



## **Complaints: Q4 January - March 2024**

### Background

In terms of Ark's Complaints Policy and Procedure, Ark's Leadership Team (LT) regularly reviews the information gathered from complaints, and considers whether our services could be improved, or internal policies and procedures updated.

### Summary of complaint activity

During Q4 January to March 2024, Ark received a total of sixteen complaints which has reduced from eighteen in the previous quarter.

Nine complaints were responded to with a frontline response at Stage 1 with ten points identified. 'Frontline complaints' are relatively straightforward complaints which can usually be responded to within five working days.

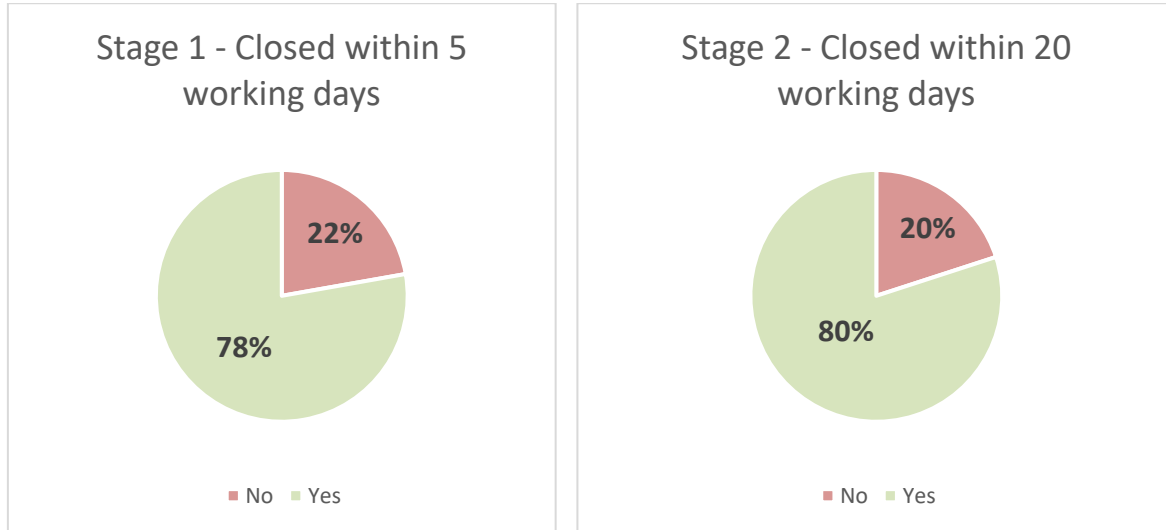
78% of Stage 1 complaints were closed within 5 working days. Two complaints were closed out with target with extensions agreed with the customers.

Stage 2 is where a customer is dissatisfied with the frontline response or refuses to engage at the frontline stage, insisting they wish their complaint to be investigated.

Five complaints were investigated directly at Stage 2 with nine points identified. 80% of these complaints were closed within our target of 20 working days. One complaint was closed over target due to a delay in communication with the complainant initially and then a further delay with internal communication. Feedback and additional guidance have since been provided to the investigating manager to ensure internal communications are concluded within appropriate timescale.

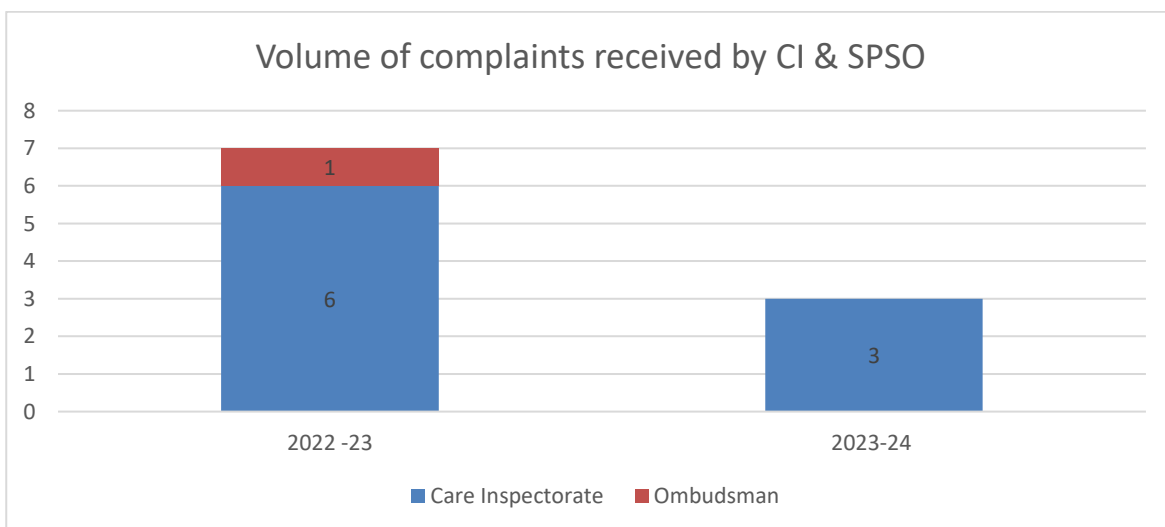
Two complaints were escalated to Stage 2 due to the customers being dissatisfied with the frontline response. Both were closed within our target of 20 working days.

The pie charts below demonstrate the percentage of complaints closed within target in Q4.

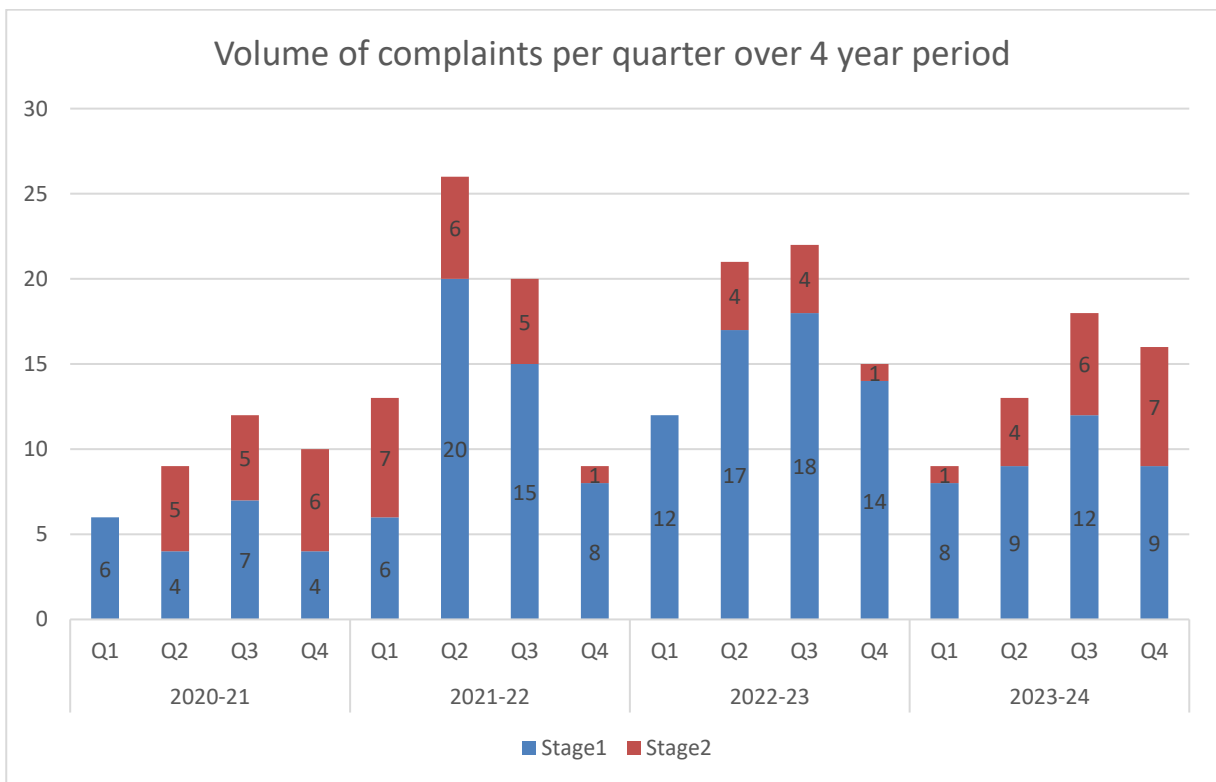
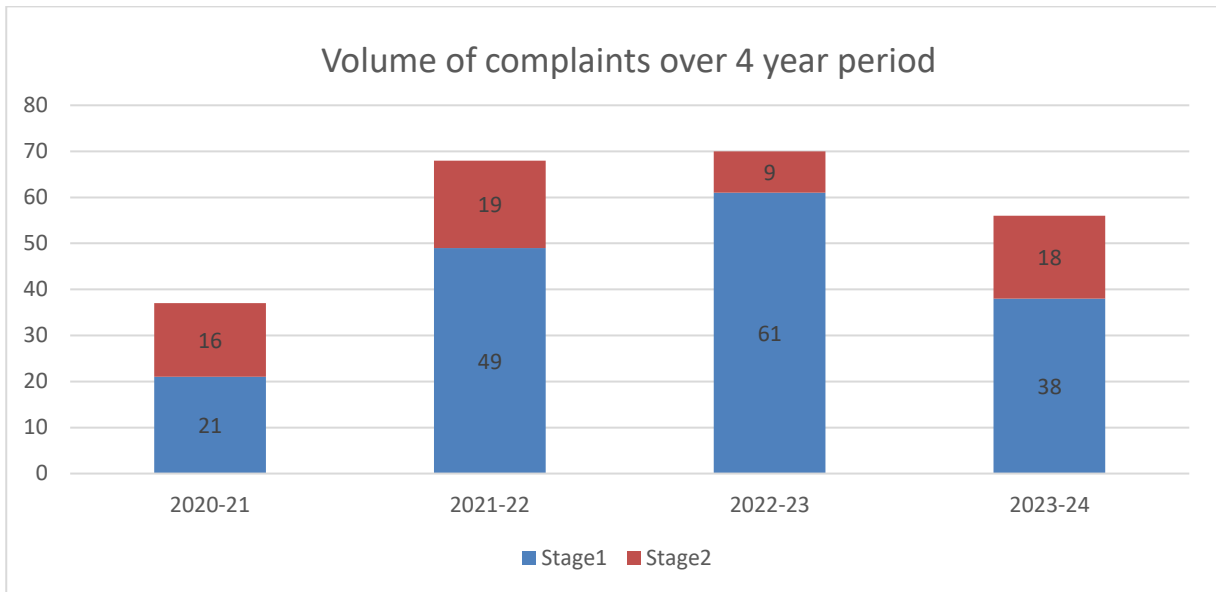


During Q4 there was one complaint reported to the Care Inspectorate regarding concerns with staffing levels and management oversight. Following an extensive investigation this complaint was not upheld and is included in the Stage 2 figures noted above. No complaints were escalated to the Scottish Public Services Ombudsman (SPSO).

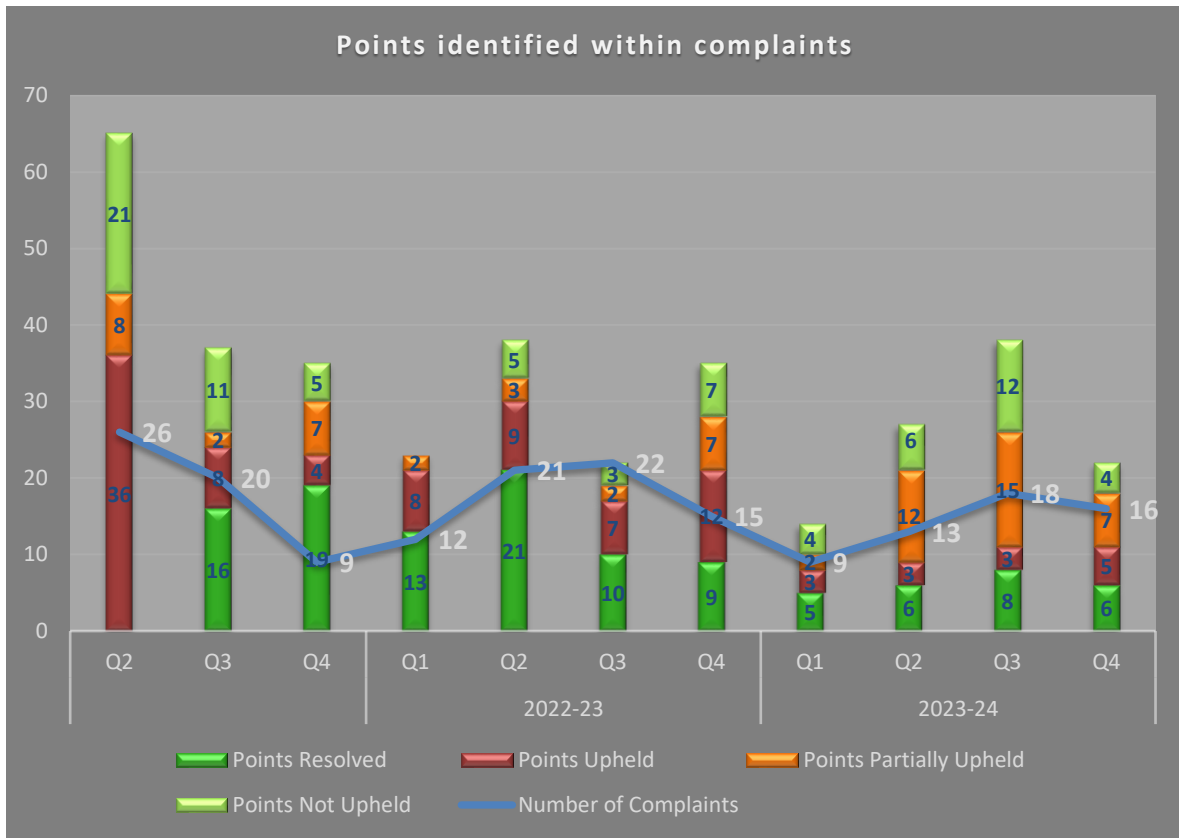
The below chart demonstrates the volume of complaints reported to the Care Inspectorate and the volume of complaints escalated to the Ombudsman within the current and previous reporting year.



The bar charts below demonstrate the volume of complaints received over a 4 year period. The overall volume of complaints in 2023-24 is 20% less than 2022-23.



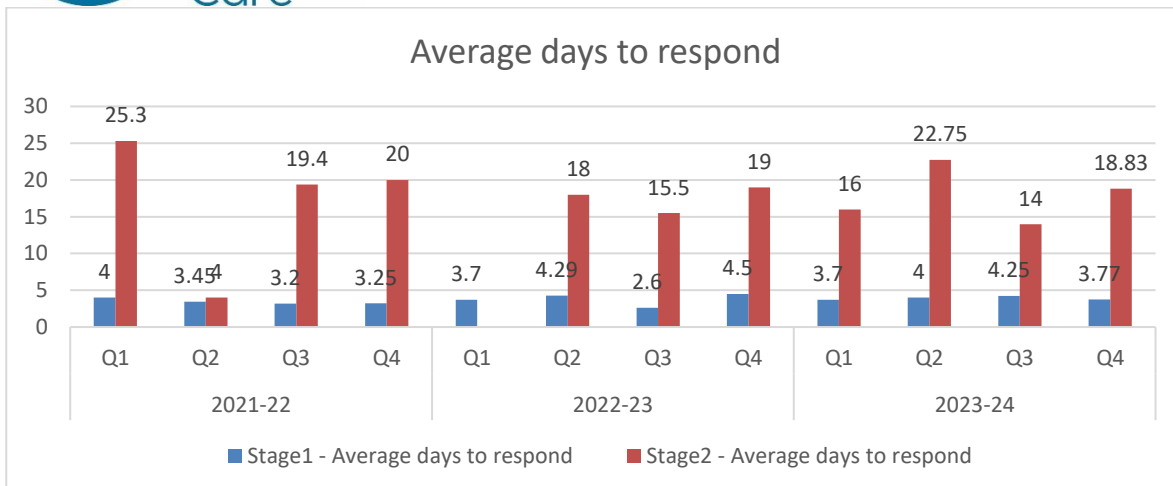
The below chart details the number of points identified within complaints over a 2 year period and identifies the volume of points Upheld, Partially Upheld, Resolved and Not Upheld.



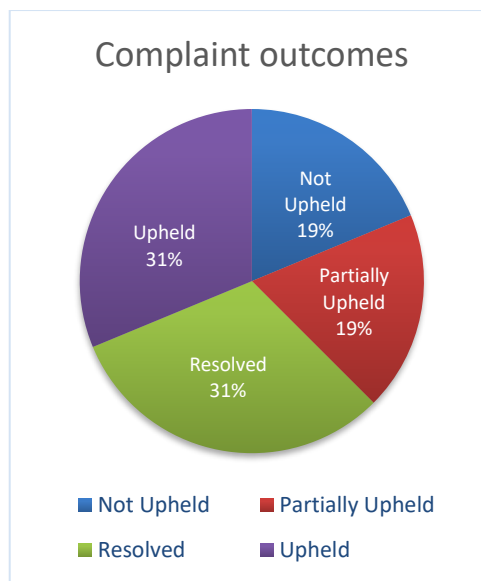
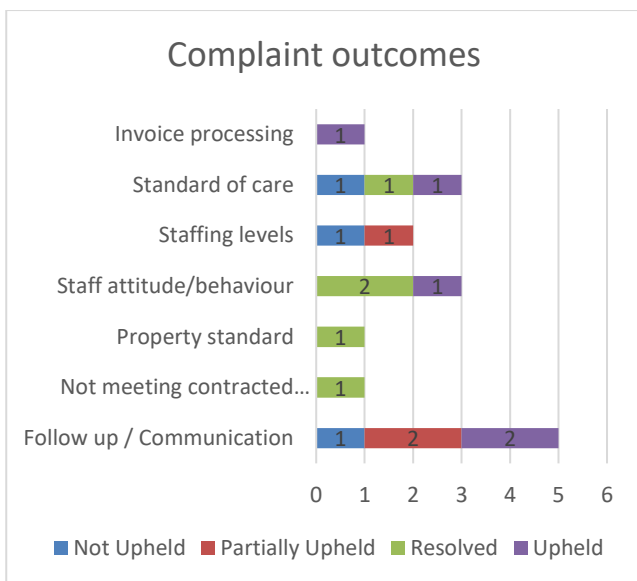
The bar chart below demonstrates the average response time for Stage 1 and Stage 2 complaints each quarter over the last three reporting years.

Stage 1 average response times have been fairly consistent with a slight reduction in Q4 2023-24 with an average of 3.77 working days to respond which is within the target of 5 working days. This has reduced from 4.25 working days in the previous quarter. The year end average response time for Stage 1 is 3.72 working days.

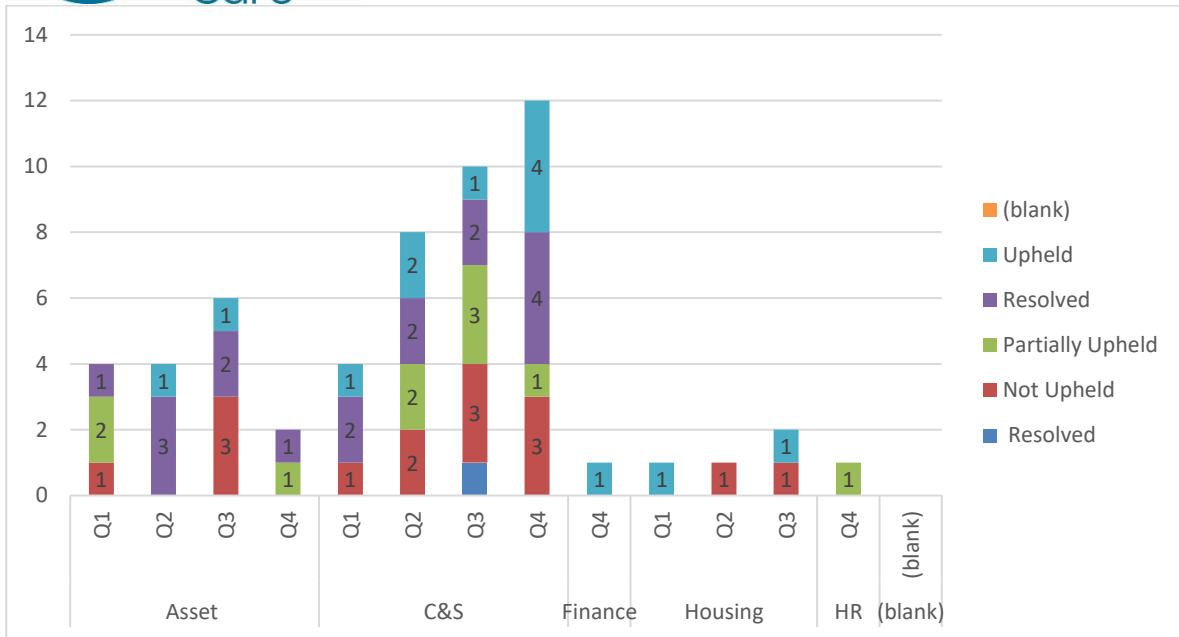
Stage 2 average response times vary with an average response time in Q4 2023-24 of 18.83 working days which is within the target of 20 working days. The year end average response time for Stage 2 remains at 17.5 working days.



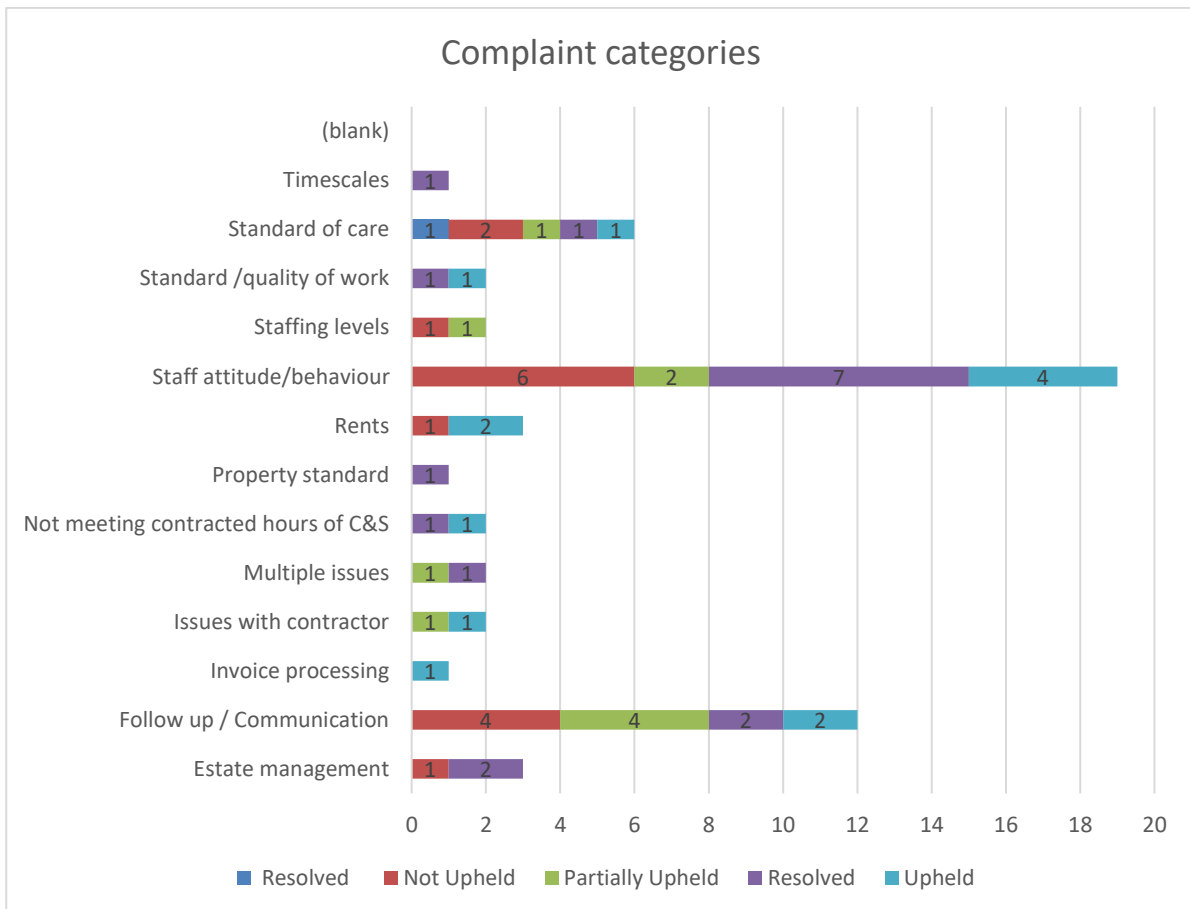
The charts below demonstrate the outcome of complaints within Q4. A complaint is resolved when both (the organisation) and the customer agree what action (if any) will be taken to provide full and final resolution for the customer, without making a decision about whether the complaint is upheld or not upheld.



The departmental breakdown of complaints in 2023-24:



The below chart sets out the complaints by category Year to date. Staff attitude/behaviour is the most common complaint received followed by communication.



The table below sets out how we are performing against the indicators set out by the SPSO, along with a comparison of our performance in the previous reporting year for responding at Stage 1 and 2 of the complaints handling procedure.

Scottish Public Services Ombudsman (SPSO) Indicators	Target/Guidance	2023/24					2022-23
		Q1	Q2	Q3	Q4	Year to Date Total	Year End Total
<b>Indicator One - The total number of complaints received</b>							
Stage 1 (this includes escalated complaints, as they were first received at Stage 1)	The total number of complaints received	8	9	12	9	38	61
Stage 2 (Investigated directly at Stage 2)	The total number of complaints received	0	4	4	5	13	8
Escalated to Stage 2	The total number of complaints escalated	1	0	2	2	5	1
<b>Indicator Two: the number and percentage of complaints closed in full within the set timescales</b>							
Stage 1 - the number of complaints closed in full within five working days	Number	7	5	9	7	28	50
	Percentage	87.50%	56%	25%	78.00%	72.00%	82.00%
Stage 2 - the number of complaints closed in full at stage 2 within 20 working days	Number	1	2	6	4	13	7
	Percentage	100%	50%	100%	80%	72%	78%
<b>Indicator Three: the average time in working days for a full response to complaints at each stage</b>							
Stage 1 - average time in working days to respond to complaints	5 Working Days	3.62	4.1	4.25	3.77	3.72	3.77
Stage 2 - average time in working days to respond to complaints (including escalated complaints)	20 Working Days	16	22.75	14	18.83	17.5	17
<b>Indicator Four: the outcome of complaints at each stage</b>							
Stage 1	Upheld	2	3	1	3	9	21
	Partially Upheld	1	1	2	1	5	7
	Not Upheld	2	1	5	0	8	4
	Resolved	3	4	3	4	14	29
Stage 2 (Investigated directly at Stage 2)	Upheld	0	0	1	2	3	4
	Partially Upheld	1	1	1	1	4	2
	Not Upheld	0	2	1	2	5	1
	Resolved	0	1	1	0	2	2

Ark is committed to improving service delivery by applying learning from complaints. The below table sets out the actions that have been agreed in response to complaints received within this quarter. These actions will be monitored and signed off by the relevant department leads.

Complaint category	Action
Staff attitude/behaviour	<ul style="list-style-type: none"> <li>➤ Staff member will complete a reflective account on professional boundaries and communication</li> <li>➤ As a result of complaint an HR investigation will take place.</li> </ul>
Communication	<ul style="list-style-type: none"> <li>➤ Rota to be emailed to supported person and Guardian copied into the email before 5pm every Friday with details of who is supporting the following week. Where there is a support gap on rota this should say to be confirmed and sufficient notice given by email if cover has been sought or not.</li> <li>➤ Task applied to supporting activities each Monday so staff can support supported person to put the names of staff supported for the week on calendar.</li> <li>➤ Further AIMS training for staff to be planned with AIMS Manager to ensure communication Compliance.</li> <li>➤ To educate staff team on the different legal powers that come with Welfare &amp; POA.</li> <li>➤ To ensure all delegated powers are on AIMS and that staff are aware of what these are</li> </ul>
Not meeting contracted hours/Staffing levels	<ul style="list-style-type: none"> <li>➤ Open communication to be had with Guardian about why the hours may need to be reduced in future so that they have a clearer understanding.</li> <li>➤ Absence Management Reporting to be discussed within Team meeting.</li> <li>➤ Discuss within supervisions the Shift Lead Folder to ensure that all staff are aware and confident in dealing with absence out with business hours.</li> <li>➤ Recruitment and retention are an area of improvement, managers have attended career events.</li> </ul>



	<ul style="list-style-type: none"> <li>➤ Organisational recruitment and retention are part of Ark's business plan and C&amp;S Strategy. Measures have been identified to improve recruitment. A pilot of Talent &amp; Engagement Officer to support services where there are high vacancies.</li> </ul>
Property standard within communal area	<ul style="list-style-type: none"> <li>➤ Committed to completing this work during 2024.</li> </ul>
Invoice processing	<ul style="list-style-type: none"> <li>➤ Provide a comprehensive breakdown of the charges billed to customer for electricity, gas, Wi-Fi and Sanitary Bins over the course of the 2023/24 financial year</li> <li>➤ A review of the Wi-Fi arrangements at service for all residents, and staff and re-consider whether it is appropriate for this to be re-charged to tenants.</li> <li>➤ Overhaul the invoicing process for all utility services provided to tenants so that a breakdown of the energy bills is provided with each invoice, regardless of whether these are paid via standing order. This will require incorporation into our new Finance system which is due to go live over the next three months and will require sufficient process updates to allow this to work smoothly.</li> <li>➤ Ark Finance will send invoices and financial information directly to the Power of Attorney where these are in place</li> <li>➤ The Ark support staff member has reflected on this issue and made aware of the care planning information within IW's AIMS file regarding this process.</li> <li>➤ More widely, Ark will review how internet, sanitary bins, and other sundry utilities are charged to tenants across the organisation and where relevant, include these in service charges as part of the rental agreement tenants hold with Ark.</li> </ul>