remedies categories must be recorded on the remedies screen on ECHO. This guidance note explains the relevant circumstances for each of the categories available on ECHO.

Personal remedies

Apology

Bodies in jurisdiction should apologise where fault has caused injustice. The body in jurisdiction may apologise in person or in writing, but in either case the apology must be made directly to the person affected using clear and plain language.

Add or correct records

Complainants may be upset about information held on file about them, because information is factually incorrect, or because they disagree with the opinion of professional assessments. Where we find fault with record keeping, we recommend the body in jurisdiction makes an amendment, addition, or correction to the records. We might also recommend the body in jurisdiction:

- places a copy of our final decision in someone's social care file;
- place a cover page on a file to alert readers to incorrect records;
- keep records of reports and actions taken in response to the complaint;
- write to an employer to confirm there are no safeguarding concerns about the complainant; or
- correct the registration date on the complainant's housing application.

Some people will ask that mistakes in records are removed completely, but we should not make such a recommendation. The law often requires that records are not altered retrospectively. If information is removed from records it means there is no trace that the event has happened. This can make it difficult for professionals to understand the history of events, and makes the records unreliable. It means anyone reading the record will not have the relevant facts available about the services provided or the historic faults which occurred.

Financial redress: Quantifiable loss

Where the body in jurisdiction has failed to pay money due to the complainant, we may include a recommendation for that sum to be paid in the remedy. Similarly, if a complainant has wrongfully accrued a debt as a result of the body in jurisdiction's actions, we may ask for the debt to be written off. Complainants can be affected by such a fault in different ways and our recommendation will take account of this. There is further guidance in our Guidance on Remedies.

Financial redress: Loss of service

A complainant may be impacted by the body in jurisdiction's failure to arrange or provide a service. We should always first consider whether there is any practical action which could be taken to return the complainant to the position they would have been in were it not for the fault. If that is not possible, we may consider recommending a payment to acknowledge the impact caused by the loss of service. There is further guidance in the subject guidance areas in the Guidance on Remedies.

Financial redress: Avoidable distress, time and trouble

We expect bodies in jurisdiction to treat people fairly and with respect, and not to expose the public to unnecessary distress, harm, risk or avoidable time and trouble as a result of their actions or inactions. In situations where this occurs, we may recommend a symbolic amount to acknowledge the impact of fault on the complainant. There is detailed guidance on such payments in our Guidance on Remedies.

Improved BinJ remedy

We might receive a complaint where a body in jurisdiction has accepted fault and offered a remedy to the complainant, but we consider the actions taken are not sufficient to remedy the injustice. In such circumstances, we may recommend the body in jurisdiction takes further action to provide a complete remedy to the complainant.

New appeal, a review, or reconsidered decision

When we find fault in a decision, we may ask bodies in jurisdiction to consider the decision again, ask a senior manager to conduct a review, or recommend a fresh appeal takes place. Some examples include, but are not limited to, recommendations for bodies in jurisdiction to:

- reconsider an application for disability related expenditure;
- arrange a new admissions appeals panel hearing with a different set of panellists
- reconsider whether a statutory nuisance has occurred;
- arrange for a review panel to hear a complaint at stage 3 of the children's service complaints process; or
- review a decision about using direct payments to pay carers in kind.

Provide services

In cases where we find the complainant has not received services they were entitled to, or when they have received a shortfall in services, we would recommend the body in jurisdiction provides new or additional services. Examples might include,

- providing free school transport;
- delivering new rubbish bins;
- carrying out remedial work on a vehicle crossover;
- moving a disabled parking bay nearer complainant's home;
- visiting a property and conduct an assessment of statutory nuisance; or
- making a direct offer of suitable housing.

Provide information/advice

We might find fault with a council for failing to provide sufficient information or advice to enable the complainant to understand its decision making process. The provision of substandard information can cause uncertainty to complainants about how they should expect services to be delivered, and might limit their ability to challenge decisions. In such circumstances, we might recommend the body in jurisdiction;

- send a detailed breakdown of outstanding care charges;
- provide a copy of a needs assessment;
- notify other residents that they are eligible for a scheme;
- ensure complainants are notified about their right to escalate complaints to the Ombudsman;
- provide a gas safety certificate; or
- clearly explain the reasons for a particular decision.

Reassessment

If we find evidence a body in jurisdiction has failed to carry out a proper assessment then we may recommend it carries out a fresh one. This is particularly relevant in social care cases where a body in jurisdiction has failed to properly assess a person's needs. Following the fresh assessment, we might want to consider whether an additional remedy is required, if it appears the failure to carry out the original assessment properly led to the person missing out on services they were entitled to.

Remedies for improving services

Procedure or policy change/review

In cases where we find an omission or error in a procedure or policy, we should recommend the body in jurisdiction makes the changes necessary to bring it in line with the relevant statutory framework.

There may be many instances in which we recommend that an organisation considers procedural changes, rather than specifically state that they ought to make procedural changes. In these cases we would ask the body in jurisdiction to conduct a review and provide us with an action plan to show how it will reduce the likelihood of the faults from recurring. Examples of this include:

- the way a body in jurisdiction decides and records decisions made by social care funding panels;
- how it supervises volunteers;
- how it provides information for the public;
- how it deals with incoming correspondence; or
- its arrangements for handling complaints about commissioned services.

Where we believe others may have been affected by any fault, we could ask the body in jurisdiction to review its records and take appropriate action to remedy any additional injustice.

Provide training and/or guidance

We might find evidence of fault in how a body in jurisdiction has acted, but find no evidence of fault in its written policies and procedures. In such cases, we may recommend the body carries out staff training in the relevant subject area. In less serious cases, we might instead recommend that guidance is provided to staff about our findings. This might include,

- reminding officers to pay attention to site conditions involving shared boundaries;
- reminding staff about the legal requirements for record-keeping; or
- asking for our decision to be shared with relevant staff so lessons are learned from the complaint.

Appendix 2 - SMART principles

When we recommend a remedy to a body in jurisdiction we must ensure that our recommendations are clear and that they remedy the injustice which flows from the fault. Any recommendation we make should be based on SMART principles:

- Specific
- Measurable
- Achievable
- Relevant
- Time bound

Specific

Be clear about what it is the body in jurisdiction should do. If it is to carry out a re-assessment, what is this for? If it is to apologise, what for? For example:

- The Council should re-assess Mr B's needs in relation to his request for a disabled facilities grant
- The Council should apologise to Mrs D for taking too long to refund the extra money she paid towards her council tax bill, and for not responding to her complaints in line with its policies

Measurable

Are we recommending a fixed or specific financial payment? Or are we setting boundaries on how a council should do its calculations? For example:

- The Council should pay Mr B the difference between the cost of the service he received for the period 1 May 2013 to 18 August 2013, and the cost of the service he should have received for that period
- The Council should pay the cost of storing Mrs C's furniture between 9 September 2013 to 16 October 2013 while she could not live in her home due to the ongoing disabled facilities grant work

Achievable

Is it something within the authority's powers to do or decide – rather than the responsibility of another body? For example in a case where the admission authority was a council, avoid saying a school needs to change its practices in relation to a school admissions complaint

Relevant

Is the recommendation to remedy the injustice, and is there is a direct link between the injustice and the fault identified? For example:

To remedy the injustice I have identified, the Council should pay Mr and Mrs L £1,000 to acknowledge their financial loss, and prolonged and exceptional distress. This represents:

- £250 for the distress arising from the delay in paying housing benefit
- £750 for the avoidable distress caused by continuing bailiff action.

Time bound

Always set a deadline by which the authority should implement the agreed action. This provides us with a deadline with which we can hold the authority to account. For example:

- The Council should re-assess Mr F's disabled parking badge application within one month of the Ombudsman's decision
- The Council should ensure that Mr D's school transport application is considered at the funding panel meeting due to take place in October 2013

Remedy Screen

- ### Remedy Details
- 1 Select remedy category
 - 2 Information on personal remedies
 - 3 Information on remedies for service improvement
 - 4 Date of decision
 - 5 Target date for TC to check compliance (auto creates task)
 - 6 General comments on BinJs' actions
 - 7 Final decision on compliance

Status: Closed at Decision Person/s Affected: BinJ: West Sussex CC Category: Education & Childrens Services Sub-Category: Childrens Services: Other
 Team: JWI Owner: [Redacted] JW Body : PHSO Related Group: Link Group:

Active Document
 Investigation Plan
 Case Summary
 View Documents
 ▶ Create Documents
 ▶ Tasks
 Telephone Calls
 ▶ Contact Details
 ▶ B in J
 ▶ Initial Information
 ▶ Category
 ▶ Workflow
 ▼ Public Value Remedy
 B in J Information
Remedy Details
 Public Value and Comms
 Service Complaints
 Quality
 Other Contact
 Joint Working
 ▶ Case Actions
 ▶ Case Clock
 ▶ Document Tracking
 Publication

Remedy Details

Save Cancel

Remedy * 1 Select

Personal Remedy

2
 Details of all personal remedies, including financial awards.
 This box can include personal information about the PA/Rep/Third Parties

Service Improvements

1
 3
 Information about service improvements must follow the guidelines in the Remedies Manual.
 This information will be published, and must not include information which identifies the PA/third parties

2

Open Notes

Recommendation Date * 4 30/01/2017

Due Date 5 Target: Actual:

Remedy checking comments

6
 General comments on BinJ's actions during compliance.
 Serious issues about BinJ performance should be placed on the BinJ information screen.

LGO satisfied with BinJ actions 7
 Remedy complete and satisfied
 Remedy not complete but satisfied
 Remedy not complete and not satisfied

Version control

Date	Version	Details
22 July 2019	1.0	Compliance launched. Replacing the Remedies Guidance Manual and the guidance note on non-compliance.
27 September 2019	1.1	Change 'Advice and Guidance' remedy category to 'Provide advice and/or guidance'
26 October 2020	2	<ul style="list-style-type: none">• We've added a new section about what investigators, reviewers, and team coordinators should do when a remedy is challenged as part of a post-decision review• We've added a table to clarify the timeframe for chasing overdue remedies, and the point non-compliance should be escalated to a casework manager• We've removed reference to the 'Other' remedy category, which is no longer on ECHO.• We've added guidance that the 'Remedy not complete but satisfied' should be used when care providers cease trading following a decision