

Report to the Virtual Meeting of the Board of Management of Langstane Housing Association Limited to be held on

This report is:

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For approval

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For noting

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A performance report

Complaints Analysis Report

Executive Summary

This report provides analysis of service complaints recorded by Langstane Housing Association during the quarter July to September 2021.

1. Background

Effective complaints handling is an important element of the Association's work. The core values of continual improvement; acting with integrity; and being open and transparent at all times, are demonstrated through the culture of welcoming complaints and treating them as an opportunity to review service provision and learn more about what is important to tenants.

The Complaint Handling Procedure (CHP) has been in place since 2012. It is the model for handling complaints, developed by the Scottish Public Services Ombudsman (SPSO), used across the public and third sectors in Scotland. Performance is reported annually to the Scottish Housing Regulator via indicators in the Annual Return on the Charter (ARC).

Changes to the model procedure that required implementation by 1 April 2021 are successfully in place.

2. Stage One Complaints (target timescale 5 working days)

	July to Sept 20	Oct – Dec 20	Jan – Mar 21	April – June 21	Jul – Sept 21
No. of complaints	53	74	74	54	73
Responded to in full	92%	99%	97%	94%	92%
Upheld	57%*	66%	59%	55%*	43%
Responded to within timescales	50%*	79%	84%	84%*	85%
Average working days to complete (new indicator)	4.35*	4.95*	4.00*	4.00*	4.02*

* indicates that these figures were calculated with cases still open on the system. Final figures for the year will vary to take into account these cases being closed off and included in the annual calculation

2.1 What does the performance trend tell us?

- a) **Number of complaints** – 73 stage one service complaints were logged during quarter two of the year. This is a substantial 35% increase compared to last quarter, and up 38% against the same period last year. The reason behind the increase compared to the previous quarter is due to some internal refresher training and reminders to staff via weekly team brief to record all complaints. This was due to concerns that under-recording is an issue.

A detailed breakdown of all complaints is reported to the senior staff concerned on a monthly basis. Procedure requires that these are then used to identify learning points and record these onto the complaints action list. This allows prevention of recurring issues and promotion of the effectiveness of the complaints process.

- b) **Responded to in full** – Follow up action is taken to ensure teams deal with complaints as quickly as possible. Monitoring reports are issued at regular intervals to alert teams to open cases, and to summarise the complaints activity to allow for improvement actions to be identified and recorded.

There are six open stage one complaints at the time of writing this report. These cases will likely have a moderate impact upon the final figures reported on to the annual return.

- c) **Upheld complaints** – at 43% this indicator has reduced by 12% against last quarter. Although difficult to identify the root cause of why complaints are made that are not upheld, it could reflect the fact that people are generally unhappy due to the impact of the pandemic affecting all aspects of their lives, and so are more likely to complain about something that is not in fact a service failure. It could also be related to poor communication about services. Information provision is something that is reviewed regularly by the teams to make improvements. In addition, improved communication to manage customer expectations is something that can be addressed via the creation of the new customer services team.
- d) **Average working days to complete** –The internal target for this indicator is to keep to within the target timescale for the complaint, which is five working days for stage one cases.

Performance this quarter is 4.02 days. This is within target of 5 working days. However, there are six open cases that will impact this performance for reporting on to the Annual Return on the Charter. Teams continue to work hard to keep within target timescales.

2.2 What issues are being highlighted?

In addition to 64% of complaints relating to various aspects of the repairs and maintenance service, there is a broad range of issues spread across the frontline services. The summer newsletter consultation concerned the repairs service, asking various questions that will improve understanding of customer experience of, and priorities for the service.

2.3 Learning from Complaints

A new quarterly process for identifying learning outcomes started in July 2021. It is designed to be both more productive in terms of achieving learning and improvement, and also provide a robust system to demonstrate compliance with this requirement of the Complaints Handling Procedure.

Six learning points arose from quarter one of the year, which is a very encouraging start to the new system. Not all teams have fully adopted the new process due to resource issues, and so it is expected that this will continue to be a productive process that demonstrates a commitment to the complaints handling procedure requirements, and improved outcomes for customers.

3. Stage Two Complaints (target timescale 20 working days)

	July – Sept 20	Oct – Dec 20	Jan – Mar 21	April – June 21	July – Sept 21
No. of complaints	7	8	6	4	10
Responded to in full	100%	88%	100%	75%	70%
Upheld	86%	71%	33%	25%*	29%
Responded to within timescales	71%	100%	100%	100%*	100%
Average working days to complete (new indicator)	20.14	19.86*	18.67	16.67*	15.86*

*Cases remain open and will need to be taken into account for final calculations of performance

3.1 What does the performance trend tell us?

Case numbers are within expected numbers, and cover a variety of service issues this quarter. Due to this variety there is not a specific underlying issue causing concern. There are three open stage two complaints at the time of writing this report. These cases will likely have a slight impact upon the final figures reported on to the annual return.

4. Alignment with Business Plan

The Langstane Group's Business Plan documents the Group's vision to "be the best we can be".

For customers, the business plan objectives are as follows:

Our customers	
OC 1	Fully understand the individual requirements of our tenants and other customers
OC2	Improve service delivery standards for tenants and other customers
OC3	Improve tenancy sustainment
OC4	Deliver value for money
OC5	Ensure Equality and Human Right Legislation is adhered to

The activity in this report is primarily aimed at delivering objectives OC1 and OC2, although OC4 and OC5 also come into play in all engagement activity.

5. Governance

Langstane Housing Association operates in a heavily regulated industry. The Scottish Housing Regulator has set down seven regulatory standards that must be adhered to. These are:

1. The governing body leads and directs the RSL to achieve good outcomes for its tenants and other service users;
2. The RSL is open about and accountable for what it does. It understands and takes account of the needs and priorities of its tenants, service users and stakeholders. And its primary focus is the sustainable achievement of these priorities;
3. The RSL manages its resources to ensure its financial well-being, while maintaining rents at a level that tenants can afford to pay;
4. The governing body bases its decisions on good quality information and advice and identifies and mitigates risks to the organisation's purpose.
5. The RSL conducts its affairs with honesty and integrity;
6. The governing body and senior offices have the skills and knowledge they need to be effective;
7. The RSL ensures that any organisational changes or disposals it makes safeguard the interest of, and benefit, current and future tenants.

This report and its actions are directly relevant in helping to meet the above standards with the exception of standard 7 which is not relevant to this report. In particular this report helps to achieve standards 1 and 2.

In addition, no other regulatory standard nor equality or human right is breached or negatively impacted by this report or its actions.

There is nothing within this report and its actions that would breach or negatively affect either the Association's Rules or charitable status or, where appropriate, any individual subsidiary Articles of Association.

6. Financial and staffing implications

No financial or staffing implications to report.

7. Risk management and assurance

It is critical that the Association complies with all aspects of the CHP. This includes:

- Identifying and recording complaints accurately
- Investigating and responding to complaints timeously
- Demonstrating and reporting on learning from complaints

Failure to fulfil the requirements of the CHP presents a high risk in terms being a significant performance failure.

8. Recommendation

Board of Management are requested to note the contents of this report.

Report prepared by: Ash Reid
Support Services Manager
ayesha.reid@langstane-ha.co.uk

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