West Lothian Council

Performance Committee

West Lothian Civic Centre
Howden South Road
LIVINGSTON
EH54 6FF

13 April 2021

A meeting of the **Performance Committee** of West Lothian Council will be held within the **Webex Virtual Meeting** on **Monday 19 April 2021** at **2:00pm**.

For Chief Executive

BUSINESS

Public Session

1.   Apologies for Absence.

2.   Declarations of Interest - Members should declare any financial and non-financial interests they have in the items of business for consideration at the meeting, identifying the relevant agenda item and the nature of their interest

3.   Order of Business, including notice of urgent business, declarations of interest in any urgent business and consideration of reports for information.

        The Chair will invite members to identify any such reports they wish to have fully considered, which failing they will be taken as read and their recommendations approved.

4.   Confirm Draft Minute of Meeting of the Committee held on 1 February 2021 (herewith).

5.   Social Policy - Community Care - report by Head of Social Policy (herewith).

6.   Service Performance 2020/21 Report – IT Services - report by Head of Services (herewith).

7.   Complaint Performance Report Quarter 3: 2020/21 - report by Depute Chief Executive (herewith).

DATA LABEL: Public

NOTE   **For further information please contact Lorraine McGrorty on 01506 281609 or email lorraine.mcgrorty@westlothian.gov.uk**

MINUTE of MEETING of the PERFORMANCE COMMITTEE held within WEBEX VIRTUAL MEETING ROOM, on 1 FEBRUARY 2021.

Present – Councillors Stuart Borrowman (Chair), Andrew McGuire, Charles Kennedy, Dom McGuire

Apologies – Councillor Carl John

1.   DECLARATIONS OF INTEREST

There were no declarations of interest made.

2.   MINUTE

The committee confirmed the Minute of its meeting held on 16 November 2020 as a correct record. The Minute was thereafter signed by the Chair.

3.   SERVICE PERFORMANCE AND WLAM OUTCOME REPORT - LEGAL SERVICES

The committee considered a report (copies of which had been circulated) by the Depute Chief Executive providing an overview of a service assessment from the West Lothian Assessment Model process (2017/20).

The report also provided a summary of recommendations from the officer-led scrutiny panel that had been identified for action and were to be delivered by the service management team.

The report recommended that the committee:

1. Note the outcome from the WLAM and Review Panel process;

2. Note the recommendations for improvement;

3. Agree any other recommendations that may improve the performance of the service

There then followed a number of questions with regard to the steps the service was taking to ensure it was carrying out extensive benchmarking.

It was explained that extensive benchmarking had been carried out by the service which included inviting thirty-one local authorities and 12 public bodies to participate. Responses were received from 16 local authorities and 8 public bodies.

The results of the benchmarking exercise were still to be collated and reported back to the WLAM panel on 11 February 2021, following which a summary of the results would be circulated to members for information.

The committee was generally very impressed with the level of benchmarking being carried out but stressed that this should be an ongoing exercise that should be pursued vigorously.

A number of questions were also asked in relation to the role of legal representation at quasi-judicial committees. It was suggested and agreed that it would be beneficial to hold quarterly meetings with the Chairs of quasi-judicial committees and the relevant legal teams.

In conclusion it was noted that this had been a positive and encouraging report.

Decision

1. To note the terms of the report.

2. To hold quarterly meetings with Chairs of quasi-judicial committees and the relevant legal teams.

3. To circulate benchmarking outcomes to committee members when available.

4.   WLAM PROGRAMME 2017/20 - REVIEW PANEL UPDATE

The committee considered a report (copies of which had been circulated) by the Depute Chief Executive providing a summary of the outcomes from the Review Panels that have taken place in 2020/21 (to date).

The report recommended that the committee:

1. Notes the outcomes from the Panels held from October 2020 to date;

2. Notes the remaining outstanding Review Panels scheduled to take place in 2020/21; and

3. Considers the services that may be asked to report to the Committee, based on the reported outcomes.

Decision

1. To note the contents of the report;

2. To agree the following services be invited to attend the next two scheduled Performance Committee meetings:
   - IT Services
   - Public Transport

- Learning, Policy & Performance
- Procurement

5.   <u>FACTFILE 2020</u>

The committee considered a report (copies of which had been circulated) by the Head of Corporate Services presenting the council's annual performance report Factfile 2020.

The report recommended that the committee note the performance contained in the factfile 2020.

<u>Decision</u>

To note the contents of the report.

DATA LABEL: PUBLIC

West Lothian
Council

PERFORMANCE COMMITTEE

SOCIAL POLICY – COMMUNITY CARE

REPORT BY HEAD OF SOCIAL POLICY

A.   PURPOSE OF REPORT

The purpose of the report is to provide the Performance Committee with an overview of the delivery of Community Care services during the COVID-19 global pandemic, in particular services for Older People, with details of service performance.

B.   RECOMMENDATION

It is recommended that Performance Committee:

1. Notes the contents of this report and Appendix;
2. Provides feedback on Community Care service performance; and
3. Identifies any recommendations for performance improvement.

C.   SUMMARY OF IMPLICATIONS

I	**Council Values**	− Focusing on our customers' needs − Being honest, open and accountable − Providing equality of opportunity − Developing employees − Working in partnership − Making best use of resource
II	**Policy and Legal (including Strategic Environmental Assessment, Equality Issues, Health or Risk Assessment)**	Reporting to the Performance Committee is consistent with the Corporate Plan undertaking to continue to develop a performance management system that helps us improve
III	**Implications for Scheme of Delegations to Officers**	N/A
IV	**Impact on performance and performance Indicators**	Appendix 2 details a selection of performance indicators and results currently reported for Community Care services.
V	**Relevance to Single Outcome Agreement**	Community Care services have a suite on performance indicators in place which support the outcomes in the Single Outcome Agreement

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VI	**Resources - (Financial, Staffing and Property)**	N/A
VII	**Consideration at PDSP**	Performance is reported quarterly to the Health and Care PDSP and the Social Policy PDSP
VIII	**Other consultations**	None.

D.   TERMS OF REPORT

D.1   Background

Community Care is a core area in Social Policy, comprising a wide range of services for adults and older people with care and support needs. The services provided include; Care at Home, Care Homes, Occupational Therapy, Supported Housing models and Housing with Care and Support for People with Learning and Physical Disabilities. A number of services are delivered in an integrated manner to improve outcomes for services users where possible, these include Mental Health and Addiction Services.

Community Care services operate within a context of significant challenge, in terms of the increasing elderly population in West Lothian and constrained public finances, and it is recognised that transformational change is required to ensure people in our community continue to access high quality services that meet their needs.

Community Care has an important role in the Integration Joint Board (IJB) and contributes to the strategic priorities set out in the IJB Strategic Plan, namely:

- Tackling Inequalities
- Prevention and Early Intervention
- Integrated and Coordinated Care
- Managing our Resources Effectively

In addition to a general progress update on the performance of the service, this report provides an overview of the impact of COVID-19 within Community Care during the past 12 months. This includes; detailing service performance for the financial year 2020/21 and some of the key actions undertaken in response to the situation.

D.2   Service Activities

The main activities of the service are wide ranging and include:

- Assessment and Care Management Services for adults and older people
- Purchasing of care home placements including respite
- Purchasing of community-based care and support services
- Engagement in the Integrated Discharge Hub

- Provision of Care at Home / Home First / Reablement and Crisis Care services
- Provision and management of council owned care establishments, including;
  - Care Homes for older people
  - Care Homes for adults with a learning disability
  - Day care for adults
  - Housing with care
- Joint management with NHS Lothian of the Community Equipment Store

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- Provision of Home Safety Services and development of Telecare
- Access to employment
- Short breaks from caring

The service also has a lead role in promoting, enabling and sustaining independence and social inclusion for service users and carers. Further development of Self-Directed Support (SDS) and Market Facilitation will enable increasing numbers of people to have control of their own care and support provision by accessing Direct Payments or other Self-Directed Support options.

D.3   Challenges in 2020/21

The emergence of a global pandemic in the last quarter of 2019/20 presented an unprecedented challenge for Social Work and Social Care services in West Lothian. The response to COVID-19 in 2020/21 from services that are designed to care for and support some of the most vulnerable people in our community was critically important and required a great deal of collaboration and operational agility to ensure the continuity of care and support for our adults and older people.

Throughout this year, Community Care has worked closely with our stakeholders, in particular, our partners in the Third and Independent Sectors, but also with our families, carers and services users to ensure that essential services were delivered safely in unparalleled times. As a result, the service has successfully managed the delivery of both key services to the agreed commitments/standards in 2020/21, alongside services that were re-designed in response to the rapidly changing COVID-19 situation.

A big factor in the success of our response was the dedication of social care and social work employees during this time, with many voluntarily moving to work in areas of care and support where people resources were most needed. While most of the workforce continued in their normal roles, it was with significantly altered practices and approaches in order to manage the health risks presented by COVID-19.

Risk assessment work was undertaken at an early point of the pandemic to support managers and employees in assessment of safe contacts with people in need of direct care, support and protection visiting.

For services with a strong foundation of relationship-based practice, the need for many social work professionals to work remotely resulted in a range of practice issues. Such as the ongoing difficulties that our staff are managing with digital engagement from service users and ensuring access to digital resources for people experiencing poverty. However, there have also been opportunities to improve engagement and it has allowed some service users to participate for whom in-person meetings would previously have been problematic.

Home working has become the norm for most social work professions not involved in the provision of direct care. Working remotely and at distance from colleagues, whilst offering flexibility to account for issues such as child care, were particularly challenging for some of our staff due to the nature of their role and responsibilities.

A priority for managers in the service therefore has been finding ways to recreate peer support and the informal work support networks that good office environments and cultures previously offered. The importance of effective professional supervision has never more critical, especially for newly qualified employees and those experienced practitioners who are working with the most complex and high-risk service users.

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The global pandemic has emphasised the necessity for digitalisation in Social Work and Social Care services and brought into sharp focus the need to modernise some key processes. As a service, we will continue to develop and adopt different ways of working and intend to fully capitalise on these changes going forward to create a more agile and responsive offer for service users. While there are undoubtedly opportunities to deliver our services differently through technology in future, we will seek to balance digital approaches with the real value of face-to-face contact and personalisation of Social Work and Social Care services.

The precise scale and ongoing impact of COVID-19 on our communities, critical services and the wider economy remains, as yet, unknown. The additional pressures associated with the response to the pandemic sit within a context of already increasing demand, while our services continue to address the long-term needs of local people and the national priorities.

D.4   How the Service Responded

Keeping people safe is a primary duty of all of our Social Work and Social Care services. The COVID-19 pandemic put a sharp spotlight on the Social Work and Social Care sector, its employees and the people of all ages who use its services. In some areas of care there has been significant and understandable focus and no more so than on Care Homes services for older people.

One of the most serious challenges faced by the Social Care sector is protecting the safety of older people resident in care homes, particularly when rates of community transmission of COVID-19 are high.

The Health and Social Care Partnership (HSCP) built on well established relationships across the Care Home sector to ensure the delivery of safe and effective care for people who live in care homes and deliver enhanced support in line with Scottish Government guidance.

Arrangements were put in place to ensure consistent contact with care homes with situation reports reviewed at daily Care Homes Clinical and Care Oversight Group meetings. These daily reviews are attended by the Chief Officer, Chief Social Work Officer, Chief Nurse, other partnership senior managers and representatives from NHS Lothian Public Health and allow early detection of emergent challenges and risks.

A rolling programme of Joint Health and Social Care Assurance and Support Visits to care homes is ongoing. The assurance visit process has strengthened oversight arrangements and promoted collaborative working across care homes in West Lothian Work is also taking place to identify how local enhanced care home assurance and support will be delivered post COVID-19 and any associated workforce requirements.

In terms of governance and accountability, the service has reported to Council Executive on the Care Homes Clinical and Care Oversight Group arrangements and on the emergency temporary powers relating to care provisions introduced by the Coronavirus (Scotland) (No 2) Act 2020. To this point, none of the new powers have been applied within West Lothian, nor has there been a need to use the Easements to Duties.

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A single point of access for Adult Rehabilitation services was established and pathways were mapped and revised to reflect the importance of patient flow from the hospital to community settings. This work will be used to inform further development of the rehabilitation pathways. The partnership will continue to participate in the development of specialist and intensive rehabilitation outreach and community-based models of care, working across Lothian to deliver the major programme of redesign associated with the Royal Edinburgh Hospital. The aim is to deliver services that are community focussed and better integrated.

The role of both internal and external Home Carers has been equally critical in responding to the pandemic. This group has continued to deliver high quality Care at Home in challenging circumstances. Care and Support at Home Services have been delivered throughout the pandemic without interruption.

At the centre of our response to the pandemic was our very active engagement with Care Providers and suppliers of Care and Support services in West Lothian. At a very early stage the HSCP put in place a range of measures designed to ensure the continuity of essential Community Health and Social Care services for service users in West Lothian. This included early intervention to address market fragility, with financial support provided to Care Providers to cover additional COVID-19 related costs.

A further support was the establishment of the West Lothian PPE centre in April 2020, to secure supplies of PPE and the timely delivery of essential items to Health and Care services across the Partnership. The PPE centre is now the main supply route for PPE in West Lothian. Without doubt, this has been a significant undertaking by West Lothian HSCP staff, with support from the Unpaid Work team from Criminal Justice and Carers of West Lothian, who played a key role in ensuring that unpaid carers and personal assistants in West Lothian have access to appropriate levels of PPE.

Supporting the wellbeing of staff is a key priority for Social Policy. The Lothian Wellbeing Hub was promoted via email communications and team meetings to ensure managers had appropriate access to information and resources that would help them to support and reassure their teams during the pandemic.

In summary, this last year has been an extremely challenging period for the service, our staff, partners and our service users. In response to the wide-ranging and ever-changing pressures that 2020/21 has brought, the service has not only ensured the continuity of essential services to the West Lothian community, but advanced a number of actions that will improve the way that we work in future. All of this made possible by our staff, especially because of their willingness to prioritise our service users above all other matters.

D.5   Impact on Normal Business

Throughout the pandemic the focus of Residential Care Homes for Older People has been the safe delivery of care, with appropriate physical distancing and infection control measures put in place for residents and staff.

With the exception of Residential Respite, which could not be provided due to infection control measures (alternative services were provided on a case by case basis), internal Care at Home provision has been fully sustained during the pandemic. This was achieved by implementing a flexible approach to managing staffing resources and includes the use of agency staff, redeployment and fast track employment.

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Face to face visits to service users' own homes, including care homes, were restricted for the Assessment and Care Management Team and priority was given to those most at risk to restrict risk of spread of infection.

The Adult Social Care Enquiries Team were able to maintain full service provision throughout the period of the pandemic. This has been achieved through a mixture of home and office working and by re-deploying some additional staff from other Social Policy areas.

The majority of Housing with Care staff remained working in the seven Housing with Care developments during the COVID-19 lockdown restrictions.

Delivery of Adult Day Care services in West Lothian altered considerably during COVID-19 due to the restrictions of the national lockdowns by the government. This has provided an opportunity to consider the re-design and modernisation of day services. As a first step the service has sought detailed feedback from service users on their experiences of the service during lockdown and this will be used as the basis for the service redesign, including opportunities to retain a blended approach of outreach and centre-based provision.

The pandemic also had a significant impact on the way that our Third Sector partners deliver services in the community. Older People's Day Care providers were required to close their buildings at times during this period and e.g Carers of West Lothian, OPAL (older people's befriending service) and the Food Train, all face to face services, were required to adopt creative solutions that ensures people in West Lothian could still benefit from these essential services.

D.6   Performance Management

The performance of Community Care services is measured through a suite of performance indictors using the corporate (Pentana) system, in line with the council's performance management framework.

Information on the performance of this service is reported on a quarterly basis to the Health and Care Policy Development and Scrutiny Panel (PDSP) and also to the Social Policy PDSP.

There are considerable demographic and budget pressures impacting Social Work and Social Care Services for adults and old people. This is not unique to West Lothian, with sustainability a key consideration for the future of the sector.

The Community Care service strives to provide the highest quality provision, one which promotes choice and satisfies services users, but also ensures value for money. While the last year has had challenges, some of the key indicators of performance for Older People (Appendix 1) demonstrate that the service has maintained a good standard of provision. This includes; delayed discharge, waiting time for assessment and the number of complaints received by the service.

Regarding waiting list times, the need to redirect resources to other pressing priorities impacted adversely on other work resulting in an increased waiting time for less urgent work. However remedial work including an investment in staffing was undertaken as soon as possible and this indicator demonstrates an improving trend.

Customer Satisfaction is an area which has been impacted in the last year, with the service unable to collect satisfaction data at the time of this report due to resources being

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directed to frontline or other priority work. The service will undertake to complete surveys on the quality of service provision in early 2021, resources permitting. Whilst the data has not been collected, it should be noted that the engagement levels with service users have been high throughout the year, maintained through face to face and remote contact. Indeed, the strong insight into users' needs and preference has the service allowed the service to react and respond to the constraints and challenges of the past year.

E.   CONCLUSION

In 2020/21, the Community Care service has faced an unprecedented level of challenge to deliver essential services to adults and older people in West Lothian during a global pandemic.

The service has had to implement change at a rapid pace, some short-term in response to the virus, but some will have a longer-term influence on the way that the service operates. This includes accelerating the digitalisation of Social Work and Social Care services and modernisation of social work practice.

Throughout the pandemic, the service, our staff and partners have been tested and our collective strengths have come to the fore. Such as the close working relationship the service has with our Health partners and our Independent and Third Sector providers and how this was leveraged to ensure the delivery of essential services was maintained during the crisis.

Importantly, the resilience of our workforce has been a vital part of the service response to each new challenge or constraint. This last year has highlighted their strong dedication to our service users, with their needs prioritised above all other matters.

F.   BACKGROUND REFERENCES

Appendices/Attachments: Appendix 1 – Social Policy Management Plan Extract
Appendix 2 – Community Care Performance Indicators

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Jo MacPherson
Head of Social Policy

Date of Meeting: 19 April 2021

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Community Care

Service manager:	Robin Allen, Senior Manager, Adults Services Pamela Main, Senior Manager, Older People Services Nick Clater, General Manager – Mental Health and Addictions (with a portfolio for Planned Care/Access) Yvonne Lawton, Head of Strategic Planning & Performance
Number of staff:	709.3 (full time equivalents)
Locations:	Civic Centre and various care facilities

Purpose

Community Care comprises a wide range of services provided for adults and older people with care and support needs. Services include Care at Home, Care Homes, Occupational Therapy, Supported Housing models and Housing with Care and Support for People with Learning and Physical Disabilities. A number of services are delivered in an integrated manner to improve outcomes for services users where possible, these include Mental Health and Addiction Services.

The Integration Joint Board Strategic Plan 2019/23 recognises that both West Lothian Council and NHS Lothian are facing significant financial challenges over the next period. The strategic plan is focused on achieving a sustainable health and care system for West Lothian. This will require transformational change over time in order to improve health and wellbeing outcomes and support the transition to future models of care. The plan aims to ensure that:

- More care and support is delivered at home or closer to home rather than in hospital or other institutions
- Care is person centred with focus on the whole person and not just a problem or condition
- There is more joined up working across professions and agencies
- Citizens, communities and staff have a greater say in planning and delivering health and social care services.

The final report from the Independent Review of Adult Social Care (IRASC) was published on 3rd February 2021. The report contains 53 recommendations which propose significant reform of adult social care in Scotland. The extent and reach of this impact on services in West Lothian will only become known when there is clarity on how and to what timescales the review will be taken forward.

In responding the pandemic, the benefits of our close working relationship with our Independent and Third Sector providers were highlighted and ensured that essential services continued to be delivered during the crisis. In going forward, we will work to build on and further strengthen these robust relationships.

The resilience of our workforce was demonstrated in their flexibility and dedication to ensuring that services continued to be delivered in the most challenging of times.

The COVID-19 pandemic further emphasised the importance of the digitalisation agenda for social work and social care services and has brought into sharp focus the need to modernise some key processes. We have developed different ways of working in response to the pandemic and will capitalise on these going forward.

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Social Policy has a lead role to promote, enable and sustain independence and social inclusion for service users and carers. Further development of Self-Directed Support and Market Facilitation will enable increasing numbers of people to have control of their own care and support provision by accessing Direct Payments or other Self-Directed Support options.

Community Care will also continue to have a significant role in the Integration Joint Board (IJB) for health and care, contributing to the strategic priorities set out in the IJB Strategic Plan:

- Tackling Inequalities
- Prevention and Early Intervention
- Integrated and Coordinated Care
- Managing our Resources Effectively

Social Policy actions align with the commissioning plans for each client group that were updated and approved by the Integration Joint Board in January 2020.

Activities

The main activities of the service during the period of the Management Plan will be:

- Assessment and Care Management Services for adults and older people
- Purchasing of care home placements including respite
- Purchasing of community based care and support services
- Engagement in the Integrated Discharge Hub
- Provision of Care at Home / HomeFirst / Reablement and Crisis Care services
- Provision and management of council owned care establishments, including;
  - Care Homes for older people
  - Care Homes for adults with a learning disability
  - Day care for adults
  - Housing with care
- Joint management with NHS Lothian of the Community Equipment Store
- Provision of Home Safety Services and development of Telecare
- Access to employment
- Short breaks from caring

Business Support Services report through this WLAM area and provide the following activities for all of Social Policy:

- Commissioning plan development, monitoring and review
- Policy and Change management
- Contract tendering and monitoring
- Administrative and clerical support
- Performance and Quality Assurance
- Management and development of the Social Policy Information Management systems
- Complaint handling
- Learning and Development
- Customer engagement

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All services are subject to review and redesign in order to reflect Transforming Your Council priorities.

Key Partners

The service actively works with our partners to plan, design and deliver improved services for our customers. Our key partners include; NHS Lothian, other council services, and the third and independent sectors.

Customer Participation

The service will actively engage customers and potential customers in the delivery and re-design of services to ensure that they are accessible and focused on their needs and preferences.

Customer Consultation Schedule 2021/22				
Customer Group	Method	Frequency	Responsible Officer	Feedback Method
Older People service users	Survey	Annual	Group Manager	• Survey returns
	Senior People's Forum	Quarterly	Business Support Officer	• Minutes
Learning Disability service users	Survey	Annual	Group Manager	• Survey returns • Feedback to service users via newsletter
	Learning Disability Service Users Forum	Quarterly	Business Support Officer	• Minutes
Physical Disability service users	Survey	Annual	Group Manager	• Survey returns, feedback to service users via newsletter
	Physical Disability Service Users Forum	Quarterly	Business Support Officer	• Minutes
Adult Protection service users	Safe and Sound Adult Protection Forum	Quarterly	Adult Protection Officer	• Minutes
Mental Health service users	Mental Health Service Users Forum	Quarterly	Team Manager	• Minutes

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Activity Budget 2021/22

Community Care – Older People

Activity Name and Description		Link to Corporate Plan	Performance Indicator and Target 2021/22	PI Category	Staff Resource (FTE)	Revenue Expenditure Budget 2020/21 £	Revenue Income Budget 2020/21 £	Net Revenue Budget 2020/21 £
Older People Assessment and Care Management	To provide assessment and care management services to older people, their families and carers.	4. Improving the quality of life for Older People	SPCC024 9a1a Net cost per head of population on social care services for older people. (Target £1,493)	WLAM	58.2	2,362,957	-46,000	2,316,957
			SPCC018_6b.3 Average number of weeks Older People's service users are currently waiting to be assessed. (Target 3)	PUBLIC				
Older People care home provision	Provision of care home placements for Older People.	4. Improving the quality of life for Older People	SPCC019 9b1a Average number per month of West Lothian patients whose discharge from hospital is delayed (Target 13)	PUBLIC	177.0	24,995,112	-2,133,000	22,862,112
Older People community based care and support services	Support activities to enable older people to live independently at home or in a homely setting (includes care at home, respite, day care and other services).	4. Improving the quality of life for Older People	SPCC152_9a Average annual cost per person receiving community based Older People services. (Target £14,362)	PUBLIC	235.7	23,802,651	-6,947,322	16,855,329
			SPCC100_9b.2a The number of people aged 75+ supported by technology to remain at home (Target 2.755)	PUBLIC				
Occupational therapy	Occupational Therapy and supply of aids and adaptations to service users.	4. Improving the quality of life for older people	SPCC081_6a.1 Percentage of customers who rated the timeliness of response of Occupational Therapy (OT) services as good or excellent. (Target 90%)	WLAM	34.1	2,466,571	-1,005,164	1,461,407
			CP:SPCC014_6b.5 Percentage of Occupational Therapy assessments allocated within 6 weeks of referral. (Target 90%)	PUBLIC				

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Service Support	Provision of management and administrative support.	Enabler Service - Corporate Governance and Risk	Support activities contribute towards the overall performance of the service. Performance is monitored through the indicators for front line activities.		37.8	1,760,220	-26,919	1,733,301
	Total :-				542.8	55,387,511	(10,158,405)	45,229,106
Time Limited - Covid Funding	Additional cost of sustainability payments and other costs related to Covid-19	4. Improving the quality of life for Older People			0.0	2,350,000	0	2,350,000
Time Limited - Food Train	Funding to support Food Train with delivery of food and shopping to vulnerable West Lothian residents	4. Improving the quality of life for older people			0.0	22,000	0	22,000
Time Limited - Befriending Sevrice	Funding to support OPAL and reduce isolation and loneliness in Older People	4. Improving the quality of life for older people			0.0	30,000	0	30,000
Time Limited - Community Hub Development Officer	Funding for development of Community Hub	4. Improving the quality of life for older people			0.0	30,000	0	30,000
	Total :-				542.8	57,819,511	(10,158,405)	47,661,106

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Community Care – Learning Disabilities

Activity Name and Description		Link to Corporate Plan	Performance Indicator and Target 2021/22	PI Category	Staff Resource (FTE)	Revenue Expenditure Budget 2020/21 £	Revenue Income Budget 2020/21 £	Net Revenue Budget 2020/21 £
Learning Disabilities Assessment and Care Management	To provide assessment and care management service to adults with learning disabilities, their families and carers.	7. Delivering positive outcomes on health	SPCC035 9a1c Net cost per head of population on social care services to adults with a learning disability. (target £153.09)	PUBLIC	12.6	671,076	0	671,076
			SPCC028_9b Percentage of people with a Learning Disability supported in their own tenancies. (target 42%)	PUBLIC				
Learning Disabilities care home provision	Provision of care home placements for adults with learning disabilities.	7. Delivering positive outcomes on health	SPCC002_6b.3 Percentage of Care Inspectorate Inspections undertaken within Registered Learning Disability Services graded good or above. (target 100%)	PUBLIC	16.5	8,186,892	(787,000)	7,399,892
			SPCC035 9a1c Net cost per head of population of social care services to adults with a learning disability. (target £152)	PUBLIC				
Learning Disabilities community based care and support services	Support activities to enable adults with learning disabilities to live independently or with family and to support positive life experiences (includes care at home, respite, day care and other services).	7. Delivering positive outcomes on health	SPCC035 9a1c Net cost per head of population on social care services to adults with a learning disability. (target £152)	PUBLIC	52.4	14,837,389	(3,246,360)	11,591,029
			SPCC028_9b Percentage of people with a Learning Disability supported in their own tenancies. (target 42%)	PUBLIC				
Learning Disabilities	Support activities to enable adults	2. Improving the	SPCC003_9b.1a Number of adults with learning disability provided with employment support. (Target 44)	HIGH LEVEL	4.7	176,497	0	176,497

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Supported Employment	with disabilities into employment.	employment position in West Lothian						
Service Support	Provision of management and administrative support.	Enabler Service - Corporate Governance and Risk	Support activities contribute towards the overall performance of the service. Performance is monitored through the indicators for front line activities.		15.1	632,443	(11,875)	620,568
	Total :-				**101.3**	**24,504,297**	**(4,045,235)**	**20,459,062**

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Community Care – Physical Disabilities

Activity Name and Description		Link to Corporate Plan	Performance Indicator and Target 2021/22	PI Category	Staff Resource (FTE)	Revenue Expenditure Budget 2020/21 £	Revenue Income Budget 2020/21 £	Net Revenue Budget 2020/21 £
Physical Disabilities Assessment and Care Management	Provision of an assessment and care management service to adults with physical disabilities or sensory impairments.	7. Delivering positive outcomes on health	SPCC036 9a1c Net cost per head of population on social care services to adults (age 18-64) with physical disabilities. (Target £62)	PUBLIC	10.3	613,457	(68,400)	545,057
			SOA1306_05 % of community care service users and carers satisfied with their involvement in the design of care packages.	PUBLIC				
Physical Disabilities care home provision	Provision of care home placements for adults with physical disabilities.	7. Delivering positive outcomes on health	SPCC019 9b1a Average number per month of West Lothian patients whose discharge from hospital is delayed (Target 13)	PUBLIC	0.0	2,895,119	(24,000)	2,871,119
			SPCC035 9a1c Net cost per head of population of social care services to adults with a physical disability.	PUBLIC				
Physical Disabilities community based care and support services	Support activities to enable adults with physical disabilities to live independently or with family and to support positive life experiences (includes care at home, respite, day care and other services).	7. Delivering positive outcomes on health	SPCC036 9a1c Net cost per head of population on social care services to adults (age 18-64) with physical disabilities. (Target £62)	PUBLIC	9.9	5,227,542	(315,245)	4,912,297
			SPCC027_9b.2a Percentage of people who have a physical disability with intensive needs receiving 10 hours+ care at home. (Target 30%)	PUBLIC				
Service Support	Provision of management and administrative support.	Enabler Service - Corporate Governance and Risk	Support activities contribute towards the overall performance of the service. Performance is monitored through the indicators for front line activities.		5.5	231,448	(4,346)	227,102
	Total :-				25.7	8,967,566	(411,991)	8,555,575

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Community Care – Mental Health

Activity Name and Description		Link to Corporate Plan	Performance Indicator and Target 2021/22	PI Category	Staff Resource (FTE)	Revenue Expenditure Budget 2020/21 £	Revenue Income Budget 2020/21 £	Net Revenue Budget 2020/21 £
Mental Health Assessment and Care Management	Provision of an assessment and care management service, including statutory mental health officer service, to adults with a mental health or substance misuse problems.	7. Delivering positive outcomes on health	SPCC037 9a1c Net cost per Head of population on social care services to adults with mental health problems. (Target £36)	PUBLIC	22.5	1,585,288	(488,226)	1,097,062
			SPCC005_9b.1a Percentage of all clients waiting no longer than three weeks from referral to appropriate drug or alcohol treatment (HEAT A11)	WLAM				
Mental Health care home provision	Provision of care home placements for adults with mental health problems.	7. Delivering positive outcomes on health	SPCC019 9b1a Average number per month of West Lothian patients whose discharge from hospital is delayed (Target 13)	PUBLIC	0.0	1,594,415	(660,000)	934,415
			SPCC037 9a1c Net cost per Head of population on social care services to adults with mental health problems. (Target £36)	PUBLIC				
Mental Health community based care and support services	Support activities to enable adults with mental health problems to live independently (includes care at home, respite, day care and other services).	7. Delivering positive outcomes on health	SOA01307_15 Warwick-Edinburgh Mental Well-being (WEMWEB) score (Target 51.5).	HIGH LEVEL	3.8	4,198,503	(1,709,874)	2,488,629
			SPCC037 9a1c Net cost per Head of population on social care services to adults with mental health problems. (Target £36)	HIGH LEVEL				
Alcohol and Drug Partnership	Partnership support to commissioning of services to	7. Delivering positive	SPCC007_9b.1a Percentage of adults with substance misuse problems who demonstrate a reduction of harmful use of substances. (Target 40%)	PUBLIC	7.3	1,792,074	(1,641,544)	150,530

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	improve health and wellbeing and reduce health inequalities by reducing tobacco, alcohol and drug use, and substance misuse.	outcomes on health						
Service Support	Provision of management and administrative support.	Enabler Service - Corporate Governance and Risk	Support activities contribute towards the overall performance of the service. Performance is monitored through the indicators for front line activities.		5.9	246,130	(4,620)	241,510
	Total :-				**39.5**	**9,416,410**	**(4,504,264)**	**4,912,146**
Time Limited - Counselling	Increased support for independent counselling services for individuals who have experienced trauma relating to violence and abuse	7. Delivering positive outcomes on health			0.0	75,000	0	75,000
Time Limited - Alcohol & Drugs Team	Enhanced budget provision for Drugs & Alcohol Team	7. Delivering positive outcomes on health			0.0	45,000	0	45,000
	Total :-				**39.5**	**9,536,410**	**(4,504,264)**	**5,032,146**

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Actions 2021/22

The service will undertake a range of actions to support corporate priorities and objectives, improve services and deliver transformation.

Community Care Actions 2021/22							
Action	Description	Planned Outcome	Owner(s)	Start	End	Status	Update
Strategic Commissioning Plans: • **Services for Older People and People Living with Dementia** • **Mental Health Services** • **Physical Disability** • **Learning Disability** • **Alcohol and Drug Services**	Implementation of Strategic Plans for each care group to support the strategic aim of shifting the balance of care in favour of community-based services.	Whole system redesign across health and social care to deliver sustainable and cost-effective community-based services. Providing support and services that allow our citizens to live well. Increasing Wellbeing and reducing inequalities	Head of Social Policy	January 2020	April 2023	Active	Strategic Commissioning Boards are in place to take forward the implementation of each plan.
Royal Edinburgh Campus Modernisation Programme (LD and PD)	Review of Health and Social Care services which will inform the specification for the design of Health Services currently based on the Royal Edinburgh Campus.	Whole system redesign to deliver sustainable and effective community based services for Mental Health, Learning and Physical Disability groups. The main aim is to enable more complex care to be available and delivered at a local level in line with 'Coming Home' best practice.	Head of Social Policy	March 2015	June 2022	Active	• The new build complex care unit for 16 adults with learning disabilities continues to progress. With a completion date of June 2022. • In tandem to the build a tender exercise will be undertaken for the delivery of the support service.

22

Community Care Actions 2021/22

Action	Description	Planned Outcome	Owner(s)	Start	End	Status	Update
West Lothian Carers Strategy	Implementation of the West Lothian Carers Strategy and Short Breaks from Caring Statement.	Carers feel supported in their care role and involved in the design of services to support the cared for person.	Senior Manager, Older People Services	August 2020	August 2023	Active	The strategy was published in published in August 2020. The West Lothian Carers Strategy Implementation Group is in place to implement the strategy.
Care for Adults day Services	Review of day services for adults with a disability.	Models of day services to allow for greater choice and flexibility.	Senior Manager, Adult Services	April 2018	March 2022	Active	Phase 1 of the project is complete and planning for Phase 2 is underway but delayed due to COVID-19 impact.
Care for adults – supported accommodation	Investment in core and cluster models to enable people to live more independently in their own tenancies.	Reduced number of residential care placements and promotion of independent living options.	Senior Manager, Adult Services	April 2018	March 2023	Active	Redesign work is underway in line with the Learning Disability Commissioning Plan.
Care for Adults and Older People – supported accommodation	Redesign of Housing with Care.	Housing with Care model that allows for greater flexibility and less fixed cost.	Senior Manager, Adult Services	April 2017	March 2022	Active	Redesign work is underway in partnership with RSLs.
Recovery following COVID-19	Ensure services continue to be delivered in line with service user need and capitalise on lessons learned from the pandemic.	Continued positive provision.	Senior Manager, Adult Services Senior Manager Older People's Services	April 2021	March 2022	New	Services continue to be reviewed.
Review of management and support	Critical review to ensure that all support functions are adding value to the delivery of social care services.	Streamlined support structure.	Head of Service	September 2018	March 2023	Active	Redesign work is underway.

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Community Care Actions 2021/22

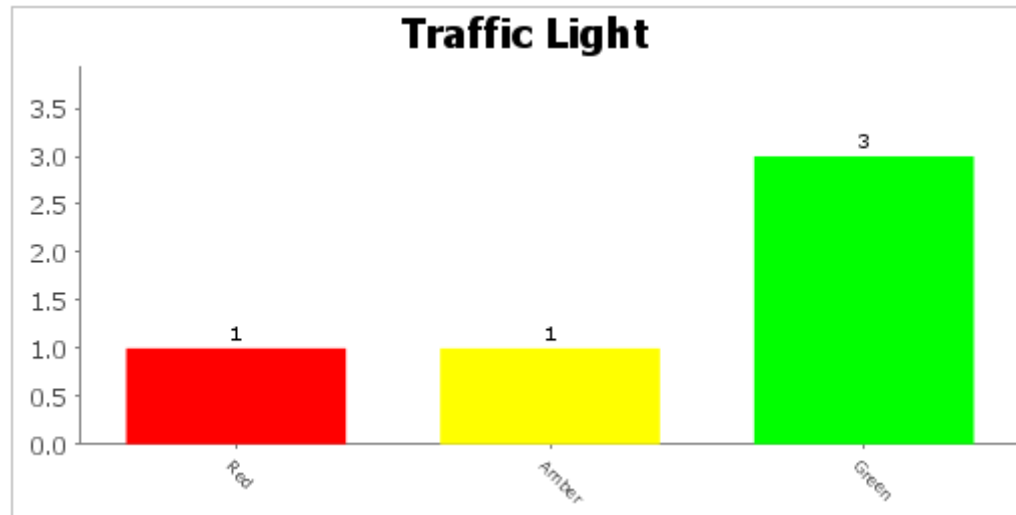| Action	Description	Planned Outcome	Owner(s)	Start	End	Status	Update
Digital transformation projects	A programme of activity to ensure that the council is well placed to take advanced of opportunities offered in the digital age.	To deliver improved user-focused digital public services.	Head of Service	April 2018	March 2023	Active	Identification of processes underway. Project Team in place and being progressed.
Introducing digital care solutions in Older Peoples Care Homes	Digital Care Planning including Electronic Medication Administration Record	Automating and simplifying manual recording processes will allow staff to focus more on direct care with service users and improve outcomes.	Senior Manager Older People	March 21	December 21	New	Software pilot to start March 21
Pilot digital solutions in Support at Home service to enable more efficient access to council systems	Pilot the use of 'netbooks' in Support at Home Services supporting remote access to council IT systems such as My HR and on-line training	Close the digital gap with this large mobile workforce and reduce the need for labour intensive manual returns and processes	Senior Manager Older People	April 21	July 21	New	If successful a full business case will be developed for consideration in 2021
Development and Implementation of Specialist Disability Framework	Launch of the new Specialist Disability Framework, building local capacity, integration of Positive Behaviour Support (PBS) into existing support services	Adults with a disability have access to high quality responsive care at home services.	Senior Manager Adults	December 20	July 2021	Active	The contract will be awarded on 25th March 2021 and will commence on 1st July.

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Community Care Actions 2021/22

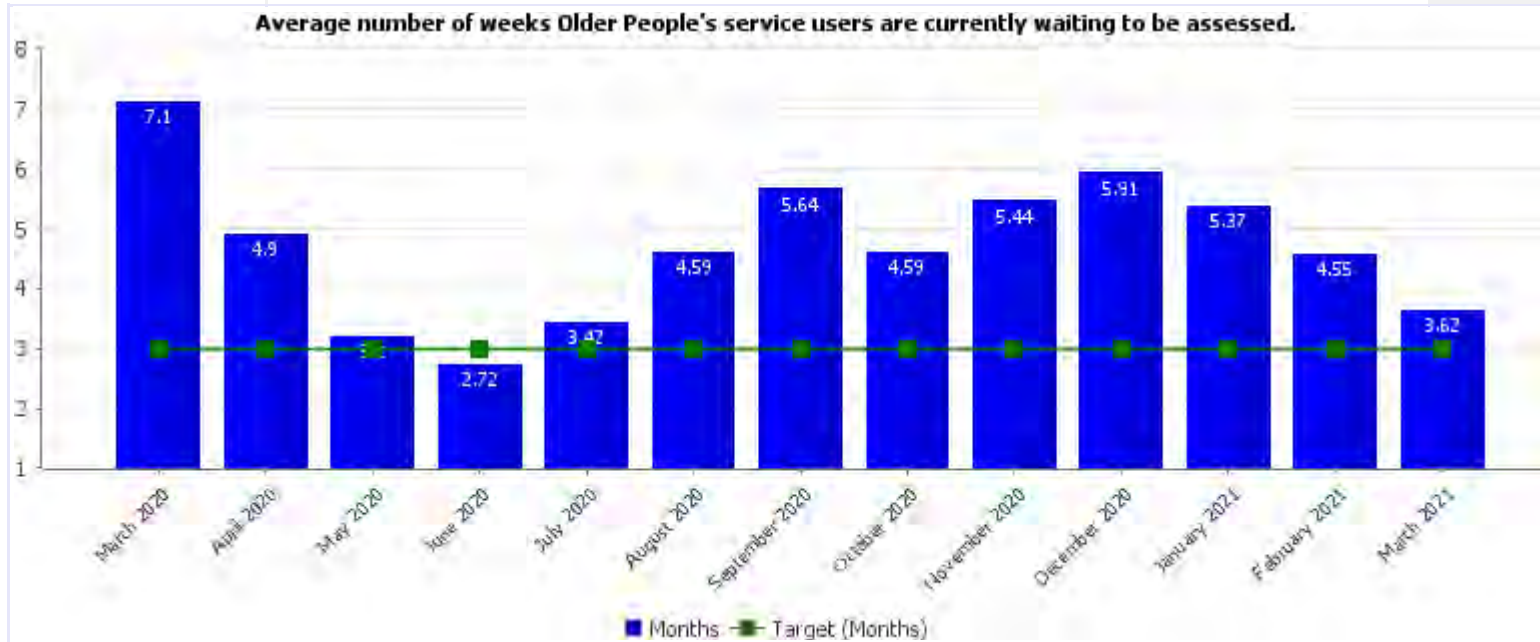| Action	Description	Planned Outcome	Owner(s)	Start	End	Status	Update
Extension of Discharge to Assess Model	Extend the current Discharge to Assess Model to include all Adult Services	Adults and Older people are supported to transition from inpatient hospital setting to community setting effectively	Senior Manager Adults	April 2021	April 2022	New	This will extend the model currently in place and maximise the use of OTs within the multi-disciplinary team
Implementation of Integrated Joint Stores Technology Project	The project will review all process and identify where possible technological supports	The service will be more efficient, it will remove duplication and ensure best use of resources	Senior Manager Adults	February 2021	September 2021	Active	The review work is underway.

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APPENDIX 2

Community Care - Performance Committee

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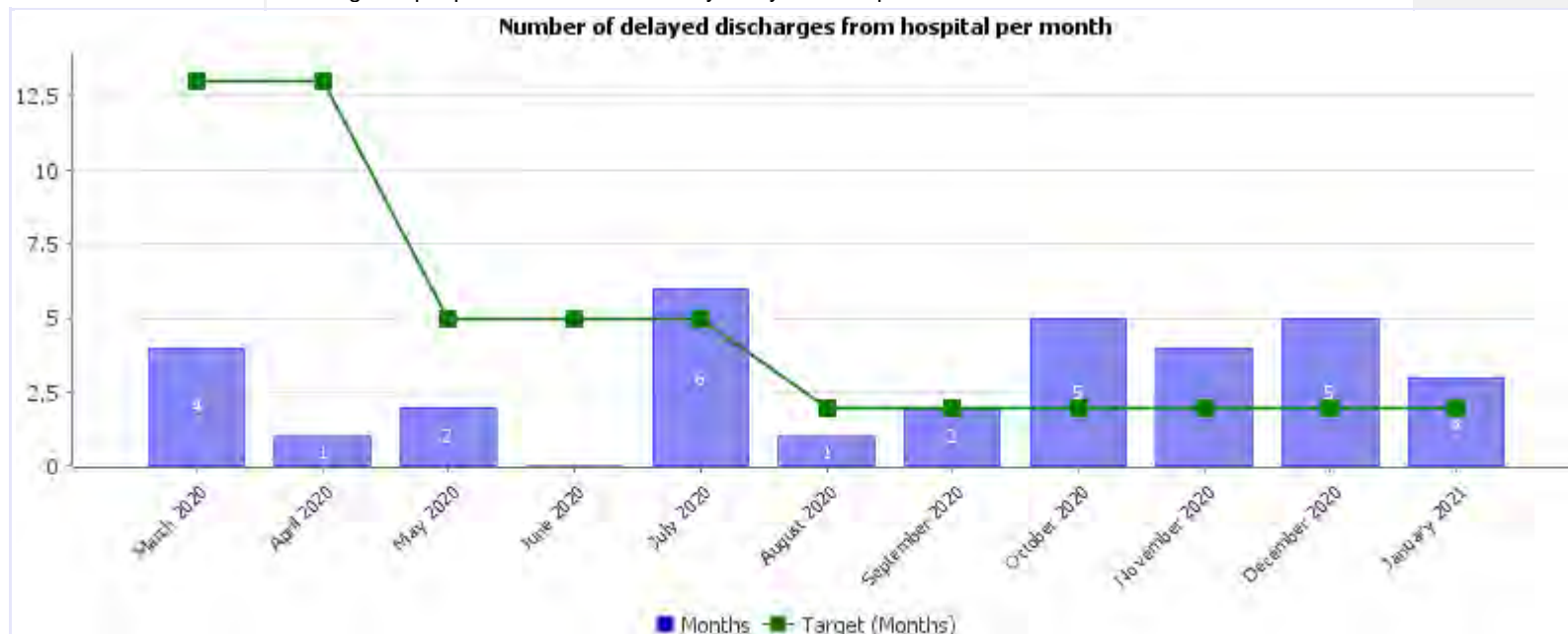| PI Code & Short Name	P:SPCC018_6b.5 Average number of weeks Older People's service users are currently waiting to be assessed.	PI Owner	zSPCC_PIAdmin; Gerard Cunniffe
Description	This indicator measures the average number of weeks Older People's service users are waiting to be assessed for support to meet their needs. This indicator is updated with information from a report run from Social Policy Information database on the last day of each month. This indicator is used to measure the efficiency and responsiveness of the service as it clearly demonstrates the capacity within our systems and processes to deal with the number of clients who present to us requiring an assessment.	**Traffic Light Icon**	⚠
		Current Value	3.62
		Current Target	3

Trend Chart Commentary:
The Older Peoples Team continues to experience a high volume of referrals. Monthly variations occur due to level of demand and the capacity of the team to respond.

The overall trend is a slight improvement in performance with average waiting time for 2020/21 being 4.67 against an average of 5.6 in 2019/20.

Additional resources have been committed to addressing the waiting list over the over the past 12 months to improve team performance. Alongside this, quality assurance work has been carried out on a monthly basis to identify and address any recording inaccuracies. The current COVID-19 pandemic will have an impact on the waiting list as staffing levels are more adversely affected as are the availability of services including respite.

The waiting list performance will continue to be closely monitored and the target for 2021/22 will reduce to 1 week to reflect the service commitment to improving responsiveness.

2

PI Code & Short Name	SPCC019a_9b.1a Number of delayed discharges from hospital per month	PI Owner	zSPCC_PIAdmin; Pamela Main
Description	This indicator measures the number of people waiting more than 2 weeks to be discharged from hospital. This is one of the governments core standards for the Local Delivery Plan. The information is drawn from the databased used by all partnerships in Scotland (TRAK) and is reported to the Information and Statistics Division (ISD) of National Services Scotland. Once validated the information for every partnership is published. This indicator measures the efficiency and effectiveness of community-based services in ensuring that people are not unnecessarily delayed in hospital.	Traffic Light Icon	✔
		Current Value	3
		Current Target	2

Number of delayed discharges from hospital per month

Legend: ■ Months ■- Target (Months)

Trend Chart Commentary:
The national standard for discharge from hospital once treatment is concluded is two weeks although a challenging target of 72 hours has also been introduced.
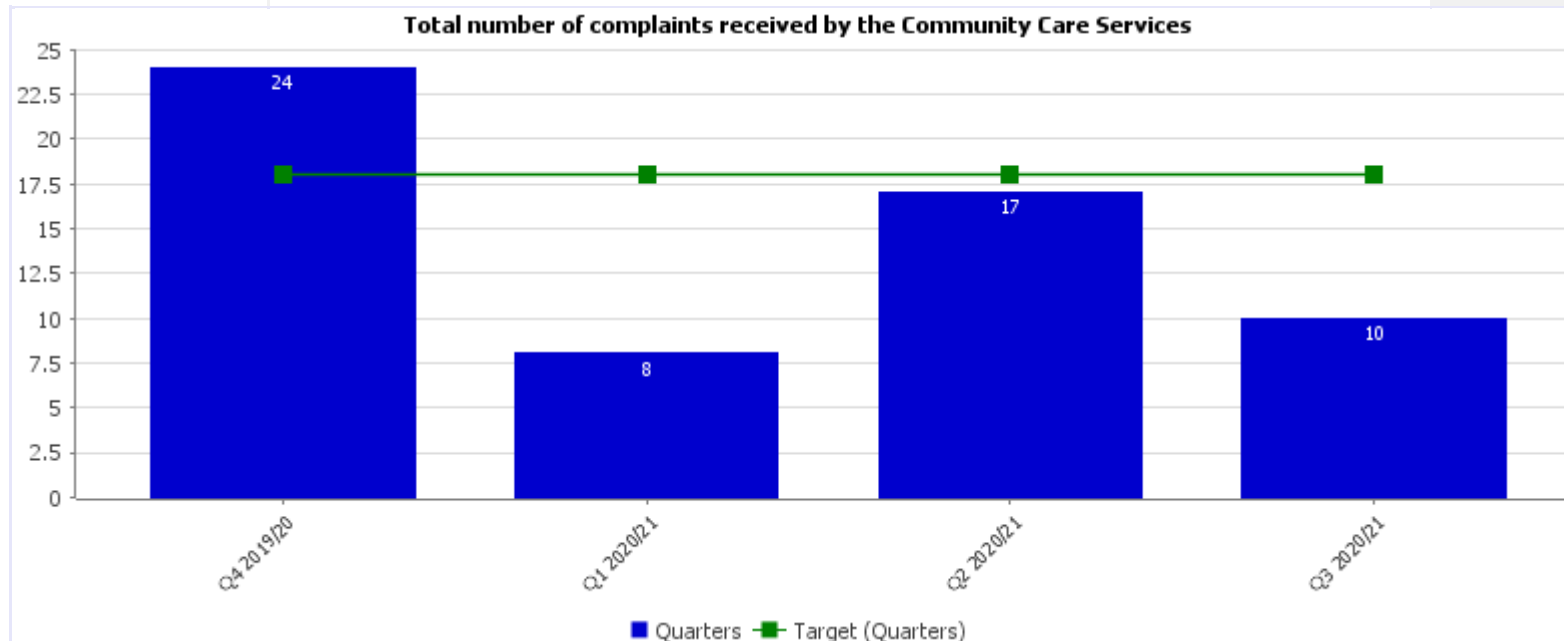
It is anticipated that this indicator will be replaced in 2021 in favour of measuring performance against 'Bed Days Lost'. This is now considered to be a more relevant and accurate indicator.

The monthly variation in performance is due to variations in the capacity of the market to respond to demand. However, Performance in 20/21 to date has improved significantly against that of 19/20 when the average delays for the year were 16 per month. This is due to a range of factors.

A different approach to commissioning care at home services as well as an investment in internal support at home services resulted in fewer delays. Whole system redesign to integrate and streamline hospital discharge processes supported the implementation of the 'Home First' approach and earlier intervention to plan discharge from the point of admission also contributed significantly.

We will continue to work with our key partners to improve performance and a challenging target for 21/22 will be set at zero to reflect this commitment.

3

PI Code & Short Name	P:SPCC038_6b.3 Total number of complaints received by the Community Care Services	PI Owner	zSPCC_PIAdmin; Pamela Main
Description	This indicator measures the total number of complaints received by Community Care. It is the total number of complaints received by Community Care at stage one (complaints that the council aims to deal with within 5 working days) and those received directly at stage two (more complex complaints that the council aims to deal with within 20 working days). The information is recorded on the council's Complaints Records Management system which allows systematic performance reporting and analysis of trends. Complaint outcomes are analysed to inform improvement plans.	Traffic Light Icon	✓
		Current Value	10
		Current Target	18

Total number of complaints received by the Community Care Services
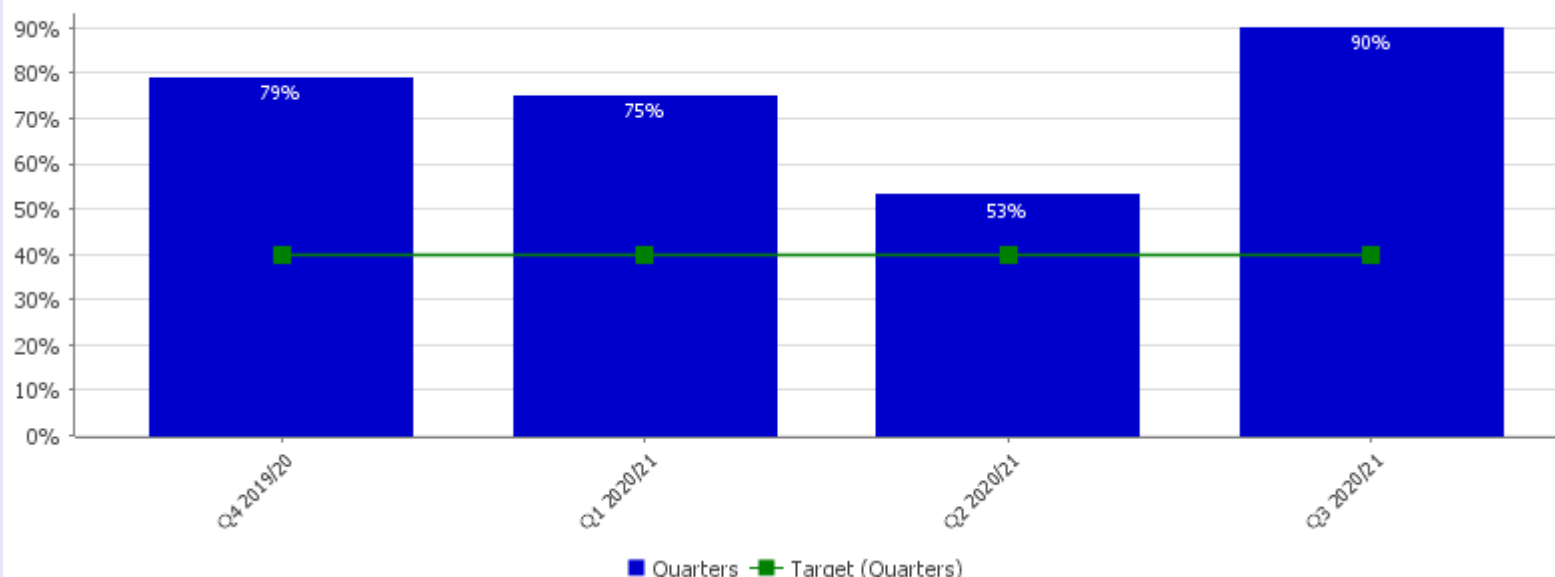
Trend Chart Commentary:
The number of complaints received by Community Care Services are few but highly variable within a small range. Complaints are systematically analysed both at an individual and aggregate level to inform trends and areas for improvement but it has not been possible to identify any consistent trend which would inform variations in performance.

Where individual complaints are upheld or partially upheld, the service ensures that required improvements are identified and implemented.

In 2020/21, performance has been variable but better than the target of 18 per quarter; there were 8 complaints in Q1, 17 in Q2 and then a reduction to 10 in Q3.
The performance target will be set at 12 for the next quarter to reflect a variable but downward trend in the number of complaints overall.

4

PI Code & Short Name	**P:SPCC041_6b.4 Percentage of complaints received by the Community Care Service that were upheld or partially upheld against the total complaints closed in full.**	PI Owner	zSPCC_PIAdmin; Pamela Main
Description	This indicator measures the total number of council complaints received by Community Care which were upheld or partially upheld, as a percentage of all complaints received. Complaints are recorded on our Customer Relationship Management system, including the outcome. This system provides the service with reports detailing the amount of complaints that were upheld and partially upheld. This information can be used to understand the effectiveness and efficiency of our services, how our staff are performing, the relationship between the service and the client and also an opportunity to identify any areas where improvements could be made to the way the service is delivered to customers.	Traffic Light Icon	🔴
		Current Value	90%
		Current Target	40%

Percentage of complaints received by the Community Care Service that were upheld or partially upheld against the total complaints closed in full.
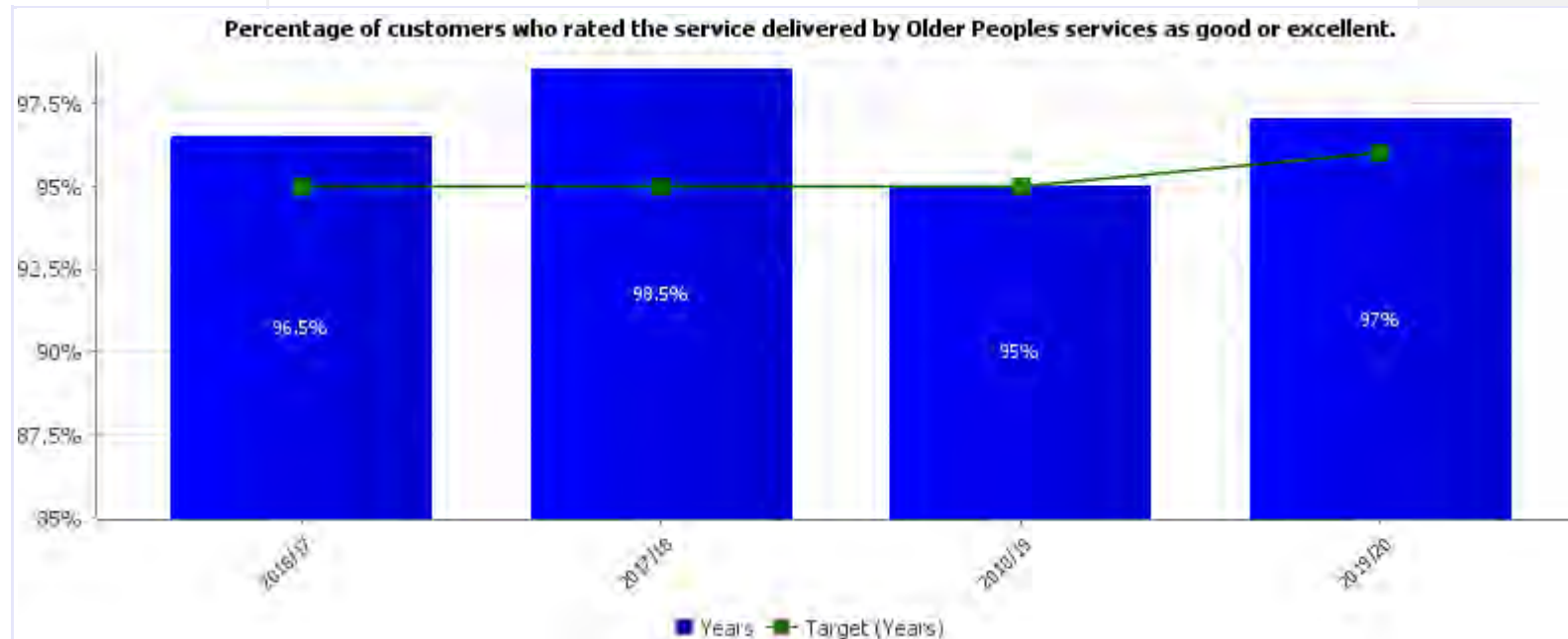
Legend: ■ Quarters ─■─ Target (Quarters)

Trend Chart Commentary:

There is a significant month on month variation in performance during the reporting period. However, there has been no change in, procedure or approach and it is concluded that this reflects simply the diversity of complaints received.

The number of formal Social Work complaints is relatively small (from 2 to 11 per month over the last year) so performance expressed as a percentage tends to appear as a very wide variation.

The target for quarter 4 will remain at 40% to demonstrate our commitment to improving customer care through the improvement actions in individual complaints/

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PI Code & Short Name	CP:SPCC092_6a.2 Percentage of customers who rated the service delivered by Older Peoples services as good or excellent.	PI Owner	zSPCC_PIAdmin; Gerard Cunniffe
Description	This performance indicator measures the percentage of customers that rated the overall quality of our service as good or excellent. Collated annually as part of our regular surveying activity, customers are asked to rate the quality of the service provided as; excellent, good, adequate, poor or very poor. The results are analysed to identify improvements to the way the service is delivered to customers. Overall satisfaction with delivery is recognised as one of the key drivers of overall customer satisfaction. This performance indicator is part of the performance scorecard for the council's Corporate Plan and will contribute to priority 4 which is improving the quality of life for older people.	Traffic Light Icon	✅
		Current Value	97%
		Current Target	96%

Percentage of customers who rated the service delivered by Older Peoples services as good or excellent.

Trend Chart Commentary

There was a slight dip in performance in 18/19 of 3.5 % against performance for 2017/18.   There were no customer comments in the surveys for that year which would explain the dip in performance. However, performance improve again in 2019/20.   Performance in relation to customer satisfaction is consistently high.

Performance in this area has consistently achieved the service target of 95%. The target for this performance indicator is to achieve 97% by 2022/2023 and this was set in the development of The Council's Corporate Plan. The target for 2021/22 will be set at 97% to evidence ongoing commitment to excellence in customer care.

The service is committed to sustaining very high standards of satisfaction and will continue to support this by: analysis of customer survey results; reviewing customer comments and suggestions; collating improvement actions from complaints and regularly reviewing care plans in consultation with service users and their carers.

Survey results for 1920/21 will be available in May 21

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DATA LABEL: OFFICIAL

PERFORMANCE COMMITTEE

SERVICE PERFORMANCE 2020/21 REPORT – IT SERVICES

REPORT BY HEAD OF SERVICE

A.   PURPOSE OF REPORT

The report provides Performance Committee with an overview of the service performance during the financial year 2021/21.

The report also provides information on the impact of the COVID-19 pandemic on the service, specifically the challenges that were overcome and some of the key achievements in the last 12 months.

B.   RECOMMENDATIONS

It is recommended that the Performance Committee:

1. Notes the performance of the IT Service in 2020/21;

2. Notes the recent WLAM review panel outcome;

3. Agree any other recommendations that may improve the performance of the service.

C.   SUMMARY OF IMPLICATIONS

I.	Council Values	Focusing on our customers' needs; being honest, open and accountable; providing equality of opportunity; developing employees; making best use of our resources and working with other organisations.
II.	Policy and Legal	The West Lothian Assessment Model programme is a key part of the council's Best Value Framework, ensuring that there is robust internal scrutiny and support for continuous improvement of services.
III.	Implications for Scheme of Delegations to Officers	None.
IV.	Impact on performance and performance indicators	The report provides a summary of performance indicators from a council service to support effective elected member scrutiny.
V.	Relevance to Single Outcome Agreement	The council has adopted an EFQM-based approach to performance management. This is reflected in the

1

		type of indicators used, including council indicators in the SOA.
VI	Resources - (Financial, Staffing and Property)	From existing budget.
VII.	Consideration at PDSP/Executive Committee required	Service performance is considered at the Partnership and Resources PDSP on an ongoing, scheduled basis.
VIII.	Details of consultations	None.

D.   TERMS OF REPORT

D.1   Background

Since March 2020, the effects of COVID-19 have had a significant impact on our communities and the way that the council operates. The council has continued to deliver critical services throughout the pandemic and IT Services has had a pivotal part in the overall council response to ever changing, often increasing, constraints and demands.

This report provides an overview of the impact of COVID-19 within IT Services during the past 12 months. This includes; detailing service performance for the financial year 2020/21 and some of the key actions undertaken in response to the situation.

In addition, the service reports on the outcome from the WLAM Review Panel in January 2021, along with the Panel recommendations for improvement in the service.

D.2   Service Overview

Head of Service: Julie Whitelaw, Head of Corporate
Services Service Manager: Ian Forrest, IT Services Manager

IT Services provide a wide range of information and communication technology services, support and advice to all of the council's services.

In order to maximise efficiency and use of technology, the majority of the service is based and delivered centrally within the Civic Centre, Livingston. The service also provides onsite support at schools and office locations where required across all council office properties. IT Services provides services to Civic Centre partners, the Improvement Service and West Lothian College.

As an enabler, IT Services has a key role in supporting the modernisation and improvement of council services through the actions set out in the ICT Strategy and the ten-year capital programme.

The main activities of the service are:

- Strategic, policy and technical advice in ICT, information and IT security;
- Service, supplier and project management, performance management and improvement;
- Support, maintenance and development of the council's ICT infrastructure and managing investment in the council's ICT assets;
- Support, maintenance and development of the council's ICT application/system assets;
- Maintaining the ongoing sustainability of the ICT infrastructure and systems to support the use of technology solutions which improve efficiency and

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effectiveness.

A summary of the service activities and resources is contained within Appendix 1.

D.3   Service Contribution to Corporate Priorities

IT Services is part of Corporate Services which provides a range of key enabling services that help the council to operate efficiently, effectively and in compliance with legal requirements and council policy.

The service enables delivery of the council's eight corporate priorities and makes a critical contribution to the delivery of the council's Transformation Programme. In particular; IT Services enables the performance of other services in the council by:

- Investing in IT resources that will support digitisation and modernisation of council services and will assist services to deliver efficiencies.
- Driving deployment of new technology to support new, digital, more efficient, sustainable, flexible, and customer focused ways of working whilst minimising risks to business critical ICT systems. Successful transformation will support services to deliver efficiencies and will be dependent on the combination and balance of people, processes and technology.
- Protecting against the threat of and risks associated with Cyber Security.

The service is also responsible for the development and delivery of the Council's ICT Strategy 2018/23.

D.4   COVID-19 – The Impact on Service Provision

Alongside many other council services, the past year for IT Services has been extremely challenging and has continually tested the capabilities of the managers, staff and the council's IT infrastructure. The council moved from an operating model of office-based and community-based staff to having thousands of homeworkers over the space of a few days and the demands for IT network, equipment and support increased correspondingly. The scale of the challenge facing the service and the response can be categorised in 3 phases.

Phase 1 – Initial Impact
The first phase of the service response to COVID-19 was in the initial weeks of the pandemic, which quite literally turned the IT Infrastructure inside out over the period of a weekend. Although some staff were equipped with portable devices, a large proportion of the office-based staff were not. In response:

- IT Security team had to quickly identify a way for desktop machines to be taken safely outside the office, maintaining protection for data stored/cached on the internal hard disks.
- The Network team had to monitor the bandwidth of network circuits and the change in pressure from having almost all network traffic flowing out to having almost all network traffic flowing inwards.
- The Server team focused on providing additional capacity for remote access sessions, all whilst moving out of the office to home working locations.
- The IT Service Desk were instrumental to the success of a quick change to the council workforce during this period, rolling out kit, such as swivel tokens, to allow staff to work from home. As well as providing ongoing telephone support to colleagues who were setting up home working arrangements and using new applications, software and kit for the first time.

Phase 2 – Resumption of Critical Business / Improvement Projects
The second phase of the year was the resumption of service support for capital-funded projects,

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mainly key IT infrastructure projects, which included upgrades and replacement of hardware. In a change to previous operating procedures, much of this work was carried out remotely and out with normal working hours, facilitated by staff with children looking to vary working patterns to match the needs of family and the needs of work. Where work demanded onsite presence, this was planned and coalesced to minimise the number of staff and visits to the office.

During this period, it was also necessary to review the approach of the IT Service Desk, where the restrictions of IPT telephony system and the inability of staff to work remotely was impacting the grade of service performance. A change to the opening hours and rotation of staff was agreed to enable the service to continue until the upgrade to the IPT telephony system was complete.

IT Services also deployed new communication and collaboration tools with great success during the pandemic. Microsoft Teams and Cisco Webex and the IPT softphone are now part of the tools available for our home worker staff and are making a meaningful difference to the way that we work and connect with others in this organisation and beyond.

The Scottish Government "Connected Scotland" programme was another area of great challenge and success for IT Services during the period. This a programme to improve digital inclusion and required the build and deployment of approximately 3,000 netbooks and 270 wireless routers, including unlimited mobile data connections, for West Lothian. This responsive work was completed in addition to the planned yearly Desktop Refresh programme and the increased level of internal service requests for new devices.

Phase 3 – Resumption of Normal Business
The last phase of the year was when the service resumed support for pre-pandemic planned project work, as services looked to progress projects to enhance or maintain technical capabilities.

Upgrades to the telephony system have enabled the IT Service desk team to return to normal operating hours and the service is now provided entirely remotely.

The introduction of an appointment-based system at the Civic Centre for technical faults and introduction of a drop off and collect service has further reduced the need for IT Services staff on site. These have been important changes for the group of IT staff who had maintained a presence onsite to ensure continuity of service provision.

The changes made during this phase contributed to an increase in the performance, which had been impacted during a very difficult and different year for IT Services. Despite an unprecedented year of demand, IT Services finish the year in a strong position; having supporting transformative change in council services and dealt with our own changes to work styles, our customers continued to rate the overall quality of the service as Good or Excellent at 98% in 2020/21.

D.5   Review Panel Outcome

The service attended the Review Panel on 22 January 2021 to provide the Panel with a detailed report on service performance and an update on the progress of actions from past recommendations. The service had been placed on Cycle 3 in 2019/20 and was asked to demonstrate performance improvement, specifically in the areas of; customer engagement, complaint handling and staff engagement.

The Review Panel outcome is determined by a Panel of three senior officers and is chaired by the Chief Executive.

Table 1: Review Panel Outcome	
Review Panel Cycle	
Cycle 1 The service will return to the panel within three years	✓

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Cycle 2	The service will return a report to the Panel within 12 months, who will determine if the service is to move to Cycle 1 or 3
Cycle 3	The service must return to the Review Panel no later than one year (12 months) from the date of the last report

The service achieved this outcome as the Panel has confidence that the service has a robust approach to performance management. The Panel also recognised the efforts of the service during challenging circumstances to maintain service delivery and positive performance.

D.6   Performance management

Performance management standards have been established to help the Panel consistently identify good or poor practice in relation to performance management and to help services address any deficiencies in their performance or management approaches. The following table sets out the evaluation for the service:

Table 2: Evaluation of Performance Management in the service	
Management standard	**Service evaluation**
Scope and relevance of performance data	The service has identified performance indicators to monitor progress in most of the key activities and outcomes / priorities
Compliance with corporate requirements	The performance framework of the service meets the basic corporate requirements
Approach	The service approach to managing performance is insufficient.
Management of data	There is not enough engagement in managing and reporting performance from the service management team
Management of information	Performance is reported and communicated to most key groups (including; Elected Members, senior officers, employees and the public)
Performance trends	The key performance indicators show good performance and the Panel has confidence that there is capacity in the service for improvement.
Targets and thresholds	Targets and thresholds rationale can be unclear for performance indicators and it is not evident how they support performance management and improvement.
Benchmarking	The service has limited comparative data for the key performance indicators (in relation to the priorities /key activities).
WLAM score	The service achieved a score of over 500 in the WLAM process

The service will also continue to report key performance publicly and through agreed committee performance reporting arrangements.

D.7   Recommendations for Improvement

A number of recommendations have been set out for action by the service to improve performance.

The Review Panel key finding and recommendations for the service are:

1. The Panel recognised the service has had a challenging year and has shown a collective ownership to delivering positive results. The strong and visible leadership in the service has been key to this success.

2. The service should have a stronger focus on future planning and strategy. The Panel

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recommend that the service work with stakeholders in the ICT Programme Board to develop a clear vision and strategies for the future that will support current and future business needs and enable adoption of new technologies and new ways of working in the council.

3. The service should seek external benchmarking opportunities to improve performance and keep pace with the latest innovation opportunities, including new technologies.

4. The Panel recognised the improved performance in the service employee satisfaction result. The service should aim to continue improving satisfaction results and increase the employee response rate.

5. The service should monitor their approach to capturing and recording customer complaints, ensuring customers are aware of how to make complaints and clearly identifying where service improvements derived from complaints.

6. The service should consider introducing performance indicators to measure project and capital investment works.

7. The service should continue to improve the quality of trend chart commentary, ensuring the trend chart commentary and chart are consistent.

8. The service should review performance targets, ensuring realistic targets are set.

Progress in these actions will be reviewed at the next Review Panel.

D.8   Service Performance

The service has a total of 63 performance indicators on the council's performance management system (Pentana). At present, the status of the indicators is as follows:

Summary of Performance Indicator status (RAG)	
Status (against target)	Number of PIs
Green	51
Amber	4
Red	5
Unknown	3

An overview of the performance indicators categorised as Public or High Level for the service is included in Appendix 2.

D.9   Service Benchmarking

The Local Government Benchmarking Framework does not contain any indicators that allow for comparison across the 32 local authorities of IT services.

The service continually interacts with other local authority IT departments via different forums such as SWAN, SOCITM, Digital Office, Holyrood Connect, Scottish Government and other IT networking events.

IT Services will focus, moving forward, on utilising all methods available to measure current and future performance formally. This will be captured and demonstrated by the use of appropriate key performance indicators following the current WLAM assessment. IT Services will include

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benchmarking results as part of the scheduled update report requested by the WLAM review panel.

E   CONCLUSION

IT Services had a pivotal part in the overall council response to the COVID-19 pandemic in 2020/21.

In this year, the service has supported continuity of council service provision throughout the pandemic via the delivery of new technologies and support for homeworking and new ways of working.

At a time of unpresented and unplanned demand, the service has also been able to make some positive progress in planned activities to improve the council's ICT infrastructure and move closer to our digital ambitions.

BACKGROUND REFERENCES

West Lothian Council ICT Strategy 2018/23

Appendices/Attachments: 2
Appendix 1_Corporate Services Management Plan Extract
Appendix 2_Performance Indicator Report

Contact Person: ian.forrest@westlothian.gov.uk Phone 01506 281081

Julie Whitelaw
Corporate Services
19 April 2021

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IT Services

Service manager: Ian Forrest, IT Services Manager
Number of staff: 45.2 (full time equivalents)
Location: Civic Centre

Purpose

IT Services provide a wide range of information and communication technology services, support and advice to all of the council's services.

In order to maximise efficiency and use of technology, the majority of the service is based and delivered centrally within the Civic Centre, Livingston. The service also provides onsite support at schools and office locations where required across all council office properties. IT Services provides services to Civic Centre partners, the Improvement Service and West Lothian College.

As an enabler, IT Services has a key role in supporting the modernisation and improvement of council services through the actions set out in the ICT Strategy.

Activities

The main activities of the service during the period of the Management Plan will be:

◆ Strategic, policy and technical advice in ICT, information and IT security
◆ Service, supplier and project management, performance management and improvement
◆ Support, maintenance and development of the council's ICT infrastructure and managing investment in the council's ICT assets
◆ Support, maintenance and development of the council's ICT application/system assets
◆ Maintaining the ongoing sustainability of the ICT infrastructure and systems to support the use of technology solutions which improve efficiency and effectiveness.

Key Partners

The service actively works with our partners to plan, design and deliver improved services for our customers.

Our key partners include; other council services, Improvement Service, West Lothian College, South Lanarkshire Council and external IT suppliers/providers.

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Customer Participation

The service will actively engage customers and potential customers in the delivery and re-design of services to ensure that they are accessible and focused on their needs and preferences.

Customer Consultation Schedule 2021/22				
Customer Group	Method	Frequency	Responsible Officer	Feedback Method
ICT Programme Board	Board meeting	Annual	IT Services Manager	Annual Consultation report provided to all Heads of Service
Service Management teams	Meeting	Annual	Service Portfolio and Programme Manager	Annual report to service area Senior Management teams
Improvement Service	Meeting	Annual	Service Portfolio and Programme Manager	Annual report to Improvement Service as part of Service Level Agreement
Education Service Head of Service for Support Model review	Meeting	Annual	Service Portfolio and Programme Manager	Annual review report on support model to Education Heads of Service
Education Service Head of Service and Secondary Head Teachers	Meeting/ electronic survey	Quarterly	Service Portfolio and Programme Manager	Annual review report on support model to Education Heads of Service
Service users	Electronic survey	Monthly	IT Services Manager	Pentana reporting and update on intranet

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Activity Budget 2021/22

IT Services Activity Budget 2021/22								
Activity Name and Description		Link to Corporate Plan	Performance Indicator and Target 2021/22	PI Category	Staff Resources (FTE)	Revenue Expenditure Budget 2021/22 £	Revenue Income Budget 2021/22 £	Net Revenue Budget 2021/22 £
Corporate IT Strategy and Support	Provide strategic support, advice and guidance on the application of IT to the council including the following services: development of strategy, policy, procedures and standards; advice and guidance on licensing and legislation, management of corporate ICT purchasing.	Enabler Service - Modernisation and Improvement	ITS060_Cost of development/ monitoring and management of compliance with Information Management and ICT Strategy Target: £370,175	High Level	3.25	360,385	(30,579)	329,507
			ITS062_Percentage of Information Security Incidents Target: 1%	High Level				
Service Project Management	Provide advice and guidance on development of service IT strategies and technology developments; project activity and project management; business analysis; communication of IT strategy, policies and standards; project office support.	Enabler Service - Modernisation and Improvement	ITS073_Cost of managing service and IT projects across the council within IT Services Target: £803,306	High Level	7.75	781,411	(66,358)	715,053
			ITS068_Percentage of projects contributing to Digital Transformation Target:	Public				
			ITS074_Percentage of projects completed within budget Target: 85%	Public				

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IT Services Activity Budget 2021/22

Activity Name and Description		Link to Corporate Plan	Performance Indicator and Target 2021/22	PI Category	Staff Resources (FTE)	Revenue Expenditure Budget 2021/22 £	Revenue Income Budget 2021/22 £	Net Revenue Budget 2021/22 £
Information Systems Development and Support	Provide IT solutions to: applications and interfaces development; adoption of user systems for maintenance and support; applications and interfaces support - in house and 3rd party developed systems; web development; small projects management.	Enabler Service - Modernisation and Improvement	ITS069_Percentage of open application programme interfaces (APIs) in use. Target:	Public	13.25	1,014,506	(86,153)	928,353
			ITS020_Percentage of faults resolved at first point of contact Target: 50%	Public				
Infrastructure Development and Support	Provide adequate and robust infrastructure services to allow the council to make best use of IT solutions including communications, network and telephony support; technical infrastructure support; server support and desktop support.	Enabler Service - Modernisation and Improvement	ITS078_Annual Percentage of ICT faults related to hardware failure Target:	Public	20.25	1,931,448	(225,922)	1,675,527
			ITS032a_Percentage data network availability Target: 99.5% estimate	Public				
Service Support	Provision of management and administrative Support	Enabler Service - Corporate Governance and Risk	Support activities contribute towards the overall performance of the service. Performance is monitored through the indicators for front line activities.		0.7	130,894	0	130,894
Total:					45.2	4,246,820	(439,012)	3,807,808

Actions 2021/22

The service will undertake a range of actions to support corporate priorities and objectives, improve services and deliver transformation.

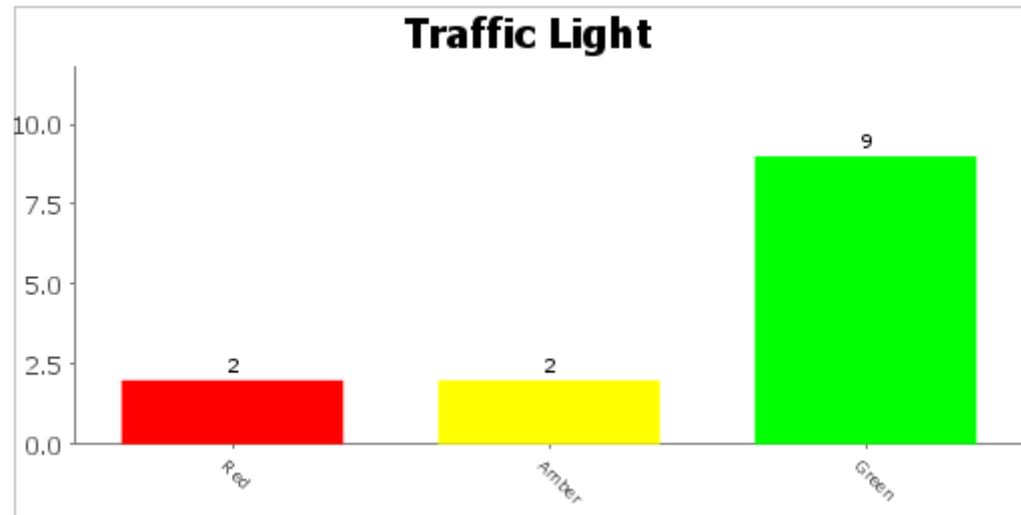| IT Services Actions 2021/22							
Action	Description	Planned Outcome	Owner(s)	Start	End	Status	Update
ICT Strategy	Development, implementation and ongoing monitoring and reporting of the council's corporate strategy.	The council has the ICT infrastructure to succeed in the priorities.	IT Services Manager	April 2018	April 2023	Active	The strategy was approved in June 2018 and is now being implemented. The annual update and strategy scorecard and action plan will be reported P&R PDSP in quarter 1 of 2021/22.
ICT asset efficiency	Review of ICT to develop new models of support and a more efficient infrastructure.	Optimisation of resources to support more efficient service delivery and reduction in spend.	IT Services Manager	April 2018	March 2021	Active	Project in delivery phase
ICT programme	Delivery of the ICT programme of projects to enhance or maintain IT networks, systems and applications.	The council has an ICT infrastructure that is suitable and compliant for business requirements.	IT Services Manager	April 2018	March 2028	Active	Project in delivery phase
Digital transformation projects	A programme of activity to ensure that the council is well placed to take advanced of opportunities offered in the digital age.	To deliver improved user-focused digital public services.	Head of Corporate Services	April 2018	March 2023	Active	The service continues to support the delivery of digital ambitions. The ICT Strategy and corporate systems are supporting digital processes across the council.

IT Services Actions 2021/22

Action	Description	Planned Outcome	Owner(s)	Start	End	Status	Update
Project Support	Support for delivery of strategic transformation programme projects.	Optimisation of resources to support more efficient service delivery and reduction in spend.	Head of Corporate Services	April 2018	March 2023	Active	Upgrades completed in 2020/21 which promote and allow for continued transformation work included; Objective, CRM, Active Directory Federated Service, Windows 10, Digitisation of documents. In 2021/22 work will continue to support Project development and implementation of ongoing projects, including the following systems, replacement of HR and Payroll system, replacement of Social Care Case Management system, design refresh and expansion of public access WiFi provision and expanding the functionality of the IPT system to enable collaboration.

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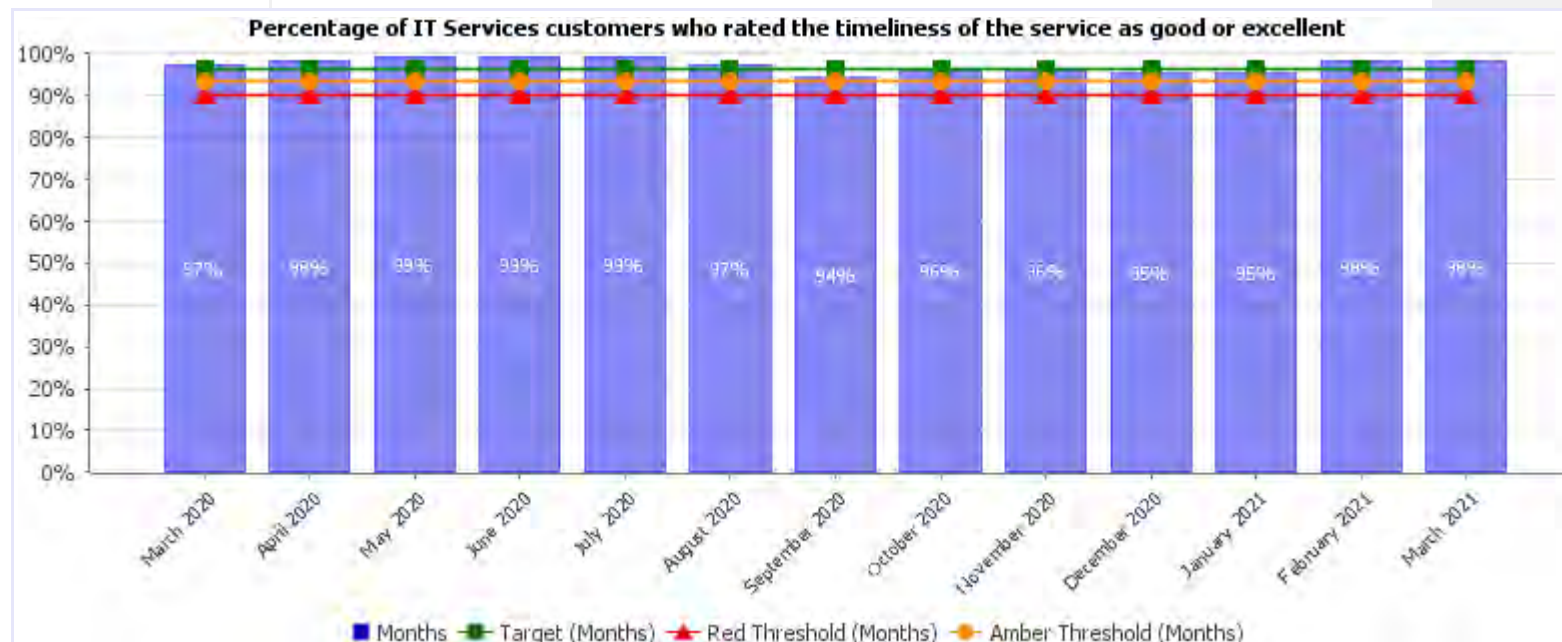**APPENDIX 2**

IT Services - Performance Committee

Generated on: 12 April 2021 13:09

Traffic Light

	Red	Amber	Green
Value	2	2	9

1

PI Code & Short Name	ITS001_6a.1 Percentage of IT Services customers who rated the timeliness of the service as good or excellent	PI Owner	zITS_PIAdmin; Ian Forrest
Description	This performance indicator measures the percentage of customers that rated timeliness of the service provided as good or excellent. Collected as part of our monthly survey, customers are asked to rate the quality of the service provided as excellent, good, adequate, poor, very poor or not applicable. The results are analysed to identify improvements to the way the service is delivered to customers.	Traffic Light Icon	✅
		Current Value	98%
	This survey is directed to all customers that have had work completed either as an Incident (fault) or a Service Request (enhancement) by IT Services within the last full month. Data is available from the 18th of each month.	Current Target	96%

Percentage of IT Services customers who rated the timeliness of the service as good or excellent

Trend Chart Commentary:
Performance from March 2020 to March 2021 demonstrates that the service regularly achieves above 96 percent. Performance ranged from 94 percent to 99 percent.
During the period of March 2020 to March 2021 the majority of council staff and IT services are working from home with a skeleton of IT staff on site to support business critical issues.

The slight dip in performance in February, September and December 2020 and January 2021 were as result of customers dissatisfied with timeliness and was impacted by the high numbers of calls logged, planned and unplanned absence and staff being diverted to deal with major incidents.
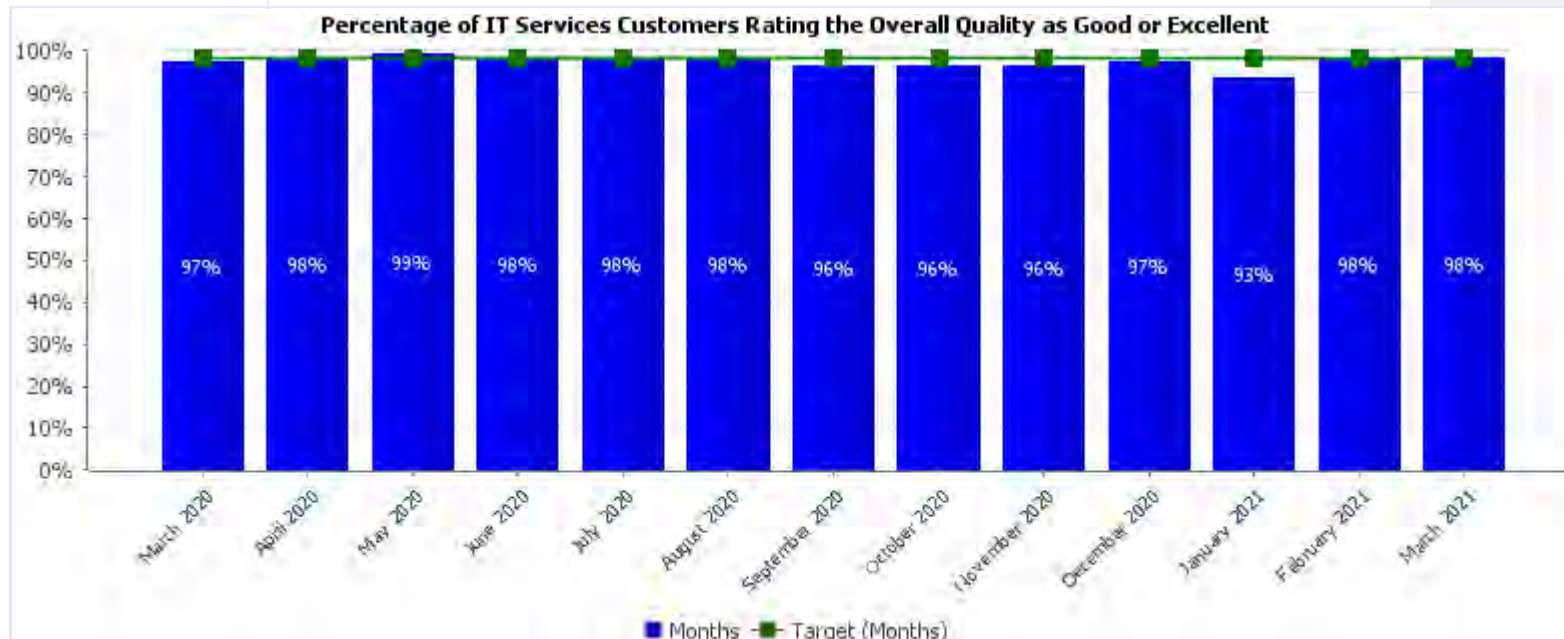
Performance is monitored monthly by team leaders and managers, who review customer feedback and identify and address the areas where customers are dissatisfied. Recurring themes are discussed at monthly team meetings and at staff one to ones with an empathises placed on asking staff to complete calls in order of time and date logged and within SLA wherever possible to improve the service provided.

Furthermore, the IT Service Desk has recently recruited an additional one-year fixed term Service Desk Analyst and the Service Centre have recently recruited an IT Engineer on a 3-month

2

contract to assist in managing workloads and improving timeliness as an outcome of the quarterly IT Resourcing Board. These specific processes and changes have assisted in providing a service of timeliness that has never fallen below the amber threshold during the rolling 13 months.

The target for 2019/20 was 96 percent to reflect previous year's performance and encourage improvement. The target for 2020/21 remains at 96 percent.

3

PI Code & Short Name	P:ITS007_6a.7 Percentage of IT Services Customers Rating the Overall Quality as Good or Excellent	PI Owner	zITS_PIAdmin; Ian Forrest
Description	This performance indicator measures the percentage of customers that rated the overall quality of the service as good or excellent. Collected as part of our monthly survey, customers are asked to rate the quality of the service provided as excellent, good, adequate, poor, very poor or not applicable. The results are analysed to identify improvements to the way the service is delivered to customers.	Traffic Light Icon	✅
		Current Value	98%
	This survey is directed to all customers that have had work completed either as an Incident (fault) or a Service Request (enhancement) by IT Services within the last full month. Data is available from the 18th of each month.	Current Target	98%

Percentage of IT Services Customers Rating the Overall Quality as Good or Excellent

Trend Chart Commentary:
Performance from March 2020 to March 2021 demonstrates that performance regularly meets or falls just below target of 98%. Performance ranges from 93% to 99%.

Performance is continuously monitored by team leaders and managers, who review customer feedback and identify and address the areas where customers are dissatisfied and discuss with them their concerns with relevant themes discussed at team meetings and directed with staff at one to ones to improve service.

February and March 2021 demonstrate an improvement in performance. This improvement is contributed to by the ITSD migration to the new Contact Centre Telephony Solution.

February to August 2020 the trend displays positive performance which is due to a more focus resource to respond to incidents and service requests as project work declined during the initial stages of lockdown and over the summer period.
Drops in performance are a result of customers responding to the survey question rating the overall quality as average, poor or very poor and are mainly due to calls being closed but not properly resolved, calls not being resolved within SLA and lack of feedback on call progress.
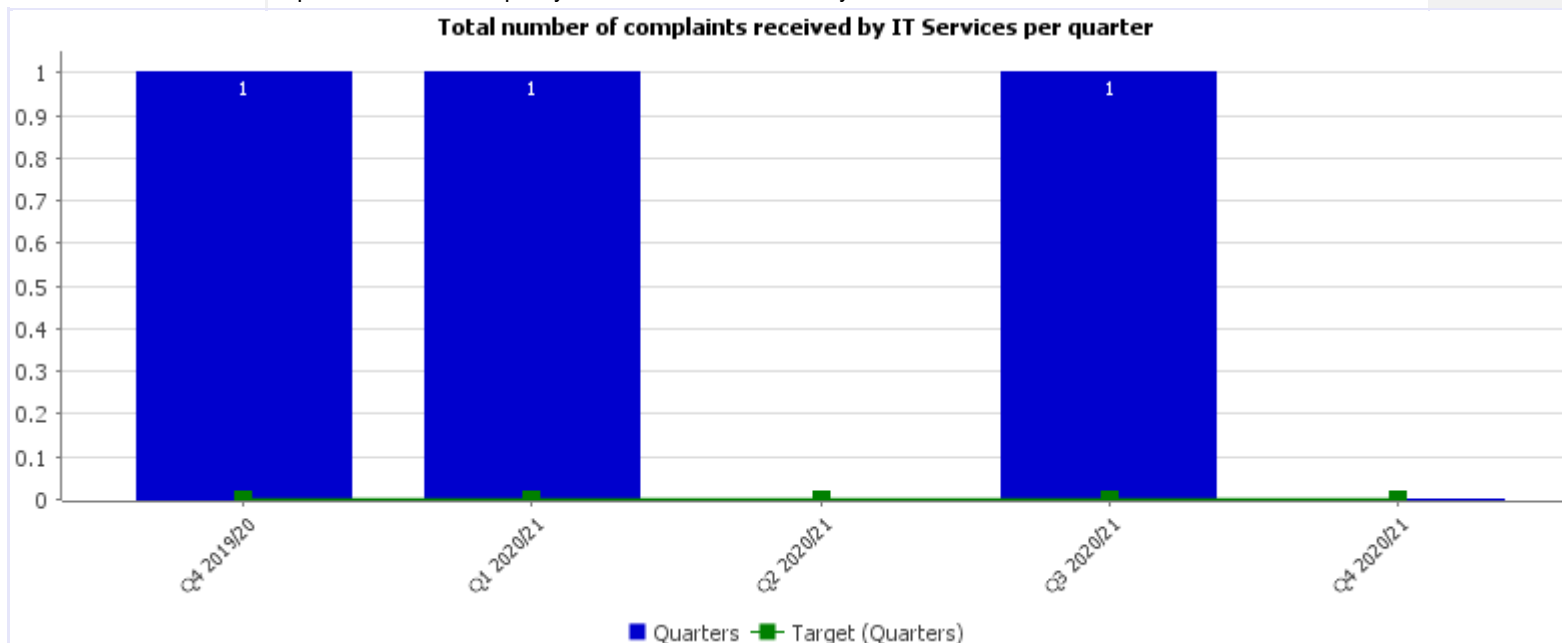
Slight performance dips in September, October and November December 2021 and January 2021 are due to an increase in service requests logged relating to mobile devices, education calls

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now coming to 1st line, resource availability relating to BAU and project work, and the level of planned and unplanned absences within IT Services. To improve this performance the service has introduced (Nov. 20) an additional fixed term post within the service desk to address more schools calls as part of a test pilot for introducing a 1st line service to the Education Desktop Support Model and staff resource availability for BAU has increased slightly after the resourcing review for Q4.

These processes and procedures have ensured that the customer feedback relating to the Quality of Service received has only once fell just below the amber threshold during the rolling 13 months.

The target for 2019/20 was 98% to reflect previous year's performance and encourage improvement. The target for 2020/21 remains at 98%.

5

PI Code & Short Name	P:ITS011_6b.3 Total number of complaints received by IT Services per quarter		PI Owner	zITS_PIAdmin; Ian Forrest
Description	This performance indicator measures the total number of complaints received during each quarter relating to IT Services. Performance is reviewed on a regular basis and reported annually to ensure that there is sufficient focus on the quality and standard of customer service. The data for this performance indicator is extracted from the Customer Relationship Management (CRM) system, which is used to manage and monitor complaint handling procedures in the council. All complaints received are analysed to identify improvements to the quality of the service and the way it is delivered to customers.		Traffic Light Icon	✅
			Current Value	0
			Current Target	0

Total number of complaints received by IT Services per quarter

Trend Chart Commentary:
Performance from Q4 2019/20 to Q4 2020/21 is mixed with 3 complaints over the period.
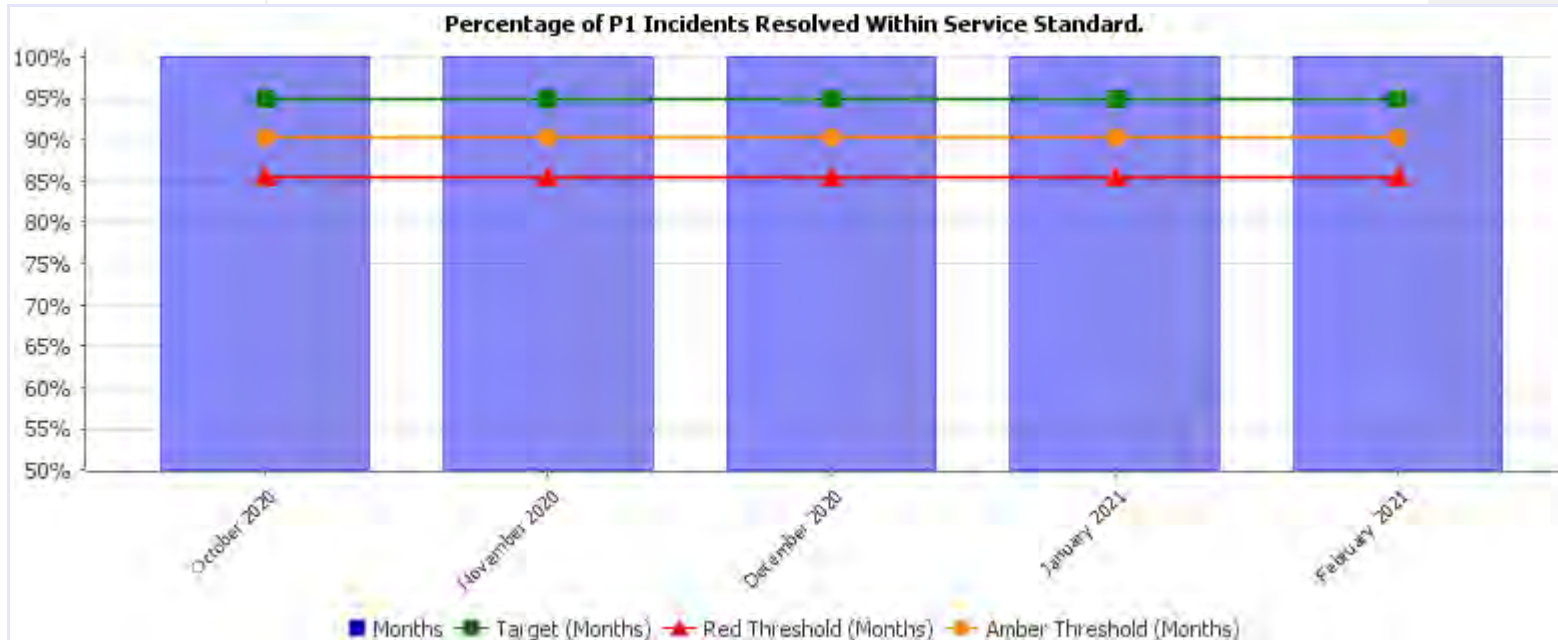
Q3 2020 complaint was due to poor video conferencing facilities in November affecting committee meetings, bandwidth increases to the internet, configuration changes to video conference software and an independent review of the network was completed to improve performance.

Q1 2020 complaint was due to users experiencing unstable connections working from home, software patches and configuration changes to user devices was completed to improve performance.

Q4 2019 complaint was made against IT member of staff whilst attending primary school, this was discussed with the member of staff and education services to review incident.

The target for 2020/21 will remain at zero to ensure that focus on customer service remains a priority in the provision of IT across the council.

6

PI Code & Short Name	ITS016_6b.5 Percentage of P1 Incidents Resolved Within Service Standard.	PI Owner	zITS_PIAdmin; Ian Forrest
Description	This performance indicator measures the overall percentage of P1 IT incidents (faults) resolved within Service Standards in a monthly period. There are three service standards for incidents and faults - within 4hrs for major incidents, 1day for priority incidents including Elected members and Corporate Management Team and up to 5 days for lower impact incidents/faults. The data for this indicator is extracted from the IT Services work tracking system. The system provides the automated workflow management and provides data on the total number of Incidents received from customers and completed within agreed service standards. Data is available from 18th of each month.	Traffic Light Icon	✅
		Current Value	100%
		Current Target	95%

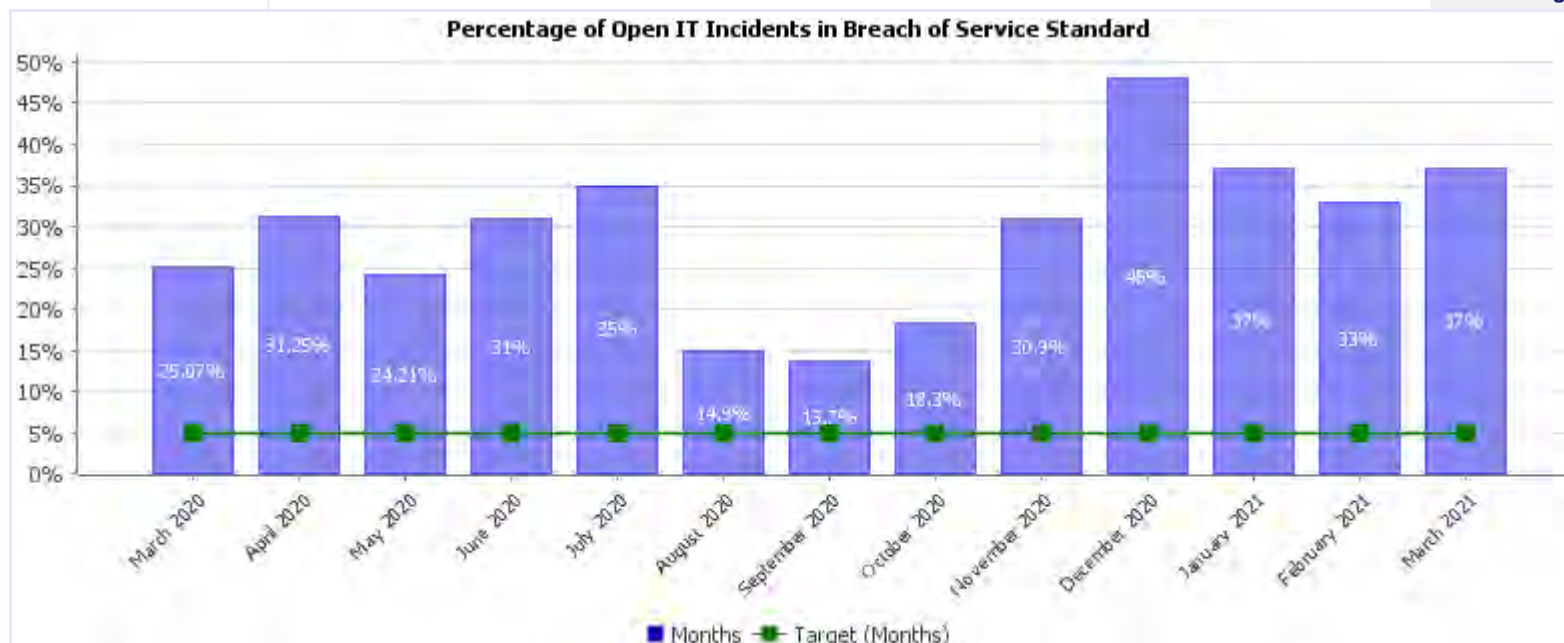Percentage of P1 Incidents Resolved Within Service Standard.

This PI has recently been created to review the top priority incident calls and resolution time

Performance during October 2020 to February 2021 has demonstrated that all P1 calls are resolved within the service standard.

The target for 2020/21 is set at 95 percent, this is aligned to the overall service standard for resolution of Incidents.

7

PI Code & Short Name	ITS018_6b.5 Percentage of Open IT Incidents in Breach of Service Standard	PI Owner	zITS_PIAdmin; Ian Forrest
Description	This performance indicator tracks the level of open IT incidents (or faults) per month that are in breach of their service level. The information is presented as a percentage of the total number of open incidents at the end of every calendar month.	Traffic Light Icon	🛑
		Current Value	37%
		Current Target	5%

Percentage of Open IT Incidents in Breach of Service Standard

■ Months ─■─ Target (Months)

Trend Chart Commentary:

Performance from March 2020 to March 2021 demonstrates that the service has failed to meet the 5% target expectation in any of the 13 rolling months. Performance ranged from 13.7% to 48% percent.

Performance over the long and short term can be greatly influenced by major incidents, call volume, call escalation and staff resource availability with regards Project Resource v BAU resource over each of the 4 resourcing quarters.

March performance was negatively impacted by an increase of 318 (38%) more incidents being logged in than February 2021. Most of the added volume of incidents related to mobile devices which were a priority to avoid leaving customers without the use of service.
Variations in Q1 project resourcing requirements per month will also continue to impact technical resource availability for BAU.

February performance was positively impacted by The Service Centre Managed highlighting breached incidents to their staff and asking for a big push to get as many as possible resolved and closed within the month. Performance was additionally improved on again with low levels of planned and unplanned absenteeism. Variations in Q4 project resourcing per month will however continue determine technical resource availability for BAU into March 2021.

January 2021 performance was positively impacted by a reduction of technical resource required for Q4 project work and a large reduction in planned and unplanned absence and public holidays in comparison to December 2021

8

Q4 project resourcing will continue to determine technical resource availability for BAU into February and March.

December performance was negatively impacted due to the 60% project, 40% BAU split for IT Engineers and the 90% project,10% BAU split for Technology and Solutions staff to meet high project demand for Q3, one member of staff being on long term unplanned absence and the high level of planned absence and public holidays.

The large decrease in November performance drop was due to the high level of IT Service Desk staff having to be on the phones dealing with customer enquiries giving them less time to deal with calls in their queues.

Service was further impacted due to the 60% project, 40% BAU split for IT Engineers and the 90% project,10% BAU split for Technology and Solutions staff to meet project demand for Q3 and one member of staff being on long term unplanned absence.

A review of the target as a result of the trend, recent IT restructure and of the 60/40% split for IT Engineers and 90/10% split of Technology and Solutions staff with regards to Project v BAU resourcing has been completed and it was agreed to continue running with the current setup.

The target for 2019/20 was 5 percent to reflect previous year's performance and encourage improvement. The target for 2020/21 currently remains unchanged and is set at 5 percent.

9

PI Code & Short Name	P:ITS019_6b.5 Annual Percentage of IT Faults resolved within service standards.	PI Owner	zITS_PIAdmin; Ian Forrest
Description	This performance indicator measures the overall percentage of IT faults resolved within the service standards in a financial year. The current service standard attached to all Corporate faults is 5 working days. The data for this indicator is provided from the IT Service Management software system.	Traffic Light Icon	⚠
		Current Value	87%
		Current Target	93%

Annual Percentage of IT Faults resolved within service standards.
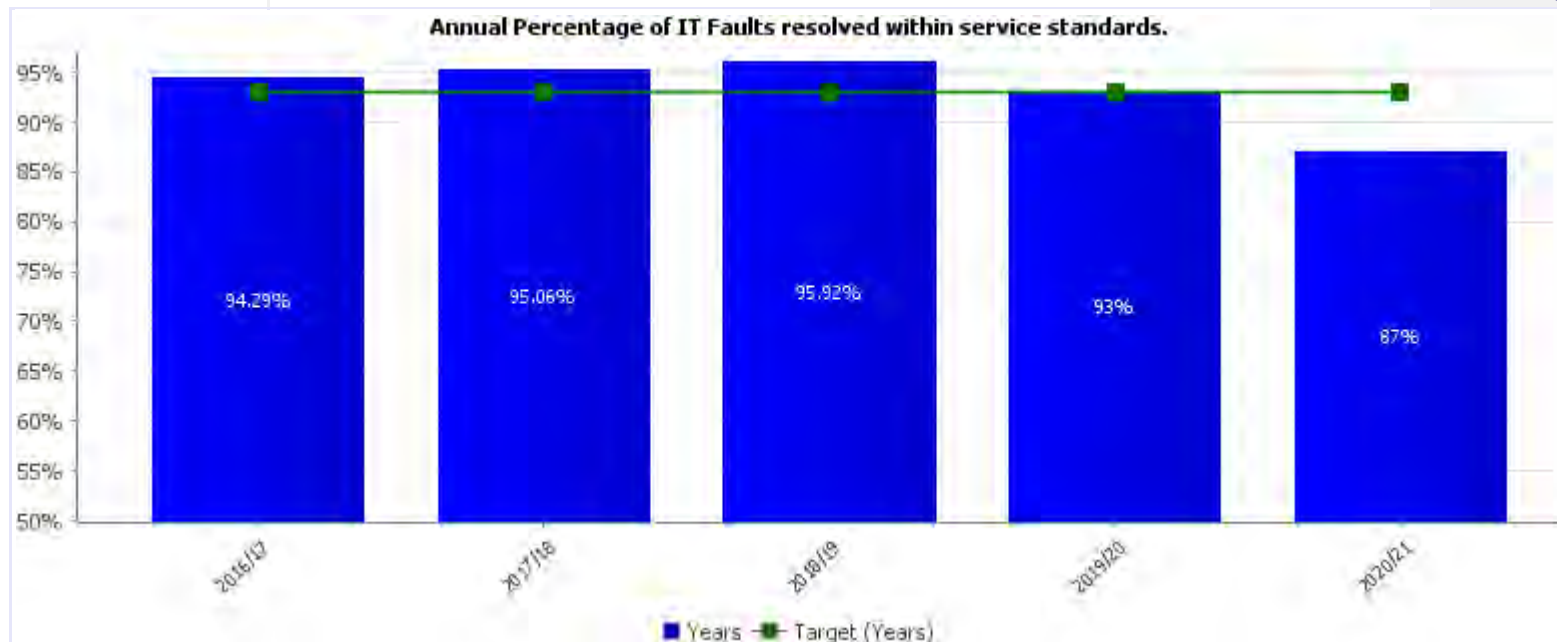
Trend Chart Commentary:
The trend chart demonstrates performance achieves 87% or above over the period.

Performance in 2020/21 achieved 87% of faults resolved within their assigned service level. IT Services resolved 13343 incidents and of those completed 11608 were within the assigned service level. The overall performance declined from the previous year by 6% and failed to meet target. The drop in performance is mainly due to having to reconfigure IT Services and realign staff throughout the year to meet the demands from the fallout caused by Covid-19.
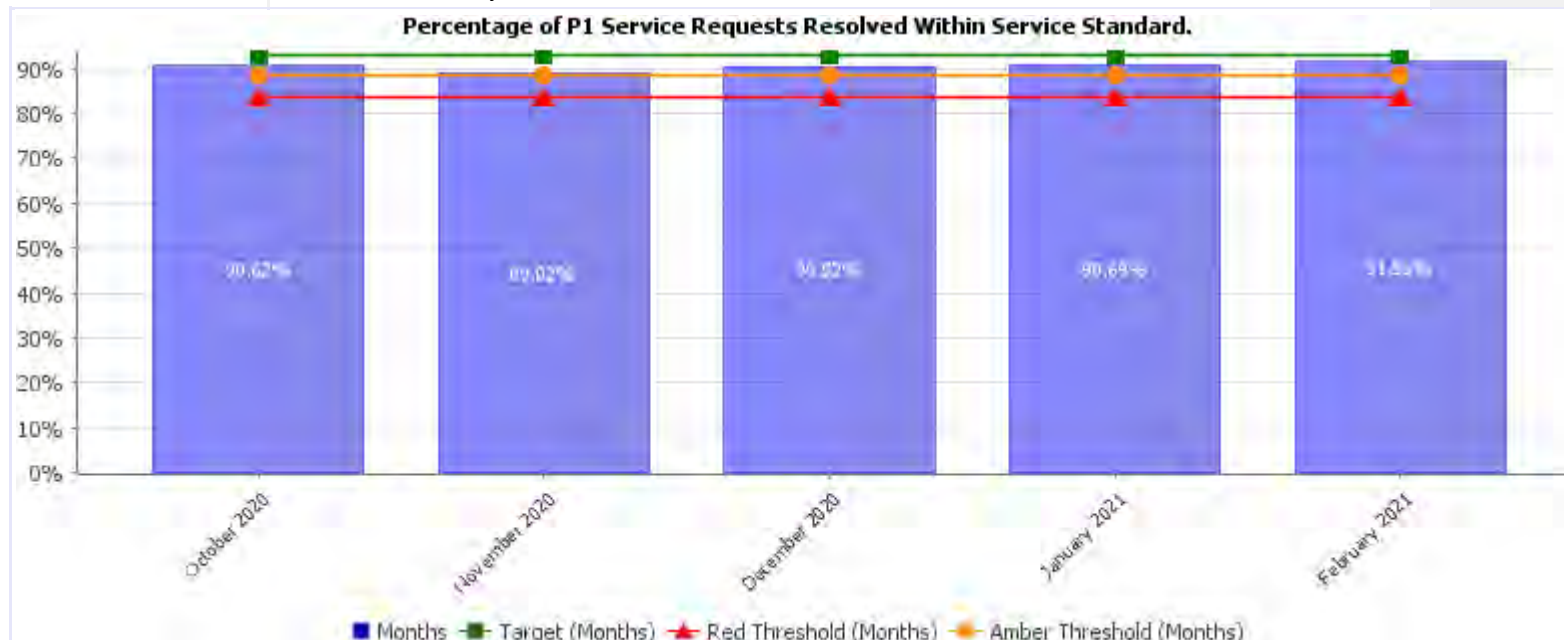
Performance in 2019/20 achieved 93% of faults resolved within their assigned service level. IT Services resolved 20,139 faults and of those completed 18,729 within the assigned service level. The overall performance declined from the previous year by 2.92% but still achieved target, the drop in performance can be attributed to service redesign, illness and death in service.

Performance in 2018/19 achieved 95.92% of faults resolved within their assigned service level and exceeded the annual target by 2.92%. The performance has continued to increase as result of further process improvements within the resource management in the service and in house cross skilling combined with updating documentation to the knowledge base within Supportworks and WIKI.

Performance in 2017/18 achieved 95.06% of faults resolved within their assigned service level. The performance has improved as a result of process improvements within the resource management in the service and in-house cross skilling combined with updating documentation to the knowledge base within Supportworks and WIKI

The target for 2021/22 remains at 93 percent to reflect previous year's performance and encourage improvement.

10

PI Code & Short Name	ITS022_6b.5 Percentage of P1 Service Requests Resolved Within Service Standard.	PI Owner	zITS_PIAdmin; Ian Forrest
Description	This performance indicator measures the overall percentage of P1 IT service requests (enhancements) resolved within Service Standards in a monthly period. There are five service standards for requests depending on complexity and requirement - within 2 days, 10 days, 16 days 30 days and greater than 30days for projects. The data for this indicator is extracted from the IT Services work tracking system. The system provides the automated workflow management and provides data on the total number of Requests (enhancements) received from customers and completed within agreed service standards. The data is extracted on the first working day of the new month and closes on 16th with results available to input to Covalent on 18th day of the month.	Traffic Light Icon	✅
		Current Value	91.56%
		Current Target	93%

Percentage of P1 Service Requests Resolved Within Service Standard.

■ Months ■ Target (Months) ▲ Red Threshold (Months) ● Amber Threshold (Months)

This PI has recently been created to review the top priority service request calls and resolution time

Performance during October 2021 to February 2021, has demonstrated that P1 service requests are not achieving the service level standard. This new PI in conjunction with resourcing of IT staff will identify areas of improvement required, this will be presented to the February ICTPB as part of the overall IT Performance discussion.

The target for 2020/21 is set at 93 percent, this is aligned to the overall service standard for resolution of service requests.

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PI Code & Short Name	ITS023_6b.5 Percentage of Open Service Requests that are in Breach of the Service Standard	PI Owner	zITS_PIAdmin; Ian Forrest
Description	This performance indicator tracks the level of open requests for change (or enhancements) per month that are in breach of their service level. The information is presented as a percentage of the total number of open Change Requests at the end of every calendar month.	Traffic Light Icon	🟠
		Current Value	24%
		Current Target	5%
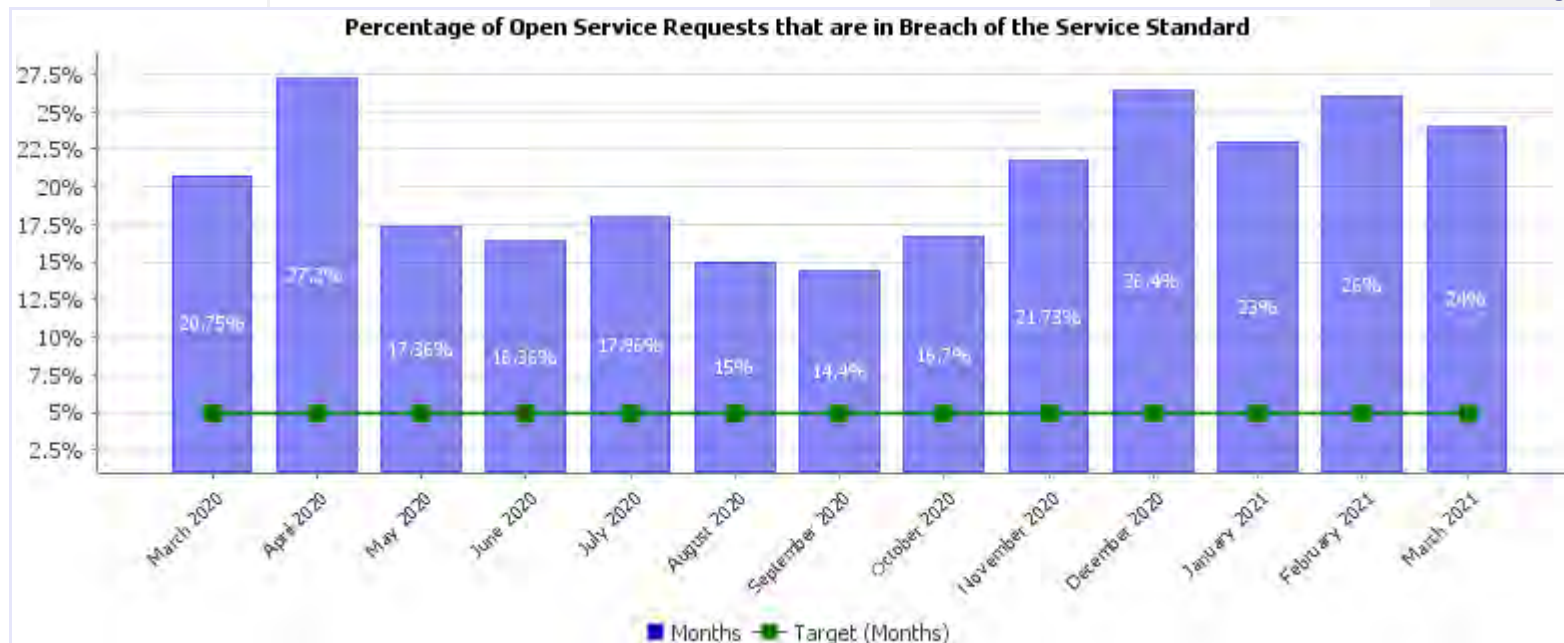
Percentage of Open Service Requests that are in Breach of the Service Standard

Trend Chart Commentary:

Performance from March 2020 to March 2021 demonstrates that the service has failed to meet the 5% target expectation in any of the 13 rolling months. Performance ranged from 14.4 percent to 27.20 percent.

Performance over the long and short term can be greatly influenced by major incidents, call volume, call escalation and staff resource availability with regards project resource v BAU resource over each of the 4 resourcing quarters.

Performance in March 2021 achieved 24% demonstrating a 2% increase in comparison to February and was a good achievement given there was an increase of 309 (29%) service requests logged.
Performance is impacted by the high level of Service Requests sitting with Technology and Solutions. Resourcing only allows for 10% of their time to be spent on BAU and 90% on project work making it difficult to manage the BAU workload.

February performance was negatively impacted by the high level of Service Requests sitting with Technology and Solutions staff. Technology and solutions resourcing only allows for 10% of time to be spent on BAU and 90% on project work making it difficult at times to manage the BAU workload. This was discussed recently at the ICTPB- Resource Board meeting where it was agreed to keep the resourcing percentages at their current levels.

January 2021's performance was positively impacted by a reduction of technical resource required for project work for Q4 and a large reduction in planned and unplanned absence and public

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holidays in comparison to December 2020

Q4 project resourcing will continue determine technical resource availability for BAU into February and March.

DecembeR performance was negatively impacted due to the 60% project, 40% BAU split for IT Engineers and the 90% project,10% BAU split for Technology and Solutions staff to meet high project demand for Q3, one member of staff being on long term unplanned absence and the high level of planned absence and public holidays.

The high decrease in November performance was due to the high level of IT Service Desk staff having to be on the phones dealing with customer enquiries giving them less time to deal with calls in their queues. Service was further impacted due to the 60% project, 40% BAU split for IT Engineers and the 90% project,10% BAU split for Technology and Solutions staff to meet project demand for Q3 and one member of staff being on long term unplanned absence.

The target for 2019/20 was 5 percent to reflect previous year's performance and encourage improvement. The target for 2020/21 currently remains unchanged and is set at 5 percent.

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PI Code & Short Name	ITS024_6b.5 Annual Percentage of IT Service Requests resolved within service standards.	PI Owner	zITS_PIAdmin; Ian Forrest
Description	This performance indicator measures the overall percentage of IT Service requests resolved within the service standards in a financial year. The service standard attached to a Service Request will vary according to the complexity of the request. The default service level assigned to a Service Request is 10 working days. The data for this indicator is provided from the IT Service Management software system.	Traffic Light Icon	△
		Current Value	90.4%
		Current Target	95%

Annual Percentage of IT Service Requests resolved within service standards.
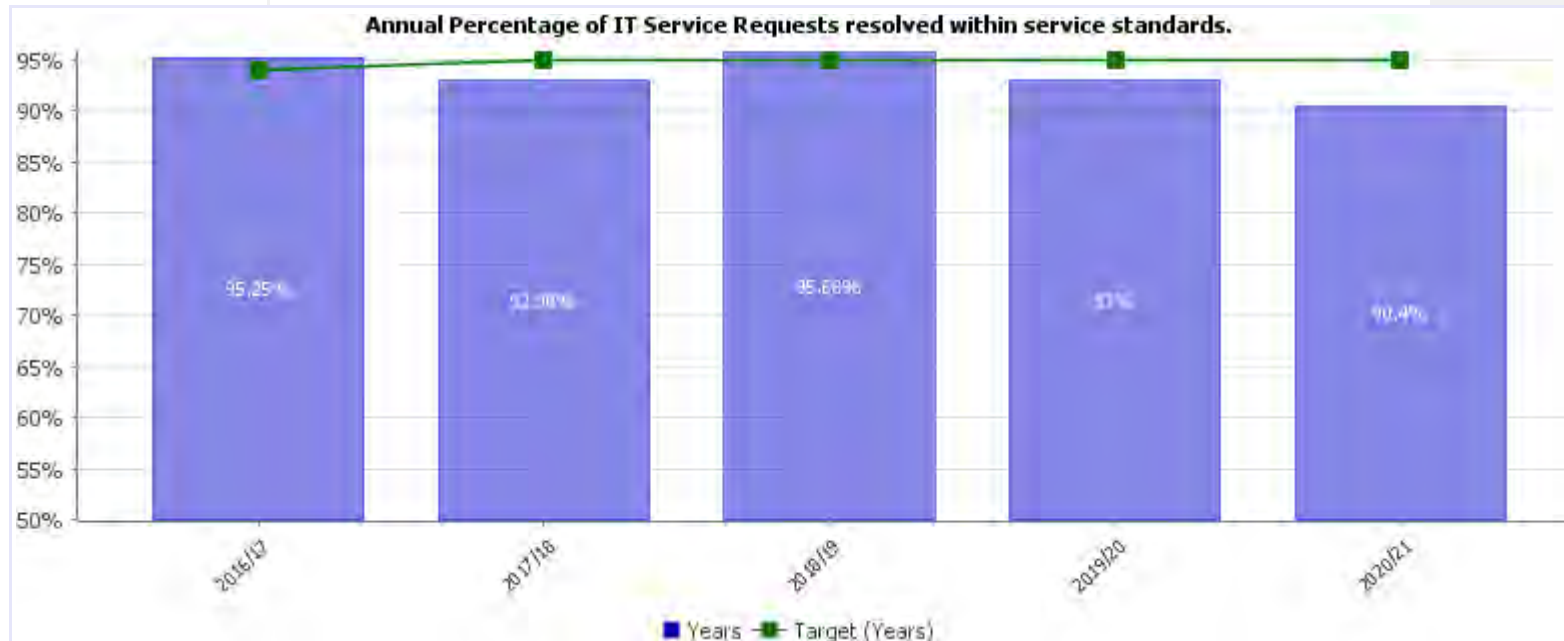
Trend Chart Commentary:

The trend chart demonstrates performance achieves 90.4% or above over the period.

Performance in 2020/21 demonstrated a reduction as a result of the need to reconfigure IT Services and realign staff throughout the year to meet the demands from the fallout caused by Covid-19.

Performance in 2019/20 demonstrated a reduction as a result of diverting resource to incidents, service redesign, vacancies, illness and death in service.

Performance in 2018/19 demonstrated an improvement in performance and surpassed the target due to managing and monitoring arrangements.

Performance in 2017/18 demonstrates a reduction as a result of diverting resource to incidents and changes to the management structure within Platforms and the Service Centre.

Performance in 2016/17 demonstrates a continued improvement in resource management in the service and the annual target for 2017/18 has been set at 95%.

The target for 2020/21 was 95 percent to reflect previous year's performance and encourage improvement.

14

PI Code & Short Name	P:ITS032_9b.1c Annual Percentage availability of the IT Data Network.	PI Owner	zITS_PIAdmin; Ian Forrest
Description	This performance indicator measures the percentage availability of the data network which connects council buildings, including schools, to each other and to the internet. Information is provided by the service provider. The measure is calculated from the number of minutes the network is available across each site relative to the total number of minutes per year multiplied by the number of sites connected.	Traffic Light Icon	✅
		Current Value	99%
		Current Target	99.9%

Annual Percentage availability of the IT Data Network.
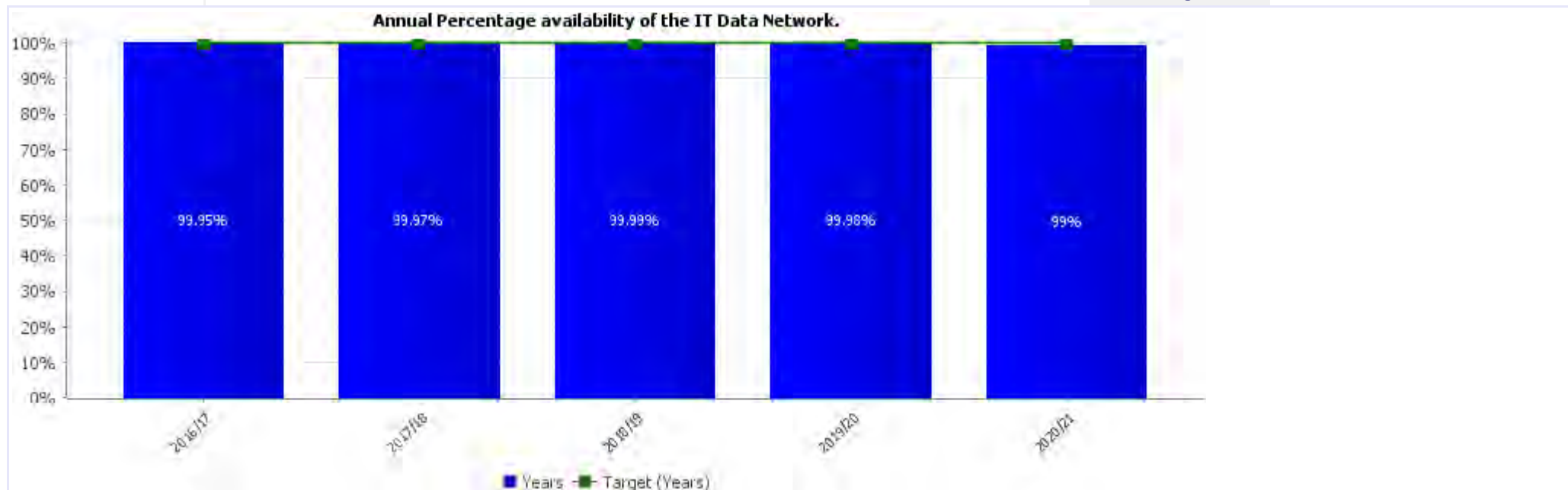
Trend Chart Commentary:
This trend chart demonstrates performance by our Wide Area Network managed service and influences IT Services performance in respect of fault resolution and resource availability.

Performance in 2020/21 achieved 99%. Network availability throughout the year was positive, however external power issues and telecommunication provider contributed to losses of service throughout the year.

Performance in 2019/20 achieved 99.98%. Network availability throughout the year was positive, power issues and internal issues at 1 site contributed to the small loss of service.

Performance in 2018/19 achieved 99.99%. Network availability throughout the year was positive, however external power issues and telecommunication provider contributed to the small loss of service.

Performance in 2017/18 achieved 99.97% and was impacted by external telecommunication related faults.

Performance in 2016/17 achieved 99.95% and was impacted by external power issues and telecommunication provider experienced issues at two local telephone exchanges.

The target for 2021/22 is set at 99.9% based on contracted service levels.

15

PI Code & Short Name	P:ITS051_7b.1 Percentage of Sickness Absence in IT Services (cumulative)	PI Owner	zITS_PIAdmin; Ian Forrest
Description	This performance indicator measures the percentage indicator of sickness absence in IT Services. The percentage is a cumulative measure of sickness absence over the period of the financial year. HR Services calculate the percentage comparing sickness days as a percentage of total available staff days and provide the monthly data on approximately the 17th day of the following month. The data is then verified and uploaded into the performance management system by the service.	Traffic Light Icon	✅
		Current Value	2.96%
		Current Target	3.6%
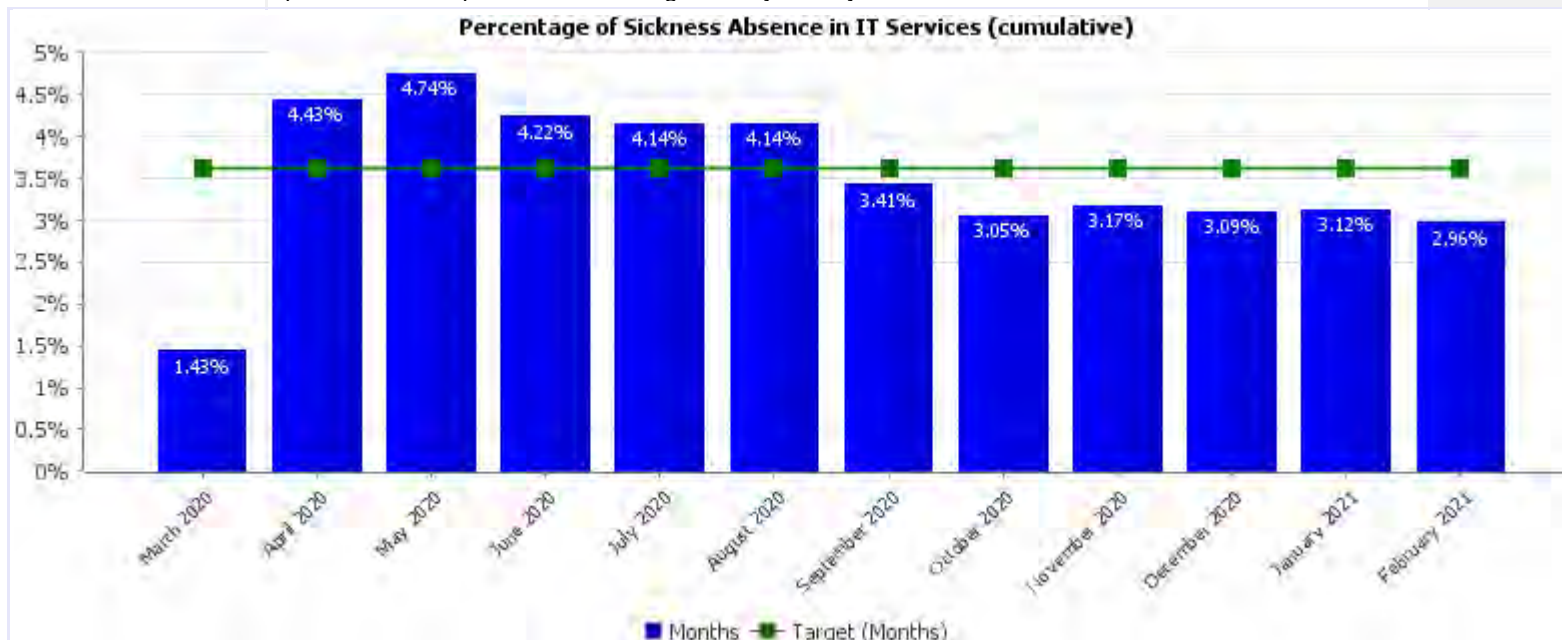
Trend Chart Commentary:
The trend chart illustrates sickness absence levels in IT Services. All sickness absence is managed in accordance to the Sickness Absence Policy and procedures.

Performance increased February 2021 as a result of the return of 1 long term absence.

Performance October 2020 - January 2021 remained fairly consistent as a result of 1 new long-term absence and short-term absences.

Performance June 2020 - September 2020 increased as a result of a return of 2 long term absences, short term absences continued over the period.

Performance February 2020 - May 2020 decreased as a result of an increase in short term absences and 2 long term absences during the period.

The target is at an overall council level target of 3.6%.

Please note monthly data is provided by HR on approximately 17th day of the following month.

16

PI Code & Short Name	P:ITS071_9b.2 Maintain Optimum Server Processing Capacity	PI Owner	zITS_PIAdmin; Ian Forrest
Description	This performance indicator is part of the performance scorecard for the council's asset management strategy and will contribute to outcome 4 sufficiency.	Traffic Light Icon	✓
	This performance indicator measures the optimum server processing capacity. Data is recorded through the use of VMware management tool, the purpose of this is to ensure that the councils server infrastructure is not underutilized or over utilised which would result in a loss of performance.	Current Value	27%
	This indicator supports Outcome 1 of the ICT Strategy - Ongoing sustainability of the ICT infrastructure and systems to support the use of technology solutions which improve efficiency and effectiveness.	Current Target	75%

Maintain Optimum Server Processing Capacity

Trend Chart Commentary:

Measuring the performance of the server estate allows us to identify unusual increases in usage, this assists in identifying issues or problems before any loss or interruption to service. in addition, it also allows IT Services to forecast growth across the server estate.

The processor utilisation for 2020/21 to date averages 27% of available capacity. This slight decrease still demonstrates sufficient overhead to cope with peaks in demand and future resource requirements in line with the ICT strategy outcome 1 and the ICT Capital Asset management plan.

The processor utilisation for 2019/20 to date averages 24% of available capacity. This slight decrease still demonstrates sufficient overhead to cope with peaks in demand and future resource requirements in line with the ICT strategy outcome 1 and the ICT Capital Asset management plan.

The processor utilisation for 2018/19 averages 29% of available capacity. This demonstrates that there is sufficient overhead to cope with peaks in demand and future resource requirements in line with the ICT strategy outcome 1 and the ICT Capital Asset management plan.

The target for 2021/22 remains set at 75%, this PI measures operating efficiency v capacity with a mean value between 25%-75%.

17

PI Code & Short Name	P:ITS079_9b.1c Annual Percentage of ICT Corporate desktop and laptop assets in use beyond their expected lifespan.	PI Owner	zITS_PIAdmin; Ian Forrest
Description	Demonstrates that our IT assets are maintained in satisfactory or better condition through application software updates and hardware performance monitoring. The percentage is a measure of desktop ICT equipment in the corporate estate that remains in use beyond a 7yr lifecycle.	Traffic Light Icon	✅
		Current Value	0%
		Current Target	0.5%

Annual Percentage of ICT Corporate desktop and laptop assets in use beyond their expected lifespan.

Trend Chart Commentary:
The trend chart demonstrates that between 2016/17 and 2020/21 the council's capital investment has maintained the corporate desktop and laptop estate ensuring no desktop equipment is in use beyond the asset lifecycle 7-year period with the exception of 2019/20.

Performance in 2020/21 improved by 25% as a result of configuring Torridon House specifically for hardware imaging, upgrading and for allowing drop off and collection of hardware from our customers due to the impact of Covid-19. The original number of machines in scope for 2019/20 was 357, this increased to 1041 corporate devices as a result of workforce mobilisation and acceleration of the capital from future years. In addition, 2900 new education devices were deployed as part of the connected Scotland programme under the government's digital inclusion scheme.

Performance in 2019/20 declined by 25 percent as a result of COVID19, 380 devices were planned to be refreshed/replaced with 95 failing to complete. This was as a result of delivery of stock and social distancing measures introduced.

A yearly project is in place to ensure that all devices due for replacement are replaced as part of the 7yr lifecycle.

The target for 2021/22 will be maintained at 0.5%.

18

19

DATA LABEL: PUBLIC

PERFORMANCE COMMITTEE

COMPLAINT PERFORMANCE REPORT QUARTER 3: 2020/21

REPORT BY DEPUTE CHIEF EXECUTIVE

A.   PURPOSE OF REPORT

To report to the Performance Committee the quarterly analysis of closed complaints in Quarter 3: 2020/21.

B.   RECOMMENDATIONS

It is recommended that the Performance Committee:

1. Note the corporate and service complaint performance against the standards outlined in the council's complaint handling procedure.
2. Continue to monitor complaint performance and request additional information from services as required.

C.   SUMMARY OF IMPLICATIONS

I.	Council Values	Focusing on customers' needs Being honest, open and accountable
II.	Policy and Legal	The Public Services Reform (Scotland) Act 2010
III.	Implications for Scheme of Delegations to Officers	None
IV.	Impact on performance and performance indicators	Will provide a robust approach to monitoring complaints performance information covering all council services
V.	Relevance to Single Outcome Agreement	Indicators support various outcomes in the SOA
VI.	Resources (Financial, Staffing and Property)	From existing budget
VII.	Consideration at PDSP/Executive Committee required	None
VIII.	Details of consultations	None

D.   TERMS OF REPORT

D.1   Background

The Scottish Public Services Ombudsman (SPSO) developed and published a model Complaint Handling Procedure (CHP) in 28 March 2012. The model CHP was to ensure a standardised approach in dealing with customer complaints across the local authority sector.

The SPSO definition of a complaint in the model CHP is:

'***An expression of dissatisfaction*** *by one or more members of the public about the local authority's action or lack of action, or about the standard of service provided by or on behalf of the local authority.*'

 All local authorities were required to adopt the model CHP by 31 March 2013. SPSO expect that local authorities will make the best use of complaint information to inform service improvement activity.

The SPSO outlined four elements of the model CHP that that should not be amended to ensure a standardised approach across all local authorities. These are:

- The definition of a complaint
- The number of stages
- Timescales at each stage
- The requirement to record, report and publicise complaints information

D.2   Corporate Complaint Performance

Table 1 breaks down Quarter 3 complaints by complaint category over a 5 year period.

Table 1 Quarter 3 complaint category covering period 2016/17 – 2020/21

Complaint Category	Q3 16/17	Q3 17/18	Q3 18/19	Q3 19/20	Q3 20/21
Standard of Service	380	345	396	353	367
Policy Related	123	122	51	121	261
Employee Attitude	75	80	75	95	103
Poor Communication	74	56	74	83	84
Waiting Time	91	59	29	44	27
Missed Appointments	11	11	5	5	12
Total Complaints	**754**	**673**	**630**	**701**	**854**

The current service level of complaint performance varies across the council and is linked to the complexity and quantity of complaints received. Operational Services and Housing, Customer and Building Services (HCBS) are the main complaint generators by service, accounting for 78.3% (669) of all recorded complaints (854) in Quarter 3: 2020/21.

Further information on the main complaint categories is set out below:

- Standard of Service

    The majority of Standard of Service complaints have been generated by Operational Services (162) and HCBS (96) which account for 70.3% of all recorded complaints in

the category. The equivalent quarter in 2019/20, Operational Services (160) and HCBS (111) had a combined total of 271 complaints categorised as Standard of Service.

Of the 162 Operational Services Standard of Service complaints, Waste Services closed a total of 138 complaints. The majority of the complaints (113) were linked to bin collection issues.

- Policy

A total of 261 Policy related complaints were received by the council. This was a increase of 145 from the equivalent quarter in the previous year (121). Operational Services (207) and HCBS (22) account for 87.7% of all Policy complaints. Within Operational Services, Roads and Transportation received a total of 177 complaints of which 158 complaints related to the Spaces for People programme .

- Waiting Time

The main Waiting Time complaints generators are HCBS (26) which accounted for 96.3% of all Waiting Time complaints (27). There was a decrease of 17 Waiting Time complaints when compared to the equivalent quarter in the previous year.

- Poor Communication

In Q3 2020/21, 75% (63) of all Poor Communication complaints (84) were generated by HCBS (32) and Operational Services (31). The equivalent quarter in the previous year HCBS received 34 and Operational Services received 28 complaints.

- Employee Attitude

Employee Attitude complaints have been driven by Operational Services (37) and HCBS (44) which account for 78.6% (81) of all recorded complaints in this category. The equivalent quarter in 2019/20, Operational Services (37) and HCBS (29) had a combined total of 66 complaints categorised as Employee Attitude related.

Appendix 1 to the report provides the council wide performance against the SPSO defined measures covering the period Quarter 3: 2020/21 (October 2020 to December 2020).

D.3   Summary of Service Complaint Performance

The Complaint Steering Board identified 4 high level indicators that provided a summary of complaint handling performance.

The 4 indicators are:

1. Total complaints received
2. Complaints closed within 5 working days
3. Complaints closed within 20 working days
4. Complaints part upheld/upheld

Table 2 provides a summary of service performance against these 4 key indicators.

Table 2 Quarter 3: 2019/20 and 2020/21 service performance summary

Service	Total complaints		Complaints closed within 5 working days		Complaints closed within 20 working days		Complaints part upheld/ upheld	
	Q3 2019/20	Q3 2020/21	Q3 2019/20	Q3 2020/21	Q3 2019/20	Q3 2020/21	Q3 2019/20	Q3 2020/21
Corporate Services	4	3	66.7%	66.7%	0%	-	50%	33.3%
Education Service	92	109	80.8%	86.2%	85%	90.9%	35.9%	50.4%
Exec Office	4	2	-	-	100%	0%	0%	0%
Finance and Property Services	41	32	80%	87.1%	100%	100%	24.4%	15.7%
HCBS	242	228	89.9%	93.3%	78.9%	92.2%	38.5%	40.8%
Operational Services	276	441	80.5%	88.2%	85.7%	88.6%	24.3%	20.6%
PEDR	13	12	85.7%	75.0%	83.3%	50%	23.1%	25%
Social Policy	29	27	70%	33.3%	100%	50%	27.5%	70.3%
Total	**701**	**854**	**83.2%**	**87.4%**	**83.9%**	**85.4%**	**30.8%**	**31.3%**

Table 3 provides a service trend summary of closed complaints received by quarter covering Q3 2019/20 and Q3 2020/21.

A target of 85% is currently set for the percentage of complaints which must be dealt with within timescale. The council exceeded the processing targets for stage1 and stage 2 complaints over this quarter.

Table 3 Quarter 3 2019/20 to Q3 2020/21 service trend summary

Service	Q3 2019/20	Q4 2019/20	Q1 2020/21	Q2 2020/21	Q3 2020/21
Corporate Services	4	1	4	4	3
Education Service	92	65	14	57	109
Exec Office	4	1	6	0	2
Finance and Property Services	41	33	22	41	32
HCBS	242	228	85	230	228
Operational Services	276	451	204	397	441
PEDR	13	9	8	15	12
Social Policy	29	39	23	27	27
Total	**701**	**827**	**366**	**771**	**854**

Appendix 1 contains the complaint analysis covering Q3: 2020/21 by Service.

Table 4 provides a service trend summary of upheld/ part upheld complaints as a percentage of complaints received by quarter covering Q3 2019/20 to Q3 2020/21.

Table 4 Q3 2019/20 to Q3 2020/21 Service upheld/ part-upheld complaint performance

Service	Q3 2019/20	Q4 2019/20	Q1 2020/21	Q2 2020/21	Q3 2020/21
Corporate Services	50%	0%	50%	100%	33.3%
Education Service	35.9%	21.5%	42.8%	26.3%	50.4%
Exec Office	0%	0%	0%	-	0%
Finance and Property Services	24.4%	30.3%	22.7%	22%	15.7%
HCBS	38.5%	42.5%	21.1%	34.3%	40.8%
Operational Services	23.3%	15.3%	27%	30%	20.6%
PEDR	24.1%	22.2%	12.5%	26.7%	25%
Social Policy	27.5%	66.7%	56.5%	51.9%	70.3%
Total	**30.8%**	**26.4%**	**27.3%**	**31.6%**	**31.3%**

Across the council, 31.3% of all complaints received in Q3:2020/21 were upheld/ part upheld. Operational Services received the highest number of complaints across the council at 441. This is an increase of 165 when compared to the equivalent quarter in 2019/20. 20.6% of complaints received by Operation Services were upheld/ part upheld.

Table 5 provides indicative ratios for the number of complaints against the specific customer groups for Education Services, Housing, Customer and Building Services and Operation Services.

Table 5: Ratio of complaints to customer group (for main generators of complaints)

Service	Base unit (Q3 2020/21)	Q3 complaint volume	Complaint ratio
Education Services	30,000 pupils	109	1 complaint for every 275 pupils
HC&BS	13,169 council houses	228	1 complaint for every 58 council house
Operational Services	81,488 households	441	1 complaint for every 185 households

E.   **CONCLUSION**

The council has shown an increase in complaints linked to an increase within Operational Services and Education Services. Operational Services and HCBS continue to be the main complaint generators across this quarter.

All services continue to be committed to regular customer complaint analysis which informs service development activity and the improvement agenda.

F.   BACKGROUND REFERENCES

SPSO publishes the Model Complaints Handling Procedure (CHP) for the local government sector in Scotland.

1.   How to Handle Complaints (Model Complaints Handling Procedure)
2.   WLC Complaints Handling Procedure

Appendices/Attachments:
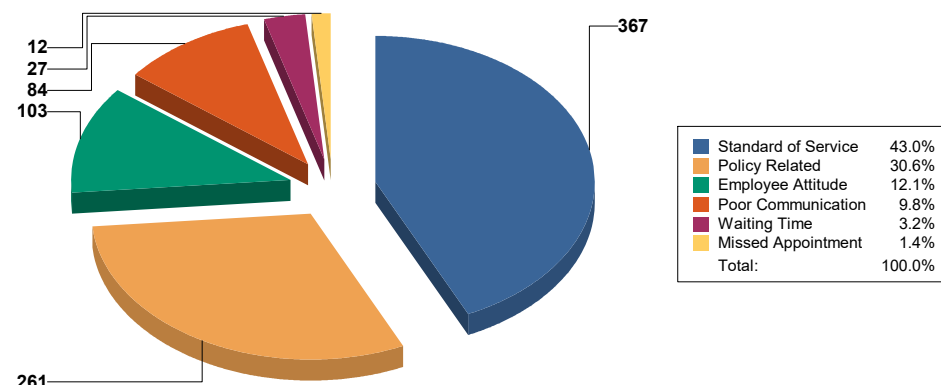Appendix 1 Council Wide Complaint Performance Q3 2020-21

Contact Person: Joe Murray
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Graeme Struthers
Depute Chief Executive
19 April 2021

CMT: Council Wide Complaints Performance - Q3 2020-21

Period: 01/10/2020 to 31/12/2020

This report summarises complaints closed within the period above for all services within Corporate Services. For the purpose of this report all timescales are based on working days and therefore excludes Saturday, Sunday and Public Holidays in the calculations.

	SPSO Performance Indicator	Number	%
1	Total number of complaints	854	
2	Complaints closed at Stage 1	717	84.0%
	Complaints closed at Stage 2	123	14.4%
	Complaints closed at Stage 2 after escalation	14	1.6%
3	Complaints UPHELD at Stage 1	142	19.8%
	Complaints NOT UPHELD at Stage 1	496	69.2%
	Complaints PART UPHELD at Stage 1	79	11.0%
	Complaints UPHELD at Stage 2	16	13.0%
	Complaints NOT UPHELD at Stage 2	83	67.5%
	Complaints PART UPHELD at Stage 2	24	19.5%
	Escalated complaints UPHELD at Stage 2	3	21.4%
	Excalated complaints NOT UPHELD at Stage 2	8	57.1%
	Escalated complaints PART UPHELD at Stage 2	3	21.4%
4	Average working days to respond to a Stage 1 complaint	3.9	Days: 2772
	Average working days to respond to a Stage 2 complaint	12.7	Days: 1563
	Average working days to respond to a Stage 2 after escalation	8.6	Days: 120
5	Complaints closed at Stage 1 within 5 working days	627	87.4%
	Complaints closed at Stage 2 within 20 working days	105	85.4%
	Complaints closed at Stage 2 within 20 working days after escalation	13	92.9%
6	Complaints closed at Stage 1 where an extension has been authorised	1	0.1%
	Complaints closed at Stage 2 where an extension has been authorised	1	0.8%

Number of Complaints by Reason

367
12
27
84
103
261

Standard of Service	43.0%
Policy Related	30.6%
Employee Attitude	12.1%
Poor Communication	9.8%
Waiting Time	3.2%
Missed Appointment	1.4%
Total:	100.0%

NB: The totals below include complaints resolved at Stage 1 and Stage 2 as well as complaints closed at Stage 1 then re-opened and handled as Stage 2 (escalated).

Percentage of all complaints resolved within timeline: 87.2%   (745)

Percentage of all complaints UPHELD: 18.9%   (161)

Percentage of all complaints NOT UPHELD: 68.7%   (587)

Percentage of all complaints PART UPHELD: 12.4%   (106)

Percentage with another or no outcome selected: 0.0%   (0)

Complaints Closed 2020/21
Number and cumulative per month
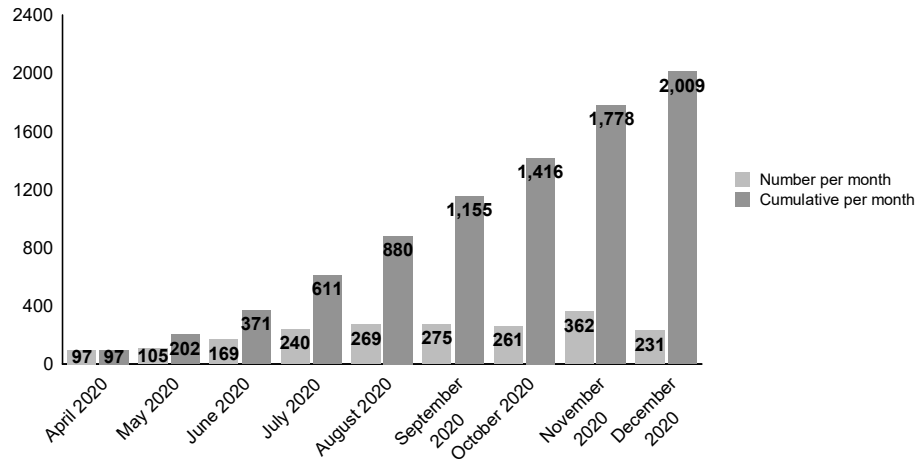
% Complaints closed within Timeline
% Stage 1 within 5 & Stage 2 within 20 working days by month
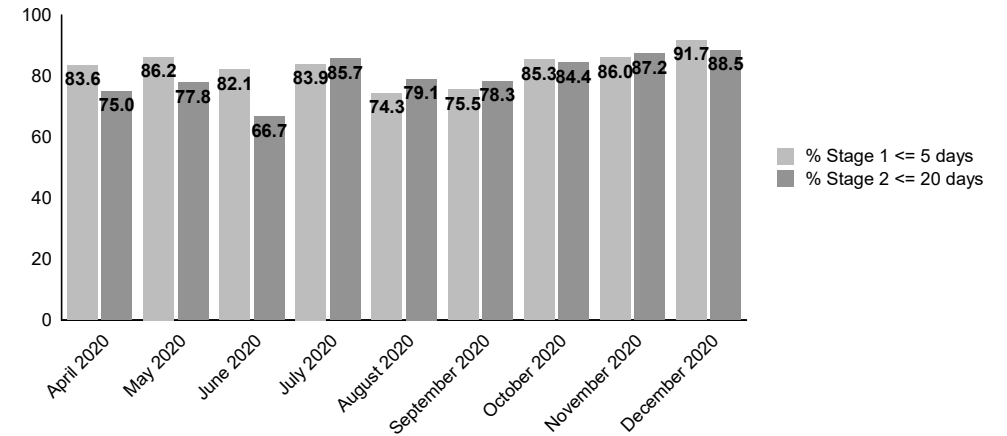
Stage 2 figures include complaints escalated from Stage 1 having been closed then re-opened

% of Total complaints Upheld & Part Upheld by month 2020/21
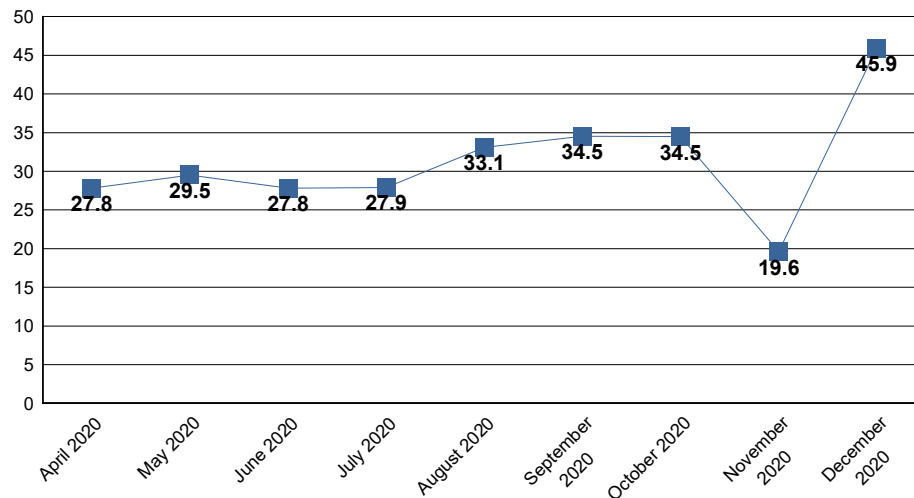
Table showing % of complaints closed within SLA at Stage 1 and Stage 2 cumulative by month

Month/Year	% Stage 1 Closed within 5 Days per month (cumulative)	% Stage 2 Closed within 20 Days per month (cumulative)
April 2020	83.6%	75.0%
May 2020	85.0%	76.2%
June 2020	83.6%	72.7%
July 2020	83.7%	77.2%
August 2020	80.8%	77.8%
September 2020	79.6%	77.9%
October 2020	80.6%	79.5%
November 2020	81.7%	80.7%
December 2020	82.9%	81.3%

NB - the Stage 2 cumulative figure includes escalated complaints (closed at Stage 1 then reopened as Stage 2).

Summary of Secondary Categorisation (Service reason for complaint)

	Total	STAGE 1			STAGE 2			Escalated		
		Upheld	Part Upheld	Not Upheld	Upheld	Part Upheld	Not Upheld	Upheld	Part Upheld	Not Upheld
Corporate Services	**3**		**1**	**2**						
Failure to reply	1		1							
Licensing - standard of service	1			1						
Policy related general	1			1						
Education	**109**	**46**	**5**	**36**	**2**	**2**	**18**			
Additional Support Needs	9			4	1		4			
Bullying - Pupil - Pupil	14	1		8			5			
Child Protection	5			3		1	1			
Communication	15	6	1	7		1				
Curriculum	41	36		2	1		2			
Data Protection	1			1						
Discipline	3	1		2						
Facilities	3			3						
Head Teacher	2						2			
Head Teacher & Staff	3		1				2			
Health & Safety	3	2	1							
Nursery Placement	2			1			1			
Office Staff	1			1						
Policy	1			1						
School Dress	2			2						
Teacher Attitude	4		2	1			1			
Executive Office	**2**						**2**			
Operational Services	2						2			
Finance & Property Services	**32**	**2**	**3**	**26**			**1**			
Claim/information processed incorrectly	11		1	10						
Employee attitude general	1			1						
Inaccurate advice/ information	1			1						
IT system failure	1			1						
Policy related general	1			1						
Poor communication general	2	1		1						
Recovery of debt	10		1	9						

Response time	1		1							
Standard of property/accommodation	1			1						
Standard of service general	3	1		1				1		
HC&BS	**228**	**37**	**31**	**96**	**7**	**12**	**32**	**3**	**3**	**7**
Call not answered	1			1						
Customer standards not met	25	3	4	9		3	3	1	1	1
Damages to property	8	2	1	4			1			
Driving/ parking issues	6	1		4					1	
Employee attitude general	28	4	3	10		3	6	1		1
Failed timescales	2	1		1						
Health & Safety	1			1						
Incorrect or conflicting advice	9	3	1	3			2			
Lack of communication	8	3		4				1		
Missed appointment general	8	1	3	1		1	1			1
No action / Ineffective action taken	7	1	3	2		1				
Policy related general	17	1		5	1		9			1
Poor communication general	18	3	2	8	2	1	2			
Procedure not followed	1	1								
Staff conduct/ attitude	10	2	4	1		1	2			
Standard of property/accommodation	8		2	2	1	2	1			
Standard of service general	31	2	2	20			4			3
Standard of workmanship	3	1	1	1						
System Issue	1				1					
Third party supplier	3	2							1	
Unreasonable delays	2	2								
Unresolved repair after visit	7	2		3	2					
Untidy work	4	2	2							
Waiting time general	20		3	16			1			
Operational Services	**441**	**49**	**32**	**325**	**4**	**6**	**25**			
Access Issues	9	1	1	7						
Accessibility Issues	3			3						
Assisted Bin Collections	11	7	3	1						
Bin Collection Issues Domestic	124	16	14	79	4	2	9			
Bin Contamination Issues	3			3						
Bin Deliveries/ Requests	1	1								
Bin/ Bulky Presentation Issues	3			2			1			

	Total							
Bin/Pick-Ups/Returns/Spillages	2		1	1				
Bulky Uplift Missed	1			1				
Bulky Uplift Policy Changes	1			1				
Council Policy & Legislation	5		2	3				
Covid19 - Policy Related	167			156		2	9	
Damage to Property	9	5	3	1				
Environmental Concerns	3	1		2				
Expectations Not Met	12	1	2	6		2	1	
External 3rd Party	11	1	1	9				
Health & Safety	3		1	2				
HWRC - Recycling Centre Issues	2			1			1	
Lack of Communication	3		1	2				
Lack of Consultation	2			1			1	
Noise Nuisance	1	1						
Parking Issues	2			1			1	
Poor Customer Service	5	4		1				
Poor or Agressive Driving	3			2			1	
Road Works	6			6				
Road/ Path Defects	3			3				
Service Standards	17	1		16				
Staff Conduct / Attitude	15	7	3	4			1	
Street Lighting Faults	2	1		1				
Unreasonable Delays	1			1				
Weather Related Delays	1	1						
Winter Maintenance Policies	10	1		9				
Planning Econ Dev Regen	**12**	**1**	**2**	**5**			**4**	
Incorrect / incomplete advice	1			1				
Lack of communication	1		1					
Pest Control- standard of service	1			1				
Policy related general	5			1			4	
Standard of service general	2		1	1				
Unreasonable delays	1	1						
Waiting time general	1			1				
Social Policy	**27**	**7**	**5**	**6**	**3**	**4**	**1**	**1**
Employee attitude general	9	1	3	3		1	1	

Appendix 2

	Total						
Non-residential Financial Contributions	2	1			1		
Policy related general	2				1	1	
Poor communication general	3	1		1	1		
Standard of service general	9	2	2	2	2		1
Unprofessional conduct	2	2					

NB - the categorisation "Z_unknown" relates to cases that were completed prior to the inclusion of the secondary category field.

Open Complaints by Service

The table below provides the number of complaints open by Service and month/financial year created (to the end of the reporting period). Note that month and financial year is taken from the Stage 1 or Stage 2 task creation date.

NB - if a complaint is closed and reopened then this will show as open under the original month/financial year it was created in the system.

	Total	2020/2021			
		August	September	November	December
Total	21	1	1	1	18
Corporate Services	1				1
Education	7		1		6
Housing Customer & Building Services	5			1	4
Operational Services	2	1			1
Planning Economic Development & Regenerati	2				2
Social Policy	4				4