



Complaints Annual Report

2017 | 2018

EAST AYRSHIRE COUNCIL
COMPLAINTS ANNUAL REPORT 2017/18

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September 2018

INTRODUCTION

1. The Council's Complaints Handling Procedure was introduced on 1 September 2012 and is based on the model developed by the Scottish Public Services Ombudsman (SPSO). It reflects the Council's commitment to valuing complaints and seeks to resolve customer dissatisfaction as close as possible to the point of service delivery.
2. Our aim is to 'get it right first time' with quick, simple and streamlined complaints handling with local, early resolution by capable, well-trained staff.
3. The 2017/18 Annual Complaints Performance report is presented in accordance with the Scottish Public Services Ombudsman's National Performance Framework which was published in August 2013.

COMPLAINTS HANDLING PROCEDURE

4. East Ayrshire Council's Complaints Handling Procedure (CHP), which was introduced in September 2012, defines a complaint as being:

'An expression of dissatisfaction by one or more members of the public about the Council's action or lack of action, or about the standard of service provided by or on behalf of the Council.'

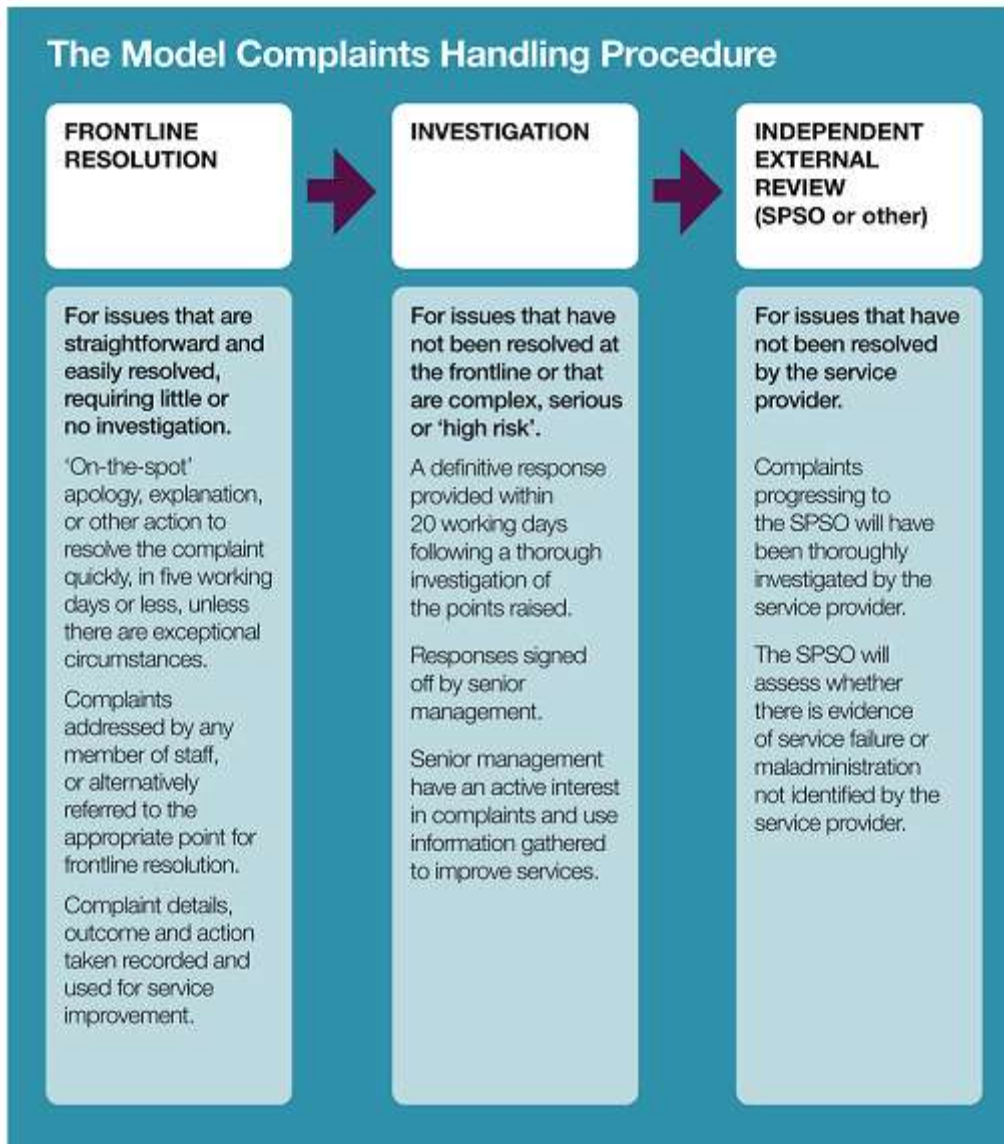
5. Our complaints process provides two opportunities to resolve complaints internally:

Stage One: Frontline Resolution

6. Frontline resolution aims to quickly resolve straightforward customer complaints that require little or no investigation. Any member of staff may deal with a complaint at this stage.
7. The main principle is to seek early resolution, resolving complaints at the earliest opportunity and as close to the point of service delivery as possible. This may mean a face-to-face discussion with the customer, or asking an appropriate member of staff to deal directly with the complaint. Frontline resolution should be completed within five working days.

Stage Two: Investigation

8. Not all complaints are suitable for frontline resolution and not all complaints will be satisfactorily resolved at that stage. Complaints handled at the Stage Two of the complaints handling procedure are typically complex or require a detailed examination before a position can be agreed. These complaints may already have been considered at the frontline resolution stage, or they may have been identified from the start as needing immediate investigation.
9. An investigation aims to establish all the facts relevant to the points made in the complaint and to give the customer a full, objective and proportionate response that represents the final position. An investigation should be completed within 20 working days, although extensions to this timescale can be required for particularly complex cases.
10. Once the investigation stage has been completed, the customer has the right to approach the SPSO if they remain dissatisfied.
11. The following diagram describes the Council's CHP in more detail:



Note: The SPSO does not consider complaints regarding factoring services. These are considered by the Housing and Property Chamber First-Tier Tribunal for Scotland.

12. In support of the CHP, the Council has developed a bespoke Complaints Management System which enables us to record, track and report on complaints information across all Services. The System not only captures details of the nature of complaints but also the action that is taken in response, including improvements made to how the Council delivers services that may have been the subject of a complaint.
13. Monitoring complaints information and the preparation and publication of this Annual Report helps to provide a clear basis for identifying service failures ('learning from complaints') and information on how effectively the Council is handling complaints ('complaints performance').

NATIONAL PERFORMANCE FRAMEWORK

14. Compliance with the SPSO's local authority model Complaints Handling Procedure is monitored by Audit Scotland in conjunction with the SPSO.
15. The complaints performance data contained within this report also informs the Council's Annual Public Performance Report, which summarises the Council's performance in relation to Statutory Performance Indicators as well as progress and achievements on partnership activity with our Community Planning Partners.
16. The implementation of the SPSO's model CHP by local authorities means that all councils are required to record, report and publish information on all the complaints they receive, providing significant opportunities for councils to identify service improvements from data that was previously unrecorded.
17. Local authorities are required to monitor and assess complaints handling data to provide assurance in relation to their performance, to facilitate continuous improvement and to assist in benchmarking between local authorities.
18. The SPSO, in conjunction with local authorities, has developed a suite of high level performance indicators against which local authorities should assess and monitor their complaints handling performance in relation to the model CHP. The information provided below details East Ayrshire Council's performance in 2017/18. For comparison purposes, the performance information relating to the previous year is also provided.

Indicator 1 – The total number of complaints closed per thousand population.

19. This indicator records the total number of complaints received by the Council. This is the sum of the number of complaints received at stage one (frontline resolution) and the number of complaints received at stage two (investigation).

| | Total number of complaints closed | Population | Number of complaints by 1,000 population |
|---------|--|-------------------|---|
| 2013/14 | 181 | 122,720 | 1.47 |
| 2014/15 | 104 | 122,440 | 0.85 |
| 2015/16 | 92 | 122,130 | 0.78 |
| 2016/17 | 139 | 122,060 | 1.1 |
| 2017/18 | 116 | 122,200 | 0.9 |

Indicator 2 – Complaints closed at stage one and stage two as a percentage of all complaints closed.

20. The term "closed" refers to a complaint that has had a response sent to the customer and at the time no further action is required (regardless at which stage it is processed).

| Number of Complaints Closed and as % of all Complaints | | | |
|---|----------------|----------------|-------------------|
| | Stage 1 | Stage 2 | Escalated* |
| 2013/14 | 154 85.1% | 16 8.8% | 11 6.1% |
| 2014/15 | 82 78.8% | 7 6.7% | 15 14.4% |
| 2015/16 | 75 81.5% | 12 13.0% | 5 5.4% |
| 2016/17 | 115 82.7% | 11 7.9% | 13 9.4% |
| 2017/18 | 83 71.6% | 16 13.8% | 17 14.7% |

*This relates to complaints “escalated” from the frontline resolution to the investigation stage.

Indicator 3 – The number of complaints upheld, partially upheld or not upheld at each stage as a percentage of complaints closed in full at each stage.

21. This indicator records the formal outcome recorded for each complaint.

| | Number of Complaints Closed | | | Number of complaints upheld and as % of all complaints closed | | | Number of complaints partially upheld and as % of all closed | | | Number of complaints not upheld and as % of all complaints closed | | |
|----------------|-----------------------------|---------|----|---|------------|------------|--|------------|------------|---|------------|-------------|
| | Stage 1 | Stage 2 | E* | Stage 1 | Stage 2 | E* | Stage 1 | Stage 2 | E* | Stage 1 | Stage 2 | E* |
| 2013/14 | 154 | 16 | 11 | 47 30.5% | 3 18.8% | 3 27.3% | 36 23.4% | 5 31.3% | 3 27.3% | 71 46.1% | 8 50.0% | 5 45.5% |
| 2014/15 | 82 | 7 | 15 | 19 23.2% | 0 0.0% | 4 26.7% | 19 23.2% | 4 57.1% | 4 26.7% | 44 53.7% | 3 42.9% | 7 46.7% |
| 2015/16 | 75 | 12 | 5 | 12 16.0% | 2 16.7% | 1 20.0% | 16 21.3% | 3 25.0% | 4 80.0% | 47 62.7% | 7 58.3% | 0 0.0% |
| 2016/17 | 115 | 11 | 13 | 24 20.9% | 0 0.0% | 1 7.75 | 26 22.6% | 5 45.5% | 5 38.5% | 65 56.5% | 6 54.5% | 7 53.8% |
| 2017/18 | 83 | 16 | 17 | 12 14.5% | 3 18.8% | 1 5.9% | 17 20.5% | 4 25% | 6 35.3% | 54 65.1% | 9 56.3% | 10 58.8% |

Indicator 4 – The average time in working days for a full response to complaints at each stage.

22. This indicator represents the average time in working days to close complaints at stage one and at stage two of the CHP.

| | Number of working days for all complaints closed | | | Number of complaints | | | Average time in working days to respond to complaints | | |
|----------------|--|---------|-----|----------------------|---------|----|---|---------|------|
| | Stage 1 | Stage 2 | E* | Stage 1 | Stage 2 | E* | Stage 1 | Stage 2 | E* |
| 2013/14 | 1188 | 488 | 343 | 154 | 16 | 11 | 7.7 | 30.5 | 31.2 |
| 2014/15 | 837 | 258 | 389 | 82 | 7 | 15 | 10.2 | 36.9 | 25.9 |
| 2015/16 | 746 | 358 | 129 | 75 | 12 | 5 | 9.9 | 29.8 | 25.8 |
| 2016/17 | 969 | 261 | 341 | 115 | 11 | 13 | 8.4 | 23.7 | 26.2 |
| 2017/18 | 491 | 336 | 364 | 83 | 16 | 17 | 5.9 | 21.0 | 21.4 |

*This relates to complaints "escalated" from the frontline resolution to the investigation stage.

Indicator 5 – The number and percentage of complaints at each stage which were closed in full within the set timescales of 5 and 20 working days.

23. This indicator presents the number and percentage of complaints closed within 5 working days at stage one and 20 working days at stage two.

| | Number of complaints closed | | | Number of complaints closed within 5 working days for Stage 1 and 20 working days for Stage 2 and escalated complaints, including %. | | |
|----------------|-----------------------------|---------|----|--|-------------|-------------|
| | Stage 1 | Stage 2 | E* | Stage 1 | Stage 2 | E* |
| 2013/14 | 154 | 16 | 11 | 90 58.4% | 5 31.3% | 7 63.6% |
| 2014/15 | 82 | 7 | 15 | 36 43.9% | 1 14.3% | 6 40.0% |
| 2015/16 | 75 | 12 | 5 | 38 50.7% | 3 25.0% | 2 40.0% |
| 2016/17 | 115 | 11 | 13 | 64 55.7% | 7 63.6% | 9 69.2% |
| 2017/18 | 83 | 16 | 17 | 65 78.3% | 10 62.5% | 11 64.7% |

*This relates to complaints “escalated” from the frontline resolution to the investigation stage.

Indicator 6 – The number and percentage of complaints at each stage where an extension to the 5 or 20 working days timeline has been authorised.

24. The Council’s CHP allows for an extension to the timescales to be authorised in certain circumstances.

| | Number of complaints closed | | Number of complaints closed where an extension had been authorised, including %. | |
|----------------|-----------------------------|---------|--|------------|
| | Stage 1 | Stage 2 | Stage 1 | Stage 2 |
| 2013/14 | 154 | 16 | 6 3.9% | 8 50.0% |
| 2014/15 | 82 | 7 | 7 8.5% | 3 42.9% |
| 2015/16 | 75 | 12 | 2 2.7% | 5 41.7% |
| 2016/17 | 115 | 11 | 10 8.7% | 4 36.4% |
| 2017/18 | 83 | 16 | 9 10.8% | 4 25% |

Indicator 7 – A statement to report customer satisfaction with the complaints service.

25. The Council's next complaints customer satisfaction survey will be undertaken in 2018/19.

Indicator 8 – A statement outlining changes or improvements to services or procedures as a result of the consideration of complaints.

26. This qualitative indicator is intended to identify service improvements that were derived from complaints during the reporting period.
27. The Council records relevant service improvements within the Complaints Management System and these are reported regularly to Elected Members through the Council's East Ayrshire Performs report which is presented to both the Council's Cabinet and the Governance and Scrutiny Committee and are available to the public from the Council's website. In addition, complaints performance data, including improvement actions, are considered routinely at Departmental Management Team meetings.
28. The following is a summary of some of the service improvements arising from complaints that were recorded in 2017/18.
- Attendance at SPSO Complaints Investigation Training, further increasing the pool of employees undertaking Stage Two complaints investigations.
 - Complaints Management System improvements to further strengthen performance reporting and monitoring.
 - Strengthened administrative processes within the Ayrshire Roads Alliance.
29. In addition to the improvements noted above, the Council continues to participate in the Scottish Complaint Handlers Network, which, with the support of the Scottish Public Services Ombudsman and the Complaints Standards Authority, seeks to drive improvement activity at a national level.

CASE STUDIES

30. Case studies are an effective way of illustrating how a complaint can have an impact on an individual and also lead to wider change or improvements in how services are delivered. The following selection of case studies, therefore, provide examples of the issues that have been dealt with by the Council under its CHP over the last year.

Case Study 1:

Ms X complained to the Council about water ingress from a shared chimney and subsequent communications with council operatives in relation to the

required repairs. The chimney at the centre of the complaint was shared between a Council property and a private owner.

Following investigation, and although the Council apologised for some of the delays in respect of getting access to the property, the Council did not uphold the complaint establishing that it was each owner's responsibility to maintain the chimney on their half of the property. There was no water ingress evident on the Council side with maintenance having been carried out to the Council's property. It was established that the source of the water ingress was on the side of the chimney in private ownership. Moreover, the investigation established that all communications had been professional and that all questions raised had been addressed.

This complaint was subsequently escalated to the SPSO and an agreement was reached between the Council and the other owner to share the cost of removing the chimney. The SPSO was satisfied that the Council had acted appropriately in relation to this matter.

Case Study 2:

Mrs X complained to the Council in relation to an ongoing noise issue from nearby commercial premises, and the handling of her case by the Council. The complainant raised a number of concerns, including a lack of information on noise testing carried out, a significant delay in attending the site and generally poor standards of customer service. The investigation which followed noted that the commercial premises in question had failed to act upon earlier recommendations made by the Council (including measures to reduce noise levels) which would have helped to alleviate the situation.

The complainant had also expressed concern that it had taken an unacceptably long period of time for officers to attend the site. The investigation upheld this aspect of the complaint, noting that the alleged noise being experienced was a particular issue in the summer months. The Council apologised for the delay in attending the site, and provided an undertaking that the situation would be reassessed at the appropriate time of year. Subsequently, a number of visits to the site took place during summer 2018. Noise levels during these visits were not sufficient to be classed as 'statutory nuisance', and the Council continues to monitor the situation closely.

Case Study 3:

Mr X applied for planning permission to convert commercial premises into a dwelling house. His application was considered and ultimately refused because it did not comply with policies set out in the Local Development Plan. Mr X was unhappy with this decision and complained to the Council, citing a number of reasons including perceived flaws in the decision-making process itself, the assessment made by Building Standards and alleged bias against him.

The investigation of the complaint established that the assessment of the application by officers had been professional and provided a considered judgment. The officer was found to have acted appropriately when requesting additional information from the applicant. Furthermore, the assessment of the building was found to have been carried out to the expected standard, and indeed, had discovered that unauthorised works had taken place on site, and noted a number of further concerns regarding the safety of the building.

The allegation of bias against officers was reviewed as part of the complaint and no evidence was found of any deliberate attempts to cause offence or display bias against the applicant.

No evidence was found to support the substantive issue made by the applicant and the complaint was not upheld.

Case Study 4:

Ms X complained to the Council about several matters relating the Ayrshire Roads Alliance.

During the course of investigations into this complaint, a discrepancy between information held within different internal systems was identified. As a consequence of this, an internal review was undertaken to ensure that the systems in question were more fully aligned, to prevent any further issues arising in future.

Additional areas for improvement were also identified in relation to the initial handling of this complaint, which were also addressed.

The complaint was therefore upheld and a comprehensive response provided to the complainant, detailing the identified issues and the actions which would be undertaken by ARA to address these matters.

SPSO ANNUAL STATISTICS 2017/18

31. On 23 August 2018, the Council received its Annual Letter from the SPSO which provided detailed information on complaints considered by the SPSO relating to the Council. The Annual Letter provided details of the numbers of complaints about the Council considered and determined by the SPSO during 2017/18, and is presented within the table at Appendix 1 along with comparative information from previous years.
32. The number of complaints about the Council received by the SPSO prematurely (before the complainant had exhausted the Council's complaints handling process) has fallen to the lowest level since the SPSO started recording such data in 2004/05. The number of premature complaints

received by the SPSO about the Council in 2017/18 fell to 27.8% compared to 72% in 2016/17 and was below the Scottish average of 28.1%.

SOCIAL WORK COMPLAINTS

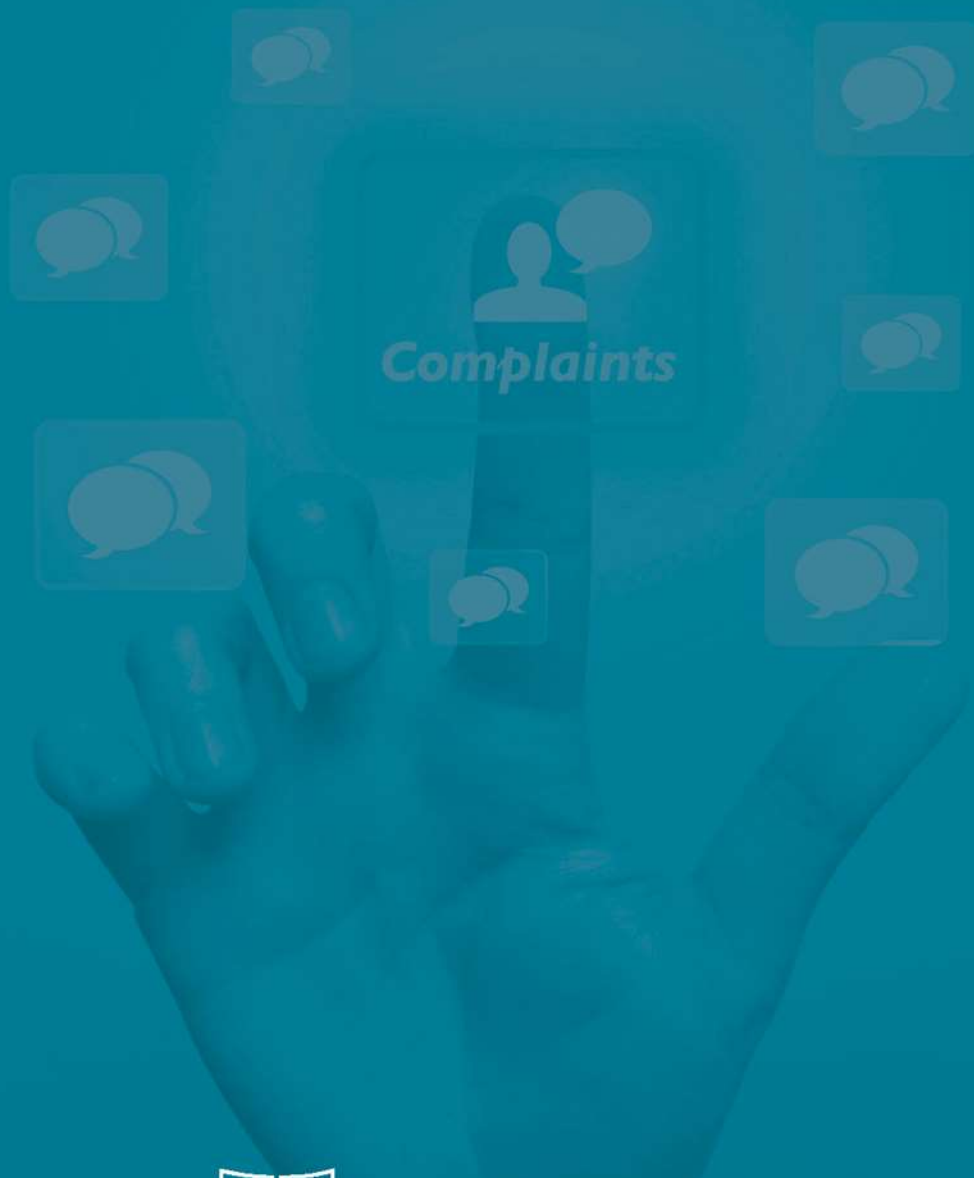
33. A new procedure for dealing with complaints about Social Services was introduced on 1 April 2017 and follows the same two-stage model complaints handling procedure that applies to complaints received by the Council. Performance reporting under these new arrangements is achieved through the Integrated Joint Board (IJB) as part of the Health and Social Care Partnership's established governance arrangements.
34. For the reporting period of 1 April 2017 to 31 March 2018, 118 complaints were received by the Health and Social Care Partnership. The Social Work and Social Care Leadership Forum has undertaken a review of complaints received in 2017/18 and emerging trends have been identified. Improvement actions are now being taken forward by Senior Managers, including providing learning opportunities for staff.
35. During 2017/18 Internal Audit reviewed the new complaints arrangements within Social Work and found reasonable assurance could be taken from the controls operating in this area. It was found that key controls exist and were applied consistently and effectively in most areas. Objectives of internal control had been met in most areas within the scope of the audit. The Chief Auditor notes that this is a good result in year one of implementation. In line with established arrangements Internal Audit will follow up the recommendations made during 2018/19. The Internal Audit report is available on the Councillors' electronic Noticeboard.

CONCLUSION

36. This Annual Complaints Report for the Council complies with the SPSO's requirement to publish complaints performance information and also reiterates the Council's commitment to valuing complaints. Importantly, the Report captures a number of the improvements to Council services that have been derived from complaints and demonstrates our continued determination to 'get it right first time'.

East Ayrshire Council: Complaints considered and determined by the SPSO

| | 04/05 | 05/06 | 06/07 | 07/08 | 08/09 | 09/10 | 10/11 | 11/12 | 12/13 | 13/14 | 14/15 | 15/16 | 16/17 | 17/18 |
|---------------------------------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|--------------|
| Total Number of Referrals | 20 | 16 | 21 | 41 | 25 | 52 | 44 | 35 | 27 | 36 | 29 | 29 | 25 | 18 |
| Premature – EAC | 16 (80%) | 13 (81%) | 14 (67%) | 17 (42%) | 21 (84%) | 38 (73%) | 22 (50%) | 21 (60%) | 15 (55%) | 19 (53%) | 22 (75%) | 16 (55%) | 18 (72%) | 5 (27.8%) |
| Premature – Scotland | 53% | 50% | 49% | 49% | 60% | 51% | 45% | 43% | 40% | 40% | 41% | 38% | 36% | 28.1% |
| Investigation Stage – Outcomes | | | | | | | | | | | | | | |
| Fully Upheld | - | - | - | - | - | - | - | - | - | - | - | - | - | - |
| Partly Upheld | 1 | - | - | - | - | - | - | - | 1 | - | 1 | - | - | - |
| Not Upheld | - | - | 1 | 4 | - | - | 3 | 1 | 1 | - | - | - | - | - |



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