

Agenda



Audit & Performance Review Committee

Date: Wednesday, 14 December 2016

Time: 14:00

Venue: Committee Room 3,
Council Offices, Garshake Road, Dumbarton

Contact: Craig Stewart, Committee Officer
Tel: 01389 737251 craig.stewart@west-dunbarton.gov.uk

Dear Member

Please attend a meeting of the **Audit & Performance Review Committee** as detailed above. The business is shown on the attached agenda.

Yours faithfully

JOYCE WHITE

Chief Executive

Distribution:

Councillor J McColl (Chair)
Councillor G Black
Councillor J Brown
Councillor P McGlinchey
Councillor I Murray (Vice Chair)
Councillor T Rainey
Councillor G Robertson
Councillor M Rooney
Mr SJ Doogan
Ms E McKerry

All other Councillors for information

Chief Executive
Strategic Director – Transformation & Public Service Reform
Strategic Director – Regeneration, Environment & Growth
Chief Officer of West Dunbartonshire Health & Social Care Partnership

Date of issue: 1 December 2016

AUDIT & PERFORMANCE REVIEW COMMITTEE

WEDNESDAY, 14 DECEMBER 2016

AGENDA

1 APOLOGIES

2 DECLARATIONS OF INTEREST

Members are invited to declare if they have an interest in any of the items of business on this agenda and the reasons for such declarations.

3 MINUTES OF PREVIOUS MEETING 5 - 6

Submit for approval as a correct record, the Minutes of Special Meeting of the Audit & Performance Review Committee held on 1 November 2016.

4 TREASURY MANAGEMENT MID-YEAR REPORT 2016/17 7 - 18

Submit report by the Strategic Lead - Resources providing an update on treasury and prudential indicators during 2016/17.

5 AUDIT ACTION PLANS 19 - 22
Appendices to follow

Submit report by the Strategic Lead - Resources advising of:-

- (a) recently issued Internal Audit action plans; and
- (b) progress made against action plans issued contained within Internal Audit and External Audit reports.

6 INTERNAL AUDIT PLAN 2016/17 HALF YEAR 23 - 28
PROGRESS REPORT TO 30 SEPTEMBER 2016

Submit report by the Strategic Lead - Resources advising of progress at the half year against the Audit Plan 2016/17.

7 CAPITAL POST PROJECT REVIEW PILOT 29 - 34

Submit report by the Strategic Lead - Resources providing an update on capital post project reviews undertaken within the pilot phase covering the period 1 April 2016 to 30 September 2016.

8 SCOTTISH PUBLIC SERVICES OMBUDSMAN 35 - 67
COMPLAINTS REPORT 2015/16

Submit report by the Strategic Lead – Communications, Culture and Communities presenting the Scottish Public Services Ombudsman (SPSO) report on complaints handling by West Dunbartonshire Council for the year 1 April 2015 – 31 March 2016.

AUDIT & PERFORMANCE REVIEW COMMITTEE

At a Special Meeting of the Audit & Performance Review Committee held in the Council Chamber, Council Offices, Garshake Road, Dumbarton on Tuesday 1 November 2016 at 2.00 p.m.

Present: Councillors George Black, Jim Brown, Jonathan McColl, Ian Murray, Gail Robertson, Martin Rooney and Lay Member Ms Eilidh McKerry.

Attending: Joyce White, Chief Executive; Richard Cairns, Strategic Director – Regeneration, Environment & Growth; Stephen West, Strategic Lead – Resources; Peter Hissett, Strategic Lead – Regulatory; Jim McAloon, Strategic Lead – Regeneration; Colin McDougall, Audit and Risk Manager; Alan Douglas, Manager of Legal; and Craig Stewart, Committee Officer.

Also Attending: Ms Karen Cotterell, Senior Auditor, Audit Scotland.

Apologies: Apologies for absence were intimated on behalf of Councillors Patrick McGlinchey and Tommy Rainey, and Mr Stevie J. Doogan, Lay Member. Apologies were also intimated from Angela Wilson, Strategic Director – Transformation & Public Service Reform.

Councillor Jonathan McColl in the Chair

DECLARATIONS OF INTEREST

It was noted that there were no declarations of interest in any of the items of business on the agenda.

MINUTES OF PREVIOUS MEETING

The Minutes of Meeting of the Audit & Performance Review Committee held on 28 September 2016 were submitted and approved as a correct record.

INTERNAL AUDIT REPORT – “PROCUREMENT APPROVED CONTRACTORS LIST”

A report was submitted by the Strategic Lead – Resources providing the full report resulting from the audit entitled “Procurement – Approved Contractors List” and advising of progress made against the agreed action plan.

After discussion and having heard the Audit and Risk Manager and relevant officers in further explanation of the report and in answer to Members’ questions, it was agreed:-

- (1) to thank officers for the report and internal audit for their investigation and the resulting audit action plan;
- (2) to note that the report makes it clear that there have been significant breaches in internal regulation and Council policy and procedure that put at risk our reputation, but more seriously, give rise to the risk of failing to meet best value and compliance with financial regulations;
- (3) that it was this Committee’s opinion that there requires to be more political accountability around tendering and the awarding of contracts and, given the serious nature of the breaches identified in the report by our own internal audit team, the following be instructed:-
 - (i) Where goods, supplies or services are to be procured above the level of delegated authority (£50,000), the report to the service committee will include the recommendation of the Audit & Performance Review Committee, that “The method of procurement and any tendering process to be undertaken should be agreed by the service committee, and any tenders received be considered by the Tendering Committee”; and
 - (ii) That the action plan in the report continues to be reported to the Audit & Performance Review Committee until the Committee have seen all actions fully implemented; and
- (4) that internal audit ask our external auditors to review the recommendations from their investigation to confirm that the action plan is appropriate and to advise if, in their opinion, any other actions are required.

The meeting closed at 4.06 p.m.

West Dunbartonshire Council
Report by Strategic Lead - Resources
Audit and Performance Review Committee – 14 December 2016

Subject: Treasury Management Mid Year Report 2016/17

1. Purpose

- 1.1** The purpose of this report is to provide Members with an update on treasury management and prudential indicators during 2016/17.

2. Recommendations

- 2.2** Members are requested to:

- (a) Note the treasury management and prudential stewardship information within the report;
- (b) Approve the 2016/17 revised estimates of treasury and prudential indicators as advised within the report (Tables A, B, C, D, E, F, H, M and N); and
- (c) Note that this report was submitted to Council on 26 October 2016.

3. Background

- 3.1** In accordance with the Treasury Policy governing the Council's treasury management activities during 2016/17, the Council is required to provide a mid year report to Members regarding the Treasury function.
- 3.2** The mid year report covers the period 1 April 2016 to 30 September 2016 and details the current position (where appropriate) and revises the 2016/17 estimates where required.
- 3.3** Members agreed within the Treasury Management Strategy 2012/13 - 2014/15 (as reported to Council in March 2012) to nominate the Audit and Performance Review Committee to be responsible for ensuring effective scrutiny of the treasury management strategy and policies.

4. Main Issues

Treasury Management Stewardship Report

- 4.1** A copy of the report is attached (Appendix 1).
- 4.2** The report gives details of key changes to the Council's capital activity (the prudential indicators), the economic outlook, the actual and proposed treasury management activity (borrowing and investment) and the risk approach to treasury management (the treasury management indicators).
- 4.3** The revised estimate for capital expenditure during 2016/17 (Table A) has reduced by £8.806m from the original estimate due to ongoing forecast outturn

figures for both the General Services capital plan and the HRA capital plan which are regularly reported to Members.

5. People Implications

5.1 There are no personnel issues.

6. Financial Implications

6.1 There are no financial implications other than those highlighted in the report.

7. Risk Analysis

7.1 There are three main risks associated with the formulation of prudential indicators and the treasury management strategy:

- (a) Capital receipts which affect the capital financing and borrowing requirement may not materialise and if this occurs then additional borrowing will be required in order to fund the financing requirement;
- (b) The risk of Counterparties default (i.e. loss of principal sum invested) must also be taken into account; however the robust controls included within the investment strategy will assist in mitigating this risk; and
- (c) Capital inflation may increase capital expenditure levels, which in turn may affect the capital financing and borrowing requirement leading to an increase in borrowing, assuming no additional capital receipts are available.

8. Equalities Impact Assessment

8.1 No equalities impact assessment was required in relation to this report.

9. Consultation

9.1 The views of Legal Services have been requested on this report and have advised there are neither any issues or concerns.

10. Strategic Assessment

10.1 Proper budgetary control and sound financial practice are cornerstones of good governance and support Council and officers to pursue the 5 strategic priorities of the Council's Strategic Plan. This report forms part of the financial governance of the Council

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Appendices: Appendix 1 - Mid Year Monitoring Report 2016/17
Treasury Management and Prudential Indicators
1 April 2016 to 30 September 2016

Background Papers: Loans register and portfolio;
Debt rescheduling schedules;
Prudential Indicators 2015/16 to 2025/26 and Treasury
Management Strategy 2016/17 to 2025/26 (Council 24 February
2016).

Wards Affected: No wards directly affected.

**Mid Year Monitoring Report 2016/17
Treasury Management and Prudential Indicators
1 April 2016 to 30 September 2016**

1 Introduction

1.1 The Council's treasury management activities are regulated by a variety of professional codes and statutes and guidance:

- The Local Government in Scotland Act 2003 (the Act), which provides the powers to borrow and invest as well as providing controls and limits on this activity;
- The Act permits the Scottish Ministers to set limits either on the Council or nationally on all local authorities restricting the amount of borrowing which may be undertaken (although no restrictions have been made as yet during 2015/16).
- Statutory Instrument (SSI) 29 2004, requires the Council to undertake any borrowing activity with regard to the CIPFA Prudential Code for Capital Finance in Local Authorities, and therefore to operate the overall treasury function with regard to the CIPFA Code of Practice for Treasury Management in the Public Services; and the treasury activity with regard to the CIPFA Code of Practice for Treasury Management in Local Authorities.

1.2 The regulatory framework of treasury management requires that the Council receive a mid year treasury review, in addition to the forward looking annual treasury strategy and backward looking annual treasury report required previously. This report meets that requirement and also incorporates the needs of the Prudential Code to ensure adequate monitoring of the capital expenditure plans and the Council's prudential indicators. The treasury strategy and prudential indicators were previously reported to Council on 24 February 2016. The current position is shown (where appropriate) and revisions to the 2016/17 estimate are provided where required.

1.3 This report sets out:

- Key changes to the Council's capital activity (the prudential indicators);
- The economic outlook;
- The actual and proposed treasury management activity (borrowing and investment); and
- The risk approach to treasury management (the treasury management indicators).

2 Key Prudential Indicators

2.1 This part of the report is structured to update:

- The Council's capital expenditure plans and how these plans are being financed;
- The impact of the changes in the capital expenditure plans on the Pls and the underlying need to borrow; and
- Compliance with the limits in place for borrowing activity.

2.2 **Capital Expenditure** – Table A shows the current position and revised estimates for capital expenditure for 2016/17 only.

2.2.1 The reduction in the both the level of anticipated capital expenditure and the net financing need for the year is due to ongoing forecast outturn figures for both the GS 10 year capital plan and the HRA capital plan in relation to spend and anticipated resources which are regularly reported to Members.

Table A:

£000	2016/17 Original Estimate	Current Position	2016/17 Revised Estimate
General Services	95,658	21,751	91,331
HRA	27,321	4,028	22,842
Capital Expenditure	122,979	25,779	114,173
Financed by:			
Capital receipts	8,043	494	4,040
Capital grants	15,185	2,872	15,021
Revenue	2,713	0	2,603
Net financing need for the year	97,037	22,413	92,509

2.3 **Impact of changes in Capital Expenditure Plans** – Table B shows the CFR, which is the underlying external need to borrow for a capital purpose while Table C shows the expected debt position over the period.

2.3.1 The external debt figures included within Table C now includes both short term and long term debt. This change has been made due to a strategy of using short term borrowing to fund long term capital investment enabling the Council to take advantage of lower interest rates. The reduction in the estimated external debt for 2016/17 is due to a reduction in the net capital financing need for the year.

2.3.2 The CFR is calculated on a year end position based on the Council's balance sheet and therefore the current position is not shown. The CFR has reduced from the original estimate due to the forecast level of capital expenditure in 2016/17 being less than budgeted. The Strategic Lead - Resources can report that the Council is on target to meet the 2016/17 revised estimates for both indicators.

Table B:

£000	2016/17 Original Estimate	2016/17 Revised Estimate
Capital Financing Requirement	507,602	492,224
Movement in CFR (from Previous year)	84,336	79,774

Movement in CFR Represented by		
Net financing need for the year (from Table A, above)	97,037	92,509
Less loan repayments in year	(11,031)	(10,978)
New Borrowing : CFR	86,006	81,531
Less Long Term Liability repayment in years	(1,670)	(1,757)
Movement in CFR	84,336	79,774

Table C:

£000	2016/17 Original Estimate	Current Position	2016/17 Revised Estimate
External Debt			
Debt at 1 April 2016	336,820	321,958	321,958
Maturing Long Term Debt (LTD)	(70,421)	(52,769)	(82,144)
Movement in Borrowing			
New Borrowing - Maturing LTD	70,421	52,769	82,144
New Borrowing - CFR	86,006	26,231	81,531
Debt at 31 March (1)	422,826	348,189	403,489
Long Term Liabilities (LTL) at 1 April	86,594	86,297	86,297
Expected change in LTL	(1,670)	(797)	(1,757)
LTL at 31 March (2)	84,924	85,500	84,540
Actual Debt at 31 March (1) + (2)	507,750	433,689	488,029
CFR from Table B	507,602	n/a	492,224
Under/(Over) Borrowing	(148)	n/a	4,195

2.3.3 Table C highlights that the Council is forecast to be under borrowed by £4.195m at 31 March 2017 when compared to the CFR.

2.4 Compliance with the limits in place for borrowing activity – A key control over the treasury activity is a prudential indicator to ensure that over the medium term, gross borrowing will only be for a capital purpose.

Gross borrowing should not, except in the short term, exceed the total of CFR in the preceding year plus the estimates of any additional CFR for 2016/17 and next two financial years. This allows some flexibility for limited early borrowing for future years.

The Council has approved a policy for borrowing in advance of need which will be adhered to if this proves prudent. As discussed in section 2.3, above the current position is not shown since the CFR is calculated on a year end position. The revised indicator is detailed in Table D and is illustrated by

comparing the estimated gross debt as at 31 March 2016 with the CFR as at 31 March 2019. The Strategic Lead - Resources reports that no difficulties are envisaged for the current year in complying with this prudential indicator.

Table D:

£000	2016/17 Original Estimate	2016/17 Revised Estimate
CFR at 31 March 2016		
2015/16 Estimate/Actual	423,266	412,450
Estimated movement in CFR		
2016/17	84,336	79,774
2017/18	38,416	56,057
2018/19	23,225	19,498
Anticipated CFR at 31 March 2019	569,243	567,779
Gross Debt at 31 March 2016	423,414	408,255

- 2.4.1** The Operational Boundary is detailed in Table E below and is the limit beyond which external debt is not normally expected to exceed. In most cases, this would be a similar figure to the CFR, but may be lower or higher depending on the levels of actual debt.

Table E:

£000	2016/17 Original Estimate	Current Position	2016/17 Revised Estimate
External Debt	558,525	477,058	536,832

- 2.4.2** A further prudential indicator controls the overall level of borrowing. This is the Authorised Limit which is detailed in Table F and represents the limit beyond which borrowing is prohibited, and needs to be set and revised by Members. It reflects the level of borrowing which, while not desired, could be afforded in the short term, but is not sustainable in the longer term. It is the expected maximum borrowing need with some headroom for unexpected movements. This is the statutory limit determined under section 3 (1) of the Local Government Act 2003.

Table F:

£000	2016/17 Original Estimate	Current Position	2016/17 Revised Estimate
External Debt	609,300	520,427	585,635

3 Economic Outlook

- 3.1** UK GDP growth rates in 2013 of 2.2% and 2.9% in 2014 were the strongest growth rates of any G7 country. However, the 2015 growth rate finally came in at a disappointing 1.8% so this shows that growth had slowed down, though it still remained one of the leading rates among the G7 countries. The Chancellor has announced that the target of achieving a budget surplus in

2020 will have to be eased in order to help the economy recover from the expected slowing of growth during the second half of 2016.

- 3.2** Interest Rate Forecast - Capita Asset Services undertook a quarterly review of its interest rate forecasts on 4 July 2016 after letting markets settle down somewhat after the Brexit result of the referendum on 23 June. It is generally agreed that this outcome will result in a slowing in growth in the second half of 2016 at a time when the Bank of England has only limited ammunition in its armoury to promote growth by using monetary policy. Bank Rate was cut by 0.25% on 3 August 2016. Capita do not expect Bank Rate to start rising until quarter 2 2018 and for further increases then to be at a slower pace than before. The Governor of the Bank of England, Mark Carney, has repeatedly stated that increases in Bank Rate will be slow and gradual after they do start. The MPC is concerned about the impact of increases on many heavily indebted consumers, especially when the growth in average disposable income is still weak and for some consumers, who have had no increases in pay, could be non-existent (other than through some falls in prices).
- 3.4** Interest Rate Movements and Expectations which take into account both the economic outlook as described above and risk analysis are detailed in Table G below.

Table G:

	Sep-16	Dec-16	Mar-17	Jun-17	Sep-17	Dec-17	Mar-18	Jun-18	Sep-18	Dec-18	Mar-19	Jun-19
Bank rate	0.25%	0.25%	0.25%	0.25%	0.25%	0.25%	0.25%	0.50%	0.50%	0.50%	0.50%	0.50%
5yr PWLB rate	1.00%	1.10%	1.10%	1.10%	1.10%	1.10%	1.10%	1.20%	1.20%	1.20%	1.30%	1.30%
10yr PWLB rate	1.60%	1.60%	1.60%	1.70%	1.70%	1.70%	1.70%	1.80%	1.80%	1.80%	1.80%	1.90%
25yr PWLB rate	2.40%	2.40%	2.40%	2.50%	2.50%	2.50%	2.50%	2.50%	2.60%	2.60%	2.70%	2.70%
50yr PWLB rate	2.20%	2.20%	2.20%	2.30%	2.30%	2.30%	2.30%	2.40%	2.40%	2.40%	2.50%	2.50%

Source: Capita Quarter 1 Review Report 2016/17

4 Treasury Management Activity

4.1 This part of the report is structured to update:

- The Council's expected borrowing need and details of under/(over) borrowing;
- Debt rescheduling and new borrowing;
- Debt charges; and
- Investments.

4.2 The Expected Borrowing Need – This was set out in Table C and demonstrates that the Council is currently under-borrowed to reduce risks in investments held and the cost of carry on investments (investments yield up to 0.50%, long term borrowing rates for periods greater than 25 years are approximately 2.40%). This introduces an element of interest rate risk, as

longer term borrowing rates may rise; however, this position is being carefully monitored.

4.3 Debt rescheduling and new borrowing – The Council has not undertaken any debt rescheduling during the first half of 2015/16. Naturally maturing long term debt of £52.769m has been repaid which was funded by loans from other local authorities.

4.4 Debt Charges – The revised estimate for debt charges for both the General Fund and the HRA is shown in Table H.

Table H:

£000	2016/17 Original Estimate	Current Position	2016/17 Revised Estimate
Borrowing	24,375	11,178	22,993
Other Long Term Liabilities	8,511	4,236	8,477
Total	32,886	15,414	31,470

4.5 Investments – The objectives of the Council's investment strategy are to ensure the re-payment of the principal and interest of its investments on time with the level of investment return being a secondary objective. Following on from the economic background above, the current investment climate has one over-riding risk consideration which is the risk of default.

4.5.1 The Council held £10.347m of investments at 30/09/2016, and the constituent parts of the investment position are detailed in Table I:

Table I:

£000	Country	< 1 Year	1 – 2 Years	2 – 3 Years
Banks	UK	7,748	Nil	Nil
Money Market Fund		2,599	Nil	Nil
Total		10,347	Nil	Nil

4.5.2 Table J details the revised budget position for investment income. The original estimate has increased by £0.046m.

Table J:

£000	2016/17 Original Estimate	Current Position	2016/17 Revised Estimate
Investment Income	57	33	66

4.5.3 A regulatory development to address risk is the consideration and approval of benchmarks relating to investment security, liquidity and the level of return. Benchmarks are currently widely used to assess the level of return and investment performance, however the application of security and liquidity benchmarks are more subjective in nature.

- **Security** - The Council's maximum security risk benchmark for the current portfolio in relation to investment periods of up to one year (when compared to historic default tables) was set at 0.09% and the Strategic Lead - Resources can report that there have been no defaults of principal sums invested in the year to date.
- **Liquidity** – The Strategic Lead - Resources can report that liquidity arrangements were adequate during the year to date and that the liquidity facilities and benchmarks set by the Council as noted below were maintained:
 - Bank overdraft - £1.000m; and
 - Liquid short term deposits of at least £5.000m available on an overnight basis.
- **Return on Investments** – The Strategic Lead - Resources can report that investment return to date average 0.46%. Table K illustrates how this average return compares with the local benchmarks approved in February 2016.

Table K:

Benchmark	Benchmark Return	Average Return
7 day LIBID rate	0.12%	0.46%
1 month LIBID rate	0.14%	0.46%
Council's Instant Access Account	0.50%	0.46%

4.5.4 No changes are recommended to the criteria for permitted investments and the criteria remains as previously approved.

6 Key Treasury Management Indicators

6.1 This part of the report is structured to update:

- Actual and estimates of the ratio of financing costs to net revenue stream;
- Upper limits on interest rate exposure;
- The maturity structure of borrowing; and
- Total principal sums invested.

6.2 Actual and estimates of the ratio of financing costs to net revenue stream – This indicator (as shown below in Table L) identifies the trend in the cost of capital (financing costs net of interest and investment income) against the net revenue stream

Table L:

	2016/17 Original Estimate	2016/17 Revised Estimate
General Fund	8.59%	8.66%
HRA	31.66%	30.25%

- 6.3 Upper Limits On Fixed and Variable Rate Exposure** – These indicators identify a maximum limit for fixed and variable interest rates based upon the debt position and were set at 100% and 50% respectively for 2015/16.
- 6.4 Maturity Structures Of Borrowing** – These maximum limits are set to reduce the Council's exposure to large fixed rate loans (those instruments which carry a fixed interest rate for the duration of the instrument) which are due to naturally mature in any given period as detailed in Table M.

Table M:

Maturity Structure of Fixed Interest Rate Borrowing	2015/16 Original Estimate	Current Position	2015/16 Revised Estimate
Under 12 months	50%	28.33%	50%
12 months to 2 years	50%	19.82%	50%
2 years to 5 years	50%	28.49%	50%
5 years to 10 years	50%	6.48%	50%
10 years to 20 years	50%	0.43%	50%
20 years to 30 years	50%	0.79%	50%
30 years to 40 years	50%	13.31%	50%
40 years to 50 years	100%	2.35%	100%
50 years to 60 years	100%	0%	100%
60 years to 70 years	100%	0%	100%

- 6.5 Total Principal Funds Invested** – These limits are set to reduce the need to temporarily borrow to cover any unexpected expenditure, and show limits to be placed on investments with final maturities beyond each year-end. The Council currently invests sums for periods greater than 364 days in hub West Scotland as detailed in Table N.

Table N:

	2016/17 Original Estimate	Current Position	2016/17 Revised Estimate
Principal sums invested > 364 days (maximum limit £1m)	£0.228m	£0.228m	£0.228m

WEST DUNBARTONSHIRE COUNCIL

Report by Strategic Lead - Resources

Audit and Performance Review Committee: 14 December 2016

Subject: Audit Action Plans

1. Purpose

1.1 The purpose of this report is to advise the Committee of:

- Recently issued Internal Audit action plans; and
- Progress made against action plans previously issued contained within Internal Audit and External Audit reports.

2. Recommendations

2.1 It is recommended that Members consider and note the contents of this report.

3. Background

3.1 When audit reports are issued by External and Internal Audit departmental management agree an action plan in relation to issues highlighted by the audit report. Progress on implementing the actions is monitored and reported to the Audit and Performance Review Committee.

4. Main Issues

4.1 The Appendices to this report will be run in the days leading up to the committee meeting so as to provide as up to date a position as possible in the progress of actions. Appendix A contains Internal Audit action plans recently agreed and issued. Appendix B details the outstanding actions on previously issued Internal Audit reports. Appendix C details the outstanding actions for External Audit reports, including the Local Scrutiny Plan for 2016/17.

4.2 At the Special Audit and Performance Review Meeting on 1st November 2016, where the audit entitled *“Procurement - approved contractors list”* was discussed, Elected Members agreed that Internal Audit should ask the Council’s External Auditors to review the recommendations from their investigation to confirm that the action plan is appropriate and to advise if, in their opinion, any other actions are required. Since that decision the external auditors have reviewed the report prepared by Internal Audit and they have concluded that the scope of the work was appropriate and the recommendations in the report supported the findings. In addition they commented that, going

forward, the Council should work towards progressing the action plan points so that the agreed completion dates are achieved. Outstanding actions arising from this report are detailed in Appendix B at Project 102.

- 4.3** The key areas of work performed by both Internal Audit and External Audit are carried out according to a risk based approach that determines the nature, extent and timing of the required audit assignments.
- 4.4** Recommendations have timescales for completion in line with the following categories:

Category	Expected implementation timescale
<u>High Risk:</u> Material observations requiring immediate action. These require to be added to the department's risk register	Generally, implementation of recommendations should start immediately and be fully completed within three months of action plan being agreed
<u>Medium risk:</u> Significant observations requiring reasonably urgent action.	Generally, complete implementation of recommendations within six months of action plan being agreed
<u>Low risk:</u> Minor observations which require action to improve the efficiency, effectiveness and economy of operations or which otherwise require to be brought to the attention of senior management.	Generally, complete implementation of recommendations within twelve months of action plan being agreed

5. People Implications

- 5.1** There are no personnel issues with this report.

6. Financial and Procurement Implications

- 6.1** There are neither financial nor procurement implications with this report.

7. Risk Analysis

- 7.1** There is a risk that failure to implement actions within the agreed timescale may result in weaknesses in internal control arrangements remaining unresolved longer than is desirable.

8. Equalities Impact Assessment (EIA)

- 8.1** A screening has been carried out and found no issues relevant to equalities duties.

9. Consultation

- 9.1** This report has been subject to consultation with appropriate Strategic Leads. In addition, services have been consulted in the update of action plans.

10. Strategic Assessment

- 10.1** This report relates to Assuring Our Success through strong financial governance and sustainable budget management.

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Stephen West
Strategic Lead - Resources
Date: 22 November 2016

Person to Contact: Colin McDougall, Audit and Risk Manager
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Appendices: A - Internal Audit Reports (Recently Issued)
B - Internal Audit Reports (Previously Issued)
C - External Audit Reports

Background Papers: Internal Audit Reports
External Audit Reports
EIA Screening

Wards Affected: All Wards

WEST DUNBARTONSHIRE COUNCIL

Report by Strategic Lead - Resources

Audit and Performance Review Committee: 14 December 2016

Subject: Internal Audit Plan 2016/17 Half Year Progress Report to 30 September 2016

1. Purpose

- 1.1** The purpose of this report is to advise Members of progress at the half year against the Audit Plan 2016/17.

2. Recommendation

- 2.1** It is recommended that the Committee note the contents of this report.

3. Background

- 3.1** The annual audit plan for 2016/17 was approved by Audit & Performance Review Committee on 9 March 2016. This report provides information on the progress in implementing the plan for the half year to 30 September 2016. Appendices A and B provide a summary of progress.

4. Main Issues

Internal Audit

- 4.1** There are variances from the planned programme of work reported at this stage per Appendix A, which also includes a projected outturn for the full year. As a result of a significant amount of investigations work to which the Internal Audit team has had to respond, it is anticipated that this will have an adverse impact on the ability of the team to fully complete the risk based audit plan for 2016/17. Priority will be placed on areas where External Audit would seek to place reliance and any audits not completed will follow through into 2017/18. This approach has been agreed in discussion with External Audit.

Corporate Fraud

- 4.2** Variances from the planned programme of work are outlined at Appendix B and this also includes a projected outturn for the full year. It is anticipated that these variances, for example the Corporate Fraud (91 days adverse) are not going to impact on the achievement of savings targets for the year as the team respond to cases across the various categories of work

5. Personnel Implications

5.1 There are no personnel implications.

6. Financial and Procurement Implications

6.1 As a result of Corporate Fraud Team activity, actual recoveries, charges and re-billings of £94,615 have been identified during the half year to 30th September 2016.

6.2 There are no procurement issues arising from this report.

7. Risk Analysis

7.1 There is a risk that failure to deliver sufficient of the Internal Audit Plan would result in an inability to provide assurances over the Council's system of internal financial control to those charged with governance. The main basis for providing assurance is coverage of the planned risk based systems audits. Every endeavour is made to ensure that no material slippage occurs in risk based systems audits by concentrating resources on these audits and, as is the situation in this particular year priority will be placed on areas where External Audit would seek to place reliance.

8. Equalities Impact Assessment (EIA)

8.1 A screening has been carried out and found no issues relevant to equalities duties.

9. Consultation

9.1 This report has been subject to a check by Finance and Legal, Democratic & Regulatory Services.

10. Strategic Assessment

10.1 This report relates to "Assuring Our Success through strong financial governance and sustainable budget management".

.....
Stephen West
Strategic Lead - Resources
Date: 16 November 2016

Person to Contact: Colin McDougall, Audit and Risk Manager
Telephone 01389 737436
E-mail – colin.mcdougall@west-dunbarton.gov.uk

Appendices: A – Internal Audit Report for the half year to 30th September 2016
B – Corporate Fraud Report for the half year to 30th September 2016

Background Papers: Audit & Performance Review Committee – 9th March 2016: Internal Audit Plan 2016/17
EIA Screening

Wards Affected: N/A

APPENDIX A**WEST DUNBARTONSHIRE COUNCIL****INTERNAL AUDIT SECTION****PROGRESS REPORT FOR THE HALF YEAR 1st APRIL 2016 TO 30th SEPTEMBER 2016**

CATEGORY	Actual for six months to 30th September 2016			Projected Outturn for twelve months to 31st March 2017		
	PLANNED TIME (DAYS)	ACTUAL TIME (DAYS)	VARIANCE (DAYS)	AUDIT PLAN 2015/16 (DAYS)	PROJECTED OUTTURN (DAYS)	VARIANCE (DAYS)
Risk Based Audit	243	226	17 F	485	444	41 F
Computer Audit	50	45	5 F	100	90	10 F
Development	30	12	18 F	60	35	25 F
Investigations and NFI	63	125	-62 A	125	240	-115 A
Regularity/CRSA	30	13	17 F	60	30	30 F
Governance & Assurance	22	20	2 F	45	40	5 F
Follow Up	12	2	10 F	24	15	9 F
Year-End Procedures	3	3	0 -	6	6	0 -
Performance Indicators	15	20	-5 A	30	22	8 F
Advice & Guidance/Grant Claims	25	15	10 F	50	35	15 F
Review	20	20	0 -	40	35	5 F
Health and Social Care Partnership	18	18	0 -	35	35	0 -
Other Bodies	30	10	20 F	60	60	0 -
Total Operational Days	561	529	0	32	F	1120
Administration	17	26	-9	A	34	40
Management & Planning	23	17	6	F	47	35
Training / Staff Development	16	51	-35	A	33	72
Leave	178	172	6	F	356	356
Total Non-Operational Days	234	266	-32	A	470	503
TOTAL	795	795	0		1590	1590
					0	

APPENDIX B**WEST DUNBARTONSHIRE COUNCIL****CORPORATE FRAUD SECTION****PROGRESS REPORT FOR THE HALF YEAR 1st APRIL 2016 TO 30th SEPTEMBER 2016**

CATEGORY	Actual Six months to 30th September 2016			Projected Outturn for twelve months to 31st March 2017		
	PLANNED TIME (DAYS)	ACTUAL TIME (DAYS)	VARIANCE (DAYS)	AUDIT PLAN 2016/17 (DAYS)	PROJECTED OUTTURN (DAYS)	VARIANCE (DAYS)
Work carried out on behalf of DWP	55	30	25 F	110	65	45 F
National Fraud Initiative	60	19	41 F	120	85	35 F
Corporate Fraud	139	230	-91 A	277	363	-86 A
Development	43	18	25 F	87	60	27 F
Research	53	59	-6 A	105	125	-20 A
Review	20	17	3 F	40	40	0 -
Total Operational Days	370	373	-3 F	739	738	1 F
Administration	11	15	-4 A	23	30	-7 A
Management & Planning	23	14	9 F	45	30	15 F
Training / Staff Development	10	13	-3 A	20	25	-5 A
Leave	108	107	1 F	216	220	-4 A
Total Non-Operational Days	152	149	3 A	304	305	-1 A
TOTAL	522	522	0	1043	1043	0

West Dunbartonshire Council
Report by Strategic Lead - Resources
Audit and Performance Review Committee - 14 December 2016

Subject: Capital Post Project Review Pilot

1. Purpose

- 1.1** The purpose of this report is to provide Members with an update on capital post project reviews undertaken within the pilot phase covering the period 1 April 2016 to 30 September 2016.

2. Recommendations

- 2.2** Members are requested to:

- Note the capital projects that were selected for inclusion in the pilot;
- Note the outcome of the pilot reviews; and
- Note the next list of projects recommended for review.

3. Background

- 3.1** Audit Scotland published a report entitled “Major Capital Investment in Councils – Follow Up” in January 2016, the details of which were reported to the Audit and Performance Review Committee on 8 June 2016.
- 3.2** The Audit Scotland report contained a recommendation that Councils should “collect and retain information on all projects including explanations for cost, time and scope changes and lessons learned. Report this information publicly to improve transparency and scrutiny of project delivery and share lessons learned across services and other councils”.
- 3.3** In response to the above recommendation West Dunbartonshire Council advised that the approach to planning and review of projects had evolved since 2013/14 and a pilot programme of post project reviews was underway with the expectation that these would be reported to the appropriate committee commencing in 2016/17.
- 3.4** During the development of the post project review process officers agreed that details on post project reviews will be reported bi-annually to the Strategic Asset Management Group and the Performance and Monitoring Review Group before being reported to the Audit and Performance Review Committee.

4. Main Issues

Pilot Post Project Review Programme

- 4.1** As part of our project management approach, Post Project Reviews are undertaken for all one off projects of £1m and over and any other projects deemed suitable for post project evaluation by the Strategic Asset Management Group.

- 4.2** A total of 4 projects were selected for inclusion in the pilot phase of the review programme, details of which are included in the following table.

Project	Planned End Date	Actual End Date	Budget	Actual	Variance against Initial Timeline	Variance against Budget
			£000	£000		£000
Knowleburn Flooding	Nov 14	May 15	3,890	4,737	6 Months	847
A814 Castle Street Junction Phase 2	Jan 16	Mar 16	1,203	1,221	2 Months	18
Vale of Leven Workshops	Oct 16	Nov 16	1,950	1,950	1 Month	0
Workforce Management System	Mar 16	Mar 17	1,099	1,099	1 Year	0

- 4.3** The review was based on completion of a post project evaluation form with the completed forms reviewed by the Strategic Asset Management Group.
- 4.4** Each project lead was invited to attend the Strategic Asset Management Group to discuss the content of the evaluation form with the aim being to gain a fuller understanding of the project (with identification of generic and/or project specific issues that may have arisen) and details of lessons learned that may benefit future projects.
- 4.5** The main points highlighted within each project specific post project review are noted below:

4.5.1 Knowleburn Flooding

The project was significantly overspent with the final project overspend of £1.178m and a delay in physical project completion of 6 months. This was due in most part to additional diversion costs for unforeseen public utilities. The extent of works could not be significantly reduced to compensate for this overspend due to the requirements to comply with the scheme objectives.

The project is regarded as a success in terms of the outcome anticipated – which was to significantly reduce the risk of flooding from the Knowleburn - as demonstrated by: weather conditions that have arisen since the completion of the project; and a lack of flooding compared to the situation prior to the flood alleviation project.

Various options were considered for the diversion prior to the final route being decided upon, however based on experience and evidence it was considered that the alternative options considered were deemed too complicated and were likely to have had a higher risk than the route chosen. The progress of the project and the increasing costs were reported regularly to Members through budgetary control reports throughout the life of the project.

4.5.2 A814 Castle Street Junction Phase 2

The project was overspent with the final project overspend of £0.018m and a delay in physical project completion of 2 months. Project overspend was as a result of additional costs associated with the amended design to incorporate high quality paving around the Maritime Museum and has developed a continued relationship with SPT (which part funded the project) which is beneficial to both the Council and the Town Centre.

The project also facilitated the location of the Council's new Dumbarton office and therefore delivered benefits beyond the original specification which was to improve access to the Riverside Development and to improve public transport integration into Dumbarton Town Centre. This is different from a project overspend which only delivered the original agreed specification.

4.5.3 Vale of Leven Workshop

The expected outcome was to provide thirteen small workshops units to meet an identified local demand in three format/arrangements within the Vale of Leven Industrial Estate, Dumbarton. This formed a key condition of £0.900m of Regeneration Capital Grant Fund awarded by the Scottish Government, which was achieved successfully and also matched by WDC Capital funding. Additional budget requirement of £0.150m was identified at an early design stage due to external works required to prepare the land for building works (which was funded from the Local Economic Development budget) and thereafter there were no further budget issues. Overall works were completed one month later than planned.

Within the project review it was confirmed that income would be anticipated from the leasing of these units. The forecast was related to occupancy of the thirteen units with the following forecast for occupancy and income levels for end of:

Time Period	Forecast Occupancy Levels	Forecast Income Levels
Year One	30%	£27,300
Year Two	70%	£63,700
Year Three	95%	£86,500

The review confirmed that within the first six months 4 units out of 13 (31%) were occupied and overall the units are on track to achieve desired occupancy levels. The rental income from the four currently occupied units is £22,500 per annum. One tenant came from an existing WDC property which has subsequently been let at £3,450 per annum.

4.5.4 Workforce Management System

The post project review of this project was not able to be fully undertaken due to turnover of staff arising from the initial inception of this project in 2007/08, it should also be noted that this project is not yet fully completed. The lesson learned is the need to introduce 'End Stage' reviews which would ensure review documentation is available at the end of each stage which can then be collated as part of the Post Project Review.

4.6 The main generic outcomes of the pilot phase of post project review are noted below.

- Project control processes should include 'end stage' reviews

- Future major capital projects should include an allowance for Optimism Bias; and
- Future revisions to the Capital Plan should include an assumption of constructions cost inflation.

Future Post Project Reviews

4.7 Based on capital projects which are anticipated to be physically complete by 31 March 2017 the following projects are recommended to be included in the next phase of post project reviews which will be rolled out from April 2017:

- ICT Modernisation;
- Dumbarton Care Home;
- New Clydebank Leisure Centre;
- Replacement of Equipment at Clydebank Crematorium;
- Energy Efficiency Street Lighting;
- Kilpatrick School New Build;
- Aitkenbar/St Peters PS Co-location; and
- Lennox PS and St Ronan's PS.

5. People Implications

5.1 There are no personnel issues.

6. Financial and Procurement Implications

6.1 Other than the financial position noted above, there are no financial implications or procurement from this report.

7. Risk Analysis

7.1 The main risks associated with not carrying out post-project evaluations regularly or consistently are:

- This limits the Council's ability to identify areas of good practice, share any lessons learned and monitor benefits realised from the investment activity; and
- Future capital plans may understate the investment required

8. Equalities Impact Assessment

8.1 No equalities impact assessment was required in relation to this report.

9. Consultation

9.1 The views of Legal Services have been requested on this report and have advised there are neither any issues nor concerns.

10. Strategic Assessment

10.1 Proper budgetary control and sound financial practice are cornerstones of good governance and support Council and officers to pursue the 5 strategic priorities

of the Council's Strategic Plan. This report forms part of the financial governance of the Council

Stephen West
Strategic Lead - Resources
Date: 18 October 2016

Person to Contact: Jennifer Ogilvie, Section Head (Treasury and Capital),
Council Offices, Garshake Road.
Telephone (01389) 737453.
Email: jennifer.ogilvie@west-dunbarton.gov.uk

Background Papers: Completed post project review evaluation forms for noted projects

Wards Affected: No wards directly affected.

WEST DUNBARTONSHIRE COUNCIL

Report by Strategic Lead

Audit and PR Committee: December 2016

Subject: Scottish Public Services Ombudsman Complaints Report 2015/16

1. Purpose

- 1.1** The purpose of this report is to present the Scottish Public Services Ombudsman (SPSO) report on complaints handling by West Dunbartonshire Council for the year 1 April 2015 – 31 March 2016.

2. Recommendations

- 2.1** It is recommended that Committee notes the content of the report.

3. Background

- 3.1** West Dunbartonshire Council adopted the SPSO complaint handling model operating in line with all other Local Authorities on 1st April 2013. Complaints are managed centrally by the Customer Relations team for all Council services with the exception of HSCP. Following extensive consultation the Public Services Reform (Social Work Complaints Procedure)(Scotland) Order 2016 was agreed and recommended to Parliament. From April 2017 SPSO will therefore take on responsibility for considering complaints made about Social Work in respect of both maladministration and the professional judgment of social work staff

Statutory appeals and reviews, such as planning decision appeals, continue to be directed to the relevant decision making body, and are not processed through the SPSO office.

- 3.2** The Complaints Handling Process (CHP) is well established and understood by both customers and staff. Centralised complaints handling ensures the process is open, and ensures a more transparent and fair delivery of service. Complaints are valued by West Dunbartonshire Council because they provide valuable feedback on services, and how the Council is performing. This in turn offers the opportunity to inform service planning, improve how services are delivered and ensure customer's views are heard. Customers who remain dissatisfied with the final outcome of their complaint are openly directed to the SPSO to have their case considered for review.
- 3.3** In addition to the SPSO reviewing cases, customers who own their properties and remain dissatisfied with the outcome of their complaint are also given information on the Homeowners Housing Panel (HOHP). The HOHP is a devolved Scottish Tribunal set up under the Property Factors (Scotland) Act 2011. It is an independent and impartial judicial body whose function HOHP

is to review complaints from homeowners who consider their property factor has failed to carry out their factoring duties or failed to comply with the Property Factors' Code of Conduct.

- 3.4** As a member of the Local Authority Complaints Handlers Network (CHN) West Dunbartonshire continues to fully engage in sharing of good practice, and developing consistent approaches to complaints management. Network meetings are held quarterly, with SPSO in attendance at each meeting, and they support valuable and informative discussion. The CHN has developed benchmarking criteria based on the reporting requirements from the Complaints Handling Model and this continues to be reviewed and discussed at meetings. Members of the CHN can also share information and updates through the knowledge hub area for members

4. Main Issues

- 4.1** The SPSO delivers an annual report to each Local Authority detailing the number of complaints reported to its office. Appendices 1 and 2 show the letter from SPSO together with a breakdown of complaints received by them relating to West Dunbartonshire Council. Appendix 3 is a summary breakdown of complaints received by West Dunbartonshire Council in 2015/16. Appendix 4 shows 2015/16 Performance Indicator data provided to SPSO through the CHN relative to reporting indicators from Complaints Handling Process. Attached as Appendix 5, Learning from Complaints, provides information on the complaints where SPSO provided a decision report. Finally, Appendix 6 shows complaints handled by Health & Social Care Partnership for the same period.
- 4.2.1** In the year 2015/16 the SPSO received 28 complaints regarding West Dunbartonshire Council, compared with 37 in the previous year, a reduction of 24%. The highest number of complaints made by West Dunbartonshire customers related to Housing matters. Of the 28 complaints received by SPSO 14 were deemed as premature, which is terminology used by the SPSO when the complaint has not exhausted the Council's complaints process. Of the remaining complaints, 3 were considered by SPSO with decision letters being issued. Of these 3 SPSO determined 1 not upheld while 2 were partly upheld. The remaining complaints were considered to be not duly made or withdrawn, outwith the jurisdiction of the SPSO or closed as no outcome was achievable for the customer or the Council.
- 4.3** As outlined in Appendix 2, the Council handled 800 complaints internally in 2015/16. Of these 796 were closed within 2015/16. The difference in complaints handled and closed is due to complaints being received during the reporting period, but still being worked on. The remaining 4 were closed in 2016/17 and will be included in appropriate reporting periods. Of the 796 complaints closed 82% were resolved within SPSO timescales, including with extension where applicable. When registering a complaint the preferred methods of Customers is by online complaints form or telephone with these methods accounting for 56% of all complaints received.

- 4.4** West Dunbartonshire Council, in adopting the Model Complaints Handling Procedure, undertook to regularly review complaints data at a senior level and consider whether services could be improved or internal policies and procedures updated. SPSO included with their Annual Letter a Learning Improvement Statement to be signed on behalf of the Council confirming our commitment to this.
- 4.5** Within their 2016-20 draft Strategic Plan SPSO advised they were looking to establish a Learning Improvement Unit (LIU). SPSO have confirmed funding has been secured by them for a pilot LIU to run until 31st March 2017. One of the key aims of the unit is to support Local Authorities in meeting SPSO recommendations and improving public services through learning from complaints. SPSO anticipate the work of the Unit informing changes in the way they make recommendations to Local Authorities with more emphasis on support for Local Authorities helping them identify and develop their own solutions to ensure effective learning and improvement.
- 4.6** Work will be ongoing throughout 2016/17 to ensure the importance of learning from complaints is fully embedded into service improvement and planning and can be evidenced. More detailed reports now provide service specific analysis of issues from complaints and this information forms part of the regular performance reporting provided at Strategic Lead level.
- 5. People Implications**
- 5.1** There are no people implications arising from this report.
- 6. Financial and Procurement Implications**
- 6.1** There are no financial implications arising from this report.
- 7. Risk Analysis**
- 7.1** There is a reputational risk of not responding to complaints within defined time periods within the two stage process. Escalation to SPSO and thereafter Audit Scotland would be the customer's next stage of complaint if we fail to deliver on the timescales for responding to complaints. Equally, escalation to HOHP would be appropriate for dissatisfied homeowners.
- 8. Equalities Impact Assessment (EIA)**
- 8.1** The two stage process has been equality impact assessed at a National level. Locally, all aspects have been considered and assistance to navigate the complaints process is available for all customers.
- 10. Consultation**
- 10.1** Not applicable to this report.
- 11. Strategic Assessment**

11.1 Effective complaints handling contributes to all five Council strategic priorities.

Electronic Signature (see notes)

Malcolm Bennie
Strategic Lead
Communications, Culture & Communities
Transformation & Public Service Reform

Person to Contact: Stephen Daly
Customer Services Manager
Communication, Culture & Communities
Council Offices, Garshake Rd, Dumbarton
01389 737263

Appendices: Appendix 1 - SPSO Letter

Appendix 2 – SPSO complaints Data

Appendix 3 - Summary of Council Complaints 2015/16

Appendix 4 – Performance Indicator Data

Appendix 5 – Learning from Complaints

Appendix 6 – Summary of CHCP Complaints 2015/16

Background Papers: None

Wards Affected: All Wards

Mrs Joyce White
Chief Executive

West Dunbartonshire Council
Garshake Road
DUMBARTON
G82 3PU

25 August 2016

Annual Letter from SPSO

Dear Mrs White,

I am pleased to send you our annual letter with statistics about complaints to SPSO about your organisation in 2015-16. As I informed members of our local authority sounding board at our June meeting and highlighted more widely in my June commentary, I am asking authorities to confirm that SPSO complaints are reviewed at a senior level (such as the appropriate scrutiny/ governance/ performance committees) by returning a learning and improvement statement to us. This builds on the model complaints handling procedures that set out the importance of authorities demonstrating how they 'systematically review complaints performance reports to improve service delivery'.

I am also providing an update on our learning and improvement pilot. This is an exciting project, and I hope you will take up our invitation to be involved in it by providing feedback about how you share learning from complaints within your organisation, and giving us your views on SPSO recommendations.

2015-16 complaints statistics

As you will know, in line with the model complaints handling procedure, each authority is required to report and publicise complaints information on a quarterly and annual basis, including annual reporting on how they perform against the agreed performance indicators. The enclosed statistics are part of the detailed complaints picture that your organisation is responsible for gathering and publishing. As you will be aware, all of our individual decisions are available online at www.spsso.org.uk/our-findings.

Learning and improvement unit (LIU)

Our 2016-20 draft Strategic Plan, which went to public consultation, proposed introducing a learning and improvement unit to ensure public authorities take the necessary responsibility and actions to handle complaints well and reduce the occurrence of repeat mistakes. It was the most commented on aspect of the draft plan, receiving significant support from respondents, who were mostly public authorities and advice /advocacy organisations. We

have been successful in securing funding for a one-year pilot of the LIU until the end of March 2017.

As the strategic plan outlines, the aim of the LIU is to enhance the impact of our work by helping authorities improve public services through learning from complaints. Over recent years, one of the key tools we have developed to support authorities' learning is the Complaints Improvement Framework. This is available on our Valuing Complaints website at: www.valuingcomplaints.org.uk/complaintsimprovementframework.

Through the LIU, we will be using the framework to help authorities better assess the efficiency and effectiveness of their overall complaints handling arrangements.

One of the main areas the LIU will focus on is our recommendations. A key part of this work includes providing authorities with additional support and advice on how to meet our recommendations with a view to preventing repeat service failings and complaints. In addition to this extra support we are looking to adopt a tighter escalation process for the very few cases where our recommendations are not being implemented, with the potential to lead to a Special Report.

It is likely that, as part of this work, the way we make recommendations will evolve. As well as continuing to ensure that our recommendations address individual complainants' injustices, the onus will increasingly be on making recommendations that work to support authorities to identify and develop their own solutions for bringing about learning and lasting improvement. The enclosed feedback form invites you to express interest in being involved in this work and I would be very grateful for your response.

Service satisfaction survey

We are always keen to understand your perceptions of the service we provide, and to look at ways in which we can improve this service. We intend to survey you and all the authorities we receive complaints about, specifically around how we meet our published service standards. The questions will be sent to the liaison officer in an electronic survey and we plan to begin this on a rolling basis from September onwards.

I look forward to hearing back from you soon.

Yours sincerely

A handwritten signature in black ink, appearing to read 'Jim B Martin', with a large, stylized initial 'J'.

Jim Martin
Ombudsman

CC:

Councillor Martin Rooney, Leader of the Council
Mr Peter Hessett, SPSO Liaison Contact

SPSO learning and improvement statement

West Dunbartonshire Council

We are committed to ensuring that all SPSO recommendations have been complied with and any further appropriate action taken.

We are committed to learning from complaints to prevent repeat failings.

We will ensure that relevant internal and external governance arrangements are in place to review systemic issues.

By signing this document you are agreeing on behalf of your organisation to the points above.

Signature

Designation:

Date

Please return this by 14 September 2016, by post or email, to:

Jim Martin, Ombudsman

SPSO

4 Melville Street

Edinburgh EH3 7NS

Email to: Fiona.Paterson@spsso.gsi.gov.uk

Feedback on SPSO recommendations and learning

One of the main areas the Learning and Improvement Unit will focus on is our recommendations. It is likely that, as part of this work, the way we make recommendations will evolve. As well as continuing to ensure that our recommendations address individual complainants' injustices, the onus will increasingly be on making recommendations that work to support authorities to identify and develop their own solutions for bringing about learning and lasting improvement.

We would be very grateful for your response to the questions below. Please indicate which response best reflects your views.

1. Looking back at recent SPSO recommendations to West Dunbartonshire Council, overall were they:

	Not at all	Slightly	Mostly	Totally	Don't know
Relevant					
Proportionate to the problem					

2. Overall, how would you rate the effectiveness of SPSO recommendations in:

	Not at all	Slightly	Mostly	Totally	Don't know
Preventing repeat service failings					
Improving complaints handling					

3. How could SPSO improve the recommendations we make?

4. Enabling learning from SPSO complaints

How satisfied are you that your organisation learns from the findings and recommendations that SPSO makes in relation to your organisation?	Not at all	Slightly	Mostly	Totally	Don't know

5. What additional support could SPSO provide to enable learning in your organisation?

6. Getting involved

If your authority would like to express an interest in being involved in the LIU's work on recommendations, please give us the contact information of the person we should contact about this.

Name

Position

Email

Thank you. Please return this to SPSO at

Learning and Improvement Unit

SPSO

4 Melville Street

Edinburgh EH3 7NS

TABLE 1
Complaints Received by Subject 2015-16

Subject Group	West Dunbartonshire Council	Rank	Complaints as % of total	Sector Total	Rank	Complaints as % of total
Housing	12	1	42.9%	423	1	24.6%
Finance	5	2	17.9%	179	3	10.4%
Social Work	3	3	10.7%	231	2	13.4%
Education	2	4=	7.1%	173	4	10.0%
Planning	2	4=	7.1%	172	5	10.0%
Environmental Health & Cleansing	2	4=	7.1%	126	6	7.3%
Roads & Transport	1	7=	3.6%	120	7	7.0%
Welfare Fund - Community Care Grants	1	7=	3.6%	31	11	1.8%
Legal & Admin	0	-	0.0%	61	8	3.5%
Building Control	0	-	0.0%	54	9	3.1%
Recreation & Leisure	0	-	0.0%	32	10	1.9%
Land & Property	0	-	0.0%	20	12	1.2%
Other	0	-	0.0%	17	13	1.0%
Economic Development	0	-	0.0%	11	14	0.6%
Personnel	0	-	0.0%	9	15=	0.5%
Welfare Fund - Crisis Grants	0	-	0.0%	9	15=	0.5%
National Park Authorities	0	-	0.0%	6	17=	0.3%
Valuation Joint Boards	0	-	0.0%	6	17=	0.3%
Fire & Police Boards	0	-	0.0%	5	19	0.3%
Consumer Protection	0	-	0.0%	4	20	0.2%
Subject Unknown or Out Of Jurisdiction	0	-	0.0%	33	-	1.9%
Total	28	-	100.0%	1,722	-	100.0%
Complaints as % of Sector		1.6%		100.0%		

Complaints Received by Subject 2014-15

Subject Group	West Dunbartonshire Council	Rank	Complaints as % of total	Sector Total	Rank	Complaints as % of total
Housing	19	1	51.4%	468	1	24.9%
Social Work	6	2	16.2%	253	2	13.5%
Finance	5	3	13.5%	174	4=	9.3%
Education	3	4	8.1%	174	4=	9.3%
Roads & Transport	2	5	5.4%	119	7	6.3%
Environmental Health & Cleansing	1	6=	2.7%	148	6	7.9%
Legal & Admin	1	6=	2.7%	76	8	4.0%
Planning	0	-	0.0%	217	3	11.5%
Building Control	0	-	0.0%	61	9	3.2%
Land & Property	0	-	0.0%	29	10	1.5%
Recreation & Leisure	0	-	0.0%	24	11	1.3%
Other	0	-	0.0%	21	12	1.1%
Welfare Fund - Community Care Grants	0	-	0.0%	14	13	0.7%
Welfare Fund - Crisis Grants	0	-	0.0%	12	14	0.6%
Personnel	0	-	0.0%	10	15	0.5%
Economic Development	0	-	0.0%	8	16=	0.4%
Consumer Protection	0	-	0.0%	8	16=	0.4%
Valuation Joint Boards	0	-	0.0%	6	18	0.3%
Fire & Police Boards	0	-	0.0%	4	19	0.2%
National Park Authorities	0	-	0.0%	3	20	0.2%
Subject Unknown or Out Of Jurisdiction	0	-	0.0%	51	-	2.7%
Total	37	-	100.0%	1,880	-	100.0%
Complaints as % of Sector		2.0%		100.0%		

TABLE 2
Local Authority Complaints Determined 2015-16

Stage	Outcome Group	2015-16		2014-15	
		West Dunbartonshire Council	Sector Total	West Dunbartonshire Council	Sector Total
Advice	Not duly made or withdrawn	6	321	8	380
	Out of jurisdiction (discretionary)	0	6	0	29
	Out of jurisdiction (non-discretionary)	0	5	0	25
	Outcome not achievable	0	6	0	42
	Premature	14	606	15	713
	Resolved	0	0	0	4
	Total	20	944	23	1,193
Early Resolution 1	Not duly made or withdrawn	1	54	0	36
	Out of jurisdiction (discretionary)	2	104	1	56
	Out of jurisdiction (non-discretionary)	0	196	4	140
	Outcome not achievable	1	185	4	107
	Premature	0	58	0	42
	Resolved	1	29	0	35
	Total	5	626	9	416
Early Resolution 2	Fully upheld	0	27	0	33
	Some upheld	1	20	0	18
	Not upheld	0	37	2	56
	Not duly made or withdrawn	0	1	0	0
	Resolved	0	1	0	3
	Total	1	86	2	110
Investigation 1	Fully upheld	0	23	1	28
	Some upheld	1	36	0	26
	Not upheld	1	40	2	63
	Not duly made or withdrawn	0	4	0	1
	Resolved	0	4	0	1
	Total	2	107	3	119
Investigation 2	Fully upheld	0	1	0	3
	Some upheld	0	0	0	1
	Not upheld	0	0	0	0
	Total	0	1	0	4
Total Complaints		28	1,764	37	1,842
Total Premature Complaints		14	664	15	755
Premature Rate		50.0%	37.6%	40.5%	41.0%
Fit for SPSO Total (ER2, Inv1 & Inv2)		3	194	5	233
Total Cases Upheld / Some Upheld		2	107	1	109
Uphold Rate (total upheld / total fit for SPSO)		66.7%	55.2%	20.0%	46.8%

Year 2015 - 2016		Complaints Received			Complaints closed						
CMT	Complaints Received	Complaints Received Stage 1	Complaints Received Stage 2	Complaints closed	Closed at Stage 1	Closed within 5 Working Days	Extension Stage 1	Exceeded S1 deadline after extension ie +10days	Total working days to close Stage 1 complaints	Average working days to close stage 1 complaint	Closed at Stage 2
Corporate Services	161	146	15	163	149	112	22	15	737	5	14
Education	99	95	4	88	87	48	20	19	628	7	1
HEEDS	540	507	33	545	514	342	75	97	3618	7	31
TOTALS	800	748	52	796	750	502	117	131	4983	7	46

Complaint Category		Upheld per category Stage 1	Upheld per category Stage 2	Performance	
				% of complaints closed within SPSO timescales	
Below declared service standard	76	58	4	average working days to close Stage 1 complaints	
Citizen expectation quality of service	208	101	4	average working days to close Stage 2 complaints	
Citizen expectation – timescales	26	12	1	% of Stage 1 complaints upheld	
Council policy – charges	20	1	0	% of Stage 2 complaints upheld	
Council policy – does not meet criteria	40	8	0		
Council policy – service provision	17	4	0	Channel Received	
Delay in service delivery	69	55	3	E-mail	
Employee behaviour	112	67	1	Online Complaints form	
Error in Service Delivery	107	69	1	Internal Complaints form	
Failure to deliver service	95	63	3	In Writing	
Service standards not declared	3	2	0	By telephone	
Contractor	27	18	0	Face to Face	
				Social Media	
Total	800	458	17	TOTAL	

Appendix 3

						Outcome					SPSO
Closed within 20 working days	Extension Stage 2	Exceeded S2 deadline after extension ie +25	Total working days to close Stage 2 complaints	Average working days to close stage 2 complaint	Escalated from S1 to S2	Upheld Stage 1	Not Upheld Stage 1	Upheld Stage 2	Not Upheld Stage 2	Withdrawn	SPSO Enquires
10	2	2	200	14	8	98	51	3	11	0	0
1	0	0	7	7	2	58	29	0	1	0	0
20	1	10	892	29	20	302	212	14	17	0	0
31	3	12	1099	24	30	458	292	17	29	0	0

		82%
		7
		24
		61%
		37%
	Equalities	
184	Age	0
244	Disability	0
75	Gender	0
76	Race	0
201	Religion	0
13	Sexual Orientation	0
7		0
800	TOTAL	0

Year 2015 - 2016		Complaints Received							
Corporate Services	Complaints Received	Complaints Received Stage 1	Complaints Received Stage 2	Complaints closed	Closed at Stage 1	Closed within 5 Working Days	Extension Stage 1	Exceeded S1 deadline after extension ie +10days	Total working days to close Stage 1 complaints
Community Participation	5	5	0	5	5	4	1	0	21
Contact Centre	17	17	0	17	17	17	0	0	29
Customer Relations	4	2	2	4	2	1	1	0	5
One Stop Shops	9	9	0	9	9	6	0	3	57
Working for you	5	5	0	5	5	5	0	0	12
Benefits	27	25	2	28	26	19	4	3	121
Council Tax	33	32	1	33	32	23	6	3	152
Creditors	0	0	0	0	0	0	0	0	0
Debtors	6	5	1	6	5	1	4	0	37
Accountancy/Treasury	1	1	0	1	1	1	0	0	1
Fraud Investigation	0	0	0	0	0	0	0	0	0
Corporate Debt	15	14	1	16	15	13	1	1	62
Intensive Management	8	6	2	7	5	3	0	2	93
Non Domestic Rates	0	0	0	0	0	0	0	0	0
Welfare Fund	1	1	0	1	1	1	0	0	1
Democratic Services	3	3	0	3	3	2	1	0	11
Legal and Admin	0	0	0	0	0	0	0	0	0
Legal and Admin - Insurance Claims	9	6	3	10	8	3	3	2	65
Registrars	2	2	0	2	2	2	0	0	4
Regulatory Services - Environmental	7	6	1	8	7	6	1	0	23
Regulatory Services - Pest Control	5	4	1	4	3	3	0	0	7
Regulatory Services - Trading Standards	1	0	1	1	0	0	0	0	0
People and Transformation	3	3	0	3	3	2	0	1	36
Totals	161	146	15	163	149	112	22	15	737

Complaint Category		Upheld per category Stage 1	Upheld per category Stage 2	Performance
				% of complaints closed within SPSO
Below declared service standard	15	14	0	average working days to close Stage 1
Citizen expectation not met - quality of service	35	19	1	average working days to close Stage 2
Citizen expectation not met – timescales	10	9	1	% of Stage 1 complaints upheld
Council policy – charges	7	0	0	% of Stage 2 complaints upheld
Council policy – does not meet criteria	6	1	0	
Council policy – level of service provision	2	1	0	Channel Received
Delay in service delivery	14	10	1	E-mail
Employee behaviour	33	15	0	Online Complaints form
Error in Service Delivery	35	28	0	Internal Complaints form
Failure to deliver service	4	1	0	In Writing
Service standards not declared	0	0	0	By telephone
Contractor	0	0	0	Face to Face
				Social Med
Total	161	98	3	TOTAL

Appendix 3 (cont'd)

Complaints closed								Outcome				
Average working days to close stage 1 complaint	Closed at Stage 2	Closed within 20 working days	Extension Stage 2	Exceeded S2 deadline after extension ie +25	Total working days to close Stage 2 complaints	Average working days to close stage 2 complaint	Escalated from S1 to S2	Upheld Stage 1	Not Upheld Stage 1	Upheld Stage 2	Not Upheld Stage 2	Withdrawn
4	0	0	0	0	0	0	0	4	1	0	0	0
2	0	0	0	0	0	0	0	12	5	0	0	0
3	2	2	0	0	22	11	2	1	1	1	1	0
6	0	0	0	0	0	0	0	8	1	0	0	0
2	0	0	0	0	0	0	0	4	1	0	0	0
5	2	1	0	1	42	21	2	21	5	0	2	0
5	1	0	1	0	23	23	0	18	14	0	1	0
0	0	0	0	0	0	0	0	0	0	0	0	0
7	1	1	0	0	9	9	1	2	3	0	1	0
1	0	0	0	0	0	0	0	1	0	0	0	0
0	0	0	0	0	0	0	0	0	0	0	0	0
4	1	1	0	0	11	11	0	9	6	0	1	0
19	2	1	0	1	50	25	1	2	3	0	2	0
0	0	0	0	0	0	0	0	0	0	0	0	0
1	0	0	0	0	0	0	0	0	1	0	0	0
4	0	0	0	0	0	0	0	1	2	0	0	0
0	0	0	0	0	0	0	0	0	0	0	0	0
8	2	1	1	0	26	13	0	8	0	2	0	0
2	0	0	0	0	0	0	0	1	1	0	0	0
3	1	1	0	0	8	8	1	2	5	0	1	0
2	1	1	0	0	5	5	1	2	1	0	1	0
0	1	1	0	0	4	4	0	0	0	0	1	0
12	0	0	0	0	0	0	0	2	1	0	0	0
5	14	10	2	2	200	14	8	98	51	3	11	0

0 timescales			90%
Age 1 complaints			5
Age 2 complaints			14
			66%
			21%
		Equalities	
	40	Age	0
	39	Disability	0
	14	Gender	0
	14	Race	0
	49	Religion	0
	5	Sexual Orientation	0
	0		0
	161	TOTAL	0

[illegible]

Year 2015 - 2016		Complaints Received							
Education	Complaints Received	Complaints Received Stage 1	Complaints Received Stage 2	Complaints closed	Closed at Stage 1	Closed within 5 Working Days	Extension Stage 1	Exceeded S1 deadline after extension ie +10days	Total working days to close Stage 1 complaints
Early Education & Child Care Services	14	13	1	14	13	11	2	0	43
Education Maintenance Allowance	1	1	0	1	1	1	0	0	2
Learning Disabilities	1	1	0	1	1	1	0	0	3
Libraries	4	4	0	4	4	3	1	0	14
Primary Schools	46	44	2	40	40	19	9	12	316
Secondary Schools	33	32	1	28	28	13	8	7	250
School transport	0	0	0	0	0	0	0	0	0
Totals	99	95	4	88	87	48	20	19	628
Complaint Category			Upheld per category Stage 1		Upheld per category Stage 2		Performance		
							% of complaints closed within SPSO 1		
Below declared service standard		3	2		0		average working days to close Stage		
Citizen expectation not met - quality of service		43	26		0		average working days to close Stage		
Citizen expectation not met – timescales		2	2		0		% of Stage 1 complaints upheld		
Council policy – charges		0	0		0		% of Stage 2 complaints upheld		
Council policy – does not meet criteria		13	6		0				
Council policy – level of service provision		6	3		0		Channel Received		
Delay in service delivery		0	0		0		E-mail		
Employee behaviour		18	13		0		Online Complaints form		
Error in Service Delivery		7	3		0		Internal Complaints form		
Failure to deliver service		6	0		0		In Writing		
Service standards not declared		0	2		0		By telephone		
Contractor		1	1		0		Face to Face		
							Social Media		
Total		99	58		0		TOTAL		

Appendix 3 (cont'd)

Complaints closed							Outcome					
Average Working Days to close S1	Closed at Stage 2	Closed within 20 working days	Extension Stage 2	Exceeded S2 deadline after extension ie +25	Total working days to close Stage 2 complaints	Average Working days to close S2 complaint	Escalated from S1 to S2	Upheld Stage 1	Not Upheld Stage 1	Upheld Stage 2	Not Upheld Stage 2	Withdrawn
3	1	1	0	0	7	7	1	7	6	0	1	0
2	0	0	0	0	0	0	0	1	0	0	0	0
3	0	0	0	0	0	0	0	1	0	0	0	0
4	0	0	0	0	0	0	0	3	1	0	0	0
8	0	0	0	0	0	0	1	22	18	0	0	0
9	0	0	0	0	0	0	0	24	4	0	0	0
0	0	0	0	0	0	0	0	0	0	0	0	0
						0						
7	1	1	0	0	7	7	2	58	29	0	1	0
timescales						78%						
1 complaints						7						
2 complaints						7						
						67%						
						0%						
		Equalities										
	21	Age				0						
	18	Disability				0						
	2	Gender				1						
	8	Race				0						
	49	Religion				0						
	1	Sexual Orientation				0						
	0											
	99	TOTAL				1						

HEED 2015/16

Housing Environmental & Economic Development	Complaints Received			Complaints Performance					
	Total Complaints Received	Complaints Received Stage 1	Complaints Received Stage 2	Total complaints closed	Closed at Stage 1	Closed within 5 Working Days	Extension Stage 1	Exceeded S1 deadline after extension ie +10days	Total working days to close Stage 1 complaints
Repairs	147	133	14	157	144	80	20	44	1374
Sold Property	27	19	8	24	18	8	7	3	287
Capital Programmes	27	24	3	24	21	18	3	0	73
Estate Management & Caretaking	35	35	0	36	36	28	6	2	206
Asist	5	5	0	5	5	4	1	0	14
Homeless	15	15	0	14	14	11	3	0	64
Allocations	18	15	3	19	15	13	2	0	56
Strategy	1	1	0	1	1	1	0	0	5
Greenspace	49	49	0	51	50	42	3	5	196
Roads	39	39	0	37	37	28	3	6	168
Street lighting	50	48	2	50	48	23	9	16	371
Waste Services	97	97	0	99	99	66	13	20	697
Commercial Estates	9	8	1	8	7	5	2	0	25
Economic Development	0	0	0	0	0	0	0	0	0
Planning & Building Standards	8	6	2	7	6	4	2	0	33
Facilities	13	13	0	13	13	11	1	1	49
	540	507	33	545	514	342	75	97	3618
Complaint Category			Upheld per category Stage 1		Upheld per category Stage 2		Performance		
Below declared service standard			58		45		3 average working days to close Stage 1		
Citizen expectation not met - quality of service			128		54		3 average working days to close Stage 2		
Citizen expectation not met – timescales			14		1		0 % of Stage 1 complaints upheld		
Council policy – charges			13		1		0 % of Stage 2 complaints upheld		
Council policy – does not meet criteria			21		1		0		

Council policy – level of service provision	9	0	0	Channel Received
Delay in service delivery	55	45	3	E-mail
Employee behaviour	62	42	2	Online Complaints form
Error in Service Delivery	65	38	2	Internal Complaints form
Failure to deliver service	86	58	1	In Writing
Service standards not declared	3	0	0	By telephone
Contractor	26	17	0	Face to Face
				Social Media
Total	540	302	14	TOTAL

Appendix 3 (Cont'd)

Complaints Closed								Outcome					
Average working days to close S1	Closed at Stage 2	Closed within 20 working days	Extension Stage 2	Exceeded S2 deadline after extension ie +25	Total working days to close Stage 2 complaints	Average working days to close S2	Escalated from Stage 1 to 2	Upheld Stage 1	Not Upheld Stage 1	Upheld Stage 2	Not upheld Stage 2	Withdrawn	SPSO Enquires
10	13	10	1	3	281	22	9	85	59	7	6	0	0
16	6	2	0	4	330	55	5	10	8	4	2	0	0
3	3	2	0	1	90	30	1	13	8	2	1	0	0
6	0	0	0	0	0	0	0	13	23	0	0	0	0
3	0	0	0	0	0	0	0	0	5	0	0	0	0
5	0	0	0	0	0	0	0	5	9	0	0	0	0
4	4	4	0	0	49	12	3	5	10	0	4	0	0
5	0	0	0	0	0	0	0	1	0	0	0	0	0
4	1	1	0	0	8	8	0	35	14	0	1	0	0
5	0	0	0	0	0	0	0	17	20	0	0	0	0
8	2	0	0	2	89	45	1	33	15	1	1	0	0
7	0	0	0	0	0	0	0	68	31	0	0	0	0
4	1	1	0	0	19	19	1	5	2	0	1	0	0
0	0	0	0	0	0	0	0	0	0	0	0	0	0
6	1	0	0	1	26	26	0	1	5	0	1	0	0
4	0	0	0	0	0	0	0	11	3	0	0	0	0
7	31	20	1	11	892	29	20	302	212	14	17	0	0
mescales								80%					
complaints								7					
complaints								29					
								59%					
								45%					

		Equalities	
	123	Equality concern raised	1
	186		
	59		
	54		
	104		
	7		
	7		
	540		

|

Data submission template

Data should only be entered into the white cells, all grey cells are based on formulas and will calculate automatically when the white cells are completed.

Note fields are not mandatory and are included only to aid indicator interpretation and check the figures add up.

The data used below is included for illustration purposes only.

<p>INDICATOR 1a - complaints received between 1st April and 31st March in any financial year</p> <p>1 (i) total number of complaints received in the year</p> <p>1 (ii) population (mid year population estimates)</p> <p>1a the total number of complaints received per 1,000 population</p> <p>Note: the definition of a complaint is that which is defined in the SPSO LA CHP. This does not include requests for service, but does include complaints that are later withdrawn or remain unresolved.</p> <p>The aim of these indicators is to measure progress against the LA CHP. The LA CHP does not relate to social work and therefore social work complaints should not be counted in any of these indicators.</p> <p>Note field only - to clarify complaints not included in 1(i)</p>				<p><i>Note fields</i></p>	<div>800</div> <div>90,000</div>	<div>8.9</div>
<p>INDICATOR 1b - complaints closed between 1st April and 31st March in any financial year</p> <p>All counts for Indicators from 1b through to 6 are based on "case closed" (i.e. responded to) to ensure complaints are counted at the point they end.</p> <p>1 (iii) total number of complaints closed in the year</p> <p>1 (iv) population (mid year population estimates)</p> <p>1b the total number of complaints closed per 1,000 population</p> <p>Note: This does not include requests for service, nor does it include complaints that are later withdrawn or remain unresolved.</p> <p>This is applicable to all indicators from 1b onwards.</p> <p>Note field only - to clarify volume and reason(s) for complaints not included in 1(iii) and the gap between the number of complaints received and closed in the same year</p>					<div>796</div> <div>90,000</div>	<div>8.8</div>
<p>INDICATOR 2</p> <p>2 (i) number of complaints - closed at stage 1</p> <p>2a the number of complaints closed at stage 1 as % all complaints closed</p> <p>2 (ii) number of complaints - closed at stage 2</p> <p>2b the number of complaints closed at stage 2 as % all complaints closed</p>					<div>750</div> <div>19</div>	<div>94.2%</div> <div>2.4%</div>

SPSO Local Authority Complaints Handling Procedure - Performance Indicators

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2 (iii)	number of complaints - closed after escalation		27	
2c	the number of complaints closed after escalation as % all complaints closed			3.4%
INDICATOR 3 - stage 1				
3 (i)	number of complaints - upheld at stage 1		458	
stage 1	number of complaints - closed at stage 1 (frontline resolution)		750	
3a	the number of complaints upheld at stage 1 as % of all complaints closed in full at stage 1			61.1%
3 (ii)	number of complaints - not upheld at stage 1		292	
stage 1	number of complaints - closed at stage 1 (frontline resolution)		750	
3b	the number of complaints not upheld at stage 1 as % of all complaints closed in full at stage 1			38.9%
3 (iii)	number of complaints - partially upheld at stage 1		0	
stage 1	number of complaints - closed at stage 1 (frontline resolution)		750	
3c	the number of complaints partially upheld at stage 1 as % of all complaints closed in full at stage 1			0.0%
INDICATOR 3 - stage 2				
3 (iv)	number of complaints - upheld at stage 2		12	
stage 2	number of complaints - closed at stage 2 (investigation)		19	
3a	the number of complaints upheld at stage 2 as % of all complaints closed in full at stage 2			63.2%
3 (v)	number of complaints - not upheld at stage 2		7	
stage 2	number of complaints - closed at stage 2 (investigation)		19	
3b	the number of complaints not upheld at stage 2 as % of all complaints closed in full at stage 2			36.8%
3 (vi)	number of complaints - partially upheld at stage 2		0	
stage 2	number of complaints - closed at stage 2 (investigation)		19	
3c	the number of complaints partially upheld at stage 2 as % of all complaints closed in full at stage 2			0.0%
INDICATOR 3 - escalated				
3 (vii)	number of complaints - upheld after escalation		7	
escalated	number of complaints - closed after escalation		27	

SPSO Local Authority Complaints Handling Procedure - Performance Indicators

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3a	the number of escalated complaints upheld at stage 2 as % of all escalated complaints closed in full at stage 2			25.9%
3 (viii)	number of complaints - not upheld after escalation		20	
escalated	number of complaints - closed after escalation		27	
3b	the number of escalated complaints not upheld at stage 2 as % of all escalated complaints closed in full at stage 2			74.1%
3 (ix)	number of complaints - partially upheld after escalation		0	
escalated	number of complaints - closed after escalation		27	
3c	the number of escalated complaints partially upheld at stage 2 as % of all escalated complaints closed in full at stage 2			0.0%
INDICATOR 4 - stage 1				
4 (i)	sum of the total number of working days taken for all complaints closed at stage 1		4,983	
stage 1	number of complaints - closed at stage 1 (frontline resolution)		750	
4a	the average time in working days for a full response to complaints at stage 1			6.6
INDICATOR 4 - stage 2				
4 (ii)	sum of the total number of working days taken for all complaints closed at stage 2		597	
stage 2	number of complaints - closed at stage 2 (investigation)		19	
4b	the average time in working days for a full response to complaints at stage 2			31.4
INDICATOR 4 - escalated				
4 (iii)	sum of the total number of working days taken for all complaints closed after escalation		502	
escalated	number of complaints - closed after escalation		27	
4c	the average time in working days for a full respond to complaints after escalation			18.6
INDICATOR 5 - stage 1				
5 (i)	number of complaints - closed at stage 1 within 5 working days		502	
stage 1	number of complaints - closed at stage 1 (frontline resolution)		750	
5a	the number of complaints closed at stage 1 within 5 working days as % of total number of stage 1 complaints			66.9%
	<i>Note field only - total number and % of complaints closed at stage 1 within agreed timescales (i.e. within 5 working days) and also within 10 working days where extension has been authorised</i>		619	
			82.5%	
INDICATOR 5 - stage 2				

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5 (ii)	number of complaints - closed at stage 2 within 20 working days		14	
stage 2	number of complaints - closed at stage 2 (investigation)		19	
5b	the number of complaints closed at stage 2 within 20 working days as % of total number of stage 2 complaints <i>Note field only - total number and % of complaints closed at stage 2 within agreed timescales (i.e. within 20 working days) and also within the agreed timescale where extension has been authorised</i>	<div>17</div> <div>89.5%</div>		73.7%
INDICATOR 5 - escalated				
5 (iii)	number of complaints - closed after escalation within 20 working days		17	
escalated	number of complaints - closed after escalation		27	
5c	the number of complaints closed after escalation within 20 working days as % of total number of escalated complaints <i>Note field only - total number and % of complaints closed after escalated within agreed timescales (i.e. within 20 working days) and within the agreed timescale where extension has been authorised</i>	<div>0</div> <div>0.0%</div>		63.0%
INDICATOR 6 - stage 1				
6 (i)	number of complaints - closed at stage 1 where extension was authorised		117	
stage 1	total number of complaints - closed at stage 1		750	
6a	number of complaints closed at stage 1 where extension was authorised as % of all complaints at stage 1			15.6%
INDICATOR 6 - stage 2				
6 (ii)	number of complaints - closed at stage 2 where extension was authorised		3	
stage 2	total number of complaints - closed at stage 2		19	
6b	number of complaints closed at stage 2 where extension was authorised as % of all complaints at stage 2			15.8%
INDICATOR 6 - escalated				
6 (ii)	number of complaints - closed after escalated where extension was authorised		0	
stage 2	total number of complaints - closed after escalated		27	
6b	number of complaints closed after escalated where extension was authorised as % of all complaints escalated			0.0%

Learning from Complaints: SPSO Enquiries

Enquiry 1:

Date: April 2015

Subject: Maintenance & Repairs

Complaint detail: Customer had complained as believed houses in a better condition than her own were included in a programme of works and were re-rendered and insulated. Said house was non-standard construction and very hard to heat.

In response to Customer WDC had advised works were being carried out to properties to ensure met Scottish Housing Quality Standard. Confirmed a Surveyor had carried out visual inspection of all housing stock and Customer's property was not one of those which failed and so was not included in the programme.

Decision: Complaint was not upheld with no recommendations

Enquiry 2:

Date: August 2015

Subject: Homeless

Complaint detail: Advice Worker complained on behalf of his client saying WDC had given misleading advice regarding storage of his belongings during a homelessness application and unreasonably delayed in responding to requests for assistance.

Customer's home was being repossessed and potential gap between leaving property and taking up a new tenancy. Customer said he was told if he became homeless prior to tenancy being available that his belongings would be stored for him, but says he was then told this would not be possible due to a change in Council Policy. In the end WDC managed to negotiate an extension to the repossession meaning customer was able to move straight in to his new tenancy and so storage was not required. SPSO were satisfied WDC did not mislead customer and acknowledged storage was not required.

Advice Worker also complained WDC failed to communicate with the Customer following a referral from an NHS service to Customer & Community Services team. SPSO noted impact Customer said the delay in communication had on his existing poor health. WDC acknowledged delay and apologised for it so this element upheld, but no recommendations.

Decision: Some upheld, no recommendations

Enquiry 3:

Date: December 2015

Subject: Repairs & Maintenance

Complaint: Customer was a council tenant and complained regarding repairs the council did to his home following water ingress. Customer had also been told he would need to pursue WDC Contractor himself if he wanted to make claim for compensation. Was also unhappy at how his complaint had been handled.

Customer had ongoing problems with water ingress to his property. SPSO were satisfied WDC had responded reasonably to reports of water ingress. SPSO looked at the issue of claiming compensation and understood why the customer had felt, as a council tenant, he should raise concerns with his landlord and were critical that on the basis there was no clear statement for tenants of the council's position regarding such claims. These parts of the customer's complaint were not upheld, however, recommendations were made.

SPSO found customer's complaint was not acknowledged or responded to within timescale and upheld this part.

Decision: Some upheld, recommendations

Recommendations: Apology to be issued to customer
Work with customer to clarify whether contractor remains in business and how he would go about raising a claim against them
Consider how to improve ease of access for tenants in making such claims against contractors in future

WDHSCP
Period:2015/16

Social Work Services	Total
Mental Health	1
Occupational Therapy	2
Children's Services	17
Residential Care Home	3
Care Contract Team	1
Care at Home	8
Care at Home Sheltered Housing	1
Children's Services Child Protection	1
Criminal Justice	3
Children's Services Fostering and Adoption	1
Community Care	1
Hospital Discharge	1
SDS Children with Disabilities	1
SDS Community Care	1
Subject	
Administration	1
Administrative Delays	1
Building	1
Bias of Unfair Discrimination	1
Communication	5
Data Protection	2
Employee Attitude	8
Failure to Achieve Standards	6
Failure to Provide Service	13
Misuse of Information	1
Parking	1
Policy	1
Paperwork	1
Response	
Acknowledged within 5 days	34
Interim response	1
Response within 28 days	33
Outcomes	
Upheld	14
Partially upheld	10
Not Upheld	15
Unsubstantiated	2
Partially upheld/Unsubstantiated	1