## Committee report



## Regularity audit of complaints handling and reporting

**Committee** Audit and Standards

#### **Report by Assistant Chief Executive**

## 1. Object of report

To advise the committee on the findings of a regularity audit of complaints handling and reporting. This engagement is included in the annual Internal Audit plan for 2018/19.

### 2. Background

SPT strives to satisfy customers in relation to every aspect of its service. If customers are not satisfied then a complaint can be submitted.

#### Legislation

The Public Services Reform (Scotland) Act 2010 gave the SPSO the authority to lead the development of simplified and standardised complaints handling procedures across the public sector. SPT adopted the Scottish Public Services Ombudsman (SPSO) Model Complaint Handling Procedure from April 2014.

### **Definition**

A complaint is 'an expression of dissatisfaction by one or more members of the public about SPT's action or lack of action, or about the standard of service provided by or on behalf of SPT. A complaint may relate to the following:

- failure to provide a service;
- inadequate standard of service;
- dissatisfaction with local authority policy;
- treatment by or attitude of a member of staff;
- disagreement with a decision where the customer cannot use another procedure (for example an appeal) to resolve the matter; and
- failure to follow the appropriate administrative process.'

The following matters are not deemed to be a complaint:

- complaints that are more than 12 months old from the time of the event that stakeholder(s) want to complain about (i.e. time bound);
- complaints that are a disagreement with or refusal to accept legal matters which SPT is obliged to comply with;
- situations that are covered by a right of appeal;

- a complaint where legal proceedings or court action has started;
- a complaint that has already been heard by a court or tribunal;
- a complaint that has already been investigated and given a final decision on; and
- complaints about opinions or judgements.

The objective of this engagement was to review complaints handling and reporting administration arrangements in accordance with regulations and model guidance.

This engagement tested elements of the internal controls and mitigation against SPT 22: Governance arrangements, as identified in the Corporate Risk register.

## 3. Outline of findings

Complaints handling arrangements are in accordance with the SPSO model guidance.

Engagement testing (January 2019) identified a requirement to review and refresh procedural guidance and performance reporting arrangements.

There are areas for improvement, and these areas have been addressed by four audit recommendations. Legal Services management have agreed to implement these recommendations, which are currently being actioned.

#### 4. Conclusions

The Audit and Assurance team has undertaken a regularity audit of complaints handling and reporting. Four recommendations have been agreed from this engagement.

Key controls exist and are applied consistently and effectively in the majority of areas tested in this engagement.

Reasonable assurance can be taken from the areas covered in this engagement.

## 5. Committee action

The committee is asked to note the contents of this report and agree that the Audit and Assurance Manager submits a follow-up report on the implementation of the recommendations to a meeting in approximately six months.

## 6. Consequences

Policy consequences None.

Legal consequences None.

Financial consequences None.

Personnel consequences None.

Social Inclusion consequences None.

Risk consequences As detailed in the report.

Name Valerie Davidson Name Gordon Maclennan

Title Assistant Chief Executive Title Chief Executive

For further information, please contact Iain McNicol, Audit and Assurance Manager on 0141 333 3195.

# Agreed action plan: Regularity audit of complaints handling and reporting

No.	Recommendation	Priority	Action Proposed	Lead Officer	Due date
1.	Procedures and practice Internal procedures in relation to complaints handling should be reviewed, enhanced, and re-issued to all staff involved in the process.  Cognisance should be given to GDPR requirements and the media by which a complaint can be submitted.  Refresher training should be provided to all staff involved in the complaints administration process to ensure they are aware of the reporting and data integrity requirements.	Medium	Agreed, current procedures will be reviewed and enhanced with refresher training provided to all relevant staff.	Information Governance and Committee Officer	March 2019
2.	Performance reporting The current methodology followed to compile internal management and member reporting should be reviewed and enhanced, where appropriate.  Reporting requirements include:  • the number of complaints for each Stage (i.e. Stage one within 5 days and average time taken, Stage two within 20 days and average time taken;  • the percentage of complaints responded to outwith prescribed timescales;  • re-categorisation of complaints;  • outcomes and lessons learned narrative.	Medium	Agreed, current arrangements will be reviewed and implemented with effect from 1 April 2019 with internal management reporting moving to quarterly in line with member reporting.	Information Governance and Committee Officer	March 2019

No.	Recommendation	Priority	Action Proposed	Lead Officer	Due date
3.	Complaints monitoring tool  The complaints monitoring tool should be refreshed in accordance with performance reporting parameters.  Designated officers should be reminded of data integrity requirements to enhance quality control arrangements.  The monitoring tool should incorporate an audit trail.	Medium	Agreed, the monitoring tool parameters will be reviewed in accordance with revised performance reporting.  Designated officers will receive refresher training.	Information Governance and Committee Officer	March 2019
4.	Committee reporting  The Secretary to the Partnership should consider changing the reporting committee from Audit & Standards to Operations to present public reporting complaints statistics.	Medium	Agreed, committee reporting will change to the Operations committee in the next committee cycle for 2019/20.	Secretary to the Partnership	March 2019

A fundamental control that should be addressed as soon as possible; High:

**Medium**: An important control that should be addressed within three months; **Low**: An issue which is not fundamental but should be addressed within six months to improve the overall control environment.