



Complaints Annual Report

2022 | 2023

EAST AYRSHIRE COUNCIL
COMPLAINTS ANNUAL REPORT 2022/23

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August 2023

INTRODUCTION

1. The Council's Complaints Handling Procedure is based on the revised Model Complaints Handling Procedure which all local authorities were required to implement with effect from 1 April 2021. 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 and local, early resolution by capable, well-trained staff.
3. This 2022/23 Annual Complaints Performance Report is presented in accordance with the Scottish Public Services Ombudsman's national performance framework, which was published in March 2022, and represents our first year of reporting against this revised framework.
4. 2022/23 represented something of a return to 'normal' after the significant disruption to council services, including complaints handling, during and in the immediate aftermath of the covid-19 pandemic. Overall complaints numbers have reduced, returning closer to pre-pandemic levels.
5. This report provides an update on our complaints handling performance during 2022/23 and the information presented will also shape the Council's continuous improvement agenda for complaints handling in 2023/24 and beyond.
6. We have also taken the opportunity within this report to highlight some of the learning from complaints over the last year, and some of the service improvements that have been implemented as a result.

COMPLAINTS HANDLING PROCEDURE

7. This annual performance report relates to East Ayrshire Council's revised Complaints Handling Procedure (CHP), which was introduced in April 2021 and which 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.'

8. This complaints process provides two opportunities to resolve complaints internally:

Stage One: Frontline Response

9. Frontline response 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.
10. 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 response should be completed within five working days.

Stage Two: Investigation

11. Not all complaints are suitable for frontline response 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.
12. 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.
13. Once the investigation stage has been completed, the customer has the right to approach the SPSO if they remain dissatisfied.
14. The following diagram describes the Council's CHP in more detail:

Stage 1: Frontline response	Stage 2: Investigation	Independent external review (SPSO or other)
<p>For issues that are straightforward and simple, requiring little or no investigation. ‘On-the-spot’ apology, explanation, or other action to put the matter right</p> <p>Complaint resolved or a response provided in five working days or less (unless there are exceptional circumstances)</p> <p>Complaints addressed by any member of staff, or alternatively referred to the appropriate point for frontline response</p> <p>Response normally face-to-face or by telephone (though sometimes we will need to put the decision in writing)</p> <p>We will tell the customer how to escalate their complaint to stage 2</p>	<p>Where the customer is not satisfied with the frontline response, or refuses to engage at the frontline, or where the complaint is complex, serious or 'high-risk'</p> <p>Complaint acknowledged within three working days.</p> <p>We will contact the customer to clarify the points of complaint and outcome sought (where these are already clear, we will confirm them in the acknowledgement)</p> <p>Complaint resolved or a definitive response provided within 20 working days following a thorough investigation of the points raised</p>	<p>Where the customer is not satisfied with the stage 2 response from the service provider</p> <p>The SPSO will assess whether there is evidence of service failure or maladministration not identified by the service provider</p> <p>In relation to social work decisions the SPSO can also look at professional decisions</p> <p>Some complaints may also have an alternative route for independent external review</p>

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

15. In support of the CHP, the Council has developed a bespoke Complaints Management System that 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.
16. 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

17. Compliance with the SPSO's local authority model Complaints Handling Procedure is monitored by Audit Scotland in conjunction with the SPSO.
18. The complaints performance data contained within this report also informs the Council's annual public performance reporting, 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.
19. 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.

20. 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.
21. The SPSO, in conjunction with local authorities, 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.
22. The national performance framework has recently been adapted to reflect the revised CHP. The revised framework was published in March 2022 and has now come into effect with regard to reporting from 2022/23 onwards.
23. This report has been prepared in accordance with the requirements of the revised Scottish Public Services Ombudsman's national performance framework 2022.
24. On this basis, the information provided below details East Ayrshire Council's performance in 2022/23. For comparison purposes, the performance information relating to previous years is also provided.

Indicator 1 – The total number of complaints received

25. 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 (this includes Escalated complaints as they were first received at Stage One) and the number of complaints received directly at Stage Two.
26. For benchmarking purposes the number of complaints received by 1,000 population is also calculated.

	Total number of complaints received	Population	Number of complaints by 1,000 population
2018/19	97	121,940	0.80
2019/20	121	121,840	1.0
2020/21	115	122,010	0.9
2021/22	173	121,600	1.4
2022/23	132	122,020	1.1

Indicator 2 – The number and percentage of complaints at each stage that were closed in full within the set timescales of 5 and 20 working days

27. This indicator presents the number and percentage of complaints closed within 5 working days at Stage One, within 20 working days at Stage Two and within 20 working days after Escalation.

	Number of complaints closed			The number of complaints closed in full, within the set timescale, as a percentage of all complaints responded to in full at each stage		
	Stage 1	Stage 2	E*	Stage 1	Stage 2	E*
2018/19	62	15	20	43 69.4%	10 66.7%	20 100.0%
2019/20	90	13	18	66 73.3%	10 76.9%	13 72.2%
2020/21	67	12	24	55 82.1%	10 83.3%	21 87.5%
2021/22	115	21	35	96 83.5%	14 66.7%	31 88.6%
2022/23	74	27	29	60 81.1%	17 63.0%	25 86.2%

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

Indicator 3 – The average time in working days for a full response to complaints at each stage.

28. This indicator represents the average time in working days for a full response to complaints at each stage.

	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*
2018/19	372	429	365	62	15	20	6.0	28.6	18.3
2019/20	515	263	324	90	13	18	5.7	20.2	18.0
2020/21	362	222	451	67	12	24	5.4	18.5	18.8
2021/22	603	545	574	115	21	35	5.2	26.0	16.4
2022/23	377	676	530	74	27	29	5.1	25.0	18.3

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

Indicator 4 – The outcome of complaints at each stage

29. This indicator represents the outcome recorded for each complaint. There are four outcome categories: resolved, upheld, partially upheld and not upheld.

	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*
2018/19	62	15	20	18 29.0%	1 6.7%	2 10.0%	10 16.1%	6 40.0%	10 50.0%	34 54.8%	8 53.3%	8 40.0%
2019/20	90	13	18	24 26.7%	0 0.0%	1 5.6%	22 24.4%	8 61.5%	10 55.6%	44 48.9%	5 38.5%	7 38.9%
2020/21	67	12	24	13 19.4%	0 0.0%	3 12.5%	18 26.9%	1 8.3%	11 45.8%	36 53.7%	11 91.7%	10 41.7%
2021/22	115	21	35	14 12.2%	2 9.5%	2 5.7%	31 27.0%	5 23.8%	6 17.1%	64 55.7%	14 66.7%	27 77.1%
2022/23	74	27	29	17 23.0%	3 11.1%	3 10.3%	19 25.7%	11 40.7%	6 20.7%	36 48.6%	13 48.1%	19 65.5%

In addition, during 2021/22, six (5.2%) Stage 1 complaints were resolved and in 2022/23, two (2.7%) Stage 1 complaints and 1 (3.4%) Escalated complaints were resolved. This reflects the introduction of the new 'resolved' outcome with effect from 1 April 2021.

IMPROVEMENT ACTIONS – LEARNING FROM COMPLAINTS

30. Learning from complaints and using this information to improve the services that we provide is an important part of the complaints procedure.
31. In terms of improvement actions identified in relation to complaints handled in 2022/23, the recurring topic is **communication** – communication within and between services, communication between the council and contractors/companies acting on our behalf, and communication between the council and individual service users.
32. In response to this, a number of service specific improvement actions have been identified, relating to:
 - information sharing about policies/procedures across particular staff groups;
 - training and awareness raising for staff related to issues identified within complaints; and
 - management action to improve how information is shared with service users.
33. One particular complaint led to improvements to how we as a Council communicate with executors/family members after a bereavement, with a review of some of the automated letters that are issued on such occasions.
34. Another complaint led a management team to review the service's approach to discussing incidents with parents and carers, considering ways to monitor how effective and supportive this is, and how it could be improved.
35. On another occasion, a complaint led to an internal grant system being updated to ensure that the applicant received a complete list of reasons for an application being returned, to allow all of these issues to be addressed in any subsequent applications.
36. The case studies later in this report highlight some other practice examples where improvements have been identified and implemented as a consequence of the complaint investigation.
37. In addition to the improvements noted herein, 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

38. 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 anonymised case studies provide examples of the some of the issues that have been dealt with by the Council under its CHP over the last year.

Case Study A

Ms X complained about the Council's failure to arrange a face-to-face meeting with her, with a British Sign Language Interpreter present, within an appropriate timeframe, in order to provide assistance with her Council Tax Reduction (CTR) application.

The complaint centred on the claim that Ms X informed the Council of her needs as a deaf person, and instead of arranging a face-to-face meeting, the Council provided Ms X with a paper copy of the CTR application form for completion.

The investigation found that, despite eventually arranging a face-to-face meeting with an interpreter present, the Council had not fully understood Ms X's needs when she first requested assistance and she had to wait an unacceptably long time to receive the support she needed. The complaint was therefore upheld.

As a result of the complaint, an awareness raising exercise took place, and clarity was provided to employees regarding their role in supporting deaf people appropriately, including the need to arrange interpretation support and a face-to-face meeting in some cases.

Case Study B

Mr X had been experiencing ongoing issues in relation to his neighbour's trees blocking out light and leaving debris in his garden. Advice had been sought from the Council's Planning Service about tree preservation orders, high hedge regulations, amenity notices and possible enforcement action that might be undertaken by the Council.

Mr X complained that the professional planning advice provided did not help to resolve the issues with the trees at his property. The complaint was not upheld, as it was found that the advice provided by the Planning Service was correct, and the Council did not have the authority to intervene in this particular situation.

However, noting that this issue had arisen from a long running dispute with his neighbour, the complainant was also signposted to the Council's

Vibrant Communities Team to see if a mutually acceptable mediated resolution could be reached between the neighbours about the trees.

A mediated meeting took place and agreement was reached allowing the neighbour access to maintain the trees from Mr X's garden and a longer term approach to managing the situation was also agreed. Both parties were happy with the outcome of the mediation.

Case Study C

Ms Y complained to the Council regarding the behaviour of a Council Officer who served her with a fixed penalty notice for dog fouling at a local park. She accepted and paid the fixed penalty but complained about the way the Council Officer handled the situation and the subsequent Stage 1 complaint investigation.

The complaint was partially upheld. There was no evidence to support the claims made about the Officer's behaviour; and the handling of the previous Stage 1 complaint was found to be fully compliant with the CHP. However the complaint investigation found that the fixed penalty public notices in the park were out of date and as a result they did not display the current fixed penalty fine value (£80) for a dog fouling offence.

The signage issue was addressed as a consequence of the complaint, and other learning points identified for the Team, including best practice in relation to the presentation of ID badges so that the public can be assured that they are dealing with an accredited Council employee.

Case Study D

Mr Y complained to the Council about entry into his house by a council contractor to conduct an Electrical Installation Condition Report (EICR).

The Council has an obligation to carry out mandatory electrical testing and EICRs of council owned properties under the Housing (Scotland) Act 2014, however in this instance, the contractor entered the property to undertake an EICR, even though the EICR for this property had already been undertaken.

The Council upheld this complaint and apologised for the mistakes that were made in this case, recognising that this was due to a communication issue between the Council and its contractor. In response to this a new procedure was instituted, ensuring that a similar event cannot happen again.

SPSO ANNUAL STATISTICS 2022/23

39. The number of complaints about the Council considered and determined by the SPSO during 2022/23 are presented within the table at the Appendix included in this report along with comparative information from previous years.
40. The total number of complaints about the Council received by the SPSO has risen, to 23 in 2022/23, compared to 21 in 2021/22. This included 5 (21.7%) premature complaints (before the complainant had exhausted the Council's complaints handling process), compared to 8 (38.1%) premature complaints in 2021/22. The Scottish average for premature complaints in 2022/23 was 13.2%.

SOCIAL WORK COMPLAINTS

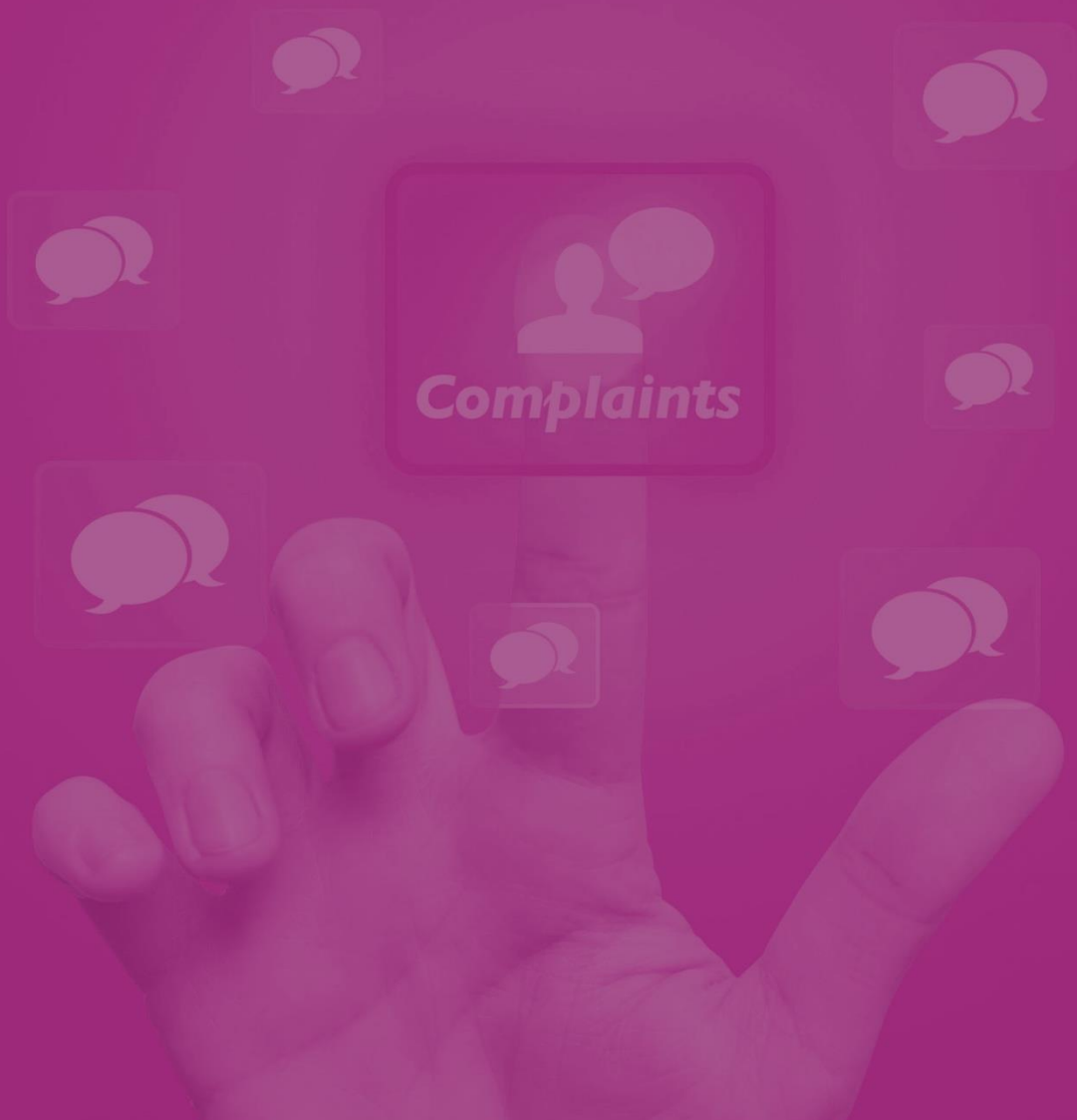
41. The introduction of the revised National Model CHP saw the integration of social work complaints within the standard CHP for Councils, meaning that the Council and Health and Social Care Partnership now apply the same standard complaints handling procedure. However, we continue to report separately on those complaints received and handled by the Council and those received and responded to by the Health and Social Care Partnership.
42. For the reporting period of 1 April 2022 to 31 March 2023, 120 complaints were received by the Health and Social Care Partnership. The Annual Complaints Report for the Health and Social Care Partnership was presented to the meeting of the Integrated Joint Board on 21 June 2023.

CONCLUSION

43. 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

	06/07	07/08	08/09	09/10	10/11	11/12	12/13	13/14	14/15	15/16	16/17	17/18	18/19	19/20	20/21	21/22	22/23
Total Number of Referrals	21	41	25	52	44	35	27	36	29	29	25	18	25	17	11	21	23
Premature – EAC	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%)	3 (12.0%)	6 (35.3%)	2 (18.2%)	8 (38.1%)	5 (21.7%)
Premature – Scotland	49%	49%	60%	51%	45%	43%	40%	40%	41%	38%	36%	28.1%	23.5%	21.4%	26.8%	26.9%	13.2%
Investigation Stage – Outcomes																	
Fully Upheld	-	-	-	-	-	-	-	-	-	-	-	-	1	1	-	-	-
Partly Upheld	-	-	-	-	-	-	1	-	1	-	-	-	1	-	-	-	-
Not Upheld	1	4	-	-	3	1	1	-	-	-	-	-	-	-	-	-	-



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