The National Consumer Council and the Scottish, Welsh and Northern Ireland Consumer Councils set up a joint committee to review the operation of the social security system. The Committee's final report - Of Benefit to All - was published in August 1984. Also issued during the course of the review were a number of working papers. This, the seventh and final working paper, was commissioned for the joint committee by the Scottish Consumer Council and, like the others, contributed to the joint committee's final policy recommendations. It examines the quality of the service provided by the Department of Health & Social Security, based on surveys of claimants and DHSS staff in offices in Scotland.

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8. CONCLUSIONS
1. INTRODUCTION

The dramatic increase over the past five years in the number of people drawing social security benefits has been well documented. This increase has put the social security system under immense pressure and prompted the government to initiate the most thorough-going examination of the system since Beveridge.

The rise in the number of claimants has brought thousands of people in Scotland into contact with the Department of Health and Social Security (DHSS). In November 1982, Scotland — with a population of little over five million — had 423,000 people on supplementary benefit and 327,000 on unemployment benefit (1)*. This paper focuses on the way in which the social security system is organised to receive enquiries from the public. The structure of service provision has an important bearing on access to benefits. Any evaluation of the way benefits are delivered to consumers needs to draw upon the direct experience of those users. As the DHSS itself says, in its handbook on good practice, "In the last resort it is the way in which individual officers deal with individual claimants, whether by letter, telephone or across the counter that earns us our reputation for service" (2). So this study examines claimants' experiences of making contact with the DHSS and their perceptions of the quality of the response once contact has been made. Whilst the emphasis is on the local office level, some wider trends in social security provision are examined briefly in order to assess whether these are moving in ways which accord with claimants' preferences.

How the study was conducted

The data was collected in two ways. The author visited seven social security offices in different parts of Scotland — Clydebank, Cowdenbheath, Falkirk, Glasgow Provan, Inverness, Oban and Paisley. These visits were an opportunity to talk to managers, supervisors and counter staff about their arrangements for clients to contact the local office, and to gain a preliminary idea of the pressures and problems. Part of each day-long visit was spent sitting in the waiting room monitoring the flow of callers at the counter and — more indefinably but as importantly — 'soaking' up the atmosphere there.

The seven offices vary considerably both in the size and nature of the catchment area served, and in the volume of the caseload handled. Broadly speaking, they were two small, three medium sized and two large offices. The catchment areas range from just under 5,000 square miles in the case of Inverness — the largest catchment area in Britain — to an inner city office covering seven square miles. The office in Oban serves a primarily rural community — including some of the Hebridean islands — where forestry and hill-farming supplemented by the summer tourist season are the main means of livelihood. The Inverness office takes in a very diverse

*Please see the end of each chapter for details of references.

1.
area, the more traditional rural communities of the west coast being contrasted with the influx of newcomers on the east coast to work on the oil platforms at Nigg Bay. The Cowdenbeath office includes Fife coal mining communities. The remaining four offices are located in the central belt of Scotland, in areas where unemployment has been traditionally high and with large numbers of young families living in local authority housing. In these areas, the social security office tends to dominate the life of the local community. It may be a major employer in the area, as in Glasgow Provan, and the hub of activity in a sea of inactivity. This has meant the dependence not just of individuals but of whole communities on the local office. As one office manager put it, "if the system hiccups, dramas would be played out in whole streets around here".

Supplementary benefit caseloads have increased very substantially over the past five years and the seven offices were no exception. Supplementary benefit caseloads varied from 15,000 in Paisley - the largest caseload in Scotland - to some 1,500 in Oban. The overall caseload has not only increased in size but also changed in composition, with the unemployed overtaking pensioners as the single largest group of claimants. In the offices visited, the unemployed accounted for between 41% and 55% of the total supplementary benefit caseload, whilst pensioners made up between 14% and 35%. This shift in the composition of the caseload has implications for the office workload: the unemployed make more demands on the system than pensioners whose circumstances remain comparatively stable. This increased workload has only partly been offset by the simplification in assessment work with the removal of rent calculation and by the introduction of postal review.

These changes have not been matched by equivalent increases in staff complements, thus placing staff in local offices under considerable pressure. Nationally, the ratio between staff and claimants has deteriorated from 1:96 in January 1979 to 1:129 in January 1983. (3) In some of the offices visited, the increase in the supplementary benefit caseload was described as a 'creeping' one, enabling the office to adjust gradually, if not without difficulty. It was where unemployment had escalated dramatically within a short period of time, for example through the closure of a major employer throwing thousands out of work, that pressures could move towards the point of breakdown - as actually occurred in Birmingham. (4). In one of the offices visited in this study management suggested that staff had been ready to walk out at one point.

Compared with the increase in the supplementary benefit caseload, the contributory benefit caseload has remained fairly static. Indeed, with the introduction of the statutory sick pay scheme

2.
(under which employers are normally responsible for payments during the first eight weeks of absence), the number of new claims has fallen by 83%, representing an overall reduction in the total caseload of 7%. However, a complementing system which is calculated according to past workloads and adjusted by estimates of forecast changes in the year ahead can mean that, where unanticipated pressures arise, staff shortages are also experienced on the contributory benefit side.

The second source of data for this study were brief questionnaires completed by clients about their experiences of making contact with the DHSS and their perceptions of the quality of this contact. The names of DHSS clients are confidential, and the DHSS made it very clear to the author that she could not interview clients during their visits to local offices. As an alternative, the author contacted clients who had gone on from the DHSS to consult an independent advice agency or a local authority welfare rights adviser. In total, 13 branches of the citizens advice bureaux and seven local authority welfare rights advisory services participated in the study, and obtained interviews with 129 clients in different parts of Scotland.(5)

This approach meant that respondents were drawn from a particular sub-group of DHSS clients - those seeking independent advice - a fact which may bias the research findings to some extent. Clients who consult an advice agency are by definition likely to have experienced some problem or difficulty, so that levels of dissatisfaction are presumably higher than average. Furthermore, advice agencies receive more queries relating to supplementary benefit than to contributory benefits. This is reflected amongst our respondents - 80% had contacted the DHSS about supplementary benefit compared to 20% about contributory benefits. The preponderance of supplementary benefit claimants is, however, of interest in itself. It is generally recognised that means-tested benefits tend towards greater procedural complexity, less clearly-defined entitlements and a higher level of claimant dissatisfaction.
References to chapter 1


3. Hansard, 30.6.83 and 11.2.82, quoted in J. Allbeson and R. Smith, We don't give clothing grants any more, Child Poverty Action Group, 1984, p.12.


5. The CABx and local authority welfare rights offices which participated in the survey were located in the following parts of Scotland:

   Strathclyde: Glasgow, Ayr, Ardrossan, Colonsay
   Lothians: Edinburgh
   Dumfries & Galloway: Castle Douglas
   Borders: Galashiels, Roxburgh, Hawick
   Central: Stirling, Denny, Falkirk, Alloa
   Highland: Alness, Lochaber, Thurso
   Tayside: Dundee
   Fife: Glenrothes
   Grampian: Aberdeen, Forres.
   Western Isles: Lewis.
2. STRUCTURE OF THE SERVICE PROVIDED BY THE DHSS

2.1 Integrated local offices (ILOs)

Social security benefits administered by the DHSS are delivered through a network of local offices. Scotland has a total of 72 offices. Additional access points for information are provided by 42 caller offices/out-stations but these cannot process claims or authorise payments.

Integrated local offices bring together the previously separate national insurance and supplementary benefit offices so as to centralise all benefits under one roof. However, unemployment benefit is still separately administered by the Department of Employment's unemployment benefit offices while local authorities have recently assumed responsibility for housing benefit, so that some claimants still have to visit more than one office. Furthermore, the major divide between supplementary benefit and contributory benefits remain an important feature of internal office organisation. Popularly known by staff as the "two sides of the house", supplementary benefit and contributory benefit sections lead separate existences and usually have different public counters. The nature and organisation of supplementary benefit and contributory benefit work differs too. Supplementary benefit work is more labour-intensive, even routine assessment and processing of claims still being done manually by clerical officers. Contributory benefit work is both more centralised and more computerised: staff sometimes spoke of their work as "feeding paper from one computer into another" and their conditions as similar working in a "factory".

These differences not only mean that supplementary benefit and contributory benefit staff have different training and areas of expertise but also that group loyalties tend to crystallise along this divide, giving rise to a degree of rivalry. The two sections, however, do not enjoy equal standing. Contributory benefit staff clearly see themselves as "superior" people, dealing with a "superior" type of client. This was reflected in such comments as "this is a different environment here" or, more bluntly, "We're more civilised here!". These value judgements echo the higher regard in which contributory benefits have been held since their introduction by Lloyd George and Winston Churchill in 1911.

2.2 Access to the public

The public may need to contact the social security office for a variety of reasons - to instigate a claim, to submit documents as verification, to report a change in circumstances or the loss of a giro or a purse, to request clarification of a decision, or to pick up a leaflet. There are three main ways in which such contact can be made - by calling in person at the office, by telephoning or by writing. The problems of access obviously differ between offices according to the size and nature of the catchment area served. All social security offices have arrangements to attend to clients at a public counter which is open from 9.30a.m. to 3.30p.m., Mondays to Fridays. While most callers do not have appointments, the
supplementary benefit section runs an appointments system for certain categories of enquiry (for example new claims, lost purses and single payments). Many calls made to social security offices were deemed by staff to be "unnecessary" and there is an attempt, not always successful, to encourage people to telephone or write rather than clog up the public counter. Telephone calls are received by a central switchboard before being passed to the appropriate section, determined both by the type of query (supplementary benefit or contributory benefit) and by the caller's surname (as much work in local offices is split on an alphabetical basis). Correspondence, likewise, is passed to the relevant section.

In the case of supplementary benefit claims, social security offices arrange for certain clients to be visited at home. The rationale for these visits is an ill-defined mixture of "control" and "welfare". Visiting, however, is a costly way of providing the service and current policy is to cut down on the number of visits made. Claims which were once routinely visited, such as those for single payments, are now increasingly dealt with by office interview, claimants being given an appointment in advance.

Where offices serve a large catchment area, as in the case of Inverness and Oban, it is obviously not possible for all claimants to call in person and more use is made of home visits. The precise cut-off point beyond which local offices do not expect people to call in person depends upon the frequency and quality of public transport available.

Home visiting presents a major headache for offices in rural areas, especially when they cover such a large and difficult terrain as the office in Inverness. Here, five visiting officers each make between 20 and 30 visits a week and there is usually a large backlog of visits to clear. How long a person has to wait depends both upon the content of the claim (new claims having priority over single payments) and where a claimant lives - visiting officers generally wait until they have gathered together a few visits in the same area to make a journey worthwhile. Where a claim for a single payment is relatively unproblematic, it may well be settled by post without any personal contact having been made.
3. RECEPTION ARRANGEMENTS

Of the three ways of contacting the social security office – calling, writing and phoning – calling in person imposes the most demands on office staff and organisation. The seven offices visited vary considerably in the volume of caller traffic handled – from around 95 callers a week at each section in Oban to over 1,000 callers at each section in Paisley. This places very different pressures on reception arrangements and calls for different approaches to their organisation.

3.1 Supplementary benefit and contributory benefit sections

As we have seen, most offices have separate supplementary benefit and contributory benefit counters on different floors of the building. This was the case in six out of seven offices visited, the exception being Oban where the comparatively small volume of caller traffic justifies only one counter for both types of query. Out of a total of 13 public counters observed, three were on the ground floor; the remainder involve climbing one or two flights of stairs or using a lift. Most offices place the supplementary benefit section lower down as this generally deals with more callers. Two offices displayed notices advising the disabled that they could be attended to at ground-floor level.

On entering the social security office, therefore, a caller has first to decide to which counter to go. One office employs a commissionaire at the front entrance to direct callers and another, as we see in more detail later, has an initial reception point by the main door. In the remainder, the caller has to rely on signs stating the type of benefit and the appropriate floor. For example, the notice in the entrance to the office in Inverness reads:

<table>
<thead>
<tr>
<th>Floor</th>
<th>Benefit Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>First floor</td>
<td>Supplementary Benefit</td>
</tr>
<tr>
<td>Second floor</td>
<td>Private</td>
</tr>
<tr>
<td>Third floor</td>
<td>Sickness Benefit</td>
</tr>
<tr>
<td></td>
<td>Injury Benefit</td>
</tr>
<tr>
<td></td>
<td>Maternity Benefit</td>
</tr>
<tr>
<td></td>
<td>Pensions</td>
</tr>
<tr>
<td></td>
<td>Child Benefit</td>
</tr>
<tr>
<td></td>
<td>Family Income Supplement</td>
</tr>
<tr>
<td></td>
<td>Death Grant</td>
</tr>
<tr>
<td></td>
<td>Contributions</td>
</tr>
<tr>
<td></td>
<td>Card Exchange</td>
</tr>
</tbody>
</table>

Notices vary in clarity and prominence. In one case, out-of-date terms, such as 'family allowances', are still being used. Despite detailed and prominent notices, however, mistakes can and do occur. Almost invariably, whilst the author was in the reception area, someone would get to the counter only to find that he or she had come to the wrong section.
3.2 Waiting areas

Social security waiting and reception areas - and supplementary benefit sections in particular - have long had a poor image. The thought of lengthy queues in unpleasant, drab and sometimes dirty surroundings can in itself act as a deterrent to making an office visit. In effect poor waiting conditions can be one of the "costs" of making a claim, adding another layer to claimants' feelings of humiliation and loss of dignity. As part of a wider initiative to improve the quality of the service to the public, social security waiting rooms are being improved. The old model of rows of hard benches bolted to the floor, and bare walls and floors, is on its way out. In its place are low, cushioned seating arranged informally, coffee tables, potted plants, carpets, curtains, magazines and background music. The overall aim is to create a more relaxed and less institutional atmosphere.

The actual or impending introduction of piped music was the talk of many office staff. Initial reactions of the counter-staff varied. Some receptionists feared that it might interfere with their work at the counter, and in one office where it had been introduced it was kept deliberately low, almost to the point of inaudibility. After hearing it in operation, one receptionist had been favourably impressed and felt that it had a calming effect: previously the atmosphere could become very charged. Another, though, thought that the money could have been better spent on, say, an additional receptionist so that people would not have to wait so long, and that soft chairs and tables were not important from the clients' point of view as "most people just want to get out of here quick".

This new-style office is certainly a more pleasant place to walk into and wait in. If piped music smacks of "sugar-coating the pill" to some, for others it may provide a welcome distraction whilst waiting. The only comment overheard from caller was from a youth, who turned to his mate as he was called up for interview and said "tell them to change their tape". Its bland repertoire is unlikely to appeal to the young.

This new package of improvements was only fully operational in one of the offices visited although many of the others had plans for reorganising the reception area along these lines. Traces of the past still lingered in some offices and a few can only be described as grim. In particular, the different esteem in which supplementary and contributory benefits are held is underlined by more or less pronounced physical inequalities between the respective waiting areas. The most striking difference between supplementary benefit and contributory benefit reception areas - and this applies to the new style as well as the old - lies in the arrangement of the counter. Whilst the contributory benefit receptionist sits behind an open counter, her supplementary benefit counterpart is generally screened off from the public by a glass partition, popularly known as the "prison cell" or "bunker". This "Alcatraz-like" structure, as one local manager described it, was introduced in supplementary benefit sections during the 1970s,
presumably in response to growing levels of tension at the counter. Undoubtedly the level and frequency of violent incidents vary considerably between offices, some having a "good" and some a "bad" reputation. The two small offices visited still operate with an open counter. Most of the larger offices had their history of incidents to relate - staff bitten, chairs thrown, windows smashed, and police being called in to evict troublesome claimants. Apart from verbal confrontations, the only physically violent act witnessed by the author concerned a man who gave the counter a hearty kick before storming out of the office swearing.

These physical arrangements underline the tension which lies at the heart of a means-tested system, whose terms of access are unclear to many. The architecture anticipates, if it does not provoke, confrontation. The placing of notices at the staff entrance to the public counter advising staff about what to do in case of assault only serves to reinforce this definition of the situation. Furthermore, fencing receptionists off in this way can create something of a siege mentality, fuelling their fears of the public. For example, in one office visited supplementary benefit receptionists refused to go into the waiting area to refill the 'Turn-O-Matic' machine (see below) and, in another, staff argued that a proposed initial reception point, which would be situated by the door to the main building, should be staffed by two people.

In an attempt to break down this barrier, one city office had dismantled part of the structure by removing the central glass partition for the width of the speaker's face. This had had no deleterious consequences and brought the added bonus of allowing freer communication, as will be seen in more detail later.

A second lingering inequality between supplementary benefit and contributory benefit sections relates to type of seating and levels of cleanliness. Supplementary benefit callers, who often have longer to wait than their contributory benefit counterparts, sometimes had to make do with wooden benches whilst all contributory benefit waiting areas in the offices visited were supplied with cushioned chairs. Moreover, there was a tendency commented on by DHSS staff themselves for the supplementary benefit section to be "dirtier" or for the contributory benefit section to be "nicer, airier, brighter". Some staff explained the difference in terms of the longer waiting times of supplementary benefit callers, so that people were more likely to become restless and "fidgety". The scanty provision of ashtrays explains the cigarette stubs on the floor. Some waiting areas are swept at mid-day but this gives rise to the minor indignity of having to lift your feet to avoid the broom. In some instances, of course, litter may be a mild form of "dirty protest", a way of hitting back at a system which some clients experience as "treating them like dirt".

Observation of the waiting area revealed how youths, in particular, tend to resist being "passively processed" and attempt to subvert the order of the office by, for example, loolling at the windows or, in one case, sitting on the counter, instead of waiting in the seats provided.
Only five out of the seven offices visited had public toilets on the premises and in three, these were kept locked, the key having to be requested from the receptionist or, in one case, from the commissionaire. Whilst degrading for callers and a nuisance for receptionists, the offices concerned had experienced the abuse of toilet facilities in the past — including in one case their use as a glue-sniffing den — making this arrangement appear necessary.

3.3 Access to information

Social security offices are important sources of information about benefits. Calling at the office not only provides the chance of settling a particular query but also of finding out more generally about entitlement and the range of benefits available.

The accessibility of leaflets varied between supplementary benefit and contributory benefit sections. Leaflets are more likely to be freely available in the contributory benefit section, displayed in an open rack for the public to help themselves. In supplementary benefits sections, however, they were nearly always kept behind the counter and so had to be specifically requested from the receptionist. In some cases a poster setting out the different leaflets by subject matter was displayed on the waiting room wall. Alternatively, a selection of the leaflets available was arranged behind plastic, with a notice advising callers that copies could be obtained from the receptionist. The reason given by staff for this more restricted access was that free availability had been shown in the past to lead to waste and litter, with leaflets being strewn around the office or scattered outside. This concern, however, can lead to offices being positively niggardly in distributing leaflets. Poster displays about social security benefits varied from office to office. Some supplementary benefit waiting room walls were bare. Where posters were displayed, there was often little attempt to do so effectively. Different topics were often jumbled together on over-crowded notice-boards, so neutralising their effectiveness.

One of the offices visited, Clydebank, has the only computerised welfare benefits advice point in Scotland. This again was located in the contributory benefit section of the office. The program takes about 25 to 30 minutes to run through; and to obtain reliable advice, users have to fall within certain standard categories and to know details of their wages, rent and rates, and benefits. The computer attracts some passing interest while callers are waiting to be attended to at the counter but most abandon the run as soon as their turn comes up, the norm being only two completed runs a day. The computer therefore plays a minimal role in expanding awareness of entitlement. It had, however, created some difficulties for counterstaff when a few callers had backed up their claim to benefit by producing the computer print-out.
3.4 Getting to the counter

Given the differing volumes of caller traffic, the offices visited varied in the extent to which waiting areas became congested. In a small office, such as Oban, the caller may well be the only person in the room. The contributory benefit section of some other offices was also lightly used and in certain cases it seemed too large for the volume of queries handled. Some offices had plans to appropriate part of the reception area for much-needed office space. In the less busy offices, a bell was sometimes placed on the counter for the caller to ring for attention, enabling the receptionist to disappear during slack periods and busy herself with paperwork in the back office.

In the busier offices, however, a queue of anything up to 20 people could be waiting for attention. Three offices visited had installed a 'Turn-O-Matic' machine to impose a degree of order on queuing. Here, callers take a numbered ticket from the machine centrally placed in the waiting area. They can then sit down and wait until their number appears on a screen above the receptionist. This system was generally welcomed by staff as it eliminated the arguments which arose about queue order, over which receptionists often had to arbitrate in the past. It also freed callers from shuffling along the row of seats, thereby enabling more flexible and informal seating arrangements to be introduced.

Some supplementary benefit sections divided the waiting area into those with appointments and those without. This allowed the receptionist to know how many were waiting to see her - as distinct from those with appointments waiting to be interviewed by someone else.

3.5 Privacy

There are three different settings in which personal contact between staff and public can take place - at the counter, in an interview booth (supplementary benefit queries only) and in a private interview room. Out of the three, only the interview room offers absolute privacy and this was usually reserved for particular types of query (for example, liable relative cases, unemployment review interviews, fraud or bereavement).

The degree of privacy afforded by the counter varies from office to office according to the number of people waiting to be attended to and the number of reception points. As an observer sitting in the waiting room, it was often possible to overhear at least part of what was being said at the counter. It may be argued that nothing very sensitive was being aired at this point and indeed many queries are of a routine nature. However, ascertaining the nature of a query can involve the receptionist probing into areas such as marital relations, illness or financial affairs. Most contributory benefit counters, and a lesser number of supplementary benefit counters, in the offices visited displayed a notice saying "Please tell the clerk if you wish a private interview". This places the
on us on the caller. It is unclear what proportion of callers who would like a private interview actually request one. As we shall see later, a large number of callers are clearly bothered by the lack of privacy at the counter and yet see little that they can do about it. In practice, privacy remains at the discretion of the receptionist. Given that ensuring greater privacy usually means calling upon the services of other staff, it is not lightly given. Furthermore, even when one of the interview booths is used, complete privacy is not ensured. Whilst the erection of a shoulder-high screen physically shields off the caller, in many cases this only creates the illusion of privacy as conversations in neighbouring booths can still be overheard. Problems are created for interviewers too; one of them told of an instance where information from two claimants in neighbouring booths became confused on the interviewers' schedules.

In sum, many counter staff express dissatisfaction themselves at the lack of privacy for callers at DHSS offices. Whilst formal safeguards are enforced to protect the confidentiality of claimants, it can be argued that confidentiality is breached daily at the counter. Not all social security offices are purpose-designed and it is obviously difficult to balance the need for the receptionist to be accessible to the public with the need for privacy at the counter. Where the waiting area is large enough, seats can be set back, but not so far back that the receptionist cannot keep an eye on the waiting area. One by-product of the introduction of piped music in waiting areas has been to increase the degree of privacy at the counter. Removing the glass partition for at least the width of the face would also enhance privacy. At present many callers feel that they have to speak up to ensure that the receptionist can hear them behind the glass barrier.

4. THE RECEPTION PROCESS

4.1 The receptionist

This discussion of the reception process is chiefly concerned with supplementary benefit callers, because it is in their cases that difficulties mainly arise. For the majority of callers who arrive at the office without an appointment, the receptionist is the initial - and sometimes the only - person they see. In the offices visited, most contributory benefit counters were staffed by one full-time receptionist counter clerk whilst supplementary benefit counters in busy city offices had up to three receptionists on duty simultaneously.

Receptionists are drawn from the clerical officer grade, one rung up from the lowest grade of clerical assistant. They cannot authorise payments and all decisions have to be referred to a supervisor who is an executive officer. Clerical officers are numerically the largest single group amongst social security staff, carrying out most of the routine processing and assessing of claims. They are preponderantly women, unlike the managerial staff.
where men predominate. Consequently, receptionists are also mainly women (15 out of the 19 receptionists observed were women) and often fairly young (in their twenties). One woman supervisor thought that this gender bias reflected the different aptitudes of the sexes for the job. In her experience, "girls" were better on the reception than "boys", women being "naturally" more receptive than men. None of the receptionists spoken to had undergone any specific training for reception work as such. Most thought that the work was simply "common sense" and had picked it up by filling in as a relief during the lunch-hour or by observing a more experienced receptionist at work.

A great deal of emphasis is placed by supervisory staff on the importance of the receptionist's task. She is recognised to be the point of entry to the social security system. It is further recognised that the quality of this initial contact can make a lasting impression on callers, colouring future transactions with the office. For many, the receptionist is the DHSS. However, in practice, such is the pressure of work in some offices that the focus shifts away from attending to the public at the counter towards the processing and assessing of claims in the back office. This order of priorities, known as "getting the money out", has implications for the status of reception work, as will be seen in more detail below.

The receptionist's first task is to find out what the caller wants. Some receptionists opened up with "How can I help?", or "What can I do for you?". In the case of supplementary benefit queries, the necessary information is elicited through filling in a caller slip, setting out the caller's name, address and brief reason for the call. In effect what the receptionist has to do is transform the caller's account into a form which can be readily processed by the office by placing it into a recognisable category. She then has to decide on the appropriate course of action. Some queries are fairly simple and straightforward. Others may prove more complex, needing reference to the client's case-papers or the assistance of other staff.

4.2 Pressure to clear

Whatever the case, there is considerable pressure on the receptionist to clear the caller as quickly as possible. This pressure to clear comes partly from supervisory or managerial staff who regard a speedy clearance at the counter as one of the measures of an efficient service. (One office visited had recently measured the average time spent at the counter as six minutes, with a range of one to twelve minutes.) However, a quick clearance also makes good sense to the receptionist herself, for the longer she spends with each caller the longer the queue grows in the waiting area. Apart from the sheer physical pressure of a queue, longer waiting times mean that callers reach the counter restless and irritable. Furthermore, the receptionist's workload is inherently unpredictable – a campaign could bring in a flood of extra queries, electricity bills could increase queries about help with payments,
or a crowd could get off the next bus - so that it makes good sense to keep something in reserve to deal with the unexpected. Of course, these pressures are not felt equally in all offices. In the small rural office visited, the receptionist explained how she spent as long with each caller as she thought necessary for the person to grasp what she was saying. Certainly, in the absence of queues, the opportunity was there for her to do so. Few receptionists in the busy city offices, however, could take this approach without the system seizing up. Undoubtedly this pressure to clear can - and does - conflict with the desire of callers to spend some time telling their story in their own way. Callers may thus resist or resent the receptionist's attempts to cut short their account, experiencing this as dismissive or "rude".

4.3 Finding the case-papers

Apart from clients' resistance to being dealt with, in their view at least, somewhat brusquely at the counter, there are organisational bottlenecks to providing a more satisfactory service. In order to resolve some queries, the receptionist needs to be able to refer to the client's case-papers. However, locating supplementary benefit case-papers is a major headache in most offices. It is estimated that at any one time a quarter of supplementary benefit files are circulating somewhere in the office. Depending upon the size of the building and organisation of the work, case-papers can sometimes be on one of three floors. When they are needed the receptionist often goes into the back office to make an initial search herself. Some receptionists mentioned how "strictly speaking" they should phone through rather than leaving their post at the counter. In practice, however, receptionists are in and out of the back office a good deal of the time. Most preferred personally asking their colleagues to see if anyone was working on the case, as they felt that this was more likely to produce results than phoning through. In some cases the receptionist can be away from the counter for up to five minutes, only to come back to say that the papers could not be found and that the caller should phone back later in the day. Needless to say, receptionists did not like doing this as they were aware that callers thought the papers were lost and left the office frustrated and with a bad impression of its efficiency. In other cases, the receptionist would ask a clerical assistant to continue the search and ask the caller to take a seat on one side so that she could attend to someone else in the meantime.

Apart from the pressure on receptionists to clear callers as quickly as possible, there is also considerable pressure on them to do so without calling on the services of other staff as this means taking them away from the task of "getting the money out", and so delaying payments. In any case, receptionists - being clerical officers themselves - are only too aware of the concentration demanded by assessment work and of their colleagues' dislike of being interrupted. Given these pressures on staff, the receptionist can easily be seen as a "nuisance" or "a thorn in everyone's flesh". As one receptionist put it, "the receptionist
can make or break an office", and a "good" receptionist clearly means someone who makes minimal demands on other staff. Rather than receiving effective back-up, receptionists perceive themselves to be "pretty much on your own", fencing off as many demands as possible to create a protective barrier for other staff to get on with the paperwork. This devaluation in practice of the receptionist's task is further exemplified by the fact that in two offices visited the receptionist was a clerical assistant, the offices being unable to release more experienced clerical officers from assessment work. But however willing, these upgraded clerical assistants do not have the same experience as a clerical officer. In one case the managerial staff were visibly relieved when the researcher's stint of observation at the counter partly coincided with the clerical assistant's lunch hour so that a "more experienced" relief could be seen in action. This says little for the quality of service routinely offered to callers.

"Doing reception" generally roused strong feelings amongst clerical officers. It was seen to be a job which you either liked or loathed. Some receptionists openly enjoyed - and were seen to enjoy - the work, finding it a welcome break from pushing pieces of paper around in the back office. They liked the human touch and mentioned their satisfaction at sending callers away with a matter clarified or resolved and, conversely, their frustration if this was not achieved.

More commonly, however, the counter was regarded as an unpopular job, largely because the receptionist "bore the brunt of it". It is at the counter that small battles are fought and the receptionist has to cope with a good deal of tension. All receptionists had their problems with "difficult" clients, those who "take a drink", "know too much", or are demanding or impatient. With respect to the last, the receptionist usually has a few stock phrases to fall back on, such as "you'll have to wait your turn", "you're not the only one", or "it's being dealt with". Many tried to defuse potential confrontations by remaining polite, thereby disarming the client's anger, or by granting a private interview to prevent the person from "playing to the gallery". Although this kind of pressure made life difficult, some receptionists accepted a degree of complaining by clients as legitimate. As one receptionist put it, "you know that you wouldn't put up with that kind of treatment yourself". The client who was too passive was sometimes seen to be lacking in self-respect.

Another reason given for its unpopularity concerned the physical and social isolation of the job. Most notably, the receptionist was cut off from the camaraderie of the supplementary benefit assessment group in the back office, where desks are pushed together and arranged in small groups of six or so people. "You feel as if you are in a no-man's land, without an anchor, without a desk!", in the words of one receptionist. Combined with the pressure on the receptionist to cope by herself at the counter, the receptionist job could thus be experienced as lonely, tense and demanding. In particular, considerable stamina is required to cope
with the continual barrage of queries and interruptions. "How would you like my job?" asked one receptionist after a particularly stressful spell. The receptionists spoke of the way in which the job left them physically drained and mentally "wound up" so that it was difficult to concentrate on anything else when the counter closed at 3.30p.m.

So reception work makes great demands on, often, young people who are still without a great deal of life-experience themselves. Not only do they need to have a firm grasp of the complex and voluminous regulations about social security benefits and to be able to communicate these clearly and intelligibly, but they are also challenged on a personal and emotional level at the counter. Developing a thick skin — as some receptionists did — is one way of coping, but at the risk of blunting their sensitivity to callers. There are thus good arguments for putting the most experienced staff on reception work — rather than the most dispensable, as sometimes happens at present.

Because of the stressful nature of the job and its unpopularity, some offices visited rotate the reception, usually every six months but in one case every month. In other offices, there are no such arrangements and some receptionists had been on the counter for as long as eighteen months. Rotating reception work not only gives the person concerned a much needed break but can also prevent the split between the back office and the counter from crystallising. Certainly in the office where the job was rotated monthly, the receptionist spoke more in terms of the helpful back-up of her colleagues, who would themselves be looking for the same support when their turn at the counter came up. However, rotation does mean that less experienced staff also take their turn.

The personality and outlook of individual receptionists are not without influence on the quality of the encounter, as borne out by claimants who replied "it depends on whom you see" to a question about calling at the office. However, the structural context within which the encounter takes place and whether or not this allows for fruitful exchange are more important. Where staff in local offices are stretched to the limit and beyond, the pressure on the receptionist to dilute the service or terminate the interview rapidly can seriously erode the standard of service provided.

5. USERS' EXPERIENCES OF MAKING CONTACT WITH THE DHSS

Drawing benefit is widely seen as an unwelcome and uncomfortable situation for most people. It is often associated with such personal crises as unemployment, marital breakdown or illness. Many people thus approach the social security office feeling insecure, vulnerable and apprehensive about the outcome of their claim, or angry and wounded at the reversal in their fortunes which has made this necessary. This section analyses the data from the questionnaire which was designed to explore clients' experiences of making contact with the local office. As described in the introduction, respondents were drawn from those claimants who go on
from the DHSS to consult the Citizens Advice Bureaux or local authority welfare rights advisory service. The findings, therefore, relate to a particular sub-group of DHSS clients.

5.1 Selection of means of contact

In deciding how to contact the DHSS, the physical accessibility of the local office is obviously an important consideration. For some—especially those living in the Highlands and Islands—the nearest main office may be up to 80 miles away so that calling in person is out of the question unless the visit is combined with some other purpose or there is a nearer caller office. Apart from distance, other factors can also influence a claimant's choice of how to contact the office. These include the nature of the query (whether routine or complex); a claimant's past experience of any one method, making a particular means attractive or unattractive; young children in the home or other commitments making an office visit impractical; the availability of a telephone in the home; and a particular physical disability or social handicap, such as illiteracy, making some forms of contact inaccessible.

The means of contact used by our survey respondents is set out in Table 1.

| Table 1: Means of contact with DHSS office used by survey respondents |
|--------------------------|--------------------------|--------------------------|
|                          | Supplementary benefit    | Contributory benefits    | All          |
|                          | % No.                    | % No.                    | % No.        |
| Calling at office        | 43 45                    | 36 9                     | 42 54        |
| Calling and telephoning  | 15 16                    | 8 2                      | 14 18        |
| Telephoning              | 18 19                    | 32 8                     | 21 27        |
| Telephoning and writing  | 8 8                      | 16 4                     | 9 12         |
| Writing                  | 13 14                    | 8 2                      | 12 16        |
| Calling, telephoning and writing | 2 2   | 0 0                     | 2 2          |

The pursuit of a claim may involve several contacts with the office and Table 1 shows that a quarter of respondents (and possibly more) used a combination of channels in the course of their transactions with the DHSS. The telephone, in particular, is likely to be an important follow-up method in checking or furthering the progress of a claim.

Altogether, 60% of supplementary benefit and 44% of contributory benefit respondents called in person, 41% of supplementary benefit and 56% of contributory benefit respondents telephoned, and 23% of supplementary benefit and 24% of contributory benefit respondents wrote.
5.2 Calling at the office

Those who had personally called at the office (57% of all respondents) were asked a series of questions aimed at assessing some of the costs of an office visit in terms of time and expense involved in getting there, waiting time and conditions, and interview arrangements.

(a) Travel

Overall, 50% of callers took less than half an hour to reach the office and just under a further third took less than an hour. A small proportion of callers (7%) had journeys of over one hour and up to two and a half hours. As regards travel expenses, 59% of callers spent under £1 getting to the office and back, the remainder spent between £1 and £2. Presented like this, these figures underestimate the difficulties which some callers in particularly straitened circumstances faced and the lengths to which they were prepared to go to visit the office. One supplementary benefit respondent had walked and hitched over 20 miles, taking two and a half hours to reach the DHSS office in Inverness. Fares of more than £1 return are paid at the discretion of the DHSS, generally when the person is asked by the office to come in, and the caller has no right of appeal against refusal of expenses. Where a person is called in and lacks the financial means to get to the office, arrangements are sometimes made with local social work departments for a travel warrant to be issued, as occurred with one supplementary benefit respondent in the survey.

(b) Waiting time and conditions

Most supplementary benefit respondents called at the office without an appointment, as did all contributory benefit respondents (there is no appointments system). Two-thirds waited for under 30 minutes before they saw the receptionist; a fifth waited between 30 minutes and an hour. A small group of respondents (12%) waited over an hour and up to three hours, although in some cases longer waits refer to the overall time spent in the office. Lengthy waits were often associated with supplementary benefit counter payments, where a giro is issued on the spot for urgent cases. Arrangements were made to pay out money twice a day in busy offices. However, giros were seldom issued promptly and those concerned would anxiously hang around the office for hours on end, periodically going up to the receptionist to remind her that they were still waiting and, often, growing increasingly resentful in the process. In one case, a woman with a young baby who was first seen at 11.30 a.m. finally left the office with her giro at 2.40 p.m.

Dissatisfaction with waiting room conditions was noticeably higher amongst supplementary benefit respondents, 47% finding them inadequate in some way, compared with 18% of contributory benefit
respondents. Criticisms related to the amount of litter lying around, the fact that the room was smoky or smelly, and "full of dogs and sticky children". All the offices visited did in fact display notices asking callers not to smoke, but these are at the level of a polite request and the provision of ashtrays shows that a degree of disregard is expected. Whilst smoking makes the atmosphere stale and fuggy, discomforting non-smokers, for others it no doubt helped to relieve the tension and anxiety of the visit or simply to pass the time. Others found the room bare and dingy, and in a few cases cold and draughty.

(c) Privacy

Undoubtedly, for many callers, one of the costs of making a claim is the invasion of privacy which this entails. To have to disclose sensitive and intimate personal details to public officials is bad enough, but to have to do so in front of an audience increases the ordeal substantially.

A high proportion of callers were clearly bothered by the lack of privacy when talking to DHSS staff, confirming the author's observations about the inadequacy of the arrangements. Sixty per cent of supplementary benefit and 50% of contributory benefit respondents found that the interview conditions were not private enough either at the counter or in the interview booths. Many had been able to overhear other conversations at the counter while they waited and were thereby made aware that others could listen to theirs. As one woman put it, "the whole menagerie of dogs and children could hear every single word I said about bed-wetting and incontinence".

5.3 Telephoning the office

Of those who telephoned the office with a query, 66% of supplementary benefit and 42% of contributory benefit respondents mentioned some problems in getting through. Some of the recurring difficulties experienced were that the line was engaged and the caller had to make several attempts to get through, the appropriate person was unavailable, or the caller was passed from person to person. Telephoning was particularly fraught when calling from a public call-box, as did half the supplementary benefit respondents who phoned (but no contributory benefit respondent). In these cases, money often ran out as callers hung on. Where a query involves referring to the case-papers, some offices take a note of the caller's number and phone back later. For those in a call-box this could mean hanging around outside for some time - one such respondent waited an hour.

5.4 Dissatisfaction and discontent

An attempt was made to gain some idea of respondents' perceptions of the response obtained from the DHSS once they had contacted the office. Not surprisingly, bearing in mind the fact that
respondents were contacted through advice agencies, levels of dissatisfaction were high, particularly amongst telephone callers: 96% of supplementary benefit and 73% of contributory benefit telephone callers expressed dissatisfaction, as did 87% of supplementary benefit and 60% of contributory benefit personal callers.

'Being dissatisfied' can, of course, mean a wide range of things. It can vary in both content and degree. Undoubtedly dissatisfaction can be, and often is, linked to being refused benefit. As one assistant manager put it, "if they get the money they're satisfied, if they don't they're not". However, we found that it was not quite so simple and straightforward as this. In the course of their transactions with the DHSS, most people wanted to have a clear statement about which benefits they were entitled to, the amount of any benefit due, and when they would receive it. Few felt that they had received this. Sources of discontent amongst survey respondents centred on three main issues:

(a) the claim had been refused and the person was often unclear as to why;
(b) the person had experienced delays in the processing of a claim; and
(c) the person was uncertain about - or disagreed with - either the decision about entitlement to benefit or the assessment of a claim.

A major source of discontent among respondents was what was seen as the abrupt and preemptory way in which their claims were dismissed, often without any explanation whatsoever. In the words of one respondent, "she just kept saying that they could not help me", and another, "I met with a blank NO". Refusals were experienced as having been made without any indication of what the eligibility requirements were or in what way the claimant fell short of them. Two respondents had asked for an appointment in order to clarify the decision but had been refused. Furthermore, the lack of exploration of any alternative solutions or a wider check on entitlement to any other benefits were also resented, especially when the person had approached the office in extreme financial hardship, only to be brusquely turned away. As one respondent said, "they did not give me any information or advice as to what to do".

Where information was offered, some respondents felt that they could not rely on it as the receptionist did not appear to have a firm grasp of the regulations. One respondent with a query about disability benefit related how she had found the staff "well-meaning but poorly equipped in a complex area. I knew more than they appeared to." Other respondents also felt they had been given incomplete, inaccurate or contradictory information.

A second major grievance concerned the delays which some respondents had experienced in the processing of a claim.
particularly in the case of supplementary benefit single payments. Some examples: "I claimed for a single payment for furniture over two months ago and have not yet received a decision" and "I had applied for a clothing grant for my daughter who is being admitted to hospital - nightdress, slippers, etc. Although I had applied in good time, my claim has not yet been dealt with and my daughter is being admitted tomorrow". Some contacts with the DHSS had been made with a view to speeding up a claim, but many claimants had left the office no further forward. Some had been stretched to the limits of their patience, as one respondent who said "I'm fed up being told that my claim is being attended to. I was told several times that a visitor would be on the way and I would just have to wait". Observation of the counter also showed a proportion of callers coming in to ask about the state of their claim. This growing dissatisfaction with delays is further borne out by the experience of advice agencies(1).

Whilst a proportion of respondents recognised that staff were well-meaning and courteous (23% of supplementary benefit and 40% of contributory benefit respondents), the majority felt that they had been treated in a casual and offhand manner. Some felt that the staff had taken no real interest in their problem, that they were simply a statistic.

5.5 Seeking help outside the system

The claimants in this study were drawn from the growing number of people who consult an independent advice centre or local authority welfare rights adviser with a social security problem. Queries received by local branches of citizens advice bureaux in Scotland witnessed a spectacular increase in 1981/82 (44% more than in the previous year). Such queries continued to grow in 1982/83, although less dramatically (plus 14%) (2).

Independent advisers and local authority welfare rights workers are increasingly acting as guides to the official system. For many claimants the existence of such centres is an invaluable resource. In choosing to consult an adviser, respondents expected to receive informed advice from "folk who know more than ordinary people" and who would "take more notice of the problem", "listen" and "understand".

Having left the social security office dissatisfied with the response, most respondents wanted the adviser to clarify or check the DHSS decision for them. They wanted to find out why benefit was refused, or how a particular amount of benefit was calculated and whether this was correct. Others wanted more general information about "supplementary benefit and how it works" and to find out if there were any other benefits to which they were entitled but were not claiming. Some advice centres, such as the citizens rights office, automatically carry out an across-the-board benefits check for all clients who approach them about social security problems. A small number of respondents wanted help
drafting an appeal letter and a few looked to the centre as a possible source of alternative funds.

A fifth of all respondents wanted the adviser to get in touch with the DHSS on their behalf. This was either to speed up the processing of a claim in the case of delay or to put pressure on the DHSS to reverse or modify a decision. Advisers were perceived as not only having easier and more direct contact with the DHSS than the ordinary claimant, but as having more influence so that they would be "listened to" and not so easily fobbed off.

In practice, the extent to which advisers have privileged access to the DHSS varies. In order to act effectively, advisers need to be able to discuss individual cases with the DHSS and this depends upon a degree of goodwill. Relations between local DHSS offices and welfare rights advisers have their individual histories of conflict and accommodation. By breaking down the official monopoly over the interpretation of social security regulations, advisers are in a position to challenge DHSS decisions. It is in the arena of appeals that these conflicts of interpretation are played out, with advisers acting as representatives at appeal tribunals. Furthermore, the campaigning tactics of some welfare rights activists are often experienced by the local office as creating "unnecessary" or extra work.

Finally, advisers' attempts to jump the queue by pressing the interests of their clients can be resisted by staff who resent the loss of control over the pace and order of their work. Where relations have become very strained, the DHSS can restrict an adviser's access by invoking confidentiality and thereby an inability to release information about clients to third parties.

In an attempt to formalise relations, some DHSS offices have set up liaison committees. These can provide an opportunity for the two sides to air grievances and dispel myths. Such developments, however, are viewed with caution by many welfare rights advisers, who are reluctant to act as brokers for the DHSS, and so undermine their ability to be effective advocates for clients.

5.6 Preferred means of contact

Finally, respondents were asked to indicate their preferred means of contacting the social security office as distinct from the means they actually used – a question which led them to weigh up the pros and cons of calling, telephoning or writing to the DHSS. The findings are set out in Table 2.
Table 2: Preferred Means of Contacting DHSS

<table>
<thead>
<tr>
<th></th>
<th>Supplementary Benefit</th>
<th></th>
<th>Contributory Benefit</th>
<th></th>
<th>All</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>%</td>
<td>No.</td>
<td>%</td>
<td>No.</td>
<td>%</td>
</tr>
<tr>
<td>Calling</td>
<td>54</td>
<td>56</td>
<td>44</td>
<td>11</td>
<td>52</td>
</tr>
<tr>
<td>Telephoning</td>
<td>15</td>
<td>16</td>
<td>28</td>
<td>7</td>
<td>18</td>
</tr>
<tr>
<td>Writing</td>
<td>23</td>
<td>24</td>
<td>16</td>
<td>4</td>
<td>22</td>
</tr>
<tr>
<td>Other (home visit,</td>
<td>4</td>
<td>4</td>
<td>4</td>
<td>1</td>
<td>4</td>
</tr>
<tr>
<td>advice agency)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>No Information</td>
<td>4</td>
<td>4</td>
<td>8</td>
<td>2</td>
<td>4</td>
</tr>
<tr>
<td>Available</td>
<td>100</td>
<td>104</td>
<td>100</td>
<td>25</td>
<td>100</td>
</tr>
</tbody>
</table>

This shows that calling in person at the office emerged as the most popular channel amongst both supplementary and contributory benefit claimants. Calling was seen by its proponents as the most effective way of getting a response from the DHSS. Comments such as "it's harder to get rid of you" or "less easily fobbed off" and "they pay more attention to your case" reveal that clients perceive a physical presence at the counter as an important resource in their exchanges with the DHSS. Unlike managerial claims that many calls were "unnecessary", from the client's point of view "you have to be there in person, because it's the only way of making sure that they're really attending to your case". Furthermore, these views were not without substance. Some receptionists admitted that client pressure at the counter paid off. If a client became awkward and persistent, the receptionist would go into the back office and tell them to "get a move on", as she didn't want to take any more "cheek" at the counter.

A second, frequently cited, reason for preferring to call in person related to a predilection for face-to-face contact. As one respondent put it, "I like to be able to identify the person I am talking to". Many respondents are not purely instrumental in their dealings with the DHSS but are looking for reassurance or understanding of their predicament. In this connection face-to-face encounters are widely held to be more satisfying forms of exchange than indirect contacts. However, these ideas about the value of personal contact had sometimes received a set-back in dealings with the DHSS, as reflected in such remarks as "face-to-face contact is usually so much more human and fruitful, but if they won't answer, I won't ask", and "personal contact gives better results, at least in theory".

Those who rejected calling mentioned the expense and time involved in an office visit and the "confusion" which such on-the-spot encounters provoked. A few respondents had found personal contact 23.
distressing, especially where they had to divulge intimate details of their lives such as marital breakdown. One respondent said that "personal contact is a real trauma, they make you feel like a currant with a bite out of it".

Overall, telephoning was not popular, perhaps not surprisingly given the difficulties telephone callers had experienced in practice. Those who preferred to telephone (16% of supplementary benefit and 30% contributory benefit claimants) regarded this as a speedier and cheaper way of getting information than an office visit. Many also found it easier to express themselves over the phone than to write a letter. Most discounted it, however, because of the difficulties experienced in getting through to someone who could help, the problems of explaining complex issues over the phone and, most importantly, the comparative ease with which telephone callers could be "fobbed off" or given the "run around".

Writing was preferred by 24% of supplementary benefit and 17% contributory benefit claimants. Some felt that putting the request in writing gave the claim greater weight than a more fleeting and intangible verbal request. It also provided proof of contact and demanded a considered reply. As one respondent put it, "they would have to send me a written reply" and, more cynically, "at least if you write, you have a chance some responsible person will reply, if such a person exists in the DHSS". Moreover, writing was time-saving and probably the cheapest of the three means of contact. A few mentioned that it was "correct" procedure, having been advised by the DHSS "to get everything in writing" after telephoning the office. Its drawbacks related to the difficulties of written expression for some. It was also regarded as the slowest way of getting a response out of the DHSS, "if you got a response at all".

Five respondents indicated no clear preference for any of the official channels. Two said they would take their problem to an advice agency rather than to the DHSS and one said that he would not be contacting the DHSS again as they simply would not listen. One respondent expressed a preference for a home visit, where she felt more relaxed and another that his choice of method would depend upon the nature of the query.
References to Chapter 5.


6. DHSS RESPONSE: SERVICE TO THE PUBLIC

The DHSS has recently publicly acknowledged that they "do not give
as much thought to the impact of our service on the public as other
agencies who have to sell themselves in ways that we do not"(1).
More specifically, at a time when the service is under extreme
pressure, the sheer scale of the tasks involved in "getting the
money out" can lead to an erosion of standards. Local offices have
been encouraged to innovate and experiment with ways of rectifying
this situation and the impact of this initiative was more or less
felt in the offices visited.

6.1 Personal service

The Department's handbook Service to the Public, puts emphasis on
the importance of personal service and accountability to ensure
that "dealing with the DHSS can appear less of an impersonal
struggle with officialdom and more a matter of personal contact
with an organisation which sees itself as part of the local
community with obligations towards it"(2). With the aim of
reducing any tension caused by impersonality, office staff are
encouraged to wear name badges when dealing directly with the
public, to personalise correspondence and to give telephone
extension numbers.

Whilst some of the offices visited had adopted signed
correspondence, revelation of names was not popular amongst the
counter staff and in no case were name badges worn. A variety of
reasons were given for this:

(a) clerical officers lack decision-making power so should not be
held accountable;

(b) there is a fair degree of mobility between jobs so that
clients may continue to ask for you when you are no longer
responsible for that query;

(c) staff could be traced through the telephone directory and
hostility may spill over into home life; and

(d) the name badges provided were cheap and nasty.

However, where name badges had been adopted - as reported in the
DHSS handbook - the results had either been favourable or without
major consequence. In all cases apprehensions about hostility
spilling over into home life had proved unfounded.

As to how DHSS staff address the public, most receptionists
referred to clients by their surnames. One receptionist referred
to clients by their first names, which sounded rather patronising
given the lack of reciprocity. The more personalised nature of
social relations in the community was reflected in the small rural
office visited. The receptionist here mentioned that many clients
were on first-name terms with staff, as they knew each other in
different settings. Where staff and clients live alongside each
other, this acts as a monitor on both sides of the relationship. Staff in city offices often preferred to live well way from the office. One receptionist who lived in the same area as many clients felt very uncomfortable about it and wanted to leave reception for this reason.

6.2 Consumer research

Many managerial staff interviewed spoke of the dangers of the office becoming "inward-looking, bureaucratic and remote" and of the importance of finding out what people thought of the service provided. In an effort to encourage feedback, some offices visited had placed a notice in the waiting area along the lines of "If you are not satisfied with the service you have received, please ask to see the supervisor". However, such notices had rarely met with much response from the public. One office which had exhibited a notice for a month mentioned that this had prompted only one complaint.

In the absence of any formal or advertised complaints procedure, it was generally assumed that clients knew to ask for the supervisor if they were dissatisfied. And, from observation by the author at the counter, this did occur. Where the complaint involved disputing a decision to refuse benefit, the receptionist would direct the client's attention of the existence of the appeals procedure. In many cases, however, dissatisfaction is expressed on the spot by banging on the counter, shouting or swearing. A proportion of clients take their complaints outside the DHSS to an MP or independent advice centre, as we have seen.

Another office attempt to gauge clients' opinions involved staff stopping and questioning callers as they left the office. This did not prove very fruitful. One manager related how "people just didn't want to know" and another that people always claimed to be "satisfied" when asked or "only tell you what they think you want to hear". Given the power which the social security office exercises over clients' lives, it is perhaps understandable that callers are hesitant about expressing their feelings freely.

6.3 Organisational responses

A number of organisational changes have been made in some offices to improve the efficiency of their service to the public. One such innovation is a fast-stream reception point. The objective is to deal speedily with the many callers who have comparatively simple queries, so as to relieve pressure on the main counter. The case for this is that these callers are at present getting caught up behind those with more complex and time-consuming queries. If these callers can be identified and dealt with separately at a fast-stream reception point, the pressure on the main counter would be reduced, leaving the receptionist with more time to attend to others.
A 'fast-stream' point had recently been introduced in one of the offices visited. Here, the former messenger's desk by the main entrance to the building was bedecked with an eye-catching yellow and black notice reading:

BENEFITS ADVICE DESK

For a faster service stop here to

OBTAIN leaflets
claim forms
general advice on social security

HAND IN all documents requested
by this office
completed claim forms
medical certificates
letters

MAKE APPOINTMENTS for supplementary
benefit interviews

Although it had only been in operation since December 1983, staff felt that the initial results were positive, with roughly half the total number of callers being cleared at this point. The office had also found that overall the number of callers had increased, although it was unclear whether this was due to improved record keeping or to clients' perceiving the service as more accessible than in the past.

It had also presented a number of difficulties. The fast-stream point aims to provide a fully integrated service to both supplementary benefit and contributory benefit callers. Given the segregated pattern of training, however, only one out of the four receptionists who ran the point had expertise in both types of benefit. The other three knew about supplementary benefit only, so generally referred contributory benefit queries to the main counter rather than risk giving inaccurate information. Setting up a combined reception point, therefore, has implications for staff training.

Another difficulty relates to callers' perceptions of the desk's status. While for some callers it clearly provided a speedy alternative to queuing at the main counter, others perceived it as an attempt by the office to remove clients yet one step further away from the centre of decision-making. The low status of the fast-stream point was accentuated by the fact that it was located in the former messenger's office.

Some callers who attempted to slip past resented being called back and they tried to convince the receptionist that they needed to go to the main counter upstairs. Furthermore, at times a queue could form at this point, making its claim to provide a faster service
less plausible and giving rise to additional problems of lack of privacy.

Taken together with the upgrading of waiting areas, these developments go a little way to improving local office conditions. However, the broader shape of service provision is determined not at local office level but by government policy. It is here that the amount of resources available and the overall terms of provision are set. Local office managers often commented on their relative powerlessness to improve local office organisation, given these financial constraints. When this wider perspective is taken into account, some of the changes associated with Service to the Public appear like mere window-dressing. Indeed, this priority was often greeted cynically by managerial staff and opposed by the unions who felt that they were being asked to make improvements of "thin air", whilst the fundamental problem of inadequate staffing was not addressed.
References to Chapter 6

1. Department of Health and Social Security, 
   Service to the Public, A Handbook of good practice, DHSS, 1983 
   p.3.

2. Ibid., p.4.
The parameters of the official debate about social security have been set by the government's overriding concern to reduce, or at least contain, public spending. One consequence of this has been to accentuate the trend towards centralisation of service provision, with larger offices serving a wider catchment area. For example, the Partick office in Glasgow with a caseload of 6,000 is at present threatened with closure. This trend has also called into question the viability of the present network of caller offices. Some, such as the caller office in Bo'ness, have had their opening hours further restricted and may eventually be closed. This policy forces the public either to travel further to visit the social security office or to rely on less popular indirect means of contact.

While the counter service is being contracted, two recent developments - the freephone and a mobile advice unit - aim to extend access to information and advice about social security benefits. The 'freephone' service, which is available in some parts of Scotland only, deals with general queries about benefits (though not the details of individual entitlement); the caller simply picks up the phone and asks for a number free of charge. The mobile information and advisory service consists of a large custom-built van, which tours mainly rural areas where office visits are more difficult, the route being publicised in advance. It is staffed by officers who are trained in both supplementary benefit and contributory benefit work, and has a private interviewing room as well as a public waiting area. These developments, while welcome, only partly fill the gap left by a reduced counter service, as neither is able to process claims or to make payments.

At the same time, as far as supplementary benefit is concerned, reductions in home visiting, and changes in claiming procedure through the introduction of a postal claim form, further restrict the opportunities for personal contact. Whilst postal claiming - at present restricted to the unemployed but possibly to be extended to other groups - may present some advantages for those who find filling in forms relatively unproblematic, it does not help those who are illiterate or who approach form-filling with apprehension. Observation by the author showed a number of callers coming into social security offices clutching empty postal claim forms in the hope that the receptionist would fill them in, or seeking reassurance that they had filled them in correctly.

This change in the claiming procedure not only penalises the most disadvantaged consumers but also has negative consequences from the point of view of controlling fraud and abuse. Home visiting has always served a dual purpose - ostensibly providing an opportunity for officials to reassure themselves about claimants' welfare but at the same time enabling them to check on possible fraud. The greater reliance on indirect forms of claiming mean that the opportunity for personal checks are diminishing so that new methods of control are deemed necessary. One such development is the extension of the activities of the specialist claims control
section. More recently a confidential DHSS management review proposed transforming the home visiting service into a fraud investigation unit, with random visits on claimants to deter "ghost" postal claims. (1) Alternatively, claimants would be asked at random to come into the office for interview. Such a concern with preventing abuse rather than promoting welfare arguably fuels the climate of opinion against "scroungers" and probably depresses take-up.

This same review argues that changes in the home-visiting system are necessary as "claimants now have a higher degree of literacy, more access to telephones and a developing awareness of their rights and of ways of disputing decisions and of circumventing the intention of legal procedures" (2). The findings of our survey, however, indicate that 47% of respondents had some difficulty in completing claim forms, 50% had to phone the social security office from a public call-box and, far from being adept at finding their way around the system, many claimants are unaware of their basic entitlement, let alone how to circumvent legal provisions.

The most ambitious plank in the government's long-term social security strategy is the 20-year programme of phased computerisation. This development offers a number of possibilities for improving the quality of service provision. By cutting down on much of the routine work at present done manually, staff will be released; they could be redirected towards advisory functions which are at present given a low priority. Furthermore, by making case-papers available at the press of a button, computerisation will eliminate one of the main bottlenecks to providing an efficient service for supplementary benefit callers. Computerisation also holds out the prospect of integrating knowledge about supplementary and contributory benefits, so that an individual's entitlement to the complete range of benefits can be made readily available with a view to improving take-up.

Whether these gains will be fully realised, however, will depend on the use to which computerisation is put. At present it is being mentioned in the same breath as manpower savings, with an eventual shedding of 25,000 jobs. A possible outcome is for computerisation to take place within the context of an increasingly centralised, impersonal and randomly monitored social security service. The alternative, which may be more in line with claimants' preferences, is for the computer to be introduced within the framework of a decentralised and more personal service, with staff being transferred to advisory work.
References to Chapter 7

1. Reported in *The Guardian*, 10.5.84

2. Ibid
This study has examined both the process of making contact with the social security office, and the quality of the exchange once contact has been made. The fact that many more people are now drawing benefits can both overload the channels of contact and have a detrimental effect on the quality of the service provided. Our findings show that many people approach the social security office with high expectations of receiving information, advice and practical help with claims. These expectations, however, are often not fully met. Observation of seven social security offices in Scotland, and the findings from a survey of clients using the service, show a number of bottlenecks and and deficiencies in the present pattern of service provision. In particular the problems of contacting the office by telephone, the lack of attention paid to informing clients about entitlements, and delays in the processing of claims were repeatedly mentioned.

While our study aimed to examine the problems of access to the social security system as a whole, the research findings are clearly weighted towards supplementary benefit. Not only do respondents with queries relating to supplementary benefit make up 80 per cent of the total survey, but supplementary benefit claimants also registered much higher levels of dissatisfaction both with physical conditions in the local office and with the quality of their encounters with staff. There is little doubt that the pressures on the supplementary benefit system are particularly acute. Unlike contributory benefits, the numbers of people on supplementary benefit have shown a dramatic increase. The nature and scope of a benefit which was initially envisaged as playing only a minimal role in social security provision has been transformed. Overall, the findings show that supplementary benefit claimants receive a poorer service. This is particularly regrettable given the greater complexity of supplementary compared with contributory benefits. Claimants therefore rely heavily on office staff for guidance.

Public service bureaucracies can too easily neglect the views of their users, who lack a financial sanction or other form of power to advance their interests. Given the value of paid time in our society, it is easy to assume that unpaid time - as in the case of the jobless - is of no significance and that people in this situation have nothing else to do. There is no doubt that these deficiencies could be remedied if they were given sufficient priority and the necessary resources were made available. Some priority areas for action, endorsed by the Scottish Consumer Council, are set out below.

**Locating supplementary benefit caseworkers**

At present, finding supplementary benefit caseworkers is a major obstacle to providing an efficient service. Too often clients have to wait whilst their papers are being sought, or are asked to call back later. Whilst this problem is recognised by staff, a solution has yet to be found. A marker system has been tried by the DHSS
in the past and found wanting. A micro-computer-based case-paper location system is currently being tried out in two DHSS offices.

Recommendation 1

An efficient way of locating supplementary benefit case-papers in local offices should be introduced.

Telephone contact

Our findings show that telephoning the local office is particularly fraught with problems. From the staff viewpoint, the telephone is experienced as a major irritation, particularly in supplementary benefit sections where concentration is needed to assess claims. This attitude is hardly likely to encourage a helpful response. One solution, particularly appropriate where the level of telephone traffic is high, would be physically to remove the telephone from staff assessing claims by creating a separate telephone section. This has been tried in some offices and, whilst it is not without problems, it may be preferable to measures such as confining incoming calls to certain hours of the day or using an answering machine, both of which hinder, rather than facilitate, access for the caller.

Our findings also show that half the supplementary benefit claimants who telephoned the office did so from a public call-box with all its associated difficulties. There is a strong case for giving further consideration to the possibility of extending the use of a 'freephone' service - at present restricted to general claims advice - to all calls to local offices.

Recommendation 2

A separate telephone section should be set up in offices where telephone traffic is high.

Recommendation 3

Further consideration should be given to the possibility of extending the 'freephone' service to all telephone contacts with local offices.

Appointments

At present, appointments are given at the discretion of office staff to certain categories only of supplementary benefit queries. A few claimants in our survey mentioned how they had telephoned the social security office to ask for an appointment - generally to clarify an adverse decision - only to be told that they should come into the office without an appointment. Given that they may anticipate having to wait or only seeing the receptionist, such a policy can act as a deterrent to pursuing a query. A more generous policy of granting appointments on request would be helpful to many claimants.
**Recommendation 4**

Appointments should be available on request to all, whatever their query. At the same time, local offices should continue to cater for callers who are unable, or do not wish, to make an appointment.

**Waiting conditions**

While waiting areas in social security offices are in the process of being upgraded, every effort should be made to ensure that supplementary benefit and contributory benefit sections are improved to an equal standard. At present, many supplementary benefit waiting areas serve as a physical reminder of the lower esteem in which these claimants are held. Although this division, rooted in history, could probably only be completely eradicated by a fundamental restructuring of the social security system, the existence of first and second class waiting rooms is unacceptable.

**Recommendation 5**

Supplementary benefit waiting areas should be upgraded to the same standard as those in contributory benefit sections.

**Privacy**

The lack of privacy during exchanges with social security staff bothered both types of claimants, but supplementary benefit claimants in particular. Improving privacy at the counter and in the interview booths should be given priority when reorganising reception areas. At the same time, more extensive use should be made of private interview rooms.

**Recommendation 6**

Steps should be taken to enhance privacy both at the counter and in supplementary benefit interview booths. More use should also be made of private interview rooms.

**Receptionists**

Our survey shows that personal callers rely a good deal on the receptionist for information and advice about social security benefits. Despite emphasis placed by supervisory staff on the role of the receptionist, some offices visited were found to be relying on temporarily upgraded clerical assistants to carry out this task. Apart from ensuring that all receptionists are fully trained clerical officers, it seems good policy to rotate receptionists on a regular basis. This not only provides a respite for the individual but also prevents reception being seen by other staff as divorced from the rest of the office. Another way of reducing the pressure on the receptionist, whilst improving the quality of service to the public, would be to increase the number of staff on duty at any one time. It is the policy of some large offices to operate a reserve pool of receptionists, who can be called upon if
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Working Paper 3: Hard Terms (an analysis of the unemployed on supplementary benefit in Northern Ireland, by John Ditch)

from the Welsh Consumer Council, Oxford House, Hills Street, Cardiff CF1 2DR. Telephone 0222 396056.


These working papers are all available free on request.
queues build up as closing time approaches. The more liberal use of reserve receptionists, say whenever a queue rises above ten people, would help reduce waiting times for callers. In addition, the extension of the fast-stream reception point can cut queues without impinging on the quality of service.

Recommendation 7
Receptionists should be fully-trained clerical officers.

Recommendation 8
Receptionists should be rotated on a regular basis.

Recommendation 9
More generous use should be made of reserve receptionists to reduce waiting times for callers.

Recommendation 10
A fast-stream reception point should be introduced in all offices with high levels of caller traffic.

Information and advice
Queries relating to entitlement or to clarification of decisions are given little weight in the present structure. The claimants in our survey had opted to take their problems outside the official system to an independent advice agency or a local authority welfare rights office, having failed to receive a satisfactory answer from the local social security office. At present the onus is on the claimant to find out about entitlement and make the appropriate claim. Given the complexity of the benefits system, such self-help devices as leaflets, and in one office the introduction of a self-operated computer benefits advice service, as yet have only a limited role. A greater onus should be placed on staff to inform clients about benefit entitlements, including, in the case of supplementary benefit, any in respect of additional requirements. More time also needs to be set aside for explaining decisions to those who seek their clarification.

Recommendation 11
Social security staff should have a duty to inform clients about the full range of possible entitlements.

Recommendation 12
Staff resources should be set aside for explaining decisions to those seeking their clarification.
Quality of service

A good service should not only be measured in terms of the prompt processing of claims but also in terms of the way in which queries of a more general nature are handled. Many of the above proposals, aimed at improving the service for clients, imply an expansion of the number of staff employed by local offices, at least in the short run. Increasing staff resources, however, is not envisaged by the DHSS service to the public initiative, and office staff are often resentful of the way in which they are being asked to give more at a time when they are already overstretched. There should be a thorough reassessment of staffing, which takes account of, and gives priority to, the wide range of needs experienced by users of the social security system. In the longer run, computerisation will release many staff from manually assessing supplementary benefit claims, and priority should be given to transferring significant numbers of them to much-needed advisory work.

Recommendation 13

A thorough review of staff complements should be undertaken and priority given to transferring staff released through computerisation to advisory work.