



Performance Committee

West Lothian Civic Centre
Howden South Road
LIVINGSTON
EH54 6FF

1 June 2021

A meeting of the **Performance Committee** of West Lothian Council will be held within the **Webex Virtual Meeting Room** on **Monday 7 June 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 Minutes of Meeting of Performance Committee held on Monday 19 April 2021 (herewith)
5. Social Policy - Children and Families - Report by Head of Social Policy (herewith)
6. Education Services: Learning Policy and Performance - Report by Head of Education (Learning, Policy and Resources) (herewith)
7. Complaint Performance Report 2020/21 - Report by Deputy Chief Executive (herewith)

DATA LABEL: Public

NOTE **For further information please contact Anastasia Dragona on tel. no. 01506 281601 or email anastasia.dragona@westlothian.gov.uk**

CODE OF CONDUCT AND DECLARATIONS OF INTEREST

This form is to help members. It is not a substitute for declaring interests at the meeting.

Members should look at every item and consider if they have an interest. If members have an interest they must consider if they have to declare it. If members declare an interest they must consider if they have to withdraw.

NAME	MEETING	DATE

AGENDA ITEM NO.	FINANCIAL (F) OR NON- FINANCIAL INTEREST (NF)	DETAIL ON THE REASON FOR YOUR DECLARATION (e.g. I am Chairperson of the Association)	REMAIN OR WITHDRAW

The objective test is whether a member of the public, with knowledge of the relevant facts, would reasonably regard the interest as so significant that it is likely to prejudice your discussion or decision making in your role as a councillor.

Other key terminology appears on the reverse.

If you require assistance, please ask as early as possible. Contact Julie Whitelaw, Monitoring Officer, 01506 281626, julie.whitelaw@westlothian.gov.uk, James Millar, Governance Manager, 01506 281695, james.millar@westlothian.gov.uk, Carol Johnston, Chief Solicitor, 01506 281626, carol.johnston@westlothian.gov.uk, Committee Services Team, 01506 281604, 01506 281621 committee.services@westlothian.gov.uk

SUMMARY OF KEY TERMINOLOGY FROM REVISED CODE

The objective test

“...whether a member of the public, with knowledge of the relevant facts, would reasonably regard the interest as so significant that it is likely to prejudice your discussion or decision making in your role as a councillor”

The General Exclusions

- As a council tax payer or rate payer or in relation to the council's public services which are offered to the public generally, as a recipient or non-recipient of those services
- In relation to setting the council tax.
- In relation to matters affecting councillors' remuneration, allowances, expenses, support services and pension.
- As a council house tenant, unless the matter is solely or mainly about your own tenancy, or you are in arrears of rent.

Particular Dispensations

- As a member of an outside body, either appointed by the council or later approved by the council
- Specific dispensation granted by Standards Commission
- Applies to positions on certain other public bodies (IJB, SEStran, City Region Deal)
- Allows participation, usually requires declaration but not always
- Does not apply to quasi-judicial or regulatory business

The Specific Exclusions

- As a member of an outside body, either appointed by the council or later approved by the council
- The position must be registered by you
- Not all outside bodies are covered and you should take advice if you are in any doubt.
- Allows participation, always requires declaration
- Does not apply to quasi-judicial or regulatory business

Categories of “other persons” for financial and non-financial interests of other people

- Spouse, a civil partner or a cohabitee
- Close relative, close friend or close associate
- Employer or a partner in a firm
- A body (or subsidiary or parent of a body) in which you are a remunerated member or director
- Someone from whom you have received a registrable gift or registrable hospitality
- Someone from whom you have received registrable election expenses

MINUTE of MEETING of the PERFORMANCE COMMITTEE held within WEBEX VIRTUAL MEETING, on 19 APRIL 2021.

Present – Councillors Stuart Borrowman (Chair), Andrew McGuire, Charles Kennedy and 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 1 February 2021, subject to amending the wording of the decision under item 3 (*Service Performance and WLAM Outcome Report – Legal Services*) to clarify that Councillor Charles Kennedy had suggested quarterly meetings in relation to the Development Management Committee.

3 SOCIAL POLICY - COMMUNITY CARE

The committee considered a report (copies of which had been circulated) by the Head of Social Policy providing 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.

It was recommended that the committee:

1. Note the contents of the report and appendix;
2. Provide feedback on Community Care service performance; and
3. Identify any recommendations for performance improvement.

Discussion followed the presentation of the report focusing on the service's response to the pandemic and any lessons learned as a result.

It was advised that existing emergency plans had been deployed and the service had been mobilised quickly, while infection control measures continued to improve and evolve during the pandemic. It was recognised that there was duplication of information gathering by the various partners involved in the response, and redesign and digitalisation of some processes were being considered as a result. Virtual engagement with stakeholders was also thought to be beneficial and would continue in future.

Officers then explained that the amber performance indicator relating to

Older People service users waiting to be assessed was a result of continual redeployment of resources due to Covid and that further investment in resources was planned.

With regard to transferring patients from hospitals to care homes, it was clarified that the service had been compliant with government guidance.

The committee queried the impact of the situation on staff and it was confirmed that the vast majority had coped well. Staff had also been made aware of the various support avenues available to them. In addition, transition to duties for shielding staff would take place gradually and on a case-by-case basis.

Finally, the committee thanked Social Policy managers, teams and contractors for their work during the pandemic.

Decision

To note the terms of the report.

4 SERVICE PERFORMANCE 2020/21 REPORT – IT SERVICES

The committee considered a report (copies of which had been circulated) by the Head of Service providing an overview of the service performance during the financial year 2021/21 as well as providing information on the impact of the COVID-19 pandemic on the service, specifically the challenges that had been overcome and some of the key achievements in the last 12 months.

It was recommended that the committee:

1. Note the performance of the IT Service in 2020/21;
2. Note the recent WLAM review panel outcome; and
3. Agree any other recommendations that might improve the performance of the service.

In the discussion that followed, officers clarified that various contributing factors were involved in connectivity issues during virtual meetings; communications with users would be maximised to ensure all options available to join virtual meetings were known. It was noted that the service was continually evolving and adapting to customer needs and infrastructure was in place to support and enable the council's interaction with customers.

Decision

To note the terms of the report.

5 COMPLAINT PERFORMANCE REPORT QUARTER 3: 2020/21

The committee considered a report (copies of which had been circulated) by the Depute Chief Executive presenting the quarterly analysis of closed complaints in Quarter 3: 2020/21.

It was recommended that the committee:

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

During discussion, it was noted that clarity to the public was required regarding the definition of a complaint in council terms and officers indicated that with the revised Complaint Handling Procedure, any complaint raised through official council social media channels would require the service to signpost the complainant to the Complaint Handling Procedure (webpage) to log their complaint.

Decision

To note the terms of the report.

DATA LABEL: PUBLIC



PERFORMANCE COMMITTEE

SOCIAL POLICY – CHILDREN AND FAMILIES

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 Children and Family services during the COVID-19 global pandemic 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 Children and Families service performance; and
3. Identifies any recommendations for performance improvement.

C. SUMMARY OF IMPLICATIONS

I Council Values	<ul style="list-style-type: none">– 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 Children and Families services.
V Relevance to Single Outcome Agreement	Children and Families services have a suite on performance indicators in place which support the outcomes in the Single Outcome Agreement

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

D. TERMS OF REPORT

D.1 Background

Children and Families is a core area in Social Policy, comprising a wide range of services providing interventions for vulnerable children and their families. The services provided include; Sure Start, Parenting Team, Mental Health and Wellbeing team, school Attendance Improvement Service (AIMS), Child Disability Service, Whole Family Support Service, Child Care and Protection Teams, Duty and Child Protection Team, Inclusion and Aftercare Service, Family Placement Team, Residential Child Care Houses, Children's Rights, Reviewing Officer Team, Domestic and Sexual Assault Team (DASAT), Social Care Emergency Team (SCET) and Public Protection lead officers. The service provides support from pre-birth to age 26 for those who have experienced care.

Children and Families services operate within a context of significant challenge, in terms of the increasing demand and constrained public finances and it is recognised that transformational change is required to ensure that vulnerable children and young people and their families continue to access high quality services that meet their needs.

The main aim of the service is to ensure that children, young people and their families can maximise their potential through the identification of additional supports. This includes disabled children, young people and their families. We are committed to providing services that are child-centred, developed in partnership with other organisations and with families themselves, that tackle inequalities and are focused on improving outcomes for children. These aims are in line with Getting It Right For Every Child (GIRFEC) principles. We are committed to providing help that is appropriate, proportionate and timely to ensure children and young people have the best start to their lives building on family strengths and promoting resilience. Our service is focused on keeping children safe and teams also provide support through statutory intervention, looked after children services and child protection interventions when these are needed. The service is focussed on minimising the impact of child poverty wherever possible.

In addition to a focus on providing early help and action to prevent difficulties escalating, the service is committed to shifting the balance of care. This means providing support to families and the wider family network to enable them to safely continue to care for children and young people in challenging circumstances. This also means where children or young people require to be accommodated away from home that more use is made of community based resources with less reliance on residential care and far from home placements.

We aim to deliver quality, appropriate and accessible services to meet current demand and also to anticipate and identify future needs and expectations.

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 Children and Families 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:

- **Childcare and Protection**
 - Child Care and Protection Practice Teams, including Throughcare
 - Child Disability Service
- **Residential and Placement Services**
 - Services for Looked After Children – Residential Houses and Family Placement
 - Domestic and Sexual Assault Team (DASAT)
 - Public Protection Lead Officers
- **Child and Family Support**
 - Whole Family Support and Crisis and Intensive Support services
 - Social Care Emergency Team (SCET)
 - Inclusion and Support Service
 - Reviewing Officers Team

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

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 children, young people and their families.

Throughout this year, Children and Families has worked closely with our stakeholders, in particular, our partners in the Third and Independent Sectors, but also with children, young people and their families and carers 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 key 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.

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

Families caring for their children affected by significant and complex disabilities experienced significant pressures as many of the usual routes for providing breaks from caring and support for them were reduced as a result of COVID-19. Alternative supports were developed and an outreach service delivered jointly by Social Policy and Education to provide respite for these families. In addition, a respite resource at Inveralmond Community High School was developed to enable carers of children with disabilities to have a break from caring.

For those children with complex additional support needs, a Hub operated throughout the period of lockdown. This was open for children with additional support needs who also had keyworker parents.

Social Policy and Education staff worked together to prepare for children returning to school. Systems were put in place to manage anticipated increases in referrals to ensure children and their families received appropriate and timely support

Detailed temporary guidance concerning public protection processes was put in place to ensure that risk and need were identified and plans developed to mitigate risk. There were frequent meetings of the West Lothian Chief Officers Group convened with reporting to provide assurance as to the provision of protection services during the pandemic. Social media messaging was used to promote information for the public about who to contact in relation to any public protection concerns. In the initial stages of the lockdown, the decision to place a child's name on the child protection register was made by the IRD participants and then moved to case conferences taking place virtually with arrangements in place to ensure families are able to participate.

There was a sharp focus on levels of domestic abuse being experienced by women and children during lock down and the Domestic and Sexual Assault Team (DASAT) saw an increased level of referrals throughout the period. Service was provided in response to this.

Social Policy took a lead role in the provision of support to some of the most vulnerable children and their families in West Lothian. Working in partnership with key third sector providers, weekly support sessions in two 'Safe Space' resources were established in Livingston and Bathgate. Hot meals were delivered to our most vulnerable care leavers through a partnership between the Aftercare team, The Larder, Who Cares (Scotland) and Livingston Football Club. Letham House, a resource temporarily closed, was used as a space for young people to go with a worker and spend some time outwith their family when that is necessary.

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 in particular for children, young people and their families. 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

The most vulnerable children continued to be seen in line with appropriate guidance.

Performance in relation to contact being made with children subject to child protection plans, other multi agency plans and those in receipt of aftercare were reported weekly to Scottish Government and performance was strong.

D.6 Performance Management

The performance of services for Children and Families is measured through a suite of performance indicators 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 Social Policy PDSP.

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

The Children and Families 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 Children and Families services (Appendix 1) demonstrate that the service has maintained a high standard of provision.

We were able to maintain our strategic aim of shifting the balance of care away from residential settings to community-based placements and we saw a reduction in the number of looked after children and young people as services worked to ensure that, where possible, children were supported to stay within their family setting. We also saw an increase in the number of people who access our services indicating that they would prefer to be contacted through digital means and will capitalise on the going forward. Referrals to the Domestic and Sexual Assault Team saw an increase in the number of referrals received from 1,599 in 2019/20 to 1,843 in 2020/21, this is consistent with the experience across Scotland. In general Children and Families services in West Lothian were able to maintain customer satisfaction levels at the rate as prior to the pandemic.

E. CONCLUSION

In 2020/21, Children and Families services has faced an unprecedented level of challenge to deliver essential services to children, young people and their families 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 partners in Education, Housing and Health 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 – Children and Families Performance Indicators
Appendix 2 – Management Plan Extract

Contact Person: Susan Mitchell,
Senior Manager, Children's Services
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Email: Susan.Mitchell@westlothian.gov.uk

Tim Ward
Senior Manager, Justice and Looked After Children
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Email: Tim.Ward@westlothian.gov.uk

Jo MacPherson
Head of Social Policy

Date of Meeting: 7th June 2021

APPENDIX 2

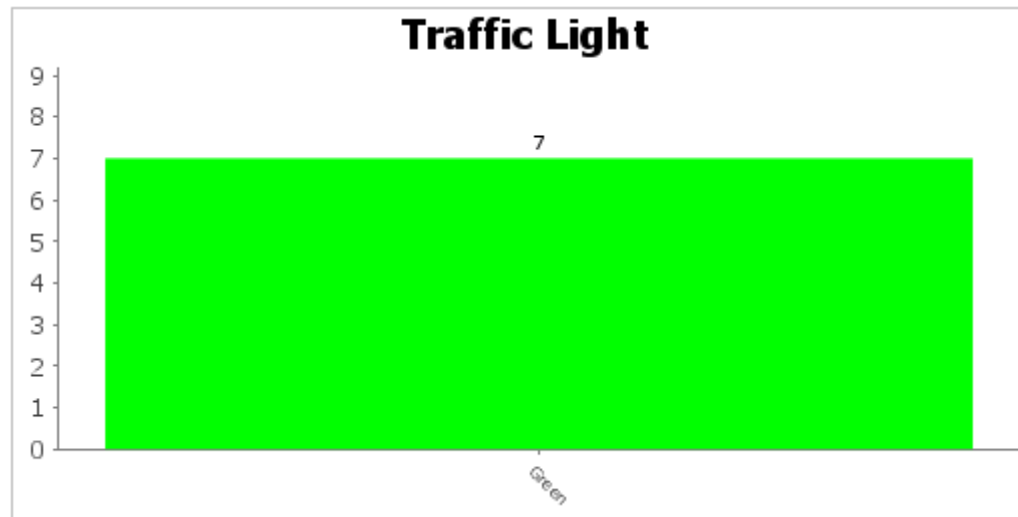
Children and Families Performance Committee report

Children and Families Strategic Planning Group Performance Report

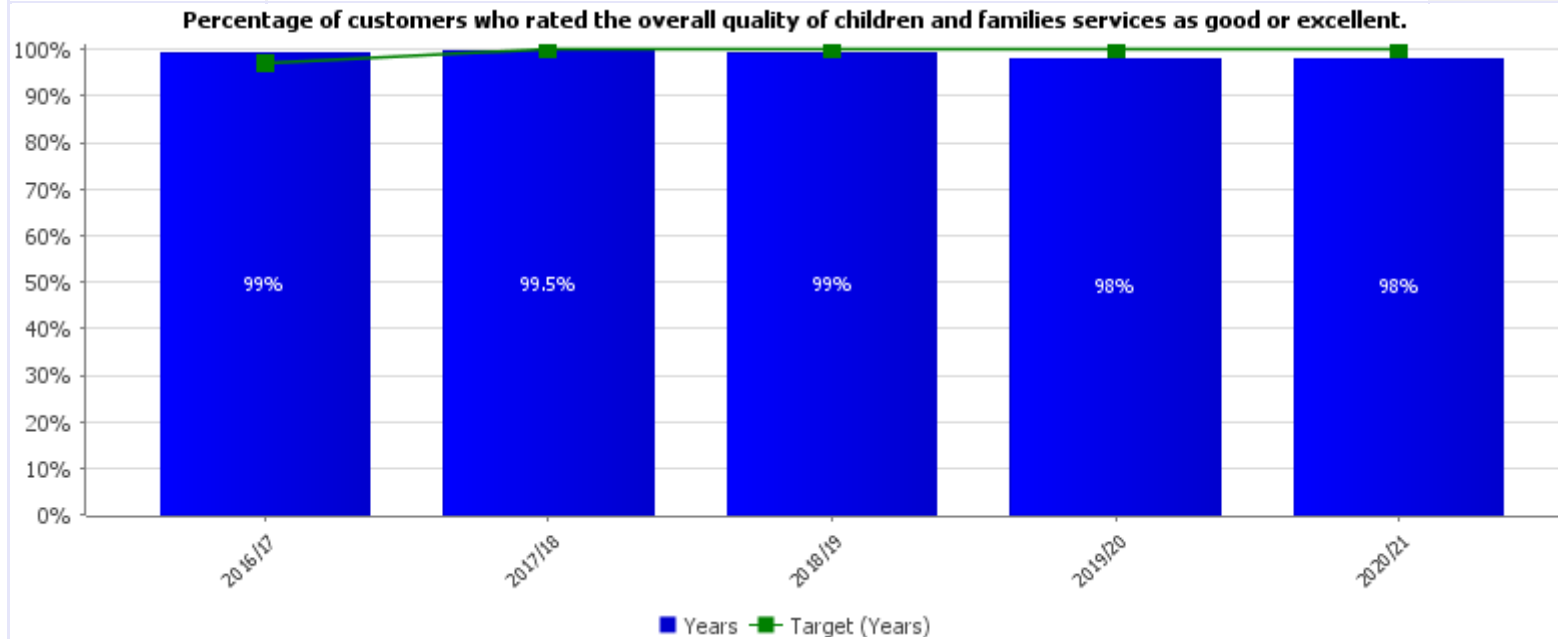
Report Author: Fiona Key

Generated on: 27 May 2021 14:49

Report Layout: .PDSP_PIs_All_For Committee_Grid



PI Code & Short Name	P:SPCF001_6a.7 Percentage of customers who rated the overall quality of children and families services as good or excellent.	PI Owner	zSPCF_PIAAdmin; Tim Ward
Description	Percentage of customers who responded to the children and families annual survey who rated the overall quality of the service as good or excellent. Key customer groups asked to participate in the survey are children and families with additional needs, Looked After Children and children and families with disabilities. The survey is carried out using a number of methods including paper, electronic and telephone surveys. Results are analysed closely to identify potential areas for improvement.	Traffic Light Icon	🟢
		Current Value	98%
		Current Target	100%



Trend Chart Commentary:

There is a consistent overall positive trend in the percentage of customers who responded to annual surveys who expressed that they felt the overall quality of service was good or excellent and this has remained at 95% or higher since 2014-15. This is attributable to an increased focus on listening to customer feedback and adopting a more customer focused approach to service delivery.

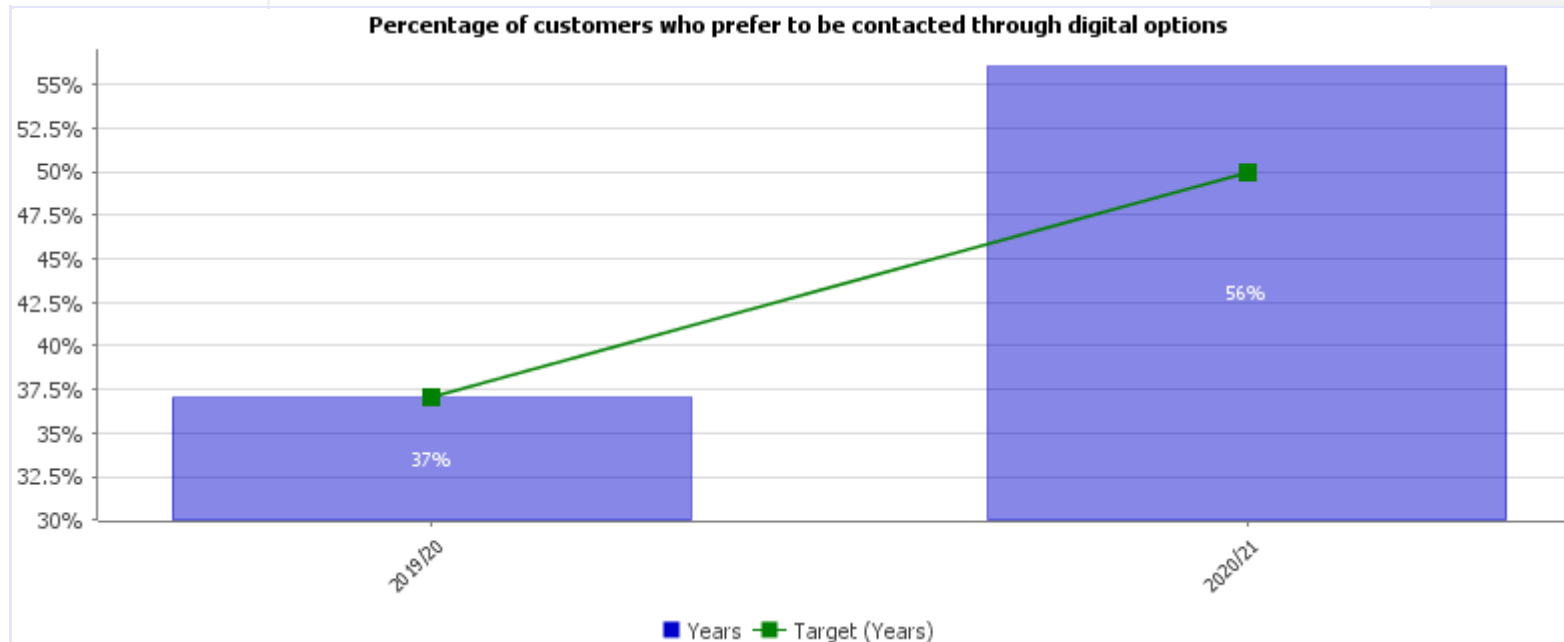
The most recent result in 2020-21 was 98% with 113 from 115 providing a response. 2019-20 was 98%, which continues the strong performance from 2018-19, when the result was 99%.

The trend since 2016-17 has been positive. This is in the context of services being delivered more remotely due to the global pandemic

The service intends to embed customer surveys and engagement more in light of implementing the findings of the national child care review, 'the Promise'.

The target for 2020-21 will remain at 100% to ensure that the service remains focused on providing the highest quality service.

PI Code & Short Name	SPCF012_6a.9b Percentage of customers who prefer to be contacted through digital options	PI Owner	zSPCF_PIAAdmin; Stephen Forrest; Susan McKenzie; Susan Mitchell; Tim Ward
Description	This performance indicator measures the percentage of customers that prefer to be contacted through digital options. Collected as part of our annual survey, customers are asked to how would they prefer to be contacted. This question has been introduced to understand the customers' needs and preference in communication with the service.	Traffic Light Icon	🟢
		Current Value	56%
		Current Target	50%

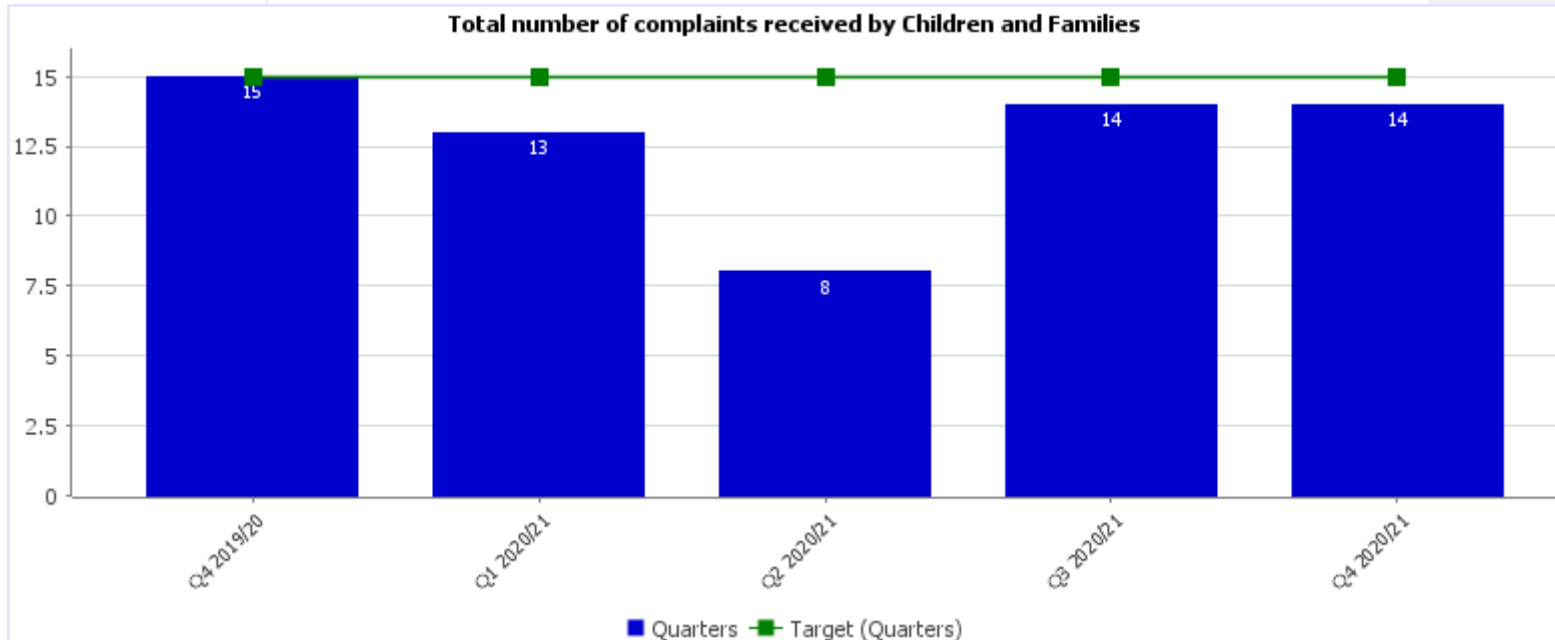


Trend Chart Commentary:

This performance indicator was new for 2019/20. The performance in 2019/20 was 37%. The number of respondents to this question was particularly high; 366 people responded to the question. Digital options include; email; social media; service portal. 136 (37%) preferred method was still face to face or phone call.

The target for 2020/21 will be set at 50% in order to challenge the service to improve in these areas and improve digital options for clients.

PI Code & Short Name	P:SPCF040_6b.3 Total number of complaints received by Children and Families	PI Owner	zSPCF_PIAAdmin; Susan McKenzie; Susan Mitchell; Tim Ward
Description	This indicator measures the total number of complaints received by Children and Families. This data is recorded on the Council's Customer Relationship Management system. It is the total number of complaints received by Children and Families 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). This data is used to understand how well we are delivering our services and where there are opportunities for us to make any improvements.	Traffic Light Icon	🟢
		Current Value	14
		Current Target	15



Trend Chart Commentary:

The vast majority of complaints relate to child care and protection and are related to dissatisfaction with decision making and attitude of staff. This is frequently because staff have to deal with challenging behaviour and passing on difficult messages. More recently some issues have arisen relating to accuracy of information which has now been addressed.

In 2020/21 there were 13 in Q1, in Q2 there were 8 and 14 in Q3, with 14 again in Q4 which is still within the current target of 15.

The number of complaints fluctuates but in quarter 4 of 2018-19 there were 7 complaints overall, the same as quarter 3. In quarter 1 of 2019-20 this increased to 11. This is still some way short of the notional target set.

There were 45 complaints overall in 2018-19.

In quarter 1 of 2017-18 there were 14 complaints received. In quarter two this reduced to 10 and increased slightly to 11 in quarter 3. In quarter 4 there was a significant jump to 23; there was no significant event, or trend that appeared to have influenced this rise in the number of complaints for that quarter. By quarter 1 of 2018-19 complaints had reduced to 13. By quarter 3 of 2018-19 the number of complaints had reduced to 7. Explanations are being sought as to why the numbers have reduced. The numbers were also down in other areas the service benchmarks against.

Work will be undertaken to better understand these variations through benchmarking with Community Care and Criminal and Youth Justice.

Volume in these areas is as follows for quarter 1 of 2019-20

Children and families - 11

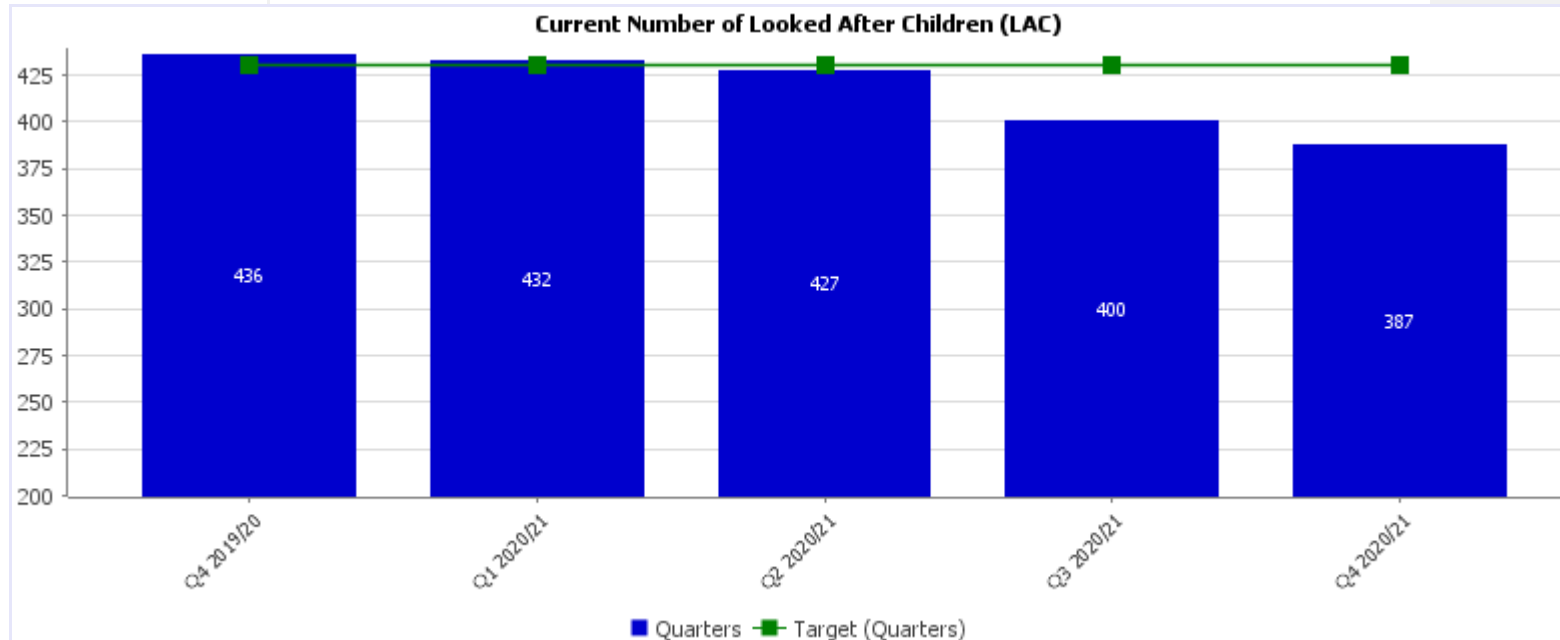
Community Care - 15

Criminal and Youth Justice - 1

Social Policy - 27

The target for 2019/20 is 15 per quarter, although this is hard to gauge due to the nature of service delivered.

PI Code & Short Name	P:SPCF090_9b.1b Current Number of Looked After Children (LAC)	PI Owner	zSPCF_PIAAdmin; Susan McKenzie; Susan Mitchell; Tim Ward
Description	This is a quarterly snapshot of the current and total number of Looked After Children in West Lothian. This included children who are Looked After at home and away from home by the Local Authority under the provisions of the Children (Scotland) Act 1995. This information is collected as part of our everyday work and recorded on our Social Policy case management system. This indicator is meaningful as the results give an indication of the effectiveness of our work and can be analysed to identify improvements to the way the service is delivered to customers.	Traffic Light Icon	🟢
		Current Value	387
		Current Target	430



Trend Chart Commentary:

This is a needs led and fluctuating service controlled to a certain extent by measures imposed by the Childrens Hearing System. Targets are based on Annual Children Looked After Statistics (CLAS Returns).

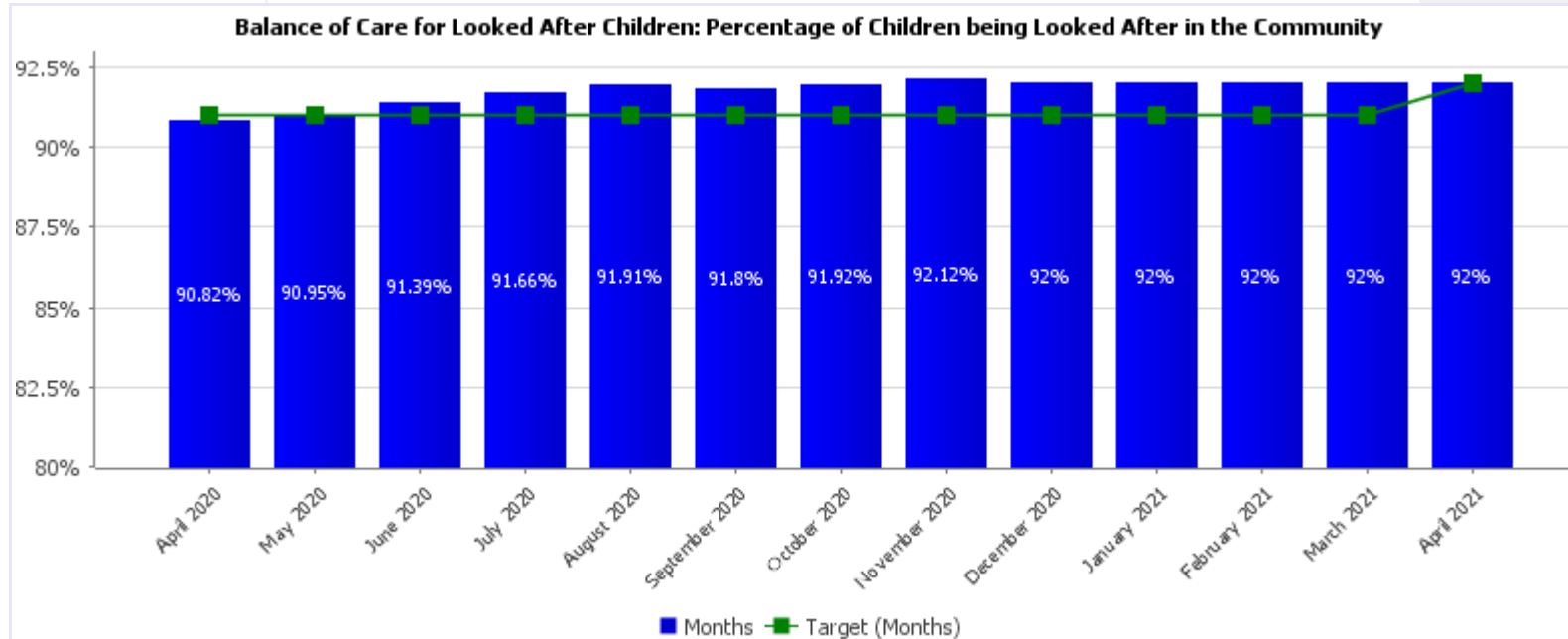
At the end of quarter 2 of 2020-21 there were 427 Looked after children. By the end of quarter 3 there were 400 and quarter 4 there were 387. This constitutes a significant drop and work is underway to better understand the causes of this.

In 2019, West Lothian had 1.1% of the 0-17 population that were looked after. remaining the same as 2018.

There is now national benchmarking data which shows the number of looked after children per 1000 of the child population aged 0-17. The service intends to develop this as a benchmarking indicator as we can measure West Lothian services against Scotland as a whole and also against other local authorities. (SPCF090)
This figure can be very variable and unpredictable due to decisions being made by the Childrens Panel.

The 2020-21 target is set at 430 to reflect the trend over the last 12 months.

PI Code & Short Name	SPCF096_9b Balance of Care for Looked After Children: Percentage of Children being Looked After in the Community	PI Owner	zAdmin_SCHN; Susan McKenzie; Susan Mitchell; Tim Ward
Description	<p>This Indicator is helpful because it helps ensure that Children's Services monitor this key aim. As a service we are aiming to ensure there is a shift in the balance of care away from residential and towards community based placements. Community placements include children looked after at home, kinship care and fostering. Residential include residential schools, residential provision of other kinds (internal and external) and secure care.</p> <p>Monitoring this information enable the service to ensure services are developed appropriately and inform the councils Corporate Parenting Report and Plan, developed annually. It will also inform our progression of the national care review.</p>	Traffic Light Icon	✓
		Current Value	92%
		Current Target	92%



This is a newly developed indicator building on the LGBF annual indicator that exists. By monitoring this figure monthly it allows for a much more up to date view of this key strategic aim.

Historically the service has not managed to make much impact on the 90% figure, however the long-term trend, which can be seen on the chart, is for a very slight increase in the percentage of those looked after in the community.

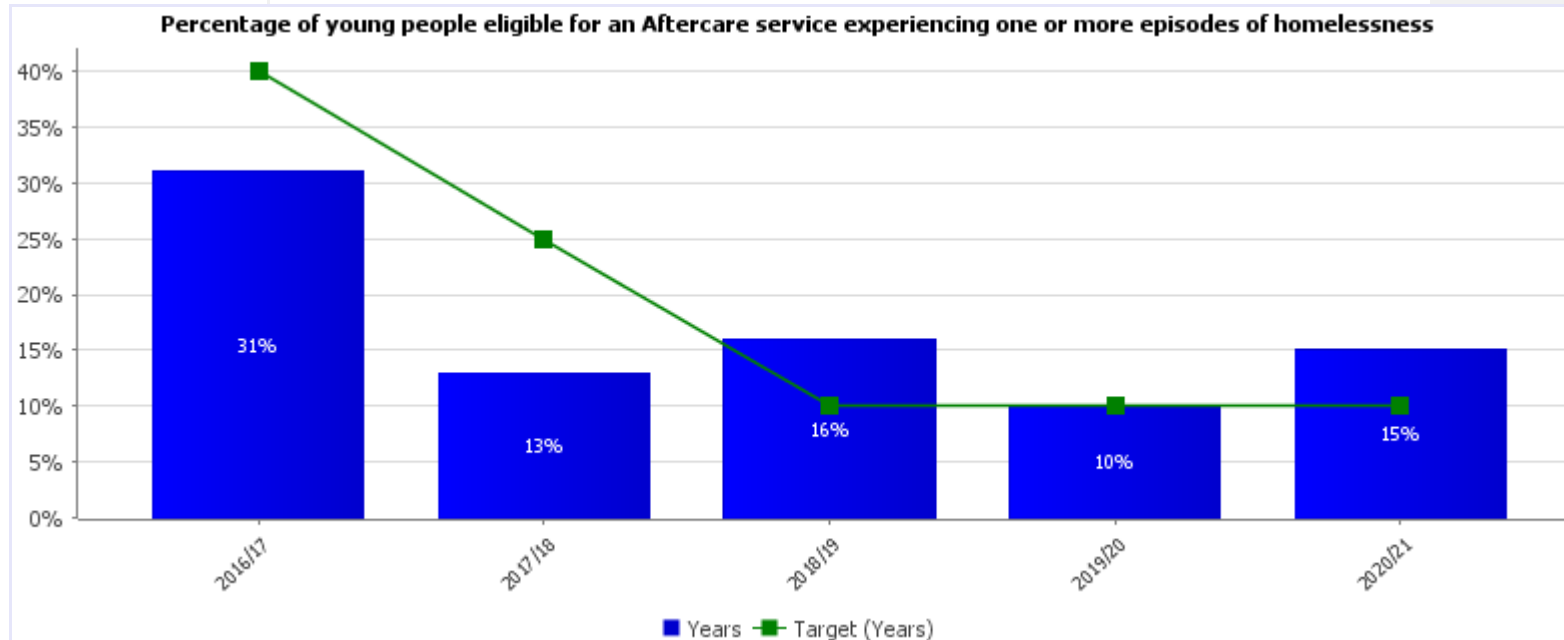
In recent months there has been a reduction in residential beds in our internal provision which has had a positive impact. There is a need to impact on costly external provision which will be a focus.

In August 2020 the figure was 91.91% with 398 of 433 Looked after children being in the community., an improvement from July 2020 when the figure was 91.66%. The variation into September and October 2020 was minimal, with a slight reduction to 91.8% in September and 90.9% in October. The performance has continued to be very strong, with the result in December 2020 and January, February 2021 being 92%.

Strategically the aim is now to push the balance nearer to 95% which will mean a reduction in the number of residential placements in residential schools and other residential provision.

The target of 91% has not yet been met consistently so should remain at that level until such time as it can be stretched further.

PI Code & Short Name	CP:SPCF124_9b.1c Percentage of young people eligible for an Aftercare service experiencing one or more episodes of homelessness	PI Owner	zSPCF_PIAAdmin; Susan McKenzie; Susan Mitchell; Tim Ward
Description	This performance indicator is part of the performance scorecard for the council's Corporate Plan 2018/23 and will contribute to priority 2 delivering positive outcomes and early interventions for early years. Previously Looked After Children who are entitled to Aftercare services can be vulnerable and experience poor outcomes. It is important to avoid young people becoming homeless as this can cause further instability. This indicator will measure how effective the Aftercare service are in supporting young people maintain and meet their accommodation needs.	Traffic Light Icon	🟢
		Current Value	15%
		Current Target	10%



Trend Chart Commentary:

The target for this performance indicator is to achieve 0% by 2022/23, and this was set in the development of the council's Corporate Plan.

This is an important indicator in that it is a measure of good outcomes for young people who have previously been Looked After. Appropriate housing is important for young people for ongoing stability in their lives.

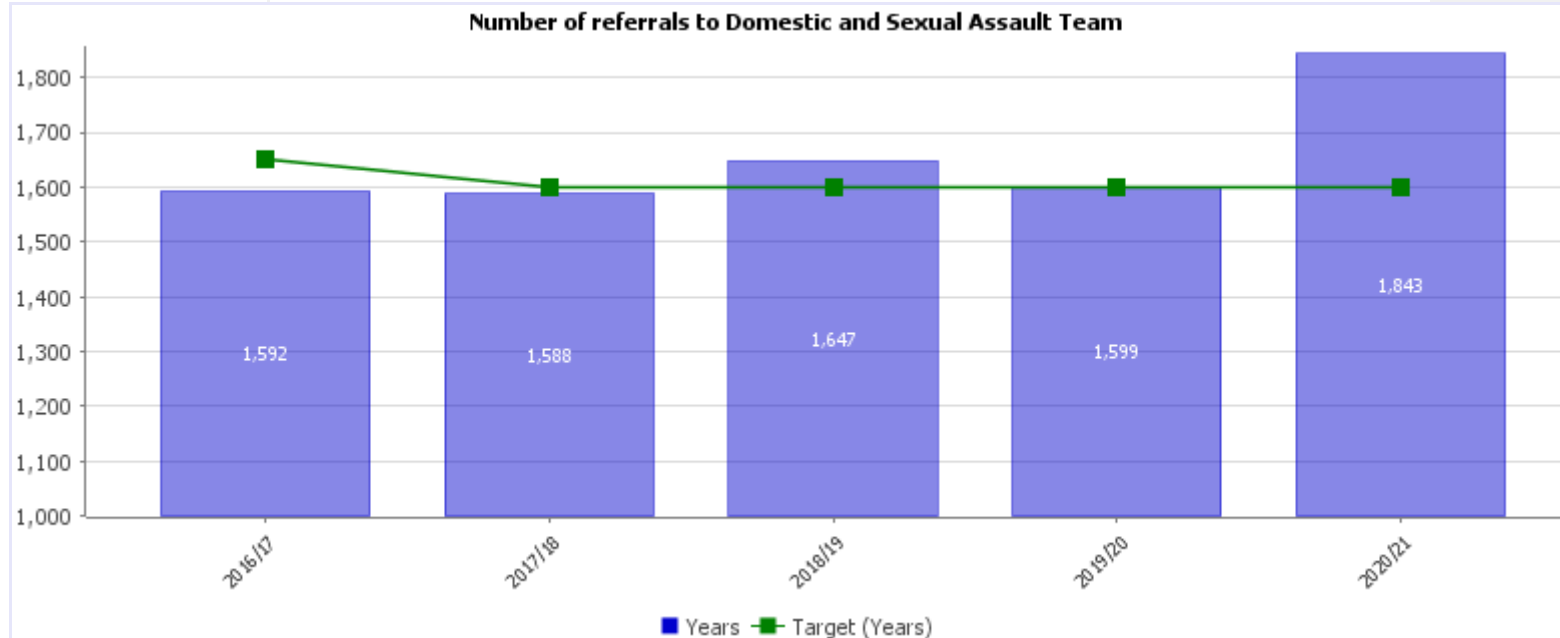
2020-21 was challenging due to the pandemic with severe restrictions on housing supply. As a consequence there was a dip in performance to 15% with 49 from 332 experiencing homelessness. Whilst this is disappointing, it is hoped a return to previous performance will be achieved.

Data for 2019-20 shows that 10%, 33 from 333 eligible for Aftercare had experienced at least one episode of homelessness. This is a continuing positive trend and helped by close working between Housing and Social Policy. This is an improvement from 16% in 2018-19. In 2011-12 the figure was 44% and in 2015-16 it was 45% so the performance is encouraging.

Work is being undertaken with Housing, Customer and Building services to ensure a strong focus on vulnerable young people, particularly care leavers. The Corporate Parenting Plan has this as a key priority for focus during the coming year. 2020-21 data will be available in March 2022.

The target for 2021-22 will remain at 10% in order to encourage further improvement.

PI Code & Short Name	SPPPVAWG_009 Number of referrals to Domestic and Sexual Assault Team	PI Owner	zSPCJ_PIAAdmin; Susan McKenzie; Susan Mitchell; Tim Ward
Description	This is an indicator of the level of demand placed on all services within the Domestic and Sexual Assault Team.	Traffic Light Icon	🟢
		Current Value	1,843
		Current Target	1,600



The Domestic and Sexual Assault Team (DASAT) is the core service supporting women and children who are affected by domestic abuse and sexual violence.

2020-21 saw a considerable increase in the number of referrals from 1,599 in 2019-20 to 1,843 in 2020-21. This was significantly impacted by individuals experiencing heightened levels of domestic abuse as a consequence of Covid-19. As families were locked down together without normal activity that may have acted as a release and with the added pressure of men working at home or furloughed, referrals were received from atypical sources and communities.

The service has changed its approaches to deal with demand with less physical face to face support and more remote and/or telephone support provided.

2018-19 saw an increase overall to 1,647, referrals for the Children's service and women's duty service was particularly high. In 2019-20, there was a slight reduction to 1599 referrals.

In 2017-18 there were 1,588 referrals, down very slightly from the previous year.

The services provided are Court advocacy, Women's Service, Children's service, Almond Project, Living in Safe Accommodation (LISA), Sexual Violence Service and Open Secret counselling. The target for 2021-22 will increase to 1,950 in anticipation that referrals may increase further as more people come forward for support after lengthy periods in abusive situations.

Children and Families

Service manager: Susan Mitchell and Tim Ward, Senior Managers

Number of staff: 297.9 (full time equivalents)

Location: Civic Centre and various locations

Purpose

The Children and Families service comprises a wide range of teams providing interventions for children and their families experiencing a need for support.

The service includes the following teams: Sure Start, Parenting Team, Mental Health and Wellbeing team, school Attendance Improvement Service (AIMS), Child Disability Service, Whole Family Support Service, Child Care and Protection Teams, Duty and Child Protection Team, Inclusion and Aftercare Service, Family Placement Team, Residential Child Care Houses, Children's Rights, Reviewing Officer Team, Domestic and Sexual Assault Team (DASAT), Social Care Emergency Team (SCET) and Public Protection lead officers. The service provides support from pre-birth to age 26 for those who have experienced care.

During 2021-22, the service will be implementing the Inclusion and Support Service to respond more effectively in regard to early intervention and prevention. The service brings together teams from Social Policy and Education to enable a coordinated approach to early intervention and support for young people and their families. It will provide specialist knowledge and expertise in the area of early intervention and prevention and ensure consistency of approach and equity of opportunity across West Lothian. The service will be delivered with a single vision, shared values and purpose, which in turn will strengthen professional links and build capacity through shared knowledge and expertise and will provide a streamlined pathway for families and professionals to access supports to address identified need making efficient use of resources.

The main aim of the service is to ensure that children, young people and their families can maximise their potential through the identification of additional supports. This includes disabled children, young people and their families. We are committed to providing services that are child-centred, developed in partnership with other organisations and with families themselves, that tackle inequalities and are focused on improving outcomes for children. These aims are in line with Getting It Right For Every Child (GIRFEC) principles. We are committed to providing help that is appropriate, proportionate and timely to ensure children and young people have the best start to their lives building on family strengths and promoting resilience. Our service is focused on keeping children safe and teams also provide support through statutory intervention, looked after children services and child protection interventions when these are needed. The service is focussed on minimising the impact of child poverty wherever possible.

In addition to a focus on providing early help and action to prevent difficulties escalating, the service is committed to shifting the balance of care. This means providing support to families and the wider family network to enable them to safely continue to care for children and young people in challenging circumstances. This also means where children or young people require to be accommodated away from home that more use is made of community based resources with less reliance on residential care and far from home placements.

We aim to deliver quality, appropriate and accessible services to meet current demand and also to anticipate and identify future needs and expectations.

In going forward we are using the learning from our response to COVID-19 and are making better use of online supports for parents using parenting groupwork programmes. We are using technology to support contact between looked after and accommodated children and their families to enhance the range of contact arrangements we already have.

Activities

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

- ◆ Childcare and Protection
 - Child Care and Protection Practice Teams, including Throughcare
 - Child Disability Service
- ◆ Residential and Placement Services
 - Services for Looked After Children – Residential Houses and Family Placement
 - Domestic and Sexual Assault Team (DASAT)
 - Public Protection Lead Officers
- ◆ Child and Family Support
 - Whole Family Support and Crisis and Intensive Support services
 - Social Care Emergency Team (SCET)
 - Inclusion and Support Service
 - Reviewing Officers Team

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, Police Scotland, Scottish Fire and Rescue Service, West Lothian College, Children's Reporter, third sector providers and private sector providers.

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
Service users	Survey	Annual	Business Support Officer	<ul style="list-style-type: none"> • Reported via performance indicators
Service users	Consultative Forums	Quarterly (carers)	Team Manager	<ul style="list-style-type: none"> • Newsletter
Partners / key stakeholders	Early Years event	Annual	Group Manager	<ul style="list-style-type: none"> • Newsletter
Having Your Say	Looked After Children's forum	Monthly	Team Manager	<ul style="list-style-type: none"> • Group meeting
Service users	Viewpoint	Monthly	Group Manager	<ul style="list-style-type: none"> • Feedback Report

Activity Budget 2021/22

Children and Families – Child Care and Protection

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 £
Child Care and Protection Practice Teams	Provision of a statutory child care and protection service for children at risk or in need. This includes the Duty and Child Protection team and long term teams for children who are looked after or at risk of accommodation	1. Delivering positive outcomes and early interventions for early years	SPPPC_100 Number of child protection re-registrations within 12 months of deregistration. (target 0)	WLAM	70.8	3,942,899	0	3,942,899
			SPCF097_9b.1a Number of Children supported in Residential Schools out with West Lothian. (target 16)	PUBLIC				
Throughcare and Aftercare	Provision of a statutory Through and Aftercare service for young people eligible for support who were previously looked after or eligible for continuing care.	1. Delivering positive outcomes and early interventions for early years	CP:SPCF124_9b.1c Percentage of young people eligible for an Aftercare service experiencing one or more episodes of homelessness (target 10%)	PUBLIC	4.6	1,744,171	0	1,744,171
			SPCF100_9b1.b Number of Children in Continuing Care arrangements (target 4)	WLAM				
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.		11.0	434,741	(3,936)	430,805
	Total :-				86.4	6,121,811	(3,936)	6,117,875

Children and Families – Looked After Children

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 £
Child Disability Service	Provision of statutory services for children affected by severe disability and their families.	1. Delivering positive outcomes and early interventions for early years	SPCF077 Percentage of section 23 assessments undertaken by the Child Disability Service within 12 weeks of referral. (target 80%)	WLAM	7.6	3,297,468	(387,000)	2,910,468
			SPCF098_9b.1a Number of Children with a disability in Residential Schools (target 6)	HIGH LEVEL				
Family Placement	Provision of statutory and regulated fostering, kinship and adoption services providing support to children who need to be looked after in family settings away from their family or in extended family.	1. Delivering positive outcomes and early interventions for early years	P:SPCF112_9b Average time taken from point of accommodation of a child to permanent placement decision (target 50 weeks)	PUBLIC	11.5	7,293,904	0	7,293,904
			SPCF105_9b.1a Number of children placed in external foster placements (target 18)	HIGH LEVEL				
Residential Care (Internal/ External)	Provision of statutory and regulated residential and residential school service, including secure care, providing support to children who need to live or be educated away from home	3. Improving attainment and positive destinations for school children	SPCF131_9b.1a Percentage of Children and Young People placed in residential care who have gone on to be placed in external resources (target 10)	WLAM	38.3	7,869,598	0	7,869,598
			SPCF092_9b Balance of Care for Looked After Children: Percentage of Children being Looked After in the Community (target 92%)	WLAM				
	Provide high-quality support and services	6. Reducing crime and	SOA1305_04 Percentage of women who report that they feel safe as a result of	HIGH LEVEL	15.5	738,862	(157,350)	581,512

Social Policy Management Plan 2021/22

Domestic and Sexual Assault Team (DASAT)	to women and children who are, or have, experienced domestic abuse or other forms of gender-based violence.	improving community safety	intervention by the Domestic and Sexual Assault Team (%) (target 100%)					
			CF090_9a.1b Cost per domestic abuse referral (Target £185.00)	WLAM				
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.		33.0	1,165,434	(13,125)	1,152,309
	Total :-				105.9	20,365,266	(557,475)	19,807,791
Time Limited - Care at Home	Funding to support care at home packages for children with disabilities	1. Delivering positive outcomes and early interventions for early years			0.0	50,000	0	50,000
	Total :-				105.9	20,415,266	(557,475)	19,857,791

Children and Families – Children and Family Services

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 £
Public Protection (Leader officers and independent chair)	Provision of professional advisory role to services involved in child protection, adult protection, multi agency public protection arrangements (MAPPA), Violence Against Women and Girls (VAWG) and Counter Terrorism.	1. Delivering positive outcomes and early interventions for early years	SOA1305_05 Percentage of closed adult protection cases where the adult at risk reported that they felt safer as a result of the action taken. (target 80%)	HIGH LEVEL	3.1	198,813	(80,113)	118,700
			CF099_9b1.b Number of Children in Secure Accommodation. (target 1)	HIGH LEVEL				
Independent reviewing team of childcare protection	Provision of an independent chairing service in relation to child protection and looked after children.	1. Delivering positive outcomes and early interventions for early years	P:SPCF090_9b.1b Current Number of Looked After Children (LAC) (target 430)	PUBLIC	5.5	308,138	0	308,138
			SPCF074_6b Percentage of Looked After Children reviews completed within statutory timescales (target 80%)	PUBLIC				
Social Care Emergency Team (SCET)	Provision of an out of hours emergency social work service to children and adults at risk of harm.	1. Delivering positive outcomes and early interventions for early years	SPCF145 -9b Number of legal orders obtained out of hours (target 25)	WLAM	5.6	550,109	0	550,109
			SPCF062_9a Social Care Emergency Team cost per head of population (target £3.20)	WLAM				
Inclusion & Support Service	Early intervention and prevention to school age children and their families who have	3. Improving attainment and positive destinations	SPCF137_9b.1a Percentage of parents involved with Positive Steps programme who demonstrate an improvement in mental health (target 100%)	WLAM	58.6	3,320,740	(76,942)	3,243,798

Social Policy Management Plan 2021/22

	experienced adverse experiences and may be at risk without intervention.	for school children						
Intensive Family Support		3. Improving attainment and positive destinations for school children	SPCF139_9b.1c Percentage of families involved with the Whole Family Support service who have demonstrated an improvement in their parenting skills (target 85%)	WLAM	23.0	593,738	(96,616)	497,122
			P:SPCF138_9b.1c Percentage of children involved with the Whole Family Support service who have avoided becoming accommodated who were assessed as being at high risk of being accommodated (target 85%)	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.		9.8	392,942	(3,449)	389,493
	Total :-				105.6	5,364,480	(257,120)	5,107,360
Time Limited - Carers	Funding to support unpaid carers and young people.	7. Delivering positive outcomes on health			0.0	25,000	0	25,000
Time Limited - Advocacy	Funding for advocacy services for children	3. Improving attainment and positive destinations for school children			0.0	70,000	0	70,000
	Total :-				105.6	5,459,480	(257,120)	5,202,360

Actions 2021/22

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

Children and Families Actions 2021/22

Action	Description	Planned Outcome	Owner(s)	Start	End	Status	Update
Develop model of intensive and crisis support	Increase and Improve the level of crisis support to communities out with normal office hours.	Fewer instances of emergency accommodation of children.	Senior Manager, Children's Services	April 2018	March 2022	Active	Service successfully piloted and moving towards full implementation.
Reduce timescale for children who are Looked After to achieve permanency	Use the Permanence and Care Excellence (PACE) Programme in partnership with CELCIS to redesign processes for children to achieve permanency.	More children achieve secure placements in a shorter timescale.	Senior Manager, Children's Services	April 2018	April 2022	Active	Redesign will commence post pandemic when systems are operating more normally. PACE programme is in implementation as a test of change. CELCIS have now ceased their involvement.
Shifting the balance of care for looked after children	Reshape services to ensure children are supported to remain in family based care.	Fewer children are accommodated in residential care placements.	Senior Manager, Children's Services	April 2018	March 2023	Active	Redesign in the process of implementation.
Improve Transitions for all young people	Redesign the transition process as it relates to children with a disability and looked after children.	Improved outcomes for children and young people aged 16 and over.	Senior Manager, Justice and Looked After Children	April 2018	March 2021	complete	New transition process for children with a disability is complete and will be monitored on an ongoing basis.
Care for Looked After Children and Children with a Disability	Reduction in external placements.	More Looked After Children cared for in West Lothian with fewer external placements.	Senior Manager, Justice and Looked After Children	April 2018	March 2023	Active	Redesign work is underway. Placement numbers for children with disabilities has reduced.

Social Policy Management Plan 2021/22

Children and Families Actions 2021/22

Action	Description	Planned Outcome	Owner(s)	Start	End	Status	Update
Family and Parenting Support	Review of early years services.	Increased outreach provision to deliver services closer to family's community or home setting.	Children's Services	April 2018	March 2023	Active	Redesign work is underway.
SWIFT Replacement	Procure and implement a replacement for SWIFT, Social Work Information System.	A robust and secure information system is in place.	Senior Manager, Justice and Looked After Children	November 2019	April 2023	Active	Procurement options being considered.
Review of Family Placement and Kinship Care Provision	Undertake service review to ensure that approaches to Fostering and Kinship Care are robust.	Services for looked after children in the community are improved.	Senior Manager, Justice and Looked After Children	January 2019	March 2022	Active	Initial scoping has commenced.
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.
Digital transformation projects	A programme of activity to ensure that the council is well placed to take advantage of opportunities offered in the digital age.	To deliver improved user-focused digital public services.	Head of Service	April 2018	March 2023	Active	Redesign work is underway. Project Team in place.
Residential Care for children	Design a model of residential provision that enable more children to remain at home.	A model of delivery that provides better outcomes for children.	Senior Manager, Justice and Looked After Children	April 2020	March 2022	Active	Organisational change being progressed.

Children and Families Actions 2021/22

Action	Description	Planned Outcome	Owner(s)	Start	End	Status	Update
Review of Adoption Support and Provision	Redesign Adoption Services to improve support, increase income and reduce adoption breakdown.	Explore the development of a dedicated Adoption Service.	Senior Manager, Justice and Looked After Children	April 2021	March 2022	New	Scoping work completed and further benchmarking taking place
Implementation of 'The Promise'	Introduce Lead Officer for taking forward service development to reflect national Care review.	Improved level of service	Senior Manager, Justice and Looked After Children	April 2021	March 2022	New	Scoping work completed and further benchmarking taking place
Review of Mental health and wellbeing support to children and young people	Undertake strategic needs assessment to identify how best to deploy support for children.	Improved response in relation to mental health of children and young people.	Senior Manager, Justice and Looked After Children	April 2021	March 2022	New	Scoping work completed and further benchmarking taking place
Implement Inclusion and Support Service	Joint response to early intervention with Education.	Improved outcomes resulting in fewer escalations to statutory services.	Senior Manager, Children's Services	April 2021	March 2023	New	Preparatory work complete and staff teams ready to implement
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, Children's Services Senior Manager, Justice and Looked After Children	April 2021	March 2022	New	Services continue to be reviewed

Social Policy Management Plan 2021/22

DATA LABEL: PUBLIC



PERFORMANCE COMMITTEE

EDUCATION SERVICES: LEARNING POLICY AND PERFORMANCE

REPORT BY HEAD OF EDUCATION (LEARNING, POLICY AND RESOURCES)

A. PURPOSE OF REPORT

The purpose of this report is to provide the Performance Committee with an overview of the delivery of Education Services' Learning, Policy and Performance Service during the COVID-19 global pandemic, focussing specifically on the presenting challenges and the key achievements over the last 14 months.

B. RECOMMENDATION

It is recommended that the Performance Committee:

1. Notes the performance of the Learning ,Policy and performance Service during the pandemic period since March 2020;
2. Notes the recent WLAM review panel outcome; and
3. Identifies any other recommendations for performance improvement.

C. SUMMARY OF IMPLICATIONS

I Council Values	Focusing on our customers' needs; Being honest, open and accountable; Developing employees; Making best use of our resources; Working in partnership
II Policy and Legal (including Strategic Environmental Assessment, Equality Issues, Health or Risk Assessment)	The West Lothian Assessment Model is a key council framework, ensuring that there is robust internal scrutiny and support for continuous improvement of council services.
III Implications for Scheme of Delegations to Officers	None
IV Impact on performance and performance Indicators	Appendix 2 details a selection of performance indicators and results currently reported for the Learning, Policy and Performance Service.
V Relevance to Single Outcome Agreement	The learning, Policy and Performance Service has a suite of performance indicators which support the Single outcome Agreement.

VI Resources - (Financial, Staffing and Property)	WLAM Unit Activity Budget (outlined in Education Services' Management Plan)
VII Consideration at PDSP	Not applicable
VIII Other consultations	None

D. TERMS OF REPORT

D.1 Background

The Learning, Policy and Performance Service is one of the five service areas within Education Services. It comprises a wide range of services for West Lothian's children, young people, adults and families delivered from across four Service Teams as detailed in D2 below. Since March 2020, the effects of COVID-19 have had a significant impact on our communities and consequently on the way the Learning, Policy and Performance Service provides services to customers.

This report provides an overview of the impact of COVID-19 in relation to the delivery of work activity by the Service during the last 14 months. This includes detailing service performance for the financial year 2020/21 and some of the key actions undertaken in response to the COVID-19 situation.

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

D.2 Service Overview

The core functions of the Learning, Policy and Performance Service span across four Service Teams: Customer Support; Performance; Community Learning and Development Adult Learning; and Community Learning and Development Youth Services. Together the teams deliver education services and contribute to the overall aims of the council in relation to the educational attainment, achievement, participation and health and wellbeing outcomes for West Lothian's children, young people, adults and families.

More specifically each team delivers the following key activities:

D.2.1 Customer Support Team

The Team centrally allocates early learning and childcare (ELC) placements, and placements at the P1 and S1 stages of education. This process is conducted concurrently with the allocation of staffing to all early learning and childcare establishments, primary schools and secondary schools. This, in turn, determines the Devolved School Management budgets of these establishments and schools. The key aim of this is to maximise both parental choice and efficient use of the council's resources.

The Team also advises on, responds to and provides the administration for: Freedom of Information requests; customer complaints; primary school letting; General Data Protection Regulation (GDPR) and Public Records (Scotland) Act 2011 (or PRSA) Compliance; annual determination of school session dates; supporting achievement of internal and external customer quality standards; and other ad hoc project work, for

example policy advice to Head Teachers, Parent Council training Events, Performance Licenses for pupils and Covid-19 data gathering and submission to Scottish Government..

D.2.2 Performance Team

The Performance Team provides service planning and performance management information to service managers across Education Services to support in the management, analysis and intelligent use of data related to improvements in key indicators of performance. More specifically, the Performance Team provides performance information to support: the implementation of the Raising Attainment Strategy; the corporate monitoring of the Local Outcome Improvement Plan objectives, community planning objectives, local government benchmarking framework, corporate strategies such as the IT strategy, and partnership action plans such as the serious and organised crime action plan.

D.2.3 Community Learning and Development (CLD) Adult Learning

The Adult Learning team is responsible for developing and delivering a range of activity for adults which:

- supports improved skills in literacy, numeracy and English for Speakers of Other Languages (ESOL)
- supports digital and financial inclusion;
- improves accredited learning and provides wider achievement opportunities;
- supports learners to move on to positive destinations;
- delivers positive outcomes on health and wellbeing; and
- works with parents, including delivering family learning.

D.2.4 Community Learning and Development (CLD) Youth Services

Youth Services provide a diverse range of learning opportunities for young people aged 11 – 25 focused on:

- building self-esteem and self-confidence to create confident individuals
- developing the ability to manage personal and social relationships, supporting and promoting health and wellbeing of young people
- creating learning, developing new skills and becoming successful learners
- supporting young people in transition into positive and sustainable destinations
- building the capacity of young people to consider risk, make reasoned decisions and become effective contributors
- developing a world view which widens horizons and supports responsible citizenship; and
- volunteer development.

D.3 COVID-19 The Impact on Service Provision

Similar to other council services, the last 14 months for the Learning Policy and Performance Service has been extremely challenging and has tested the capabilities of all colleagues in delivering services to customers which are critical to their functioning in the community and organisation of family life. The Service's customers include some of the most vulnerable people in our community and the response to COVID-19 required a great deal of timeous collaboration and operational agility. The Service moved from an operating model of office-based and community-based staff to full capacity restricted

to homeworking over a space of a few days. The primary challenge initially was to establish the change in customers needs due to the pandemic circumstances and adapt the operational flow of work activity to best meet these needs.

D.3.1 Customer Support Team

From initial COVID lockdown in March 2020 the Customer Support Team were assigned the role of coordinating the allocation of mainstream school placements for key worker and vulnerable children in the specific mainstream schools which remained open during this period. This required the creation of a new online application and allocation system with the ability to record and allow the team to assess and categorise information provided by parents/carers.

From June 2020, the team supported the move of the keyworker provision over to the 6 summer hubs which were created to provide childcare facilities over the school holiday period. This process continued to inform and support the assessment of eligibility and allocations for keyworker and vulnerable pupils to attend schools in January 2021 when the second lockdown was implemented. There was a tight turnaround of information for parents at this time who were expected back at work with little notice, and a high number of requests from families whose circumstances did not meet the criteria for placements. It was recognised that those families who did not meet the criteria of keyworker/vulnerable pupils were disappointed that their applications were refused. It was essential however for the council adhere to the criteria in order to maintain safety measures in line with government guidelines.

Part of the cross-service collaboration required during this time included The Customer Support Team supporting the Public Transport Service and mainstream schools with a new process to issue bus tickets for pupils. Public Transport required support in establishing which pupils were on each bus to meet the requirements of Track and Trace. Another area of innovation was The Customer Support Team's involvement in the implementation of a new catering 'App' for secondary schools to allow pupils to order food remotely. The key aim of this process was to ensure a 'touchless' system which reduced the risk of cross infection in schools. Throughout the pandemic period The Customer Support Team has supported the effective communication with parents and carers with update messages as required via Group-call.

On an ongoing basis the Customer Support Team has also supported the reporting of COVID-19 cases in schools and nurseries, supporting NHS Public Health and headteachers communications to staff, parents and carers and that close contacts are advised of the self-isolation periods determined by Public Health. The team has been flexible in meeting the requirement to provide this service over weekends, public holidays and evenings. This crucial work is ongoing.

In addition to the above work activity the Customer Support Team required to maintain the school placement process in line with its annual schedule. With the implementation of homeworking the Team adapted this process to ensure that all communications could be sent via e-mail rather than by post. Adaptations were made to the Pupil Placement systems to automate this process to reduce the workload and to ensure accuracy when e-mailing letters to parents and carers. This has been well received by parents and carers and reduces costs to the Council. This is a positive change that will continue as the country moves out of the pandemic period. The Team has therefore maintained the statutory school placement process for early learning and childcare, primary 1 and secondary 1 with the team meeting statutory deadlines along with responses to FOIs and SARs. The service will explore further opportunities for automisation of this process.

The Team has made excellent use of Microsoft Teams to support remote working, enabling staff to stay connected within the Team and with colleagues in schools and other council services.

D.3.2 Performance Team

From the initial lockdown period the Performance Team continued to provide its service engaging with Service Managers, Heads of Service and school leaders directly and through virtual platforms. In addition, in collaboration with the Quality Improvement Team, The Performance Team further developed tracking and monitoring of learner engagement to effectively track and monitor learner engagement and progress in learning, regardless of their learning environment. In primary schools systems were enabled to capture an overview of learner engagement within literacy, numeracy and Health and Wellbeing. In secondary schools engagement was captured across the curriculum. The Performance Team also collaborated with the ASN Service to ensure that a dual tracking system for remote and in-school learning was created for Additional Support Needs Schools.

D.3.3 Community Learning and Development (CLD) Adult Learning

The Adult Learning Team is designed to enable personal development, the acquisition of skills and qualifications, promote health and well-being, and build community capacity. It has a strong focus on early intervention, prevention and tackling inequalities. This Team empowers adults individually and collectively to make positive changes in their lives and in their communities, with the clear intention to help our most disadvantaged citizens develop the skills and support to participate fully in society.

Throughout the pandemic period The Adult Learning Team has continued to deliver a wide range of learning opportunities to adults in West Lothian who seek to improve their skills. The team worked with 331 learners in the reporting period of April 2020 to March 2021. This is below the annual target of 600 however the Team experienced a reduction in referrals during the first half of the year. A significant number of existing learners disengaged when the country entered the initial lockdown.

The Team has worked across all areas of delivery to support learners to continue their studies during the pandemic period and continually strive to encourage potential learners to engage. Arrangements were made without delay to move classes onto virtual platforms where possible and learners worked on their digital skills with their tutor in order to engage in this way. Those learners who didn't want to move online or didn't have a suitable digital device have been supported with weekly phone calls, and emailed or posted copies of worksheets and activities. Customer feedback reflects how much this ongoing support was valued by learners.

Notable achievements and examples of successful projects are clearly apparent across the Team's activities. Some examples include:

- Short courses, in particular Driving Theory, have been adapted for online delivery and have been very popular. These courses will remain online as part of a future delivery model, alongside a selection of online-only ESOL classes.
- The Connecting Scotland programme has awarded 1029 internet enabled devices to West Lothian residents who couldn't afford to buy their own. The team is also providing digital support to anyone who needs help to use their new device.
- The portfolio of SQA qualifications the team are approved to deliver has been reviewed and a programme of updating is underway. This includes applying for

approval to deliver new qualifications, with two new subjects added this year. Excellent feedback was received from SQA on the operation of West Lothian's Adult Services SQA Centre.

Planned recovery to resume a full programme of classes, on a priority basis, in line with government guidelines is ongoing. Learners who are most vulnerable, have outstanding SQA assessments to complete or who have been unable to engage digitally are being offered face to face classes moving forwards.

D.3.4 Community Learning and Development (CLD) Youth Services

The CLD Youth Services Team, in partnership with schools and third sector partners, support and provide access to a range of high-quality learning, skills development, and activities to promote health and wellbeing. These are crucial factors in determining life chances and can be a key to reducing inequality.

From the beginning of the pandemic the delivery of the community- based youth provision was significantly impacted with children's clubs and youth clubs not running due to COVID-19 restrictions and the closure of community venues. However effective social media presence was developed as quickly as possible to promote services and engagement activities with children, young people, families and communities. Over the 2020/21 period digital youth groups were set up and maintained to support more vulnerable young people and home learning activity packs were produced. Participation surveys were used to assess engagement highlighting 76% of participants expressing that participation in the activities improved their mental/emotional wellbeing.

Summer Hubs in 2020 were established for the children of key workers and vulnerable children. Staff delivered a wide range of learning activities within these hubs including opportunities for accreditation. This helped to increase engagement, address learning loss, support health and wellbeing and raising attainment. Over the reporting period 173 accredited learning certificates and awards were achieved by children in P1 to S3.

The School Vocational Programme was significantly impacted by COVID restrictions. Only the Hard Landscaping and Hospitality courses ran with reduced numbers to meet the restrictions guidance. Achievements were celebrated however with Hard Landscaping classes resulting in all 11 students achieving an Oatridge Hard Landscaping Certificate. Going forward these students will be entered for SQA Qualifications. Similarly, the Hospitality courses ran with reduced numbers and the students achieved the SQA Intro to Food Hygiene and SQA Working in a professional Kitchen qualification.

The More Choices More Chances Key Workers adapted their service delivery using social media to maintain engagement with young people in the absence of being able to provide in-person support. For some young people this was very challenging, particularly due to lack of IT equipment or connectivity. Over the reporting period the annual percentage of More Choices More Chances client group of young people supported moving into a positive destination is 91%.

Short vocational tasters for young people were reduced over the period however Youth Services procured a number of courses which ran during the Autumn 2020 period including Fit for Life (Synergy Gym), Nail Art (WL College), Construction (WL College) and Quiet Space (25 young people benefitted from these courses).

The Youth Work in Schools Programme is usually delivered through an informal groupwork approach. Staff had to adapt to a different delivery style due to COVID-19 measures and achieved the delivery of activities in 6 secondary schools over the

reporting period. In response to a survey – “the extent to which CLD Youth Services, youth work in schools, adds value to young people’s educational experience” - the schools survey responses gave a rating of 4, good, or 5, excellent which is 100% satisfaction.

The Skills Training Programme (STP), due to imposed restrictions, was unable to start another intake. Ongoing negotiation continues to identify appropriate premises from which to operate the STP. Helping Young People Engage (HYPE) developed innovative ways to maintain learning programmes and engagement with young people. Work continued through 1:1 walk and talks, outdoor small groupwork, digital and home learning packs. The Team achieved 87% positive destinations, the highest result to date (26 out of 30) leavers.

There is a significant delay to young people completing expeditions involved in the Duke of Edinburgh’s Award due to COVID-19 restrictions. Increasing completions is dependent on schools’ recovery and renewal plans however over the reporting period 34 young people completed the award (3 Gold, 3 Silver and 28 Bronze). The Youth services team is continuing to support youth people through eDofE online learning platform.

Other areas of activity for the Youth Services Team include the successful bids to the Digital Inclusion and Connecting Scotland funded programmes which resulted in devices for 56 young people; staff have undertaken training to use the Healthy Respect Kit Bag resources which has proved useful for detached/outreach services to young people; The Hatch (Healthy Respect Service) was set up at Crofthead Community Centre and is facilitated by CLD Youth Services staff; the Team has supported the development of online work experience opportunities; and the Service has shared resources from the Electoral Commission and Electoral Registration Office with schools for use by teaching staff.

D.4 Performance Management

The performance of The Learning, Policy and Performance Service is measured through a suite of performance indicators using the corporate system Pentana, in line with the council’s performance management framework. Appendix 2 to this report provides an overview of the performance indicators categorised as Public or High Level for the Service.

The Service attended the Review Panel on 8 February 2021 to provide an update on the progress of actions from past recommendations. The Service was placed on Cycle 3 to allow the Review Panel to monitor employee results and performance culture within the Service.

The Review Panel outcome is chaired 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
Cycle 2	The service will return a report to the Panel within 12 months, who will determine if the service are 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. ✓
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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 Learning, Policy and Performance Service:

Table 3: 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 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 sufficient and will help the service to improve
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).

Recommendations for Improvement

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

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

1. The Panel recognised the service effort to build a cohesive approach across the WLAM unit.
2. The service should return to the panel with updated employee satisfaction results. The data collected should be used to improve employee morale and enhance engagement.
3. The Panel encouraged the service to develop effective models for engaging the Key Stakeholder groups in future service design / transformation. This should include employees, service users and key partners (internal and external).

4. The Panel noted to progress made with benchmarking activity and encouraged the service to continue to identify relevant comparators to help improve service activity and performance.
5. The service should seek to review and improve their approach to customer engagement, specifically those customers whom are hard to reach, with the aim of improving the customer response rates and monitoring satisfaction performance.
6. The service should embed a performance culture, to increase engagement of its people with the council's performance management procedures.
7. The Panel encouraged the service to improve performance with Nursery provisions by promoting the quality and value of the council services.
8. The service should improve the general standard of trend chart commentary for performance indicators. The service should include planned improvement activity against performance.
9. The service should review performance targets and thresholds ensuring a consistent and realistic approach to target setting and fully explain target setting rationale for the current year and the coming year.

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

E. CONCLUSION

The Learning, Policy and Performance Service has delivered a pivotal part in the overall council response to the COVID-19 pandemic in 2020/21. During this time of unprecedented challenge and unplanned demand the Service has delivered essential services to West Lothian communities and also been able to make some positive progress in planned activities to progress towards the council's digital ambitions. The Service has had to implement change at a rapid pace, some short term in response to the pandemic, with some having a longer-term influence on the way that Education Services operates.

Throughout the pandemic, the resilience and professionalism of our staff has been critical in overcoming the challenges faced by all involved. The last 14 months has evidenced our colleagues' commitment to our customers and their collective strength in working collaboratively throughout this period.

F. BACKGROUND REFERENCES

Appendices/Attachments:

Appendix 1 – Education Services Management Plan 21/22 Extract

Appendix 2 – Performance Indicators for the Service (Learning Policy and Performance)

Contact Person: Alison Raeburn, Service Manager
Email: alison.raeburn@westlothian.gov.uk

James Cameron
Head of Service, Education Services

Date of meeting: 7 June 2021

Appendix 1

Learning, Policy and Performance

Service manager:	Alison Raeburn, Service Manager
Number of staff:	64.37 (full time equivalents)
Locations:	Civic Centre, St David's House, Bathgate, and Partnership/Community Centres (CLD)

Purpose

The Learning, Policy and Performance Section comprises of four teams: Customer Support (including ELC/Pupil Placement), Policy and Performance, Adult Learning and Community Learning and Development Youth Services. The teams deliver education services and contribute to the overall aims of the council in relation to the educational attainment, achievement, participation and health and wellbeing outcomes for West Lothian's children, young people, adults and families.

Customer Support Team

The Team centrally allocates early learning and childcare (ELC) placements, and placements at the P1 and S1 stages of education. This process is conducted concurrently with the allocation of staffing to all early learning and childcare establishments and primary and secondary schools and therefore determines the Devolved School Management budgets of these establishments and schools totalling £131.5 million, in order to maximise both parental choice and efficient use of the council's resources.

The team advises on and responds to freedom of information requests and complaints. It undertakes the letting of primary schools and halls, management of internal and external web content, communication and the achievement of customer quality standards, and support to parent councils.

Policy and Performance

The Policy and Performance area performs service wide function including supporting achievement of internal and external customer quality standards, service planning and performance management, policy development, policy advice to Head Teachers to ensure consistency of approach, and consultation with and provision of information to Head Teachers and the Local Negotiating Committee for Teachers.

The Performance Team supports the implementation of the Raising Attainment Strategy. It provides performance information to support corporate monitoring of the single outcome agreement, community planning objectives, local government benchmarking framework, corporate strategies such as the IT strategy, and partnership action plans such as the serious and organised crime action plan.

Adult Learning and Community Learning and Development (CLD) Youth Services

Adult Learning and CLD Youth Services have a strong focus on early intervention, prevention and tackling inequalities. These services empower people individually and collectively to make positive changes in their lives and in their communities; in line with corporate plan priorities 1, 3, 5, 6 and 7. Access to high quality learning, skills development, attainment and activities to promote health and wellbeing are important factors in determining life chances and can be a key to reducing inequality. Working together and with our partners CLD Youth Services and Adult Learning aim to ensure that disadvantaged communities have access to community learning and development support they need and help our most disadvantaged citizens develop the skills and support to participate fully in society.

CLD Youth Services provides a diverse range of learning opportunities for young people aged 11 – 25 focused on:

- building self-esteem and self-confidence to create confident individuals
- developing the ability to manage personal and social relationships, supporting and promoting health and wellbeing of young people
- creating learning, developing new skills and becoming successful learners
- supporting young people in transition into positive and sustainable destinations
- building the capacity of young people to consider risk, make reasoned decisions and become effective contributors
- developing a world view which widens horizons and supports responsible citizenship; and
- volunteer development.

The Adult Learning Service focusses on working with adults with few, if any qualifications, to develop their core skills and qualifications through:

- community-based adult learning, including adult literacies and English for Speakers of Other Languages (ESOL), digital learning skills and financial literacy;
- learning for vulnerable and disadvantaged groups in the community, for example, people with disabilities, care leavers or offenders; and
- family learning and other early intervention work with children, young people and families is delivered through specialist programmes such as: Triple P, Incredible Years and Playlab.

Adult Learning and CLD Youth Services are designed to enable personal development, the acquisition of skills and qualifications, promote health and well-being, and build community capacity.

Activities

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

- ◆ Providing an equitable and responsive service for the placement of pupils at early learning, primary and secondary schools.
- ◆ Determining staffing for 67 primary schools and 61 early learning and childcare establishments, thereby determining their budgets, in order to maximise parental choice and achieve best value.
- ◆ Providing a responsive customer complaints and Freedom of Information service leading to service improvement.
- ◆ Managing analysis and reporting of performance data to the public and internal and external stakeholders.
- ◆ Establishing and support Parent Councils and train Parent Council members.
- ◆ To complete the implementation of the expansion of early learning and childcare to 1140 hours for all eligible two year olds and three and four year olds by 19 April 2021.
- ◆ Continue to provide flexibility and choice for early learning and childcare placements.
- ◆ Expand the provision of free school meals during school holidays through the lunch and activity clubs project.
- ◆ Improve literacy, numeracy, lip reading, IT and English as a Second or Other Language (ESOL) skills.
- ◆ Offer opportunities to gain initial qualifications to upskill adults to gain and retain employment.
- ◆ Support the development of family learning through targeted learning opportunities including Attainment Challenge projects and Pupil Equity Fund.
- ◆ Further develop the Dyslexia Network to better support professionals and front line workers to support adults to become dyslexic friendly organisations.
- ◆ Lead on the implementation of Learning Community Partnerships and Plans based on school catchment areas.
- ◆ Coordinate the Developing the Young Workforce Strategy and implementation.
- ◆ Promoting youth participation and continuing support to members of the Scottish Youth Parliament.
- ◆ Support collaborative approaches between schools and Youth Services to enable targeted groups of young people to access wider achievement opportunities through youth clubs and projects.
- ◆ Continue to offer a high quality work experience programme.
- ◆ Further promote West Lothian Employability Award across the senior phase and Science, Technology, Engineering and Mathematics STEM related industries within nursery, primary and secondary schools.
- ◆ Intensive keyworker support to young people identified as requiring additional support to achieve and sustain positive destinations.
- ◆ Deliver the Youth Work in Schools Programme to develop skills for life learning and work; democratic literacy, health and wellbeing, community and personal safety group work sessions.

- ◆ Continue to develop post school employability programmes - Activity Agreement and Skills Training Programme.

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, Scottish Government, Scottish Parental Involvement Officers Network, West Lothian Parent Council Forum, Local Negotiating Committee for Teachers, Scotland's Learning Partnership, Voluntary Sector Gateway West Lothian, young people and adult learners, community and voluntary sector organisations, schools and early years learning providers, work-based training providers, West Lothian College, Skills Development Scotland, NHS Lothian, Youthlink Scotland, Education Scotland, Electoral Registration Office, Duke of Edinburgh Awards, Youth Scotland, LGBT Youth Scotland, Livingston Designer Outlet, Department for Work and Pensions, Newbattle Abbey College, Scottish Rural and Urban College, Police Scotland and Community Councils.

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
Parents using Pupil Placement	Survey relating to services provided	Annual	Statistics and Pupil Placement Officer	Public performance reporting
Adult Learning Students	Satisfaction Survey	6 monthly	Adult Learning Manager	Via tutor
Schools	Youth Work in Schools Programme and Work Experience Surveys	Annually	Youth Services Manager	Via practitioners and Service Newsletter
Young People	Customer Satisfaction Survey	Annually	Youth Services Manager	Service Newsletter and via practitioners

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Activity Budget 2021/22

Learning, Policy & Performance

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 £
Complaints, Freedom of Information, Website management, Policy and Equality Advice, Staff, Pupil and Parental Engagement	Provide a responsive customer complaints service leading to service improvement. Provide a responsive FOI service. Provide comprehensive electronic information to internal and external customers. Provision of policy and equality advice to internal and external customers leading to consistent application of policy. Consult a sample of parents, carers, pupils and staff annually increasing the customer insight	Enabler service – Modernisation and Improvement	EDPP340_ Cost Per Pupil of the Customer Support Team Target: £ 13.29	High Level	2.61	395,175	0.0	395,175
Pupil Placement	To provide an equitable and responsive service that meets legislative and regulatory requirements for placements in early learning and childcare, primary and secondary schools. leading to better designed services.	1. Improving attainment and positive destinations for school children	EDPP340_ Cost Per Pupil of the Customer Support Team Target: £13.29	High Level	11.67	494,740	0.0	494,740
			EDPP214_Percentage of P1 and S1 Requests Granted by the School Placement Panel Target: 98%	High Level				
Performance Management	Manage pupil attainment analysis in relation to all categories of data, including adaptive testing in Primary	1. Improving attainment and positive destinations	EDPP400_ Cost Per pupil of Performance Team Target: £4.37	WLAM	2.91	154,855	0.0	154,855

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Learning, Policy & Performance

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 £
Service Support	Schools, Cognitive Ability Tests, Insight analysis on Secondary Schools. Support Managers in maintaining Pentana Performance Management System. Maintain Performance Management System for Schools Provision of management and administrative support.	for school children	EDPP401_Percentage of Schools supported through the provision of detailed performance information Target: 100%	WLAM				
	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.		0.29	111,553	0.0	111,553
	Adult Learning Service							
	Planning and provision of adult learning activities delivering positive outcomes on health and wellbeing, support digital and financial inclusion, improving accredited learning and wider achievement opportunities, works with parents, including family learning, and, supports improved skills in literacy, numeracy and English for speakers of other languages.	3. Minimising poverty, the cycle of deprivation and promote equality	EDALYS022_Unit cost per learner Target: £650 EDALYS024_Percentage of learners resident in 20% most disadvantaged areas Target: 33%	Public Public	8.9	464,859	0.0	464,859

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Learning, Policy & Performance

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 £
CLD Youth Services More Choices More Chances	Delivery of employability services in school and post school targeted vulnerable and disengaged young people, through pro-active intervention and the establishment of partnerships and networks to assist in the process.	1. Improving attainment and positive destinations for school children	EDCYS62_Percentage of More Choices More Chances young people supported moving into a positive destination Target: 88%	Public	13.26	798,367	0.0	798,367
			EDCYS042_The annual unit cost of a More Choices More Chances young person supported into a positive destination Target: £1,584	Public				
CLD Youth Services Work with Young People (WwYP)	In partnership with young people, schools and communities the team plans and delivers appropriate targeted and universal learning opportunities supporting young people to develop skills for life learning and work, achieve qualifications and enabling them to gain a voice, influence and place in society.	1. Improving attainment and positive destinations for school children	EDCYS056_ Percentage of young people participating in accredited learning opportunities that have achieved an award. Target: 92%	Public	24.67	1,025,852	(17,700)	1,008,152
			EDCYS041_Unit cost per young person attendance at youth clubs Target: £11.50	Public				

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Learning, Policy & Performance								
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 £
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 frontline activities.		0.06	9,431	0.0	9,431
Total:					64.37	3,454,832	(17,700)	3,437,132

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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.

Learning, Policy & Performance Actions 2021/22

Action	Description	Planned Outcome	Owner(s)	Start	End	Status	Update
Expansion of Early Learning and Childcare	Expansion of the availability of early learning and childcare places.	Each eligible child receives 1140 hours of early learning and childcare by August 2020.	Head of Education (Learning, Policy and Resources); Strategic Resources Manager; Service Manager – Learning, Policy and Performance	April 2019	August 2021	Active	Update reports submitted to Education Policy Development and Scrutiny Panel and Executive.
Education Governance and Head Teachers' Charter – Empowering Schools	Redefined relationship between schools and local authorities, empowering schools.	Schools having greater financial and curricular freedom to meet the needs of learners in their school. Schools continue to benefit from high quality support services delivered by education authorities and through the Regional Improvement Collaboratives.	Heads of Education Services (Curriculum, Quality Improvement and Performance & Learning, Policy and Resources); Service Manager – Learning, Policy and Performance	April 2019	March 2021	Active	Revised Devolved School Management Manuals agreed, with Revised Devolved School Management Framework developed and agreed, being implemented at school level with central support.

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Learning, Policy & Performance Actions 2021/22

Action	Description	Planned Outcome	Owner(s)	Start	End	Status	Update
Early Learning and Childcare and Central Services	Increase efficiency in early learning and childcare and school education to achieve set targets.	<ul style="list-style-type: none"> Efficient use is being made of existing early learning and childcare places during the period of expansion. Teachers have been replaced by other qualified professionals in early learning and childcare, and all Council nurseries are now under the management of primary Head Teachers. Central staff is being made more efficient. Other savings will be achieved through fees and charges and more efficient partnership working. 	Head of Education (Learning, Policy and Resources)	April 2018	March 2022	Active	Project scope and plan defined within TYC Programme governance and monitoring.
CLD, Arts and Sport	Increase efficiency in Community Learning and Development, Arts and Sport to achieve set targets.	<ul style="list-style-type: none"> The adult learning service will concentrate on adult literacy and English as a second and other language and work with vulnerable groups. Community arts will focus on developer funded public art, and the arts programme at Howden Park Centre. Charges were introduced for instrumental music tuition in school session 2018/19. Sport provision will focus on Active Schools. 	Head of Education (Learning, Policy and Resources)	April 2018	March 2022	Active	Project scope and plan defined within TYC Programme governance and monitoring.

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Appendix 2

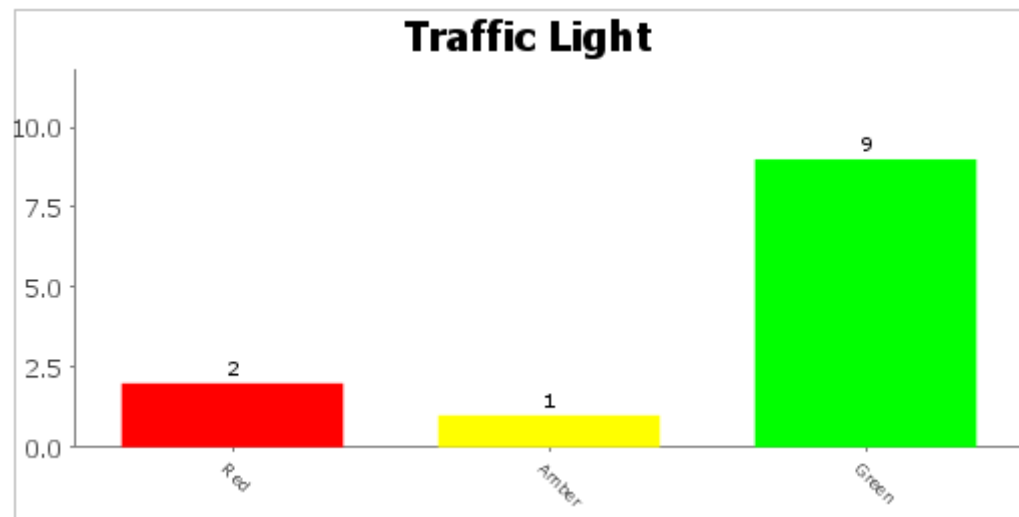
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Learning, Policy & Performance- Performance Committee


Report Author: Fiona Key

Generated on: 26 May 2021 09:39

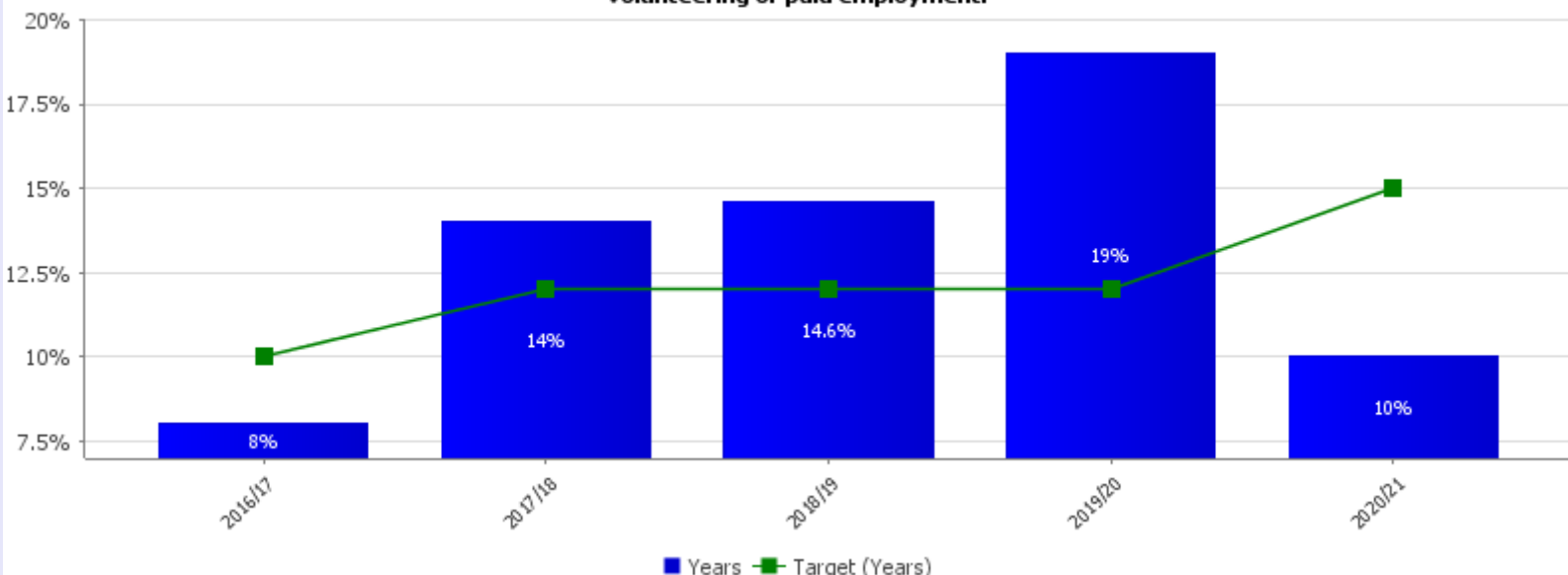
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PI Code & Short Name	P:EDALYS28_9b.1c Adult Learning - Percentage of working age Adult Learning students progressing to a positive destination of further learning, training, volunteering or paid employment.	PI Owner	zEDALYS_PAdmin; Laura Wilson
Description	<p>This indicator measures the percentage of economically active adult learners improving their employability by progressing to one or more positive destinations from further learning, training, volunteering or paid/self employment.</p> <p>This indicator is based on data collected at the end of the financial year. It links to the council's key outcomes of improving the employment position in West Lothian and minimising poverty, the cycle of deprivation and promoting equality.</p>	Traffic Light Icon	
		Current Value	10%
		Current Target	15%

Adult Learning - Percentage of working age Adult Learning students progressing to a positive destination of further learning, training, volunteering or paid employment.



Year	Years (Actual)	Target (Years)
2016/17	8%	10%
2017/18	14%	12%
2018/19	14.6%	12%
2019/20	19%	12%
2020/21	10%	15%

Trend Chart Commentary:

In 2020/21 10% of learners who were not retired moved on to one or more positive destinations. This is below the target of 15%. This reflects the reduced opportunities available due to Covid-19.

In 2019/20 19% of learners who were not retired progressed on to one or more positive destinations. This is above the target of 12%. This increase reflects work done to improve referral pathways and a new community learning partnership with West Lothian College.

In 2018/19 14.6% of learners who were not retired progressed on to one or more positive destinations. This is above the target of 12%. Performance has been maintained with improved referral networks which were developed to support learner transitions.

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In 2017/18 14% of working age adults progressed onto one or more positive destinations. This meets the target set of 12% and is an increase of 6 percentage points on the previous year. This is due to improved impact measurement and recording of data.


In 2016/17 8% of working age adults progressed onto one or more positive destinations which was below the initial target set of 10%. Processes were put in place to ensure that all learners progression is tracked through the use of group and individual learning plans, with outcomes recorded through Client Relationship Management Software (CRM). Learning pathways are also being developed to ensure smoother progression to further education opportunities.

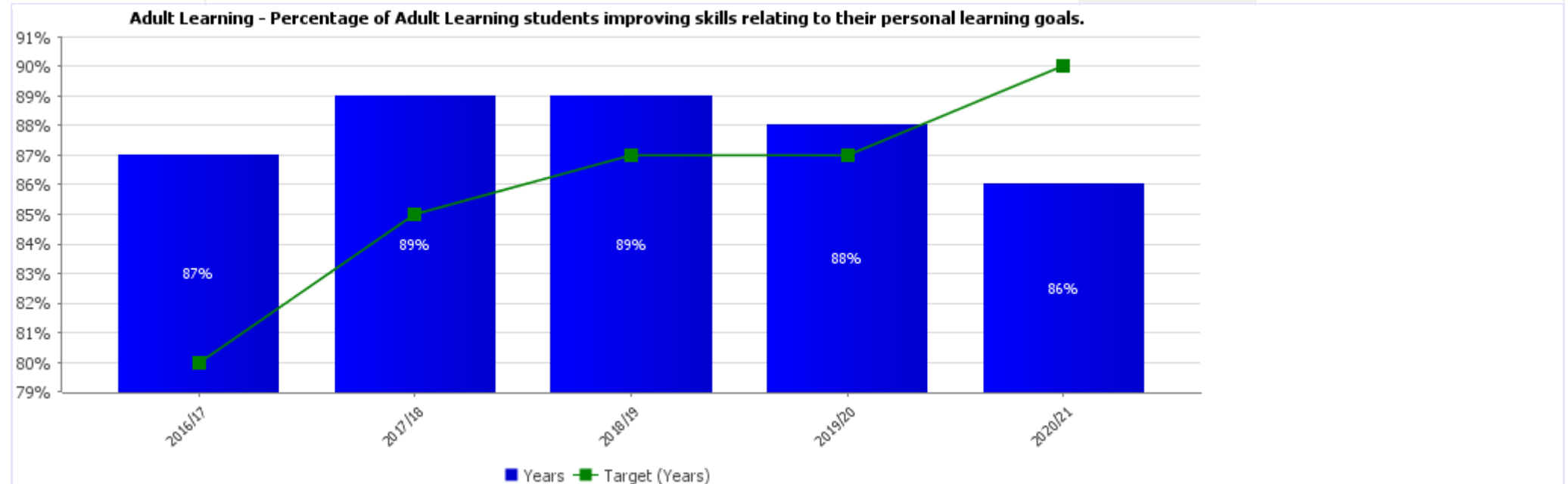
The number of learners of working age who progressed to one or more positive destination are as follows:

2020/21 29 out of 298
2019/20 98 out of 518
2018/19 76 out of 521
2017/18 95 out of 696
2016/17 50 out of 624

The target will remain at 15% for 2021/22. This will encourage the team to ensure that progression to positive destinations is fully supported and recorded.

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PI Code & Short Name	P:EDALYS029_9b.1 Adult Learning - Percentage of Adult Learning students improving skills relating to their personal learning goals.	PI Owner	zEDALYS_PAdmin; Laura Wilson
Description	<p>This indicator measures the percentage of adult learners who make progress towards their personal learning goals by improving related knowledge, skills and understanding. Learning goals relate to individual or group learning activities including digital and financial inclusion, literacy, numeracy, ESOL (English For Speakers of Other Languages), lipreading and health and well-being.</p> <p>This indicator is based on data collected at the end of the financial year. It links to the council's key outcomes of improving the employment position in West Lothian and minimising poverty, the cycle of deprivation and promoting equality.</p>	Traffic Light Icon	
		Current Value	86%
		Current Target	90%



Trend Chart Commentary:

In 2020/21 86% of learners made target towards their learning goals. This is below the target of 90%. This reflects a number of learners disengaging with their learning during lockdown and therefore not making progress against their learning goals.

In 2019/20 88% of learners made progress towards their learning goals and achieves the target of 88%.

In 2018/19 89% of learners made progress towards their learning goals. This achieves the target of 87% and reflects the high quality of teaching delivered by the team and the ongoing capturing of outcomes data.

In 2017/18 89% of adult learners made progress towards their personal learning goals. This achieves the target set of 85% and is an increase of 2 percentage points on the previous year. This is due to improved impact measurement and recording of data.

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In 2016/17 87% of adult learners accessing learning opportunities between 1st September 2016 and 31st March 2017 made progress towards their personal learning goals. This achieves the target set of 80%. Support has been put in place to improve the team's confidence with collecting and recording impact using the Client Relationship Management Software (CRM).

The number of adult learners made progress towards their personal learning goals is as follows:

2020/21 234 out of 272

2018/19 532 out of 597

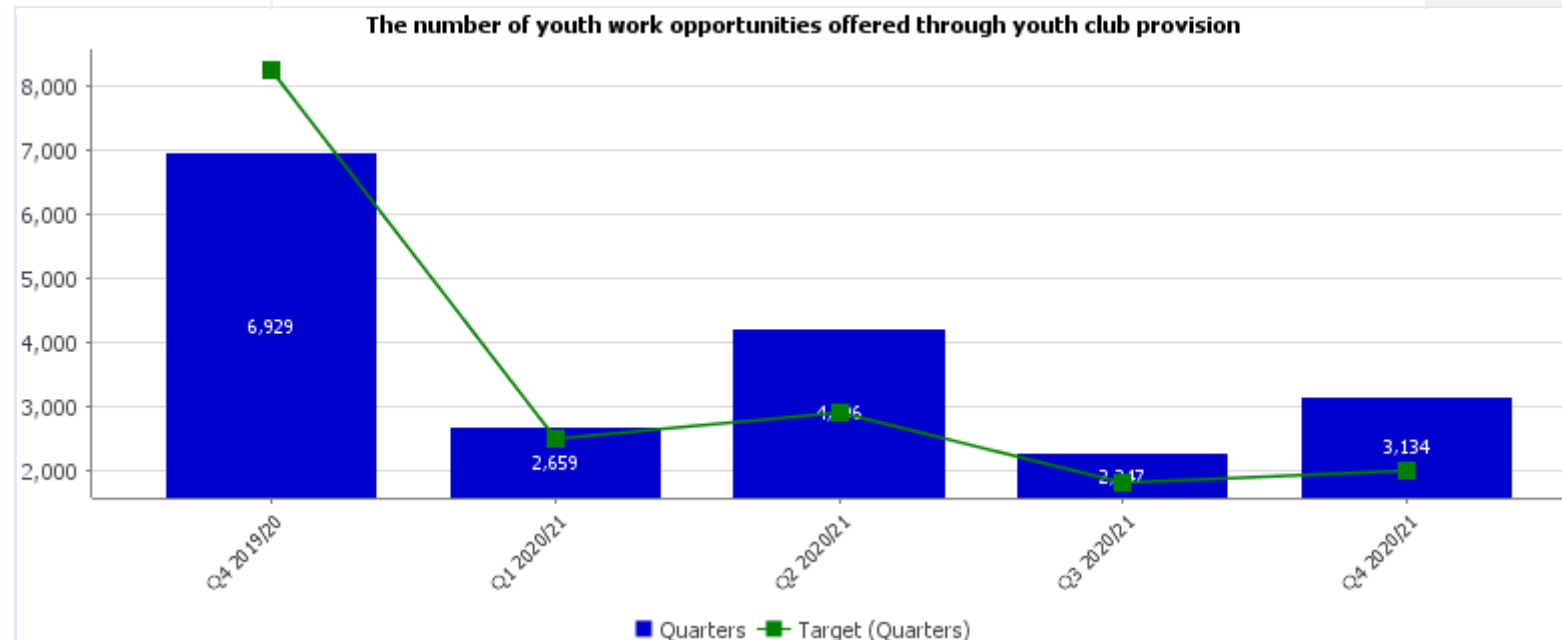
2017/18 719 out of 805

2016/17 640 out of 733

The target will remain at 90% in 2021/22. This challenges the team to continue to support learners to set, work towards and evaluate personal learning goals. This will be achieved by improving consistency in how learning is planned and evaluated across all delivery.

DATA LABEL: OFFICIAL

PI Code & Short Name	P:EDCYS054_9b.1c The number of youth work opportunities offered through youth club provision	PI Owner	zEDCYS_PAdmin; John Kerr
Description	The total number of youth work opportunities offered by Community Learning and Development Youth Services through youth club provision. Information is gathered from monthly club registers. This is monitored and reported on a quarterly basis. This performance indicator is based on data collected at the end of the financial year. This performance indicator relates to council key priorities of Improving Attainment and Positive Destinations.	Traffic Light Icon	🟢
		Current Value	3,134
		Current Target	2,000



Trend Chart Commentary:

Yet again the second wave of Corona Virus - 19 Lockdown restrictions has caused traditional physical provision to remain closed. The service had altered its approach to fit the prevailing conditions.

This has seen the continuation of virtual groups online and one to one contact with our more vulnerable young people through programmes such as HYPE.

The service has continued to provide activity boxes for the school holidays giving much needed contact with young people.

In October the service redeployed resources into providing a detached youth work approach to maintain contact. However the restrictions imposed from December disallowed the detached youth work activity.

The change in focus has caused the service's main provision to continue to be of a targeted nature as opposed to universal which means we are working with less young people which has decreased the number of young people engaged with.

The service has set the expected number of engagements for Quarter 1 at 2650 on the expectation that some service will resume as restrictions are lessening.

DATA LABEL: OFFICIAL

2020/21

Quarter 4 performance - 3134 target 2000

Quarter 3 performance - 2247 target 1800


Quarter 2 performance - 4196 target 2900

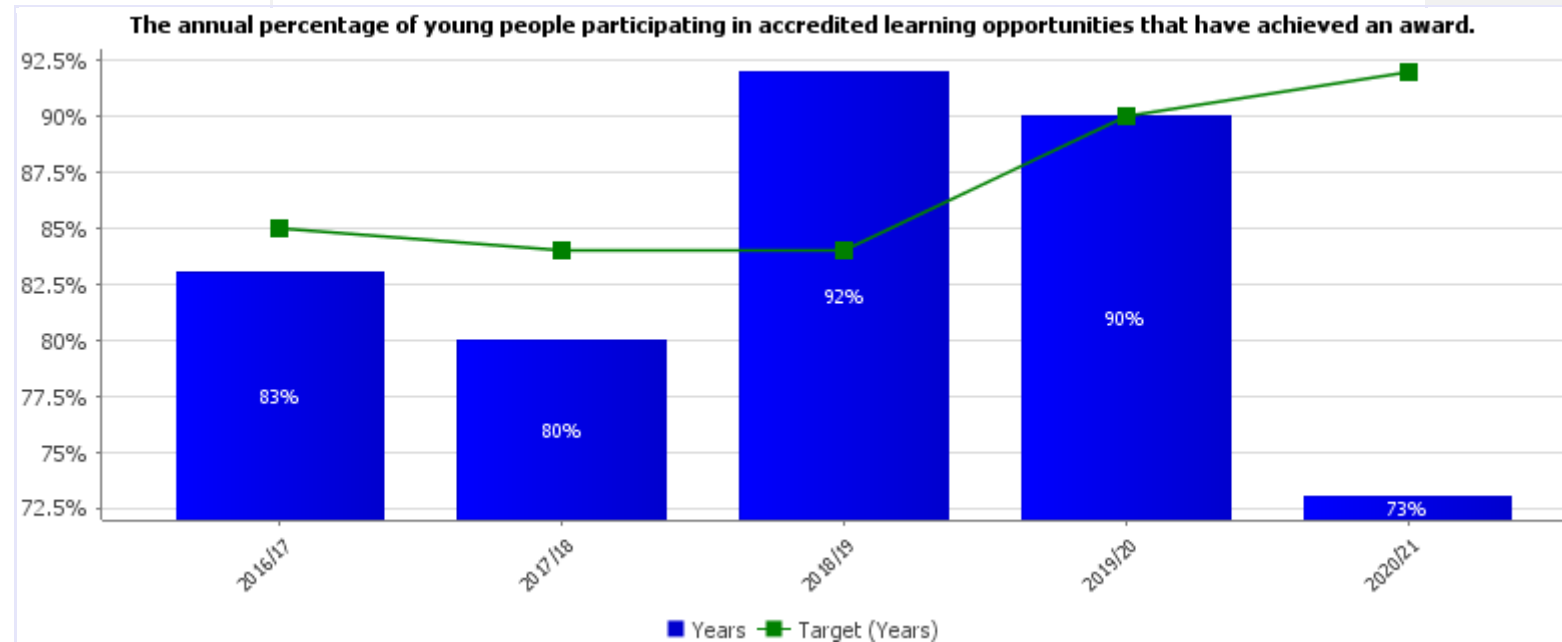
Quarter 1 performance - 669 target 2500

2019/20

Quarter 4 performance - 6,929 target 8,250

DATA LABEL: OFFICIAL

PI Code & Short Name	P:EDCYS056_9b.1a The annual percentage of young people participating in accredited learning opportunities that have achieved an award.	PI Owner	zEDCYS_PAdmin; Gary Sneddon
Description	The percentage of young people that successfully achieve externally accredited/certified learning qualification, for example, Youth Achievement Award and Dynamic Youth Award. This performance indicator is based on data collected at the end of the financial year. This performance indicator relates to council key priorities of Improving Attainment and Positive Destinations.	Traffic Light Icon	
		Current Value	73%
		Current Target	92%



Trend Chart Commentary:

Performance in 2020/21 was 73%.

The service has performed on or above target from 2016/17 to 2019/20. In the last year, 2020/21 performance was impacted by the COVID-19 pandemic and the closure of the majority of youth provisions.

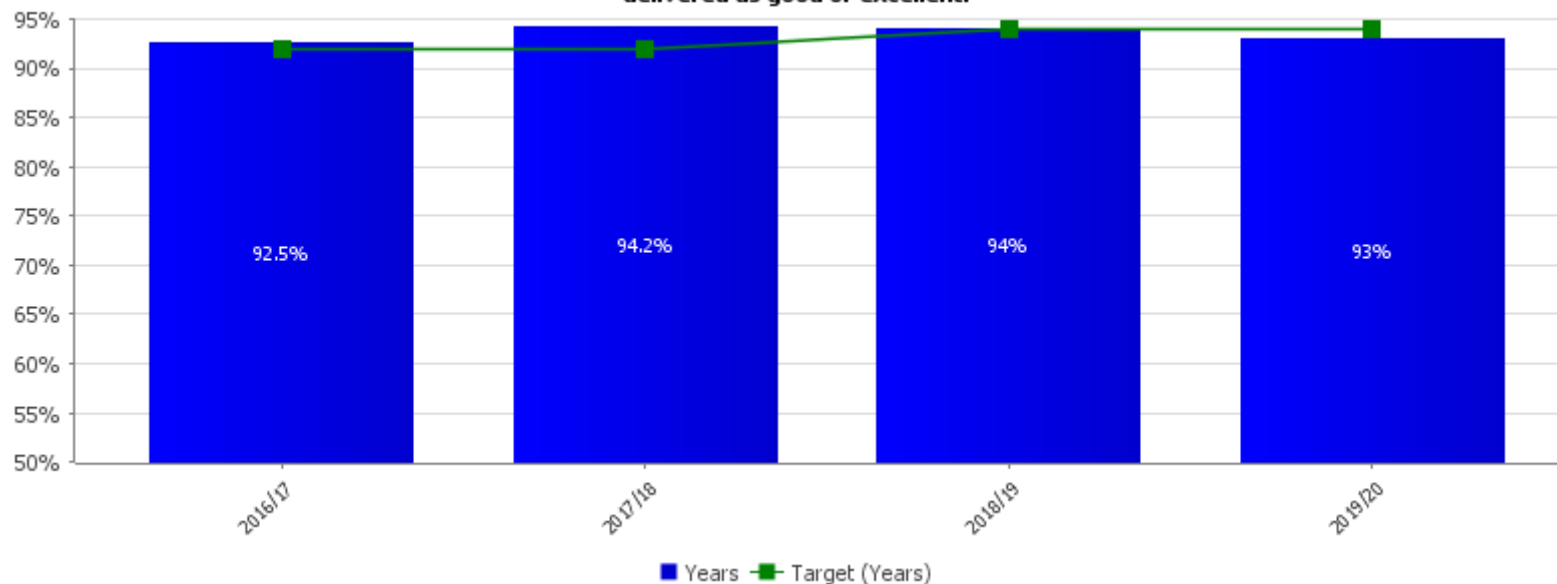
2020/21 performance was 73%, target 92%
 2019/20 performance was 90%, target 90%
 2018/19 performance was 92%, target 84%
 2017/18 performance was 80%, target 84%
 2016/17 performance was 83%, target 85%

The service will make a gradual phased return to face to face youth work in line with recovery and renewal planning. The focus will be on health and wellbeing and employability. Accredited learning opportunities will be offered, where appropriate. The target set for 2021/22 is 78%.

DATA LABEL: OFFICIAL

PI Code & Short Name	P:EDLPP002_6a.2 Learning, Policy and Performance (including Community Learning and Development) WLAM - Percentage of customers who rated the service delivered as good or excellent.	PI Owner	zEDLPP_PIAAdmin; Donna Adam
Description	This performance indicator measures the percentage of customers who rated the service delivered by the Learning, Policy and Performance (including Community Learning and Development) WLAM as good or excellent. Customer feedback is sought via customer survey and customers are asked to rate the service delivered as: excellent, good, adequate, poor or very poor. All responses ranked as either 'Excellent' or 'Good' are recorded as a positive response. For each year, the cumulative number of positive responses are divided by the total number of responses to determine a percentage. Data is updated in August each year.	Traffic Light Icon	✓
		Current Value	93%
		Current Target	94%

Learning, Policy and Performance (including Community Learning and Development) WLAM - Percentage of customers who rated the service delivered as good or excellent.



Trend Chart Commentary:

In 2019/20 customer satisfaction with the service delivered was 93% which was comparable to 18/19. This result over the last two years has come from improvements in communication with customers through the use of online applications and a reduction in traditional methods of communication such as mail. 2017/18 was also the first year that the newly formed Adult Learning Team results were added into this survey.

The analysis of the customer survey results from previous years and subsequent annual review of processes and procedures showed that improvements could be made through the increased use of online applications and use of e-mail correspondence which in turn will improve customer satisfaction with timeliness. 2017/18 was the first year that school placement application were fully automated and can be attributed to the increase in customer satisfaction.

All customer satisfaction responses are broken down into segmented groups according to the specific part of the service they access and analysed to identify trends, provide insight into service delivery and, where possible, identify what action is required to rectify problems.

DATA LABEL: OFFICIAL

For information the number of customers surveys responded to as excellent or good in each year was as follows:

2019/20 - 222 out of 266

2018/19 - 168 out of 730

2017/18 - 957 out of 1016

2016/17 - 420 out of 454

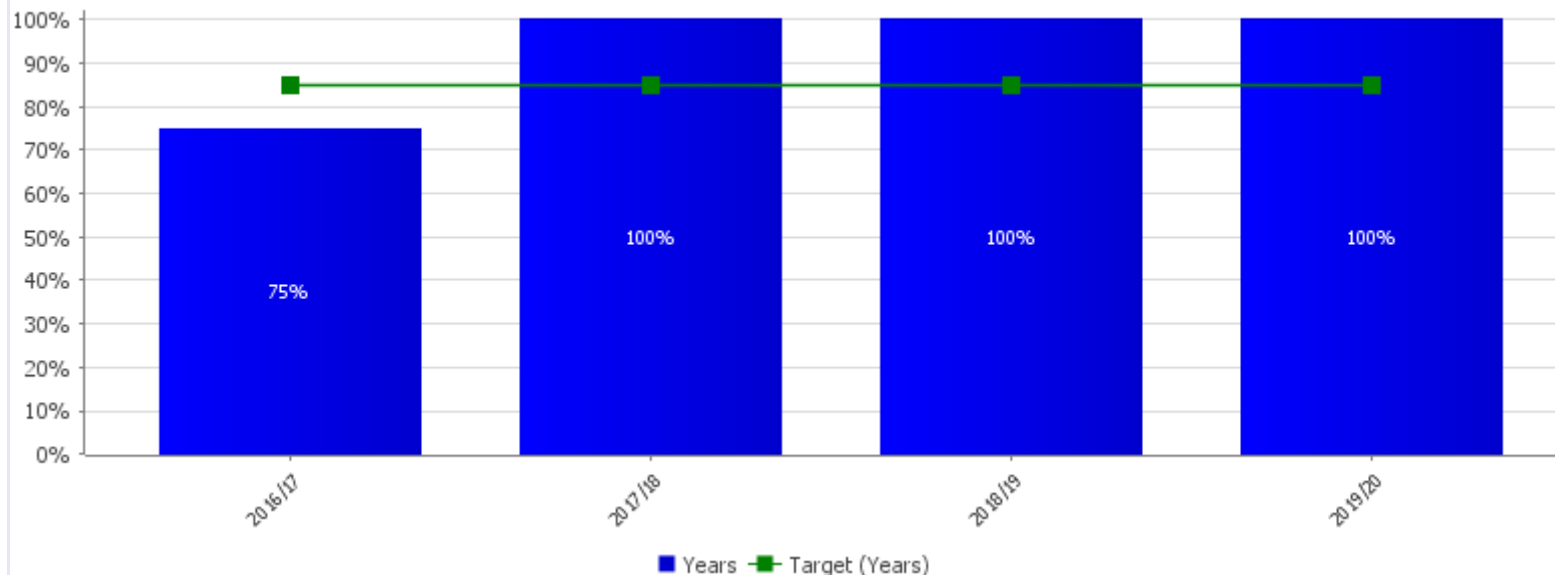
2015/16 - 544 out of 587

The target for 2020/21 has been set at 95%, as online applications will be embedded and result in achieving this increase with the customer satisfaction with service delivery.

DATA LABEL: OFFICIAL

PI Code & Short Name	P:EDLPP008_6b.1 Learning, Policy and Performance (including Community Learning and Development) WLAM - Number of complaints closed at stage one within 5 working days as a percentage of total number of stage one complaints closed	PI Owner	zEDLPP_PIAAdmin; Donna Adam
Description	This indicator measures the total number of stage one complaints (complaints that the council aims to deal with within 5 working days) which are closed within 5 working days as a percentage of the total number of stage one complaints closed by the Learning, Policy and Performance (including Community Learning and Development) WLAM Unit. Performance is reported at the end of each financial year.	Traffic Light Icon	✓
		Current Value	100%
		Current Target	85%

Learning, Policy and Performance (including Community Learning and Development) WLAM - Number of complaints closed at stage one within 5 working days as a percentage of total number of stage one complaints closed



Trend Chart Commentary:

This performance indicator has only been recorded since the start of 2015/16. In 2017/18 Adult Learning and Youth Services were added into the WLAM unit which significantly increased the size of the service.

This WLAM unit was formed in 2017 and now includes Customer Care/Pupil Placement Teams, Community Learning and Development - Adult Learning Team and Youth Services Team.

2020/21

Quarter 1 - Nil complaints received

2019/20 - 12 out of 12 complaints responded to within timescales.

2018/19 - 9 out of 9 complaints responded to within timescales.

2017/18 24 out of 24 complaints responded to within timescales - Council wide average 83.9%

2016/17 12 out of 16 complaints responded to within timescales - Council wide average 85.6%

2015/16 4 out of 5 complaints responded to within timescales - Council wide average 84.7%

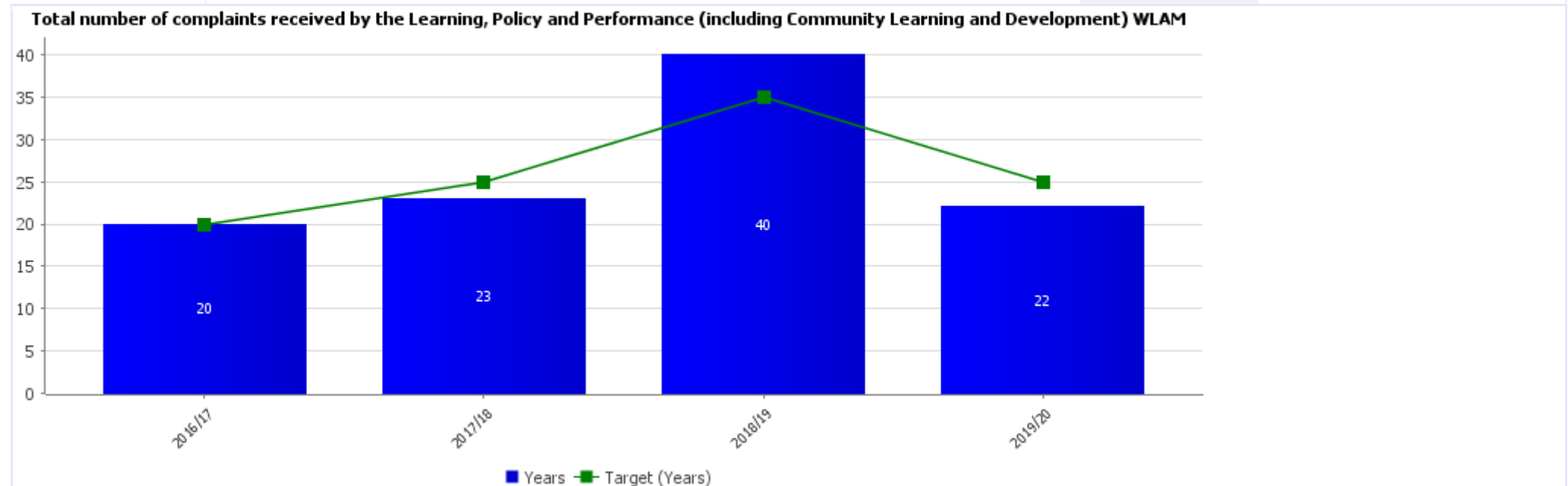
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The Unit will continue to focus on making improvement to the resolution of Stage 1 complaints timeously in order to match performance at Stage 2.

The Service target (and WLAM unit target) for 2020/21 will remain at 85% which is the Corporate Target and it will be used as a benchmark. Staff have received training on classification of complaints at Stage 1 or Stage 2 based on the complexity of the amount of investigation required relating to a complaint.

DATA LABEL: OFFICIAL

PI Code & Short Name	P:EDLPP010_6b.3 Total number of complaints received by the Learning, Policy and Performance (including Community Learning and Development) WLAM	PI Owner	zEDLPP_PIAAdmin; Donna Adam
Description	This indicator measures the total number of complaints received by the Learning, Policy and Performance (including Community Learning and Development) WLAM unit. It is the total number of complaints received by Learning, Policy and Performance (including Community Learning and Development) WLAM unit 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). Performance is reported at the end of each financial year. Note: This is to ensure complaints escalated from stage 1 and stage 2 are not double counted.	Traffic Light Icon	🟢
		Current Value	22
		Current Target	25



Trend Chart Commentary:

This performance indicator has only been recorded since the start of 2015/16. This WLAM unit was formed in 2017 and now includes Customer Care/Pupil Placement Teams, Community Learning and Development - Adult Learning Team and Youth Services Team.

2019/20 - 22 complaints
2018/19 - 40 complaints
2017/18 - 23 complaints

2017/18 was the first year that the newly formed Adult Learning Team were included in these results and as such the target was revised accordingly. Some of the common themes are around complaints are linked to communication, waiting times and refusal of applications for school placements (P1 and S1) and Early Learning and Childcare (ELC). In 2018/19, expansion in early

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learning and childcare entitlement posed a challenge for the Pupil Placement team to administer and a lot of change for customers, and better recording of complaints across the teams led to an increase in complaints. In 2019/20 the challenges around the nursery entitlement had been resolved and pressure on the Pupil Placement team was more manageable allowing faster responses to queries which prevented a lot of issues from escalating to complaints.

Over the past three years the Service received a low number of complaints considering the number of customers that the WLAM unit is interacting with. For example the customer care team deals with benefit applications for over 6000 pupils per year, and the Pupil Placement team deals with over 4000 primary and secondary applications, and over 4500 Early Learning and Childcare applications per year.

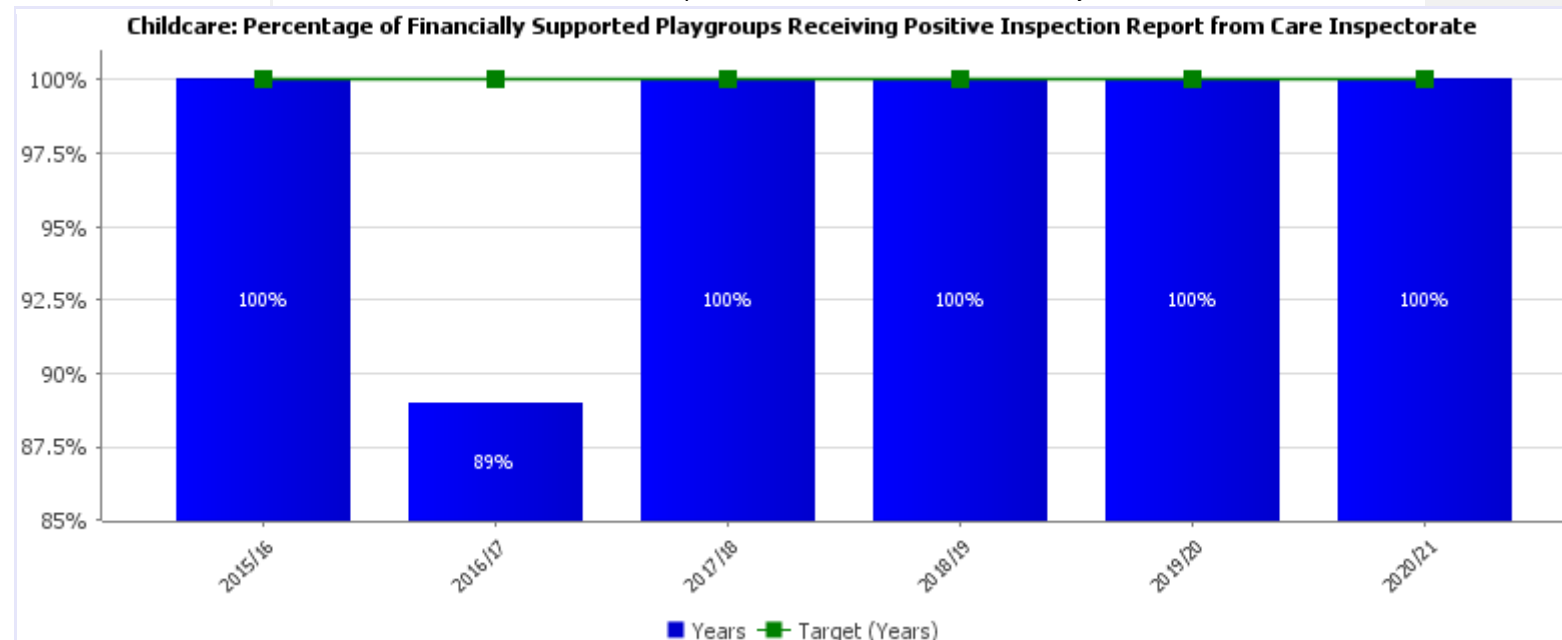
Each time a complaint is received it is seen as an opportunity to improve the service and therefore the Service welcomes complaints and the target has been raised accordingly.

As the number of complaints submitted by customers is not within the Service's control the Service will focus on ensuring that the internal processes and procedures are as efficient as possible to avoid upholding complaints. Moreover, the Service will continue to monitor incoming complaint's numbers to gain visibility over potential issues around our processes and procedures.

The target for 2019/20 will be set at 25 to reflect previous year's results and achieve an improvement.

DATA LABEL: OFFICIAL

PI Code & Short Name	P:EDLPP0629b.1c Childcare: Percentage of Financially Supported Playgroups Receiving Positive Inspection Report from Care Inspectorate	PI Owner	zEDLPP_PAdmin; Mvairi Lynch
Description	Indicator shows the percentage of financially supported childcare providers (playgroups) in West Lothian receiving a positive inspection report after a Care Inspectorate inspection. The Council provides financial support to playgroups in order to increase the range of childcare options available to communities. A positive inspection report is where all quality indicators have been evaluated as adequate or above. This Performance Indicator measures performance in the school/academic year.	Traffic Light Icon	🟢
		Current Value	100%
		Current Target	100%



Trend Chart Commentary:

There were no inspections during 2020/21 due to the COVID pandemic as playgroups were closed for most of the year.
The 12 registered playgroups in West Lothian are provided support through the Early Years Development Team and Community Playgroups.

Over the period displayed on the chart performance has been positive. However, in 2016/17, 2 independent playgroups received a negative report. Remedial actions were taken supported by the Early Years Development team and through liaison with the Care Inspectorate one playgroup joined Community Playgroups and re-inspection showed improvement.

Benchmarking is internal within the playgroups across West Lothian which are financially supported and registered with the Care Inspectorate and takes place on an annual basis when grant applications are submitted. Benchmarking provides an opportunity for the Early Years Development Team to review the standard of care provided within each setting and in particular the support provided to funded placements for eligible two year olds.

The number of playgroups inspected by the Care Inspectorate per year is outlined below:
2020/21 - there were no inspection during the year due to COVID and playgroups closed

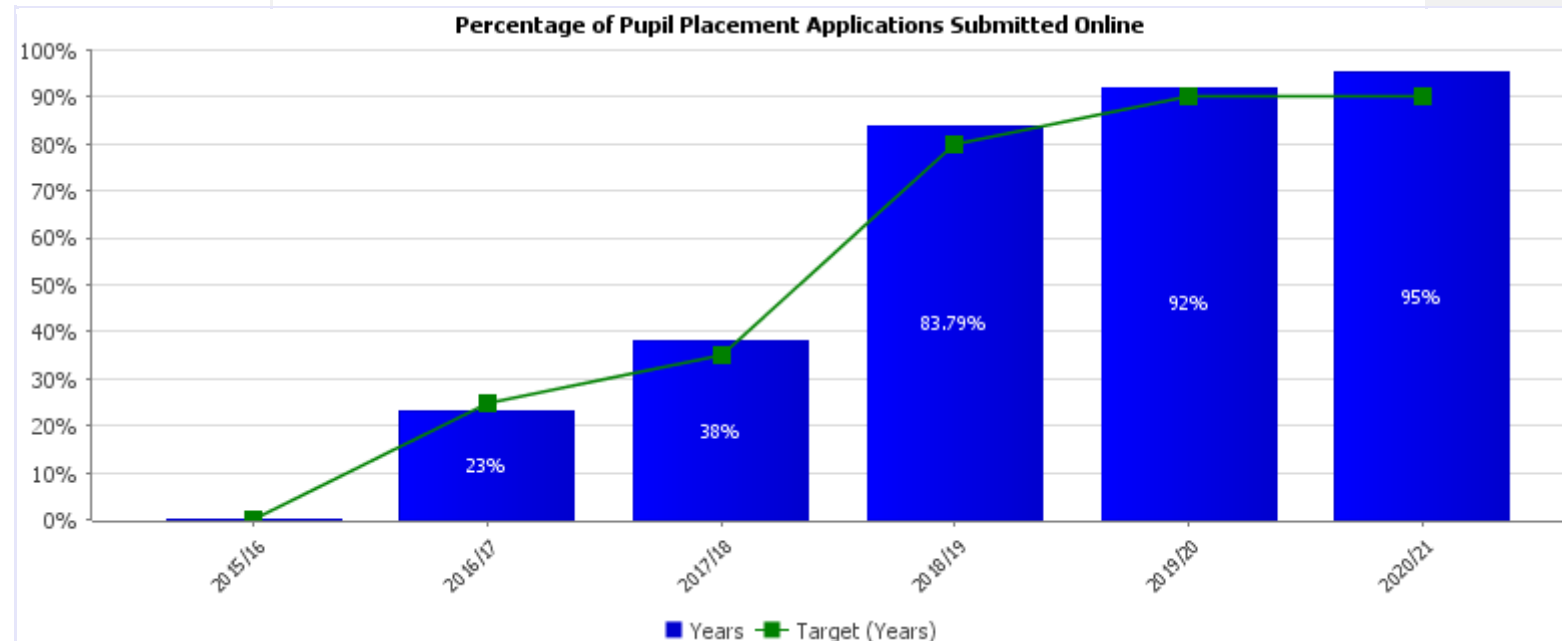
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2019/20 - 5
2018/19 - 4
2017/18 - 2
2016/17 - 4

The target for 2021/22 will remain 100% as this is a requirement for funded placements from the Scottish Government that a setting should have a positive Care Inspectorate report and meet the new National Standard which was published on 18 December 2018.

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PI Code & Short Name	P:EDPP215_9b.1b Percentage of Pupil Placement Applications Submitted Online	PI Owner	zEDPPL_PIAAdmin; Hannah Haywood
Description	This indicator shows the percentage of P1/S1 and early learning and childcare applications made online. A range of e-forms, starting with a secondary school application form in Session 2017/18, were introduced when a suitable development environment was introduced by the Council's web site provider. Parents/carers are now encouraged to use e-forms rather than their paper equivalents whenever possible, however paper forms remain an option for applicants who are not comfortable with e-forms and for those with no on-line access. Data updated in August.	Traffic Light Icon	🟢
		Current Value	95%
		Current Target	90%



Trend Chart Commentary:-

The ability to submit online applications was introduced in late 2016, starting with Secondary School, Early Learning and Childcare and Wraparound Care. The calculation was based on those application processes where on-line application has been an option. As the previous figure was not based on the 2016/17 School Session, a true comparison is not possible.

A large majority of forms (particularly P1, S1, Additional Year of Early Learning and Childcare) are almost exclusively for the start of the school session; however mid-session applications can be submitted at any time.

Parents/carers were able to submit on-line P1 applications for the first time for Session 2018/19, and paper based school placement application forms are now only available on request. This has resulted in the large increase in the number of forms submitted on-line.

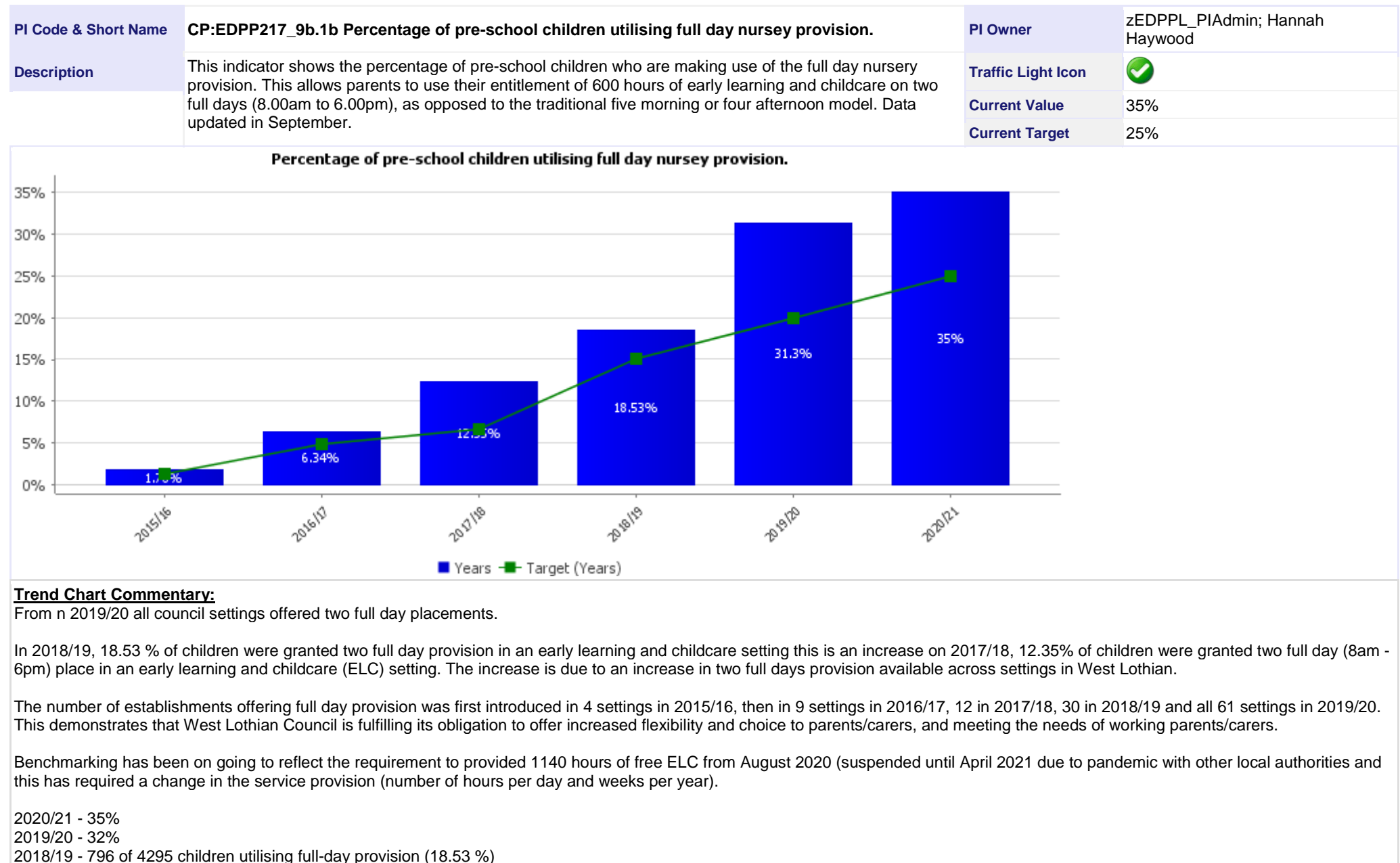
2020/21 - 95%
2019/20 - 92%
2018/19 - 83.79%

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2017/18 - 38%
2016/17 - 23%

The target for 2021/22 will remain at 95%, based on wider availability, increased publicity and an expected growing demand for e-forms.

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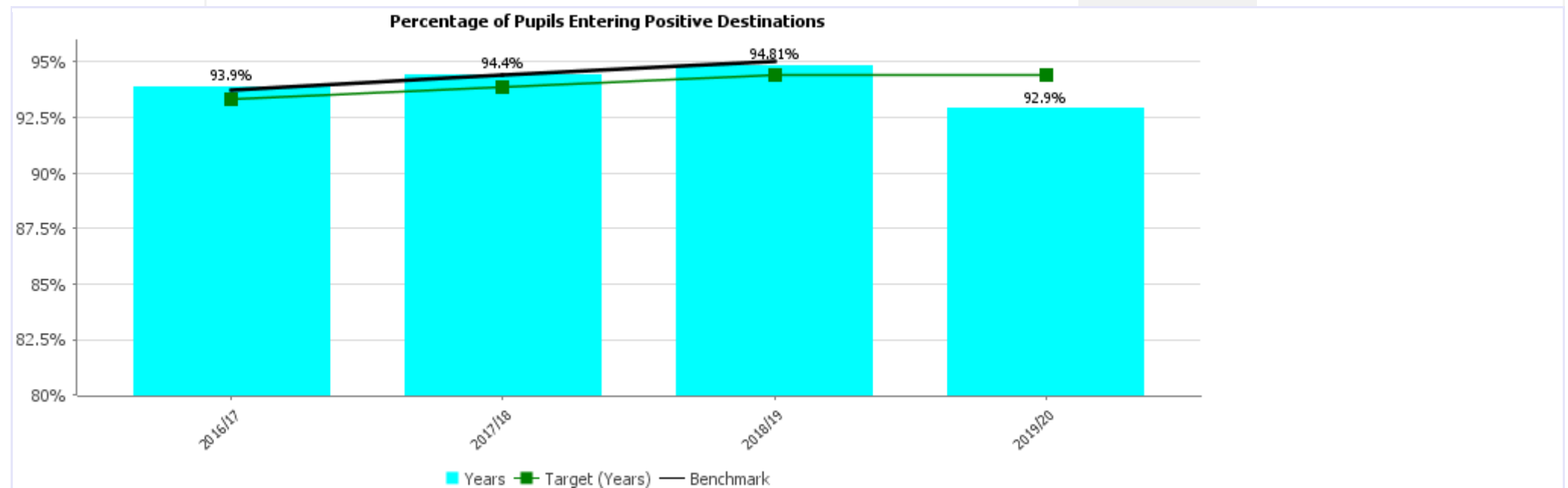
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2017/18 - 513 of 4154 children utilised full-day provision (12.35%)
2016/17 - 260 of 4099 children utilised full-day provision (6.34%)
2015/16 - 69 of 3912 children utilised full-day provision (1.76%)
2014/15 - no children utilised full-day provision as it was not available

Target for 2021/22 remain 35% as the ELC Expansion provides more flexibility and choice for parents include funded placements with partner providers including childminders.

DATA LABEL: OFFICIAL

PI Code & Short Name	SCHN11 Percentage of Pupils Entering Positive Destinations	PI Owner	zAdmin_SCHN; Stuart McKay
Description	<p>Percentage of Pupils Entering Positive Destinations measures the percentage of pupils leaving school and entering education, employment, training or voluntary work.</p> <p>This information is collected by Skills Development Scotland (SDS) via an initial leaver destination survey, which collects information on the destination of school leavers in September.</p> <p>A school leaver is classed as a young person of school leaving age, who left school during (at the end of the winter term) or at the end of the school year, where the school year is taken to run from 1 August to 31 July.</p> <p>School leavers who moved out-with Scotland have not been included in the results.</p>	Traffic Light Icon	🟢
		Current Value	92.9%
		Current Target	94.4%



Trend Chart Commentary:

Performance has increased from 93.40% to 94.81% between 2014/15 and 2018/19.

2018/19 performance of 94.81% was above the target of 94.4% but below National performance of 95.05%, National performance is shown on the benchmark line in the chart. West Lothian was ranked equal 17th out of the 32 Local Authorities and 4th out of the 8 Local Authorities in our Family Group.

West Lothian Council is committed to improving attainment for all children and young people in line with the National Improvement Framework and West Lothian Council's Raising Attainment Strategy through the effective delivery of Curriculum for Excellence to allow pupils to enter positive post-School destinations.

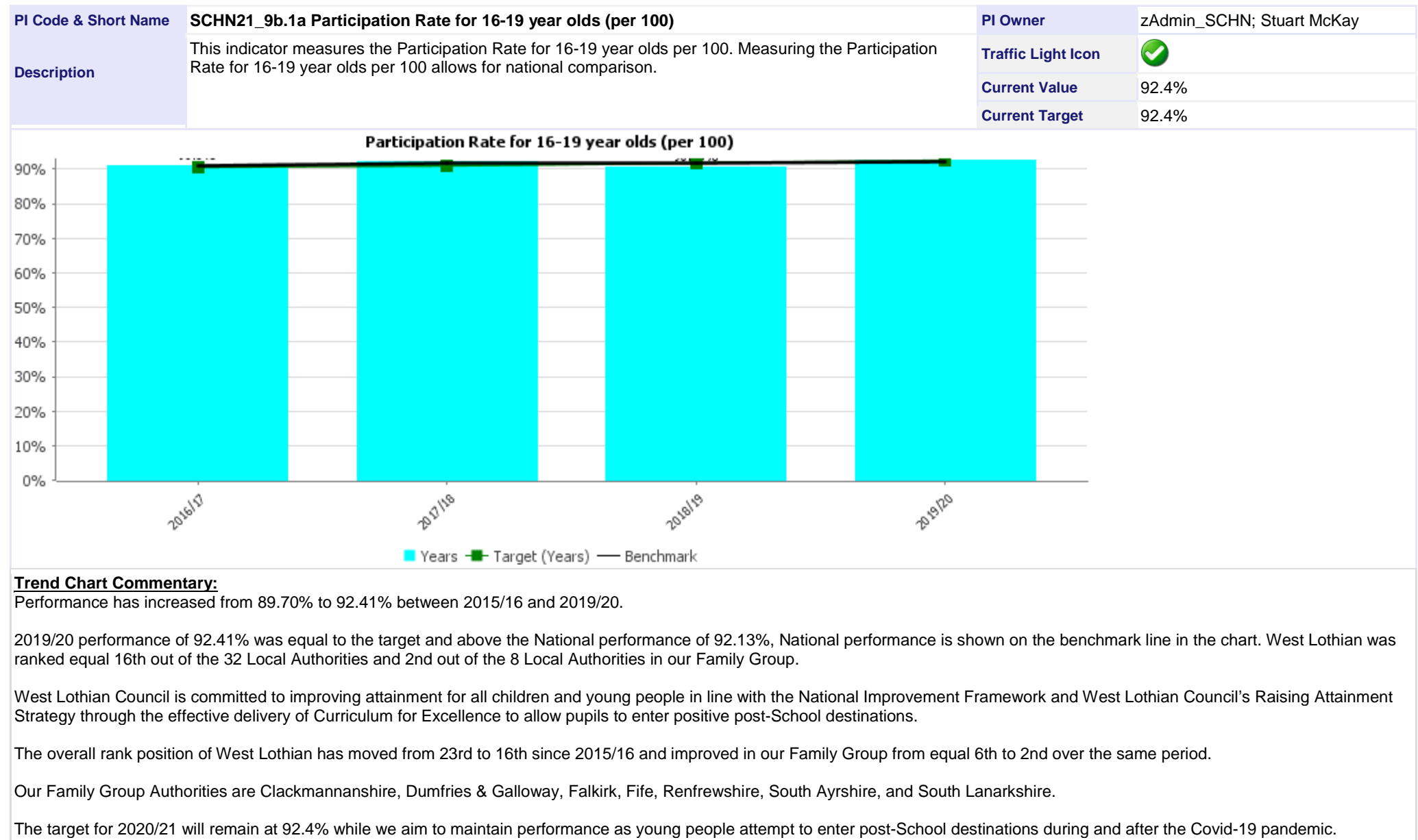
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The overall rank position of West Lothian has moved from 15th to 17th since 2014/15 and moved in our Family Group from 2nd to 4th over the same period.

Our Family Group Authorities are Clackmannanshire, Dumfries & Galloway, Falkirk, Fife, Renfrewshire, South Ayrshire, and South Lanarkshire.

The target for 2019/20 will remain at 94.4% while we aim to maintain performance as young people attempt to enter post-School destinations during and after the Covid-19 pandemic.

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PERFORMANCE COMMITTEE

COMPLAINT PERFORMANCE REPORT 2020/21

REPORT BY DEPUTE CHIEF EXECUTIVE

A. PURPOSE OF REPORT

To report to the Performance Committee the council's complaint annual report 2020/21 and provide detailed analysis of council-wide complaints closed during 2020/21.

B. RECOMMENDATIONS

It is recommended that the Performance Committee:

1. Note the council's annual Complaint Performance Report 2020/21;
2. Note the corporate and service complaint performance against the standards outlined in the council's complaint handling procedure; and
3. 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	Complaints annual report to be considered at the Policy and Resource PDSP
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.

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

The SPSO began a review of the model CHP in 2019/20.

The SPSO finalised the revised model CHP in 2020/21 which updated and refreshed the procedure. All Local Authorities are required to implement the revised CHP.

The key changes to the CHP are outlined below:

- The addition of a new outcome "Resolution";
- Agreeing the points of the complaint at stage 2 acknowledgement response;
- Time limit to make a complaint reduced from 12 months to 6 months;
- Managing complaints on council social media channels- signpost social media complainants to the council's CHP.

The revised Complaint Handling Procedure was considered by the Partnership and Resources PDSP on 23 April 2021 and approved by the Council Executive on 18 May 2021. The revised Complaint Handling Procedure is included in Appendix 4 of the report.

D.2 Corporate Complaint Performance

Table 1 provides the council's total complaints closed per 1,000 population over the past 5 years. The table shows that there has been an increase in complaints received by the council in 2020/21 when compared to the previous year from 2,871 to 2,875.

Table 1 Complaints closed per 1,000 population

Measure	2016/17	2017/18	2018/19	2019/20	2020/21
West Lothian Population ¹	178,550	180,130	181,310	182,140	183,100
Total number complaints closed	3,414	3,169	3,382	2,871	2,875
Number complaints closed per 1,000	19.1	17.6	18.7	15.8	15.7

¹ Previous years published mid-year estimate used

Table 2 provides a breakdown of complaints closed by service from 2016/17 to 2020/21

Table 2 Complaints closed by service

Service	2016/17	2017/18	2018/19	2019/20	2020/21
Operational Services	1,852	1,644	1,759	1,290	1,576
Housing, Customer & Building Services	1,013	950	969	911	757
Education Services	277	225	276	263	222
Finance and Property/ Executive Office	179	127	163	171	146
Social Policy ²	5	137	128	146	118
Planning, Economic Dev. and Regeneration. (PEDR)	72	73	71	62	43
Corporate Services	16	13	16	28	13
Total	3,414	3,169	3,382	2,871	2,875

Table 3 breaks down the annual complaints closed by complaint category over a 5 year period.

Table 3 Complaint category covering period 2016/17 – 2020/21

Complaint Category	2016/17	2017/18	2018/19	2019/20	2020/21
Standard of Service	1,652	1,809	2,134	1,347	1,281
Policy Related	578	437	330	533	597
Poor Communication	369	299	307	483	475
Employee Attitude	324	366	383	331	393
Waiting Time	463	228	206	155	104
Missed Appointments	28	30	22	22	25
Total Complaints	3,414	3,169	3,382	2,871	2,875

The current service level complaint performance varies across the council and is linked to the complexity and quantity of complaints received. Housing, Customer and Building Services (HCBS) and Operational Services are the main complaint generators by service, accounting for 81.2% (2,333) of all recorded complaints (2,875) during 2020/21.

The main contributors in Standard of Service complaints are HCBS (343) and Operational Services (653) which account for 77.75% (996) of all recorded complaints in the category. The equivalent quarters in 2019/20, HCBS (408) and Operational Services (632) had a combined total of 1,040 complaints categorised as Standard of Service.

The increase in Policy Related complaints is attributable to a large increase in Operational Services Policy complaints from the equivalent quarters in 2019/20. Operational Services received 597 Policy Related complaints in 2020/21 against a total of 276 Policy Related

² Social Policy: From the 1 April 2017 all complaints were considered as part of the council's CHP.

complaints in 2019/20. The increase in Operational Service Policy complaints related to the implementation of the Spaces for People programme and the delivery of the Winter Maintenance programme by Road and Transportation Services. Roads and Transportation Services received 251 policy complaints in 2020/21 compared to 52 in 2019/20. The main contributors to Policy Related complaints were Operational Services (427) and HCBS (76) accounting for 84.3% of all recorded complaints in this category.

85.3% (405) of all Poor Communication complaints are generated by Operational Services (303) and HCBS (102). Operational Services had the largest increase in the Poor Communication complaints when compared to the previous year from 237 to 303.

The increase in Employee Attitude complaints have been driven by Operational Services (175) and HCBS (137) which account for 79.4% (312) of all recorded complaints in this category. During 2019/20, Operational Services (125) and HCBS (111) had a combined total of 236 complaints categorised as Employee Attitude.

The main contributors of Waiting Time complaints are HCBS (81) and Operational Services (11) which account for 88.5% (92). The equivalent quarter in 2019/20, HCBS (121) and Operational Services (16) had a combined total of 137 complaints categorised as Waiting Time.

Appendix 1 to the report provides the council wide performance against the SPSO defined measures for 2020/21.

Appendix 3 includes Scottish Local Authority average comparative performance information for 2019/20 for some of the indicators presented. The council's performance in relation to complaint processing outperformed the 2019/20 Scottish national average for most of the indicators presented.

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

Table 4 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	
	2019/20	2020/21	2019/20	2020/21	2019/20	2020/21	2019/20	2020/21
Corporate Services	28	13	74%	30.8%	0%	N/A	10.7%	69.3%
Education Service	263	222	86.2%	85.1%	77.5%	83.0%	31.6%	40.5%
Exec Office	7	13	N/A	0%	100%	54.5%	0%	7.7%

Service	Total complaints		Complaints closed within 5 working days		Complaints closed within 20 working days		Complaints part upheld/ upheld	
	2019/20	2020/21	2019/20	2020/21	2019/20	2020/21	2019/20	2020/21
Finance and Property	164	133	85.4%	83.5%	75.0%	81.8%	31.1%	22.6%
HCBS	911	757	87.2%	89.8%	83.6%	87.6%	43.6%	36.8%
Operational Services	1,290	1,576	82.5%	82.2%	86.7%	88.4%	17.9%	26.2%
PEDR	62	43	91.4%	56.5%	87%	61.1%	19.4%	23.3%
Social Policy	146	118	49.1%	47.9%	73.3%	43.8%	51.4%	56.8%
Total	2,871	2,875	82.8%	82.6%	81.7%	81.0%	34.2%	31.3%

In 2020/21 there was a decrease in the percentage of complaints that were upheld/ part upheld when compare to the previous year from 34.2% (981) to 31.3% (900). There were 81 less complaints that were upheld/ part upheld when compared to the 2019/20 figure (981).

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

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

Service	Base unit (2020/21)	2020/21 complaint volume	Complaint ratio
Education Services	30,000 pupils	222	1 complaint for every 135 pupils
HCBS	13,169 council houses	757	1 complaint for 17 council houses
Operational Services	76,659 households	1,576	1 complaint for every 49 households

A target of 85% has been set for the percentage of complaints which must be dealt with within timescale. Across the council, 31.3% of all complaints received in 2020/21 have been upheld/ part upheld.

Appendix 1 contains the complaints analysis covering 2020/21 by Service. Appendix 2 contains the fully breakdown of complaint outcome by reason over 2020/21.

Appendix 3 provides the West Lothian Council Annual Complaint Performance Report 2020/21.

E. CONCLUSION

In 2020/21 the council closed 2,875 complaints and this represents a marginal increase on the number of complaints closed in 2019/20. This was primarily linked to an increase in complaints closed by Operational Services.

The increase in Operational Services complaints was 286. This increase can be attributed to the increase in complaints closed by Roads and Transportation Services from 165 in

2019/20 to 461 in 2020/21. All other services saw a decrease in complaints over 2020/21 which was in part linked to the reduction in complaints received in Q1 2020/21.

The council has shown similar performance to the previous year relating to the percentage of complaints closed at stage 1 and stage 2 against target but both performance levels are well above the Scottish national average. Customer satisfaction performance relating to complaint handling has improved across all four key indicators.

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. [The Local Authority Model Complaints Procedure \(model CHP\) Guide to Implementation](#)
2. [WLC Complaints Handling Procedure](#)

Appendices/Attachments:

Appendix 1 Corporate Complaint Performance 2020-21

Appendix 2 Complaint Outcome by Reason and HOS 2020-21

Appendix 3 West Lothian Council Annual Complaint Performance Report 2020-21

Appendix 4 Revised Complaint Handling Procedure

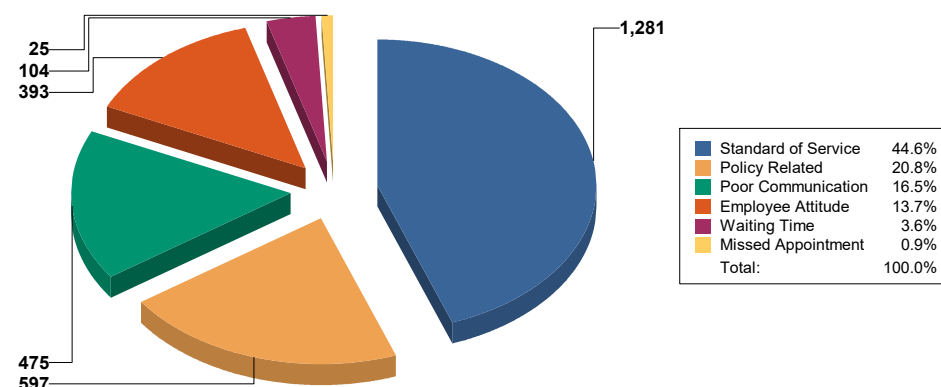
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Graeme Struthers
Depute Chief Executive
7 June 2021

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	2875	
2	Complaints closed at Stage 1	2447	85.1%
	Complaints closed at Stage 2	373	13.0%
	Complaints closed at Stage 2 after escalation	55	1.9%
3	Complaints UPHELD at Stage 1	477	19.5%
	Complaints NOT UPHELD at Stage 1	1685	68.9%
	Complaints PART UPHELD at Stage 1	285	11.6%
	Complaints UPHELD at Stage 2	53	14.2%
	Complaints NOT UPHELD at Stage 2	255	68.4%
	Complaints PART UPHELD at Stage 2	65	17.4%
	Escalated complaints UPHELD at Stage 2	9	16.4%
	Escalated complaints NOT UPHELD at Stage 2	35	63.6%
	Escalated complaints PART UPHELD at Stage 2	11	20.0%
4	Average working days to respond to a Stage 1 complaint	4.0	Days: 9865
	Average working days to respond to a Stage 2 complaint	14.7	Days: 5482
	Average working days to respond to a Stage 2 after escalation	11.7	Days: 645
5	Complaints closed at Stage 1 within 5 working days	2022	82.6%
	Complaints closed at Stage 2 within 20 working days	302	81.0%
	Complaints closed at Stage 2 within 20 working days after escalation	47	85.5%
6	Complaints closed at Stage 1 where an extension has been authorised	15	0.6%
	Complaints closed at Stage 2 where an extension has been authorised	3	0.8%

Number of Complaints by Reason


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: 82.5% (2371)

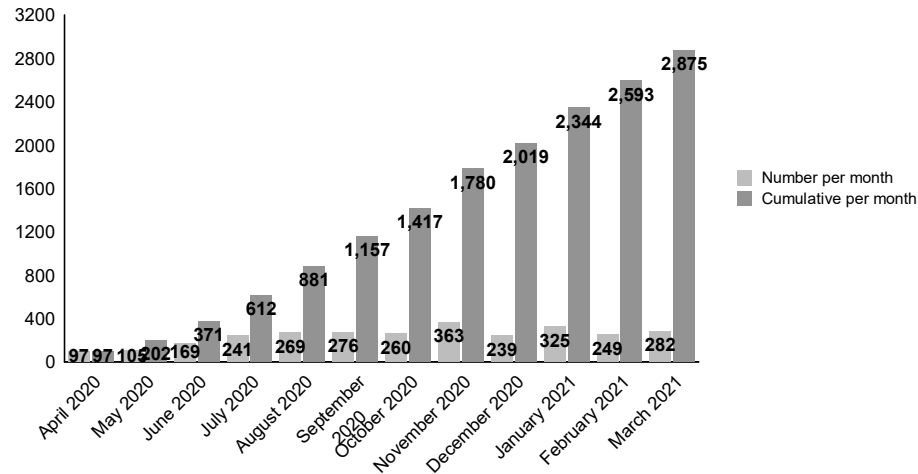
Percentage of all complaints UPHELD: 18.7% (539)

Percentage of all complaints NOT UPHELD: 68.7% (1975)

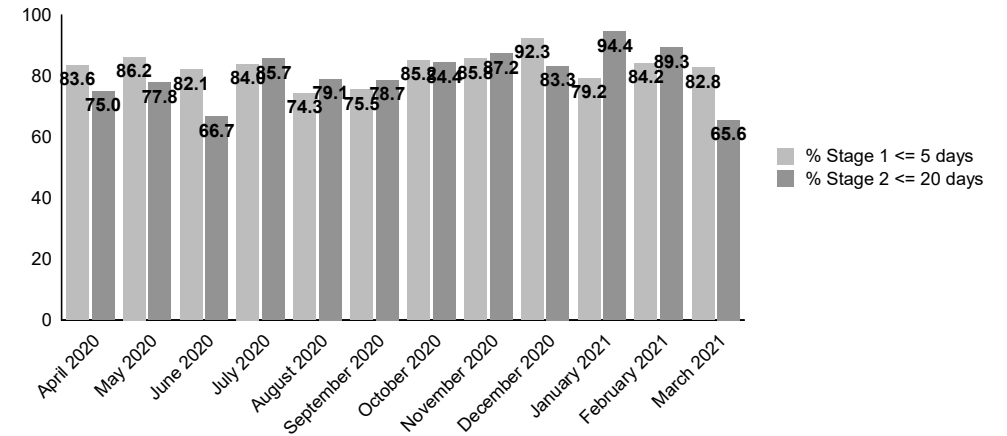
Percentage of all complaints PART UPHELD: 12.6% (361)

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

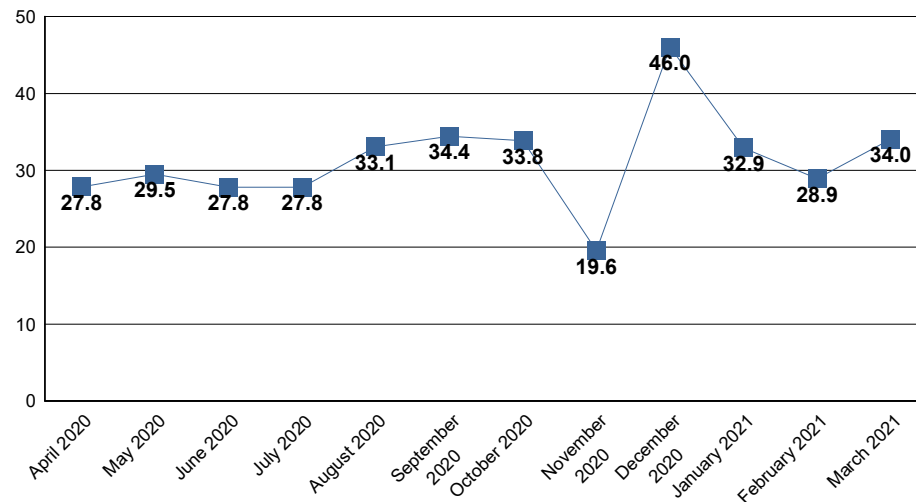


Table showing % of complaints closed within SLA at Stage 1 and Stage 2 cumulative by month

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	83.8%	77.2%
August 2020	80.9%	77.8%
September 2020	79.6%	78.0%
October 2020	80.6%	79.6%
November 2020	81.7%	80.8%
December 2020	83.0%	81.0%
January 2021	82.2%	82.3%
February 2021	82.4%	82.8%
March 2021	82.5%	81.5%

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)

	<u>Total</u>	<u>STAGE 1</u>			<u>STAGE 2</u>			<u>Escalated</u>		
		<u>Upheld</u>	<u>Part Upheld</u>	<u>Not Upheld</u>	<u>Upheld</u>	<u>Part Upheld</u>	<u>Not Upheld</u>	<u>Upheld</u>	<u>Part Upheld</u>	<u>Not Upheld</u>
Corporate Services	13	6	3	4						
Employee attitude general	1			1						
Failure to reply	3	2	1							
Inaccurate advice/ information	1			1						
Policy related general	2			2						
Poor communication general	1	1								
Standard of service general	2	2								
Unreasonable delays	1		1							
Waiting time general	2	1	1							
Education	222	69	11	88	5	5	43			1
Additional Support Needs	16		1	7	1	1	6			
Bullying - Pupil - Pupil	29	3	1	15			10			
Bullying - Pupil - Teacher	2			1			1			
Child Protection	7			4		1	2			
Communication	25	9	1	13		1	1			
Composite Classes	6			3	1	1	1			
Curriculum	56	46		6			4			
Data Protection	6	3		3						
Discipline	6	1		3			2			
Facilities	4			4						
Head Teacher	8			3			4			1
Head Teacher & Staff	9		1	3	1		4			
Health & Safety	4	2	1	1						
Insurance	1						1			
Nursery Placement	11	1	1	6			3			
Office Staff	4			4						
Policy	5			3	1		1			
Pupil Placement	12	4	2	3	1	1	1			
School Dress	2			2						
Teacher Attitude	9		3	4			2			
Executive Office	13	1					11			1

Corporate Services	2	1			1			
Discrimination	1				1			
Incorrect or conflicting advice	1				1			
No action / Ineffective action taken	1				1			
Operational Services	3				3			
Planning and Econ. Dev.	2				2			
Policy related general	2				2			
Standard of service general	1							1
Finance & Property Services	133	16	9	96	3	2	6	1
Call not answered	1	1						
Claim/information processed incorrectly	40	3	4	31		1		1
Delay in processing claim/information	15	3	2	8	2			
Discretionary payments decision	2	1		1				
Employee attitude general	17	1		14		1	1	
Inaccurate advice/ information	1			1				
Incorrect or conflicting advice	5	2	1	2				
IT system failure	1			1				
No action / Ineffective action taken	1			1				
Policy related general	6			5		1		
Poor communication general	8	3		5				
Recovery of debt	17		1	16				
Response time	1		1					
Standard of property/accommodation	1			1				
Standard of service general	16	2		9	1	1	3	
Waiting time general	1			1				
HC&BS	757	110	98	359	28	30	95	6 7 24
Awaiting materials	1		1					
Call not answered	6		2	4				
Claim/information processed incorrectly	1	1						
Customer standards not met	84	6	12	42	1	3	12	3 2 3
Damages to property	29	5	4	14		1	5	
Driving/ parking issues	17	7	4	5				1
Employee attitude general	82	10	16	29	2	7	12	1 5
Failed timescales	4	2		2				
Failed to reply	1			1				
Failure to reply	1					1		

Health & Safety	3	3						
Inaccurate advice/ information	1				1			
Incorrect or conflicting advice	20	4	3	7	1 4			1
Lack of communication	22	5	1	12	2			1 1
Missed appointment general	15	3	4	5	1 1			1
No action / Ineffective action taken	28	4	9	7	1 2 3			1 1
Policy related general	61	3	3	35	3 2 12			3
Poor communication general	76	14	9	34	4 3 9			3
Procedure not followed	4	3 1						
Refusing customer request	5	4						1
Staff conduct/ attitude	27	4	6	10	2 5			
Standard of property/accommodation	28	4 13			1 2 8			
Standard of service general	112	10	10	63	2 3 19			5
Standard of workmanship	26	7	1	15	2 1			
System Issue	1				1			
Telephony Issue	1	1						
Third party supplier	14	5	1	3	3 1			1
Unreasonable delays	5	2 1			1			1
Unresolved repair after visit	16	6 7			2 1			
Untidy work	7	5 2						
Waiting time general	59	4	6	41	3 3			1 1
Operational Services	1576	247	142	1092	12	13	70	
Access Issues	41	3	3	33	1 1			
Accessibility Issues	6	5			1			
Assisted Bin Collections	36	11	11	13	1			
Awaiting Bin Stock Delivery	1	1						
Bin Capacity/ Size	4	4						
Bin Collection Issues Domestic	439	78	54	277	7 5 18			
Bin Collection Issues Trade	2	1 1						
Bin Contamination Issues	18	2	3	13				
Bin Deliveries/ Requests	11	2	4	5				
Bin/ Bulky Presentation Issues	30	4	1	22	3			
Bin/Pick-Ups/Returns/Spillages	18	5	7	6				
Breach of Policy	2	1			1			
Bulky Uplift Missed	8	3	1	3	1			

Bulky Uplift Policy Changes	3		2		1	
Collection Dates/ Routes	1		1			
Complaint Handling Procedure	2	2				
Council Policy & Legislation	34	1	2	28	3	
Covid19 - Policy Related	227		1	210	1	2
Damage to Property	27	18	5	2	2	
Environmental Concerns	16	4	1	9	2	
Expectations Not Met	39	5	3	24	1	2
External 3rd Party	23	2	1	20		
Glass Recycling	18		6	11	1	
Grass Left on Paths	5	3	1	1		
Grass Not Cut/ Missed	8	3	1	4		
Health & Safety	13	4	3	6		
HWRC - Recycling Centre Issues	13			12	1	
HWRC OpeningTimePolicy Changes	1			1		
Incorrect Conflicting Advice	2			2		
Lack of Communication	31	6	3	21	1	
Lack of Consultation	3			2	1	
Material Left on Site	2	1		1		
Noise Nuisance	3	1		2		
Parking Issues	8	4		3	1	
Poor Customer Service	14	7	1	6		
Poor or Agressive Driving	10	2	2	4	2	
Private Property not WLC	2			2		
Recycling & Calendars	3		1	2		
Road Works	17	1		16		
Road/ Path Defects	22			20	2	
Service Standards	180	17	18	139	1	2
Severe Weather Event	4			4		
Staff Conduct / Attitude	46	18	8	16	1	3
Standard of Workmanship	4	3		1		
Street Lighting Faults	3	1		2		
Unreasonable Delays	2			2		
Vehicle Breakdown	1			1		
Weather Related Delays	14	3		11		

Website Content Missing/Errors	5	1	4						
Winter Maintenance Policies	154	30	1	117	1	5			
Planning Econ Dev Regen	43	6	3	14	1	17		2	
Inaccurate advice/ information	1					1			
Incorrect / incomplete advice	2		1	1					
Lack of communication	2		1			1			
Missed appointment general	1	1							
Pest Control- standard of service	3	1		2					
Planning application- delay in processing	1			1					
Policy related general	17			7		10			
Poor communication general	4				1	3			
Standard of service general	7	1	1	1		2		2	
Unreasonable delays	3	3							
Waiting time general	2			2					
Social Policy	118	22	19	32	5	14	13	3	4
Customer standards not met	1		1						
Employee attitude general	33	2	5	13	3	5		1	4
Lack of communication	4	1	1	2					
Non-residential Financial Contributions	4	1	1	1	1				
Policy related general	6	1			1	2	2		
Poor communication general	20	7	1	6	1	2		2	1
Standard of service general	39	8	8	8	1	7	2	1	2
Timescale issue	1		1						
Unprofessional conduct	10	2	1	2	1	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		
		December	February	March
Total	33	1	6	26
Corporate Services	4	1	1	2
Education	6			6
Finance & Property Services	1		1	
Housing Customer & Building Services	12		1	11
Operational Services	6		2	4
Planning Economic Development & Regenerati	1			1
Social Policy	3		1	2

Appendix 2 Upheld/ Part Upheld/ Not Upheld By Reason and Head of Service 2020/21

Complaint Reason	HOS	Not Upheld	Part Upheld	Upheld	Total
Employee Attitude	Corporate Services	1	0	0	1
	Education	16	4	1	21
	Executive Office	2	0	0	2
	Finance & Property Services	16	1	1	18
	Housing Customer & Building Services	78	35	24	137
	Operational Services	79	42	54	175
	Social Policy	24	11	4	39
Employee Attitude Total		216	93	84	393
Missed Appointment	Housing Customer & Building Services	11	4	3	18
	Operational Services	2	1	4	7
Missed Appointment Total		13	5	7	25
Policy Related	Corporate Services	2	0	0	2
	Education	42	3	4	49
	Executive Office	4	0	0	4
	Finance & Property Services	9	1	1	11
	Housing Customer & Building Services	59	9	8	76
	Operational Services	411	10	6	427
	Planning Economic Development & Regeneration	18	1	0	19
	Social Policy	3	2	4	9
Policy Related Total		548	26	23	597
Poor Communication	Corporate Services	0	1	0	1
	Education	12	1	7	20
	Executive Office	3	0	1	4
	Finance & Property Services	8	1	4	13
	Housing Customer & Building Services	63	14	25	102
	Operational Services	230	29	44	303
	Planning Economic Development & Regeneration	4	2	0	6
	Social Policy	11	4	11	26
Poor Communication Total		331	52	92	475
Standard of Service	Corporate Services	1	0	4	5
	Education	62	8	58	128
	Executive Office	3	0	0	3
	Finance & Property Services	68	8	13	89
	Housing Customer & Building Services	214	60	69	343
	Operational Services	433	71	149	653
	Planning Economic Development & Regeneration	9	1	6	16
	Social Policy	13	20	11	44
Standard of Service Total		803	168	310	1281
Waiting Time	Corporate Services	0	2	2	4
	Education	0	0	4	4
	Finance & Property Services	2	0	0	2
	Housing Customer & Building Services	53	13	15	81
	Operational Services	7	2	2	11
	Planning Economic Development & Regeneration	2	0	0	2
Waiting Time Total		64	17	23	104
Total		1975	361	539	2875
		68.7%	12.6%	18.7%	100.0%

Data Label: Public

West Lothian Council

Annual Complaint Performance Report 2020/21

ANNUAL COMPLAINT PERFORMANCE REPORT | 2020-21

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ANNUAL COMPLAINT PERFORMANCE REPORT | 2020-21

1. Overview

1.1. Introduction

This is the council's annual complaints performance report which provides information on customer complaints received and closed between 1 April 2020 and 31 March 2021.

The council always aims to provide the highest possible quality of service to our community, but recognise that there are times when things go wrong and fail to meet the expectations of our customer.

The council's complaints procedure provides our customers with a clear and structured way to provide feedback on their dissatisfaction with council services in a range of easily accessible ways. The council welcomes feedback and it provides information that helps services learn from complaints and to modify and improve the way services are delivered.

The indicators covered in this report were created to provide a useful tool that the council and the public can use to judge objectively how well complaints are being handled and how it informs service improvement activity.

1.2. Corporate Complaints Procedure

There are many factors that affect the number and complexity of complaints received by the council such as the standard of service that is being delivered, the attitude of our employees, the service response time to customer requests, missed appointments and poor communication.

The council's complaint procedure has 2 stages in its process which are outlined below:

- Stage one complaints could mean immediate action to resolve the problem or complaints which are *resolved in no more than five working days*.
- Stage two deals with two types of complaints: those that have not been resolved at stage one and those that are complex and require detailed investigation. Stage two complaints should be resolved *in no more than 20 days*.
- After the council has fully investigated the complaint, and if the customer is still not satisfied with the decision or the way the council dealt with the complaint, then it can be referred onto the Scottish Public Services Ombudsman (SPSO).

The council has put in place clear governance arrangements for complaints. The Corporate Complaint Steering Board is an officer group that monitors the implementation of the corporate complaint procedure and the corresponding performance and reporting activity. The board ensures that the council is compliant with the complaint procedure requirements. This is chaired by a Deputy Chief Executive and the membership consists of council Heads of Service.

Complaint performance is reported on a quarterly basis to both the council's Corporate Management Team and the council's Performance Committee. All complaint performance statistics are reported to the public and are available on the council's website.

2. Complaint Performance Statistics

Statistics on complaints are based on 8 key performance indicator themes devised by the SPSO in conjunction with all 32 Scottish councils.

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Complaints are recorded and tracked using the council's Customer Relationship Management (CRM) system which enables the production of the complaints performance information.

The number of complaints the council closed in 2020/21 was 2,875. This is a marginal increase from the number closed in the previous year. The council will continue to analysis complaints to help inform service improvement, identify training opportunities for our staff and help prioritise our activities to meet the changing needs of our community. Complaint benchmark data for 2020/21 is not yet available for other Local Authorities. Where applicable, this report has included the 2019/20 Scottish Local Authority national average for a range of performance indicators for comparative information. The current council's performance relating to the processing of complaints continues to outperform the Scottish National Average in almost all indicators.

2.1. Indicator 1: Complaints closed per 1,000 population

This indicator records the total number of complaints closed by the council. To allow for a fair comparison across all 32 councils in Scotland, the figure of complaints per 1,000 of population is used. The council received 2,904 complaints from 1 April 2020 to 31 March 2021. This is equivalent to 15.9 received complaints per 1,000 population. Of the total complaints received in 2020/21 (2,904), 2,875 were closed in this period¹.

Table 1 provides the council's total complaints closed per 1,000 population over the past 5 years. The table shows that there has been a slight decrease in complaints per 1000 closed by the council in 2020/21 when compared to the previous year from 15.8 to 15.7 complaints per 1,000 population.

Table 1: Complaints closed per 1,000 population

Measure	2016/17	2017/18	2018/19	2019/20	2020/21
West Lothian Population ²	178,550	180,130	181,310	182,140	183,100
Total number of complaints closed	3,414	3,169	3,382	2,871	2,875
Number of complaints closed per 1,000	19.1	17.6	18.7	15.8	15.7

In 2019/20, the Scottish Local Authority average for the number complaints closed per 1,000 population was 10.1. Table 2 provides a breakdown of complaints closed by service from 2016/17 to 2020/21.

Table 2: Complaints closed by service

Service	2016/17	2017/18	2018/19	2019/20	2020/21
Operational Services	1,852	1,644	1,759	1,290	1,576
Housing, Customer & Building Services	1,013	950	969	911	757
Education Service	277	225	276	263	222
Finance and Property/ Executive Office	179	127	163	171	146

¹ There was a carry-over of complaints received that remained open from 2019/20 which accounts for the closed figure being smaller than the complaints received in 2020/21.

² Previous years published mid-year estimate used

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Service	2016/17	2017/18	2018/19	2019/20	2020/21
Social Policy	5	137	128	146	118
Planning, Economic Development and Regeneration	72	73	71	62	43
Corporate Services	16	13	16	28	13
Total	3,414	3,169	3,382	2,871	2,875

All complaints received by the council are grouped into 6 categories. The categorisation allows the service to group complaints by theme and helps the service to identify areas that require improvement actions.

Table 3 breaks down all council complaints closed by complaint category from 2016/17 to 2020/21.

Table 3: Complaints closed by category

Category	2016/17	2017/18	2018/19	2019/20	2020/21
Standard of Service	1,652	1,809	2,134	1,347	1,281
Policy Related	578	437	330	533	597
Poor Communication	369	299	307	483	475
Employee Attitude	324	366	383	331	393
Waiting Time	463	228	206	155	104
Missed Appointments	28	30	22	22	25
Total Complaints	3,414	3,169	3,382	2,871	2,875

2.2. Indicator 2: Closed complaints

This indicator provides information on the number of complaints closed at stage one and stage two and stage two escalated complaints as a percentage of all complaints closed. Table 4 provides the performance information for this indicator.

The term “closed” refers to a complaint that has had a response sent to the customer and at the time no further action is required (regardless at which stage it is processed and whether any further escalation takes place).

Table 4: Closed complaints

Closed complaints	2016/17	2017/18	2018/19	2019/20	2020/21	Scottish LA average 2019/20
Number complaints closed at stage one (5 days) as % of all complaints	82.9% (2,831)	84.2% (2,667)	83.8% (2,833)	82.7% (2,374)	85.1% (2,447)	89.1%

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Closed complaints	2016/17	2017/18	2018/19	2019/20	2020/21	Scottish LA average 2019/20
Number complaints closed at stage two (20 days) as % of all complaints	15.7% (535)	13.8% (437)	14.6% (493)	15.8% (453)	13% (373)	7.8%
Number complaints closed at stage two (20 days) after escalation as % of all complaints ³	1.4% (48)	2.1% (65)	1.7% (56)	1.5% (44)	1.9% (55)	3.2%

2.3. Indicator 3: Complaints upheld, partially upheld and not upheld

The council reviews all complaints and each customer is contacted to explain whether their complaint has been upheld, partially upheld or not upheld and why.

This indicator measures the number and percentage of complaints which were upheld, partially upheld or not upheld recorded at each stage. The results can be seen in Tables 5, 6 and 7.

Table 5: Upheld complaints

Complaints upheld	2016/17	2017/18	2018/19	2019/20	2020/21	Scottish LA average 2019/20
Number of complaints upheld at stage one as % of all complaints closed at stage one (5 days)	35.11%	22.8%	34.6%	21.4%	19.5%	45.3%
Number complaints upheld at stage two as % of complaints closed at stage two (20 days)	23.4%	20.6%	15.20%	12.2%	14.2%	24.5%
Number escalated complaints upheld at stage two as % of escalated complaints closed at stage two (20 days)	27.1%	12.3%	16.10%	15.9%	16.4%	26.7%

Table 6: Partially upheld complaints

Complaints partially upheld	2016/17	2017/18	2018/19	2019/20	2020/21	Scottish LA average 2019/20
Number of complaints partially upheld at stage one (5 days) as % of all complaints closed at stage one	26.14%	28.2%	23.0%	12.2%	11.6%	16.9%
Number complaints partially upheld at stage two (20 days) as % of complaints closed at stage two	25.0%	19.9%	23.3%	19.4%	17.4%	23.3%

³ From 2015/16, the escalated stage 2 complaint figure was not included in stage 2 complaints closed total for the council.

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Complaints partially upheld	2016/17	2017/18	2018/19	2019/20	2020/21	Scottish LA average 2019/20
Number escalated complaints partially upheld at stage two (20 days) as % of escalated complaints closed at stage two	25.0%	18.5%	21.4%	25.0%	20.0%	25.0%

Table 7: Not upheld complaints

Complaints not upheld	2016/17	2017/18	2018/19	2019/20	2020/21	Scottish LA average 2019/20
Number of complaints not upheld at stage one (5 days) as % of all complaints closed at stage one	38.75%	49.0%	42.4%	66.4%	68.9%	36.6%
Number complaints not upheld at stage two (20 days) as % of complaints closed at stage two	51.6%	59.5%	61.5%	63.4%	68.4%	53.7%
Number escalated complaints not upheld at stage two (20 days) as % of escalated complaints closed at stage two	47.9%	69.2%	62.5%	59.1%	63.6%	45.5%

Overall, the council upheld/ part upheld 900 (31.3%) complaints from a total of 2,875 complaints closed in 2020/21. The equivalent upheld/ part upheld figure in 2019/20 was 34.2% (981).

2.4. Indicator 4: Average times

Indicator 4 represents the average time in working days to close complaints at stage one and at stage two of the council's Complaint Handling Procedure (CHP). Indicator 4 performance can be seen in Table 8.

Table 8: Average times

Average times	2016/17	2017/18	2018/19	2019/20	2020/21	Scottish LA average 2019/20
Average time in working days to respond to complaints at stage one (5 day resolution target)	3.8	3.9	4.5	4.3	4.0	10.2
Average time in working days to respond to complaints at stage two (20 day resolution target)	11.4	13.9	15.2	14.4	14.7	23.9
Average time in working days to respond to complaints after escalation (20 day resolution target)	10.0	10.7	7.5	9.7	11.7	17.5

2.5. Indicator 5: Performance against timescales

The council's Complaint Handling Procedure requires complaints to be closed within 5 working days at stage one and 20 working days at stage two. This indicator measures the percentage of

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complaints which were closed in full at each stage within the set timescales of 5 and 20 working days. Indicator 5 performance can be seen in Table 9.

Table 9: Performance against timescales

Performance against timescales	2016/17	2017/18	2018/19	2019/20	2020/21	Scottish LA average 2019/20
Number complaints closed at stage one within 5 working days as % of stage one complaints	85.6%	83.9%	81.6%	82.8%	82.6%	61.0%
Number complaints closed at stage two within 20 working days as % of stage two complaints	89.2%	84.4%	81.7%	81.7%	81.0%	61.9%
Number escalated complaints closed within 20 working days as % of escalated stage two complaints	95.8%	87.7%	92.9%	95.5%	85.5%	59.7%

2.6. Indicator 6: Number of cases where an extension is authorised

The council always aims to respond to complaints as quickly as possible. There are, however, times when a complaint is particularly complex and it is not feasible to fully investigate the issues within the prescribed timescales. In these situations the council can agree with a complainant to extend the timescale for closing the complaint.

This indicator provides the percentage of complaints at each stage where an extension to the 5 or 20 working day timeline has been authorised. Indicator 6 performance can be seen in Table 10.

Table 10: Number of cases where an extension is authorised

Number of cases where an extension is authorised	2016/17	2017/18	2018/19	2019/20	2020/21	Scottish LA average 2019/20
% of complaints at stage one (5 days) where extension was authorised	1.2%	1.2%	0.6%	0.9%	0.6%	4.5%
% of complaints at stage two (20 days) where extension was authorised	1.3%	3.4%	1.4%	1.3%	0.8%	12.7%

2.7. Indicator 7: Customer satisfaction

This indicator provides information on the levels of customer satisfaction with the complaint handling procedure and process. Indicator 7 performance can be seen in Table 11. A sample of complainants are contacted by the council's Customer Service Centre on a monthly basis to gather this satisfaction information.

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Table 11: Customer satisfaction

Customer satisfaction	2016/17	2017/18	2018/19	2019/20	2020/21
Percentage of customers who agreed that they were satisfied with the length of time it took to deal with their complaint.	64.8%	71.3%	65.3%	58.1%	69.5%
Percentage of customers who agreed that they were satisfied with the outcome of their upheld complaint.	69.7%	73.0%	61.3%	63.4%	68.1%
Percentage of customers who agreed that they were satisfied with the way their complaint was handled.	70.3%	73.0%	67.3%	64.8%	67.4%
Percentage of customers who agreed that they found it easy to complain to the council.	80.7%	85.1%	83.8%	84.3%	84.6%

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2.8. Indicator 8: Learning from complaints

The council has a clear commitment to listen to our customers and act on their feedback. Learning from complaints is a continuous process that helps the council to resolve common complaints and further improve the services that are provided. **Some examples** of actions that have been taken are highlighted below.

	Service/ Complaint Theme	Complaints Analysis	Service Improvement Action(s)
1.	Corporate Services Standard of Service	A customer complained that they had to pay for a letter from the council that had not been franked.	The administration team have included additional checks ensure that letters are franked before they are sent in the post.
2.	Corporate Services Poor Communication	The service was late in providing a response to a customer complaint.	The service held additional training sessions on complaint handling and highlighted the importance of dealing with complaints within the agreed timescales.
3.	Education Services Poor Communication	A complaint was received regarding poor communication and support around a Child's Planning Meeting at a school.	The school made improvements to their Child's Planning Meetings. All staff have undertaken in-depth training on Autism Spectrum Disorder (ASD) and Dyslexia to ensure a consistent approach to supporting each learner. The approach to communication was also reviewed to keep the parent/carers informed.
4.	Housing, Customer and Building Services Poor Communication	A tenant tried to contact a Housing Officer who failed to respond in a timely manner.	The Housing Officer was late in attempting to call the customer. The correct communication process was reinforced to the employee reminding them that an email should be sent to the customer if a phone call is not answered.
5.	Housing, Customer and Building Services Standard of Service	Customer complaint about the litter left around their property after a roof repair was carried out.	A full site clean up was carried out and an apology was given to the customer. The supervisor discussed the complaints with the operatives and reinforced the requirement to ensure each work area is cleaned when the job is complete.

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	Service/ Complaint Theme	Complaints Analysis	Service Improvement Action(s)
6.	Housing, Customer and Building Services Standard of Service	Customer complaint about the lack of signage in an area being worked on by council contractors.	An apology was given to the customer and the contractor provided additional signage across the whole site. The customer was contacted and was satisfied with the agreed outcome.
7.	Operational Services Standard of Service	Complaint made about the service's failure to carry out a scheduled bulky uplift.	There was a system error with the Bulky Uplift booking and payment system which cancelled the customer's uplift. The service worked with the supplier to rectify the system issue. An apology was made to the customer and the payment was reimbursed.
8.	Operational Services Waiting time	Complaint received about time taken for a new bin to be delivered.	Due to Covid-19 the supplier was on restricted deliveries. The service managed to secure bins from an alternative supplier and a delivery was made to the customer.
9.	Operational Service Standard of Service	The customer complained about council vehicles queuing to access a council facility in Blackburn.	The service reviewed the issue where the vehicles were queuing at the site. The service introduced staggered tipping times and improvements have been made in the weighbridge system which has helped reduce the impact of traffic congestion.
10.	Social Policy Poor Communication	A customer received a Care Home payment request in error.	An apology was provided to the customer and additional checks have been introduced to ensure the information in customer documentation is accurate before being sent.

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3. 2020/21 Complaint Summary

In 2020/21 the council closed 2,875 complaints and this represents a slight increase of 4 complaints from the 2019/20 figure of 2,871.

The number of complaints closed across council service areas varies significantly with 55% (1,576) of all complaints being recorded against Operational Services to 0.45% (13) in Corporate Services.

Of the seven service areas that deliver the council's activities and functions, six have shown a reduction in customer complaints and one has had an increase in the number of complaints closed compared to the previous year. Operational Services increased the number of complaints closed over 2020/21 from 1,290 in 2019/20 to 1,576 in 2020/21. Housing Customer and Building Services has shown the largest numerical decrease in complaints from 911 in 2019/20 to 757 in 2020/21.

The marginal increase in complaints across the council can be linked to an increase in the number of complaints closed by Operational Services over 2020/21. The main generator of complaints within Operational Services was Recycling, Waste and Fleet Services and Roads and Transportation Services. There was a large increase in Roads and Transportation Services complaints when compared to the previous year. The number of complaints increased from 165 in 2019/20 to 461 in 2020/21. Roads and Transportation Services received a total of 288 Policy complaints and the main complaint themes related to their Spaces for People programme and the Winter Maintenance activity.

85.1% of all complaints closed by the council were resolved at stage one (Frontline Resolution), 13.0% of complaints resolved at stage two (Investigation) with the remaining 1.9% of complaints being resolved at stage two (Escalation). The average times taken by the council to resolve both stage one and stage two complaints were 4 days and 14.7 days respectively. The council's performance relating to the processing of stage one and stage two complaints have shown a marginal decrease in performance. Both performance levels are below the corporate resolution target of 85% but are well above the national average for processing complaints at both stages. 82.6% stage one complaints were resolved within 5 days and 81.0% stage two complaints were resolved within 20 days. The Scottish National Average 2019/20 was 61% and 61.9% for stage one and stage two resolution respectively.

The percentage of complaints that were upheld/ part upheld across the council in 2020/21 was 31.3% which represents a decrease of 2.9% from the 2019/20 figure which was 34.2%. The council's performance in relation to this measure substantially outperformed the Scottish National Average 2019/20 which was 62.3%.

In 2020/21, the council has shown improved performance across a range of indicators relating to complaint handling. There are four key customer satisfaction complaint indicators. Customer satisfaction performance relating to complaint handling has improved in each of the four key indicators. 84.6% of customers surveyed said that they found it easy to submit a complaint to the council, which is an increase of 0.1% from 2019/20. The satisfaction indicator that has shown the largest increase was customers stating that they were satisfied with the time it takes to respond to a complaint which increased by 11.4% from 58.1% in 2019/20 to 69.5% in 2020/21.

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Overall, there has been a slight increase in the number of complaints closed in 2020/21 when compared to the previous year. The council's performance relating to the processing of complaints continues to outperform the Scottish National Average in almost all indicators. These indicators include the percentage of stage one and stage two resolved within timescale, the average time to resolve a complaint and the number of complaints that were upheld/ part upheld. Customer satisfaction relating to complaint handling has increased across all four indicators and complaint driven service improvement continues to be identified based on robust complaint analysis.



WEST LOTHIAN COUNCIL

Complaints Handling Procedure

The complaints handling process

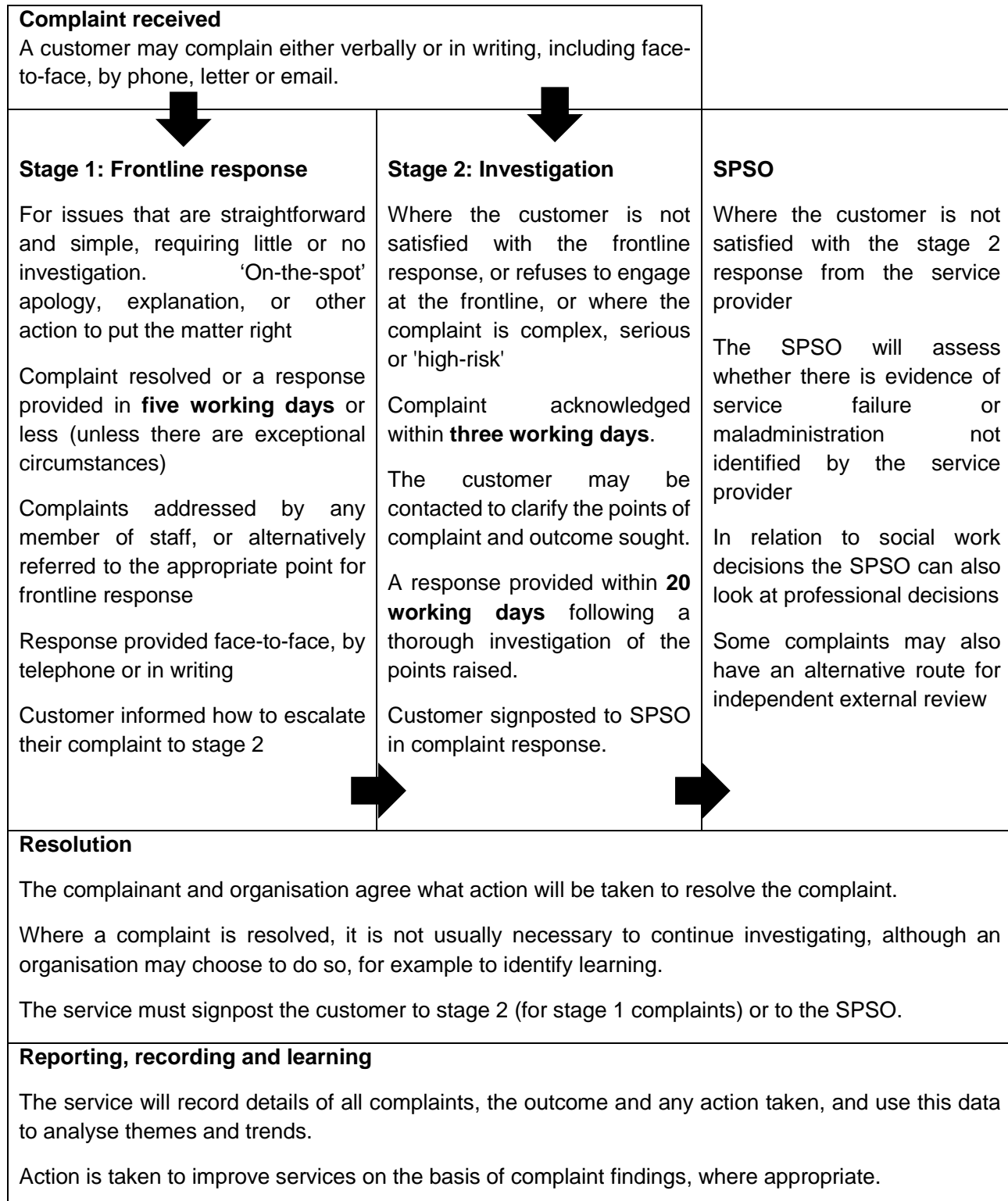
Revised April 2021

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The complaints handling procedure

1. The Complaints Handling Procedure (CHP) aims to provide a quick, simple and streamlined process for responding to complaints early. Where possible, the service will resolve the complaint to the customer's satisfaction. Where this is not possible, the customer will receive a clear and reasoned response to their complaint.



Resolving the complaint- Resolution Outcome

2. A complaint has the outcome “Resolution” when both the service and the customer agree what action (if any) will be taken to provide full and final resolution for the customer, without making a decision about whether the complaint is upheld, part upheld or not upheld.
3. The service will try to resolve complaints wherever possible, although it is accepted that this will not be possible in all cases.
4. A complaint may have the outcome “Resolution” at any point in the complaint handling process, including during the investigation stage. It is particularly important to try to resolve complaints where there is an ongoing relationship with the customer or where the complaint relates to an ongoing issue that may give rise to future complaints if the matter is not fully resolved.
5. Where a complaint has the outcome “Resolution”, the service would not normally need to continue looking into the complaint or provide a response on all points raised. The service will keep a clear record of how a complaint was resolved, what action was agreed, and the customer’s agreement to this as a final outcome. In some cases it may still be appropriate for the service to continue looking into the issue, for example where there is evidence of a wider problem or potential for useful learning.
6. In all Resolution cases, the service will record the complaint outcome (Resolution) and any action taken, and signpost the customer to stage 2 (for stage 1 complaints) or to the SPSO (for stage 2 complaints)
7. If the customer and service are not able to agree a resolution, the service will follow the Complaint Handling Procedure to provide a clear and reasoned response to each of the issues raised.
8. **NOTE:** In almost all cases, services should review each complaint to understand whether the complaint outcome is **upheld, part upheld or not upheld**. Understanding one of these outcomes helps inform service improvement activity. The use of the “Resolution” outcome may impede service improvement activity if the complaint is not fully investigated.

What to do when the service receives a complaint

9. Members of staff receiving a complaint will consider four key questions. This will help to either respond to the complaint quickly (at stage 1) or determine whether the complaint is more suitable for stage 2:

What exactly is the customer's complaint (or complaints)?

10. It is important to be clear about exactly what the customer is complaining about. The customer may have to be contacted to provide more detail about the complaint.
11. The service will need to decide whether the issue can be defined as a complaint and whether there are circumstances that may limit the ability to respond to the complaint (such as the time limit for making complaints, confidentiality, anonymity or the need for consent). The service should also consider whether the complaint is serious, high-risk or high-profile.
12. If the matter is not suitable for handling as a complaint, this will be explained to the customer.
13. In most cases, complaints will be handled at stage 1 of the complaints procedure. If it is a complex complaint, it may need to be handled immediately at stage 2.

What does the customer want to achieve by complaining?

14. In most cases, the service will attempt to clarify the outcome the customer wants if this is unclear in the received complaint.

Can the customer expected outcome be achieved, or explain why not?

15. If a staff member handling a complaint can achieve the expected outcome, for example by providing an on-the-spot apology or explain why they cannot achieve it, they will do so.
16. The customer may expect more than can be provided. If so, the service will tell them as soon as possible.
17. Complaints which can be resolved or responded to quickly should be managed at stage 1.

If the service cannot respond quickly, who can help?

18. If the complaint is simple and straightforward, but the staff member receiving the complaint cannot deal with it because, for example, they are unfamiliar with the issues or area of service involved, the complaint will be passed to the appropriate service.
19. If the complaint is not simple and straightforward it may be handled immediately at stage 2.

Stage 1: Frontline response

20. Frontline response aims to respond quickly (within five working days) to straightforward complaints that require little or no investigation.
21. Any member of staff may deal with complaints at this stage (including the staff member complained about, for example with an explanation or apology). The main principle is to respond to complaints at the earliest opportunity and as close to the point of service delivery as possible.
22. The service may respond to the complaint by providing an on-the-spot apology where appropriate, or explaining why the issue occurred and, where possible, what will be done to stop this happening again.
23. Complaints which are not suitable for frontline response will be identified early, and handled at stage 2: investigation.

Notifying staff members involved

24. If the complaint is about the actions of another staff member, where possible, the complaint may be shared with the staff member before a complaint response is provided.

Timelines

25. Frontline response must be completed within **five working days**. 'Day one' is always the date of receipt of the complaint (or the next working day if the complaint is received on a weekend or public holiday).

Extension to the timeline

26. In exceptional circumstances, a short extension of time may be necessary due to unforeseen circumstances (such as the availability of a key staff member). Extensions will be agreed with an appropriate manager.
27. If a complaint is expected to take more than five working days to look into, it should be handled at stage 2 immediately. The only exception to this is where the complaint is simple and could normally be handled within five working days, but it is not possible to begin immediately (for example, due to the absence of a key staff member). In such cases, the complaint may still be handled at stage 1.

Closing the complaint at the frontline response stage

28. If the complaint decision is communicated either face-to-face or on the telephone, there is not a requirement to write to the customer as well. The service will must:
 - tell the customer the outcome of the complaint. The council's outcomes are: resolution, upheld, partially upheld and not upheld;
 - explain the reasons for the decision (or the agreed action taken to resolve the complaint, or the agreed action taken to resolve the complaint; and
 - explain that the customer can escalate the complaint to stage 2 if they remain dissatisfied and how to do so (the customer should not be signposted to the SPSO until the customer has completed stage 2).

29. The service will keep a full and accurate record of the decision given to the customer. If the service is not able to contact the customer by phone, or speak to them in person, a written response to the complaint will be provided if an email or postal address is available, covering the key complaint points.
30. If the complaint is about the actions of a particular staff member/s, the service will share any part of the complaint response which relates to them (unless there are compelling reasons not to).
31. The complaint should then be closed and the complaints system updated accordingly.

Stage 2: Investigation

32. Not all complaints are suitable for frontline response and not all complaints will be satisfactorily addressed at that stage. Stage 2 is appropriate where:
- the customer is dissatisfied with the frontline response or refuses to engage at the frontline stage. Unless exceptional circumstances apply, the customer must escalate the complaint within six months of when they first knew of the problem or within two months of the stage 1 response, whichever is later
 - the complaint is not simple and straightforward (for example where the customer has raised a number of issues, or where information from several sources is needed before the service can establish what happened and/or what should have happened); or
 - the complaint relates to serious, high-risk or high-profile issues.
33. An investigation aims to explore the complaint in more depth and establish all the relevant facts. The aim is to resolve the complaint where possible, or to give the customer a full, objective and proportionate response that represents our final position. Complaints may be investigated by someone not involved in the complaint (for example, a line manager or a manager from a different area).
34. Details of the complaint must be recorded. Where appropriate, this will be done as a continuation of frontline response. If the investigation stage follows a frontline response, the officer responsible for the investigation should have access to all case notes and associated information.

Acknowledging the complaint

35. Complaints must be acknowledged within three working days of receipt at stage 2.
36. The service will issue the acknowledgement in a format which is accessible to the customer.
37. Where the points of a stage 2 complaint and expected outcomes are clear from the complaint, the service may set these out in the acknowledgement and ask the customer to get in touch if they disagree.
38. Where the points of complaint and expected outcomes are not clear, the customer may be contacted to discuss this further.

Agreeing the points of complaint and outcome sought

39. It is important to be clear from the start of stage 2 about the points of complaint to be investigated and what outcome the customer is seeking. The service may also need to manage the customer's expectations about the scope of the investigation.
40. Where the points of complaint are not clear, the service should contact the customer to confirm these. The service can contact the customer either by phone, face-to-face or in writing. A record of any discussion with the customer should be kept.
41. In all cases, the service must have a clear understanding of:
- What are the points of complaint to be investigated?**
- While the complaint may appear to be clear, agreeing the points of complaint at the outset ensures there is a shared understanding and avoids the complaint changing or confusion

arising at a later stage.

The service will make every effort to agree the points of complaint with the customer if the points are unclear. In very rare cases, it may not be possible to agree the points of complaint (for example, if the customer insists on an unreasonably large number of complaints being separately investigated, or on framing their complaint in an abusive way). The service will manage any such cases in accordance with the council's Unacceptable Actions Policy.

- **Is there anything the service can't consider under the CHP?**

The service must explain if there are any points that are not suitable for handling under the CHP.

- **What outcome does the customer want to achieve by complaining?**

Where the outcome of the complaint is unclear the service may ask what outcome the customer is seeking. This may help direct the investigation and enables the service to focus on resolving the complaint where possible.

- **Are the customer's expectations realistic and achievable?**

It may be that the customer expects more than can be provided, or has unrealistic expectations about the scope of the investigation. If so, this should be made clear to the customer as soon as possible.

Notifying staff members involved

42. If the complaint is about the actions of a particular staff member/s, the service may notify the staff member/s involved (including where the staff member is not named, but can be identified from the complaint). The service may:

- share the complaint information with the staff member/s (unless there are compelling reasons not to);
- advise them how the complaint will be handled, how they will be kept updated and how the service will share the complaint response with them;
- discuss their willingness to engage with alternative complaint resolution approaches (where applicable); and
- signpost the staff member/s to a contact person who can provide support and information on what to expect from the complaint process (this must not be the person investigating or signing off the complaint response).

Investigating the complaint

43. The staff member investigating the complaint should consider:

- what happened? (this may include, for example, records of phone calls or meetings, work requests, recollections of staff members or internal emails)
- what should have happened? (this may include any relevant policies or procedures that apply); and

The Local Authority Model Complaints Handling Procedure

- is there a difference between what happened and what should have happened, and whether the service is responsible?

44. In some cases, information may not be readily available. The service will balance the need for the information against the resources required to obtain it, taking into account the seriousness of the issue (for example, it may be appropriate to contact a former employee, if possible, where they hold key information about a serious complaint).

Alternative complaint resolution approaches

45. Where the service think it is appropriate, the service may use alternative complaint resolution approaches such as complaint resolution discussions, mediation or conciliation to try to resolve the matter and to reduce the risk of the complaint escalating further. If mediation is attempted, a suitably trained and qualified mediator should be used. Alternative complaint resolution approaches may help both parties to understand what has caused the complaint, and so are more likely to lead to mutually satisfactory solutions.

46. Alternative complaint resolution approaches may be used to resolve the complaint entirely, or to support one part of the process, such as understanding the complaint, or exploring the customer's desired outcome.

47. If the service and the customer (and any staff members involved) agree to using alternative complaint resolution approaches, it is likely that an extension to the timeline will need to be agreed. This should not discourage the use of these approaches.

Meeting with the customer during the investigation

48. To effectively investigate the complaint, it may be necessary to arrange a meeting with the customer. Where a meeting takes place, the service will always be mindful of the requirement to investigate complaints (including holding any meetings) within 20 working days wherever possible. Where there are difficulties arranging a meeting, this may provide grounds for extending the timeframe.

49. As a matter of good practice, a written record of the meeting should be completed and provided to the customer. Alternatively, and by agreement with the person making the complaint, the service may provide a record of the meeting in another format. The service will notify the person making the complaint when to expect a written record of the meeting.

Timelines

50. The following deadlines are appropriate to cases at the investigation stage (counting day one as the day of receipt, or the next working day if the complaint was received at the weekend or on a public holiday):

- complaints must be acknowledged within **three working days**
- a full response to the complaint should be provided as soon as possible but not later than **20 working days** from the time the complaint was received for investigation.

Extension to the timeline

51. Not all investigations will be able to meet this deadline. For example, some complaints are so complex that they require careful consideration and detailed investigation beyond the 20 working day timeline. It is important to be realistic and clear with the customer about timeframes, and to advise them early if the service think it will not be possible to meet the 20 day timeframe, and

why. The service should bear in mind that extended delays may have a detrimental effect on the customer.

52. Any extension must be approved by an appropriate manager. The service will keep the customer and any member/s of staff complained about updated on the progress of the complaint.

Closing the complaint at the investigation stage

53. The response to the complaint should be in writing (or by the customer's preferred method of contact) and must be signed off by the appropriate manager or delegated officer who is empowered to provide the final response on behalf of the service.
54. The service will tell the customer the outcome of the complaint (whether it is upheld, partially upheld, not upheld or resolution). The complaint response in terms of good practice will:
- be clear and easy to understand, written in a way that is person-centred and non-confrontational;
 - avoid technical terms, but where these must be used, an explanation of the term should be provided;
 - address all the issues raised and demonstrate that each element has been fully and fairly investigated;
 - where appropriate, include an apology where things have gone wrong;
 - highlight any area of disagreement and explain why no further action can be taken;
 - indicate that if they are not satisfied with the outcome of the stage 2 process, they may seek a review by the SPSO.
55. Where a complaint outcome is **resolution**, the response does not need to provide a decision on all points of complaint, but should instead confirm and record the resolution agreed.
56. If the complaint is about the actions of a particular staff member/s, the service will share with them any part of the complaint response which relates to them, (unless there are compelling reasons not to).
57. The service will record the decision, and details of how it was communicated to the customer, on the complaints system.

Signposting to the SPSO

58. Once the investigation stage has been completed, the customer has the right to approach the SPSO if they remain dissatisfied. The service must make clear to the customer:
- their right to ask the SPSO to consider the complaint;
 - how to contact the SPSO.
59. The SPSO considers complaints from people who remain dissatisfied at the conclusion of the complaints procedure. The SPSO looks at issues such as service failure and maladministration (administrative fault), and the way the service has handled the complaint. There are some subject areas that are outwith the SPSO's jurisdiction, but it is the SPSO's role to determine whether an individual complaint is one that they can consider (and to what extent). All investigation responses must provide a signpost to the SPSO.

60. The SPSO recommends that the service use the wording below to inform customers of their right to ask the SPSO to consider the complaint. This information should only be included on the service's final response to the complaint.

Information about the SPSO

The Scottish Public Services Ombudsman (SPSO) is the final stage for complaints about public services in Scotland. This includes complaints about *[the organisation's sector]*. The SPSO is an independent organisation that investigates complaints. It is not an advocacy or support service (but there are other organisations who can help you with advocacy or support).

If you remain dissatisfied when you have had a final response from *[the organisation]*, you can ask the SPSO to look at your complaint. You can ask the SPSO to look at your complaint if:

- you have gone all the way through the council's Complaints Handling Procedure
- it is less than 12 months after you became aware of the matter you want to complain about, and
- the matter has not been (and is not being) considered in court.

The SPSO will ask you to complete a complaint form and provide a copy of this letter (our final response to your complaint). You can do this online at

<https://www.spsso.org.uk/complain/form/start/> or call them on Freephone 0800 377 7330.

You may wish to get independent support or advocacy to help you progress your complaint. Organisations who may be able to assist you are:

- Citizens Advice Bureau
- Scottish Independent Advocacy Alliance

The SPSO's contact details are:

SPSO

Bridgeside House

99 McDonald Road

Edinburgh

EH7 4NS

(if you would like to visit in person, you must make an appointment first)

Their freepost address is:

FREEPOST SPSO

Freephone: 0800 377 7330

Online contact www.spsso.org.uk/contact-us

Website: www.spsso.org.uk

Factoring complaints and complaints from shared owners

61. The SPSO does not normally look at complaints about our factoring service or complaints from shared owners. These complaints can be considered by the First Tier Tribunal for Scotland (Housing and Property Chamber). Their contact details are on their website: <https://www.housingandpropertychamber.scot/>

62. Where the complaint relates to social housing, the service should still signpost these complaints to the SPSO, as there may be some aspects the SPSO can consider (for example, if the customer is dissatisfied with how the service have handled their complaint). However, the service should also notify the customer of their right to approach the Tribunal if they are dissatisfied with our response to these kinds of complaint.

Post-closure contact

63. If a customer contacts the service for clarification when they have received a final complaint response, the service may have further discussion with the customer to clarify the response and answer their questions. However, if the customer is dissatisfied with the response or does not accept the findings, the service will explain that the service has already given them our final response on the matter and signpost them to the SPSO.

Appendix 1 - Timelines

General

1. References to timelines throughout the CHP relate to working days. The service does not count non-working days, for example weekends, public holidays and days of industrial action where our service has been interrupted.
2. The service does not count school holidays as non-working days. Complaints received during school holidays should follow the same timelines as set out for frontline response and investigation, unless there are special circumstances which would extend these timelines.

Timelines at frontline response (stage 1)

3. The service will aim to achieve frontline response within five working days. The date of receipt is **day one**, and the response should be provided (or the complaint escalated) on **day five**, at the latest.
4. If the service has extended the timeline at the frontline response stage in line with the CHP, the response should be provided on **day ten** where possible.

Timelines at investigation (stage 2)

5. For complaints at the investigation stage, **day one** is:
 - the day the case is transferred from the frontline stage to the investigation stage;
 - the day the customer asks for an investigation or expresses dissatisfaction after a decision at the frontline response stage; or
 - the date the service receives the complaint, if it is handled immediately at stage 2.
6. The service must acknowledge the complaint within three working days of receipt at stage 2 i.e. by **day three**.
7. The service should respond in full to the complaint by **day 20**, at the latest. The service has 20 working days to investigate the complaint, regardless of any time taken to consider it at the frontline response stage.
8. Exceptionally, the service may need longer than the 20 working day limit for a full response. If so, the service will explain the reasons to the customer, and update them (and any staff involved) at least once every 20 working days.

Frequently asked questions

What happens if an extension is granted at stage 1, but then the complaint is escalated?

9. The extension at stage 1 does not affect the timeframes at stage 2. The stage 2 timeframes apply from the day the complaint was escalated (the service have 20 working days from this date, unless an extension is granted).

What happens if the service cannot meet an extended timeframe?

10. If the extended timeframe at stage 1 is not met, the service should consider escalating the complaint to stage 2.
11. If the service cannot meet the extended timeframe at stage 2, a further extension may be approved by an appropriate manager if there are clear reasons for this. This should only occur

in exceptional circumstances (the original extension should allow sufficient time to realistically investigate and respond to the complaint). Where appropriate, the service will keep the customer and any member/s of staff complained about updated on the progress of the complaint.

What happens when a customer asks for stage 2 consideration a long time after receiving a frontline response?

12. Unless exceptional circumstances exist, customers should bring a stage 2 complaint within six months of learning about the problem, or within two months of receiving the stage 1 response (whichever is latest).

Appendix 2 – The complaint handling process steps

A customer may complain verbally or in writing, including face-to-face, by phone, letter or email. Your first consideration is whether the complaint should be dealt with at stage 1 (frontline response) or stage 2 (investigation).		
	Stage 1: Frontline response	Stage 2: Investigation
Step 1	Always try to respond quickly, wherever possible	<p>Investigate where:</p> <ul style="list-style-type: none"> • The customer is dissatisfied with the frontline response or refuses to engage with attempts to resolve the complaint at stage 1 • It is clear that the complaint requires investigation from the outset
Step 2	Record the complaint and notify any staff complained about (where appropriate)	<p>Record the complaint and notify any staff complained about</p> <p>Acknowledge the complaint within three working days</p>
		<p>You may choose to contact the complainant to agree:</p> <ul style="list-style-type: none"> • Points of complaint; • Outcome sought; • Manage expectations (where required)
Step 3	Attempt to respond to the complaint within the five working day target	Respond to the complaint as soon as possible, but within 20 working days unless there is a clear reason for extending the timescale.
Step 4	The service should tell the customer how to escalate the complaint to stage 2 of the complaint handling procedure.	<p>Communicate the decision, normally in writing.</p> <p>Signpost the customer to SPSO and advise of time limits.</p>