



**Dumfries and
Galloway College**

One step ahead

ANNUAL COMPLAINTS HANDLING REPORT, ACADEMIC YEAR 23-24

Performance Team

September 2024

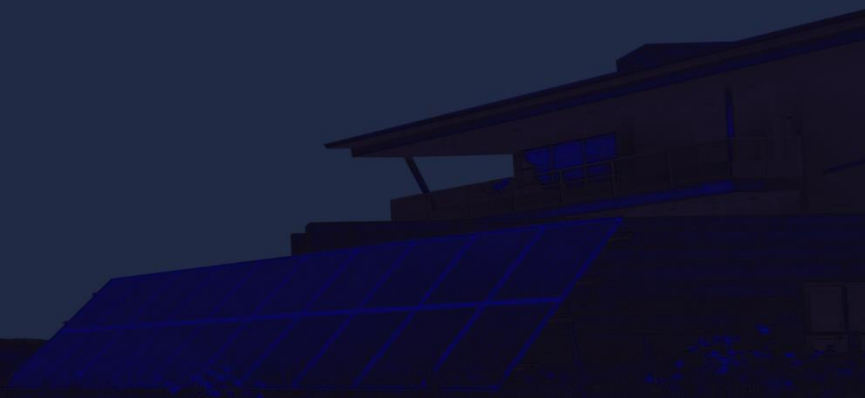


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Annual Complaints Handling Report

Academic Year 2023–2024

1. *The Purpose of the Report*

This report aims to provide an overview on the efficiency of our complaint handling process, providing an insight into continuous service improvement.

2. *Background to the Report*

The College is required to comply with the Scottish Public Services Ombudsman’s (SPSO) Model Complaints Handling Procedure and report annually on our performance in handling complaints. It is also part of our duties under Freedom of Information legislation.

This analysis includes statistics in relation to the volume and type of complaints, as well as key performance details.

Complaint reporting

- **Quarterly Reports:** Prepared by the Performance Team for the purpose of review by Senior Management. Reports are published on the College Website.
- **Annual Report:** Prepared by the Performance Team for the purpose of review by Senior Management, Executive Leadership Team and approved by the College Board of Management. Report is published on the College Website.

Complaints received by Category and Complaint Outcomes

The College has adopted the standardised Complaint Categories developed by the College Development Network's Complaint Handling Advisory Group:

- Customer Care
- Applications, Admission and Progression
- Course Related
- Services
- Facilities
- Others

There are four outcome categories to be reported against for Indicator 4 (The outcome of complaints at each stage):

- Upheld (where the College is at fault)
- Not upheld (where the College is not at fault)
- Partially upheld (where some of the points of complaints are upheld and others are not)
- Resolved - A complaint is resolved when both (the organisation) and the customer agree what action (if any) will be taken to provide full and final resolution for the customer, without making a decision about whether the complaint is upheld or not upheld

3. *Key Observations*

- 👉 The overall number of complaints has decreased significantly from 51 to 41.
- 👉 The number of Stage 1 complaints, 22, has remained the same as Session 22-23
- 👉 There is a notable decrease in the number of Stage 2 complaints, 19 for Session 23-24 compared to 29 in Session 22-23
- 👉 Complaints per 100 population dropped from 0.99% to 0.85%
- 👉 Stage 1 complaints were more frequent in Q1 (11), while Stage 2 complaints were spread more evenly across the year
- 👉 We note a considerable decrease in the number of Stage 2 complaints received in Quarter 1 (August to October), 5 received in 23-24 and 12 received in 22-23. There were no significant differences for the other quarters
- 👉 The number of complaints closed in full at Stage 1 within 5 working days increased significantly - 86% for 23-24 compared to 68% for 22-23, with the average time to close being 3.75 days
- 👉 The number of complaints closed in full at Stage 2 within 20 working days improved by 20% (79% for 23-24 which is a significant improvement on the 59% closure rate for 22-23), with the average time to close being 15.15 days.
- 👉 Escalations from Stage 1 to Stage 2 were minimal, with 2 cases in Session 2023-24, up 1 from the previous session
- 👉 The number of Stage 1 complaints Upheld reduced by 30%
- 👉 The number of Stage 1 complaints Partially Upheld decreased by 10%
- 👉 The number of Stage 1 complaints Not Upheld remained the same
- 👉 The number of Stage 1 complaints Resolved increased by 39%
- 👉 The number of Stage 2 complaints Upheld decreased by 34%
- 👉 The number of Stage 2 complaints Partially Upheld decreased by 3%
- 👉 The number of Stage 2 complaints Not Upheld increased by 34%
- 👉 The number of Stage 2 complaints Resolved increased by 4%

4. *The Report*

This report covers the period August 2023 to July 2024. In this period there were 22 frontline complaints (Stage 1*) and 19 complaints requiring a full investigation (Stage 2**). 2 complaints were escalated to Stage 2.

* complaints that are straightforward, requiring little or no investigation

** complaints that are complex, serious or 'high risk and where the customer is not satisfied with the frontline response

2023-2024 Performance Indicators 1 – 4

Indicator One: The total number of complaints received

1	Quantitative Indicator	2023-24	2022-23	2021-22
1.1	Number of complaints received	41	51	30
1.2	Number of complaints received per 100 population as a %	0.85%	0.99%	0.54%

Fewer complainants (10) utilised the complaint handling procedure in Session 23-24 than in session 22-23.

Breakdown of Complaints	2023-24	2022-23	2021-22
Stage 1 Number of complaints received	22	22	17
Stage 2 Number of complaints received	19	29	13
Stage 1 Number of complaints escalated to Stage 2	2	1	1

For both Sessions 23-24 and 22-23 the number of complaints dealt with at Stage 1 was 22, marking a slight increase on the 17 Stage 1 complaints received in session 21-22. There is a notable decrease in the number of Stage 2 complaints, 19 for Session 23-24 compared to 29 in Session 22-23. Both these figures were an increase on the 13 Stage 2 complaints received in Session 21-22. In 22-23 a quantity of the stage 2 complaints related to resulting and certification, resting of courses and course management issues which were dealt with at Stage 2 due timescale and the nature of the complaints.

Escalations from Stage 1 to Stage 2

Minimal escalation with 2 cases in Session 2023-24, up 1 from the previous session.

Breakdown of Complaint Categories	2023-24	2022-23	2021-22
Stage 1			
Customer Care	5	2	3
Applications, Admission, Progression	2	4	3
Course Related	10	7	6
Services	4	4	5
Facilities	1	5	0
Stage 2			
Customer Care	10	12	8
Applications, Admission, Progression	1	8	1
Course related	6	7	4
Services	2	1	0

Facilities	0	1	0
Escalated Complaints			
Applications, Admission, Interview, Enrolment	0	1	0
Course related	2	0	1

15% of stage 1 complaints were customer care and course related. Complaints relating to resulting/certification, course content and communication accounted for the 10 course related complaints, and the 5 customer care complaints were received with issues relating to smoking on campus, power cuts, noise from an adjacent property and student behaviour. Analysis shows that the complaints received had common themes but some were isolated and do not pertain to any one key area or team within the college.

Further analysis on the Stage 2 complaints received in Session 23-24 indicates that the number of complaints in the Applications, Admission, Progression category decreased by 7, from 8 in session 22-23 to 1 in Session 23-24. This was a result of service improvements relating to informing students with regards to Industrial Action taking place and procedures put in place to complete resulting.

Customer Care saw the most complaints (10 in Session 23-24), although this is a reduction on the previous session, with fewer issues in services and facilities.

Breakdown of Complaints per Quarter		2023-24	2022-23	2021-22
Stage 1				
Quarter 1 (August – October)		11	8	5
Quarter 2 (November – January)		6	7	3
Quarter 3 (February – April)		2	2	7
Quarter 4 (May – July)		3	5	2
Stage 1 Total Number of complaints received		22	22	17
Stage 2				
Quarter 1 (August – October)		5	12	1
Quarter 2 (November – January)		6	6	0
Quarter 3 (February – April)		4	7	3
Quarter 4 (May – July)		4	4	9
Stage 2 Number of complaints received		19	29	13
Stage 1 Number of complaints escalated to Stage 2				
Quarter 1 (August – October)		2	1	0
Quarter 2 (November – January)		0	0	0
Quarter 3 (February – April)		0	0	0
Quarter 4 (May – July)		0	0	1

Analysing the number of complaints received per quarter, we note a considerable decrease in the number of Stage 2 complaints received in Quarter 1 (August to October), 5 received in 23-24 and 12 received in 22-23. This is attributable to a number of complaints received in Session 22-23 relating to resulting and certification and resting of programmes. Stage 1 escalations remained rare, with only 2 occurring in Q1 of Session 23-24. Both complaints were escalated to Stage 2 due to timescale, further investigation could not be completed within the 5 working day Stage 1 timeframe.

Indicator Two: The number and percentage of complaints at each stage which were closed in full within the set timescales of five and 20 working days

2	Quantitative Indicator	23-24		22-23		21-22	
		No.	%	No.	%	No.	%
2.1	Number of complaints closed in full at stage 1 within five working days as % of all stage 1 complaints responded to in full	19	86%	15	68%	12	71%
2.2	The number of complaints closed in full at stage 2 within 20 working days as % of all stage 2 complaints responded to in full	15	79%	17	59%	6	43%
2.3	The number of complaints closed in full after escalation within 20 working days as % of all complaints responded to in full after escalation.	2	100%	1	100%	0	0%

An improvement of 18% for Stage 1 complaints is noted (86% for 23-24 compared to 68% for 22-23). This is attributable to staff who deal with complaints adhering to the 5 working day timescale for Stage 1 complaints. This improvement in Stage 1 complaint resolution reflects the impact of enhanced internal processes.

The number of complaints closed in full at Stage 2 within 20 working days noted a significant improvement of 20% for Stage 2 complaints (79% for 23-24 which is a significant improvement on the 59% closure rate for 22-23). This is attributable to staff who deal with complaints adhering to the 20 working day timescale for complaint investigation and the Performance Team actively sending out deadline date reminders. The percentage has improved greatly by 36% over the last three sessions, as only 43 % of complaints were closed in full in Session 21-22.

Indicator Three: The average time in working days for a full response to complaints at each stage

Quantitative Indicator		Average time in working days 2023-2024	Average time in working days 2022-2023	Average time in working days 2021-2022
3.1	Average time in working days to respond to complaints at stage 1	3.75	3.81	3.52
3.2	Average time in working days to respond to complaints at stage 2	15.15	18.83	29.38
3.3	Average time in working days to respond to complaints after escalation	10.5	9	29

In accordance with the Complaints Handling Procedure the target for resolution of Stage 1 complaints is 5 days and Stage 2 complaints is 20 days.

In 2023-24 the average time in working days to close a Stage 1 complaint was 3.75 days (3.81 days in Session 22-23, and 3.52 days in Session 21-22). In 2023-24 the average time in working days to close a Stage 2 complaint was 15.15 days (18.83 days in Session 22-23, and 29.38 days in Session 21-22). This is an improvement of 3.68 days on comparison to Session 2-23, and 14.23 days on comparison to Session 21-23.

For one of the escalated complaints, the necessary information was not available due to industrial action. For the second complaint the dates of the October break resulted in an increase in the number of days taken to investigate the complaint. Whilst the average time taken to respond to escalated complaints has taken 0.5 days longer than the previous session, we still have maintained a significant improvement compared to session 21/22.

Indicator Four: The outcome of complaints at each stage

	Quantitative Indicator	Upheld			Partially upheld			Not upheld			Resolved***		
		23-24	22-23	21-22	23-24	22-23	21-22	23-24	22-23	21-22	23-24	22-23	21-22
4.1	Number of complaints as a % of all complaints closed at stage 1	4 (18%)	10 (48%)	8 (50%)	0 (0%)	2 (10%)	1 (6%)	3 (14%)	3 (14%)	2 (13%)	15 (68%)	6 (29%)	5 (31%)
4.2	Number of complaints as a % of all complaints closed at stage 2	0 (0%)	10 (34%)	7 (54%)	0 (0%)	1 (3%)	0 (0%)	11 (58%)	7 (24%)	2 (15%)	8 (42%)	11 (38%)	4 (31%)
4.3	Number of complaints as a % of all complaints closed after escalation	0 (0%)	1 (100%)	0 (0%)	0 (0%)	0 (0%)	1 (100%)	0 (0%)	0 (0%)	0 (0%)	2 (100%)	0 (0%)	0 (0%)

***A complaint is resolved when both (the organisation) and the customer agree what action (if any) will be taken to provide full and final resolution for the customer, without making a decision about whether the complaint is upheld or not upheld.

Number of complaints as a % of all complaints closed at stage 1

100% of stage 1 complaints were closed off. 86% were closed within the 5 working day timescale, with 14% requiring an extension. The number of complaints Upheld reduced by 30% from Session 22-23 to Session 23-24 (from 10 to 4). The number of complaints Resolved in Session 23-24 increased by 39% from Session 22-23 (from 6 to 15). On comparison to Resolved complaints in Session 21-22, there was an increase of 37%.

Number of complaints as a % of all complaints closed at stage 2

100 % were closed off, with 21% having had an extension. The number of Upheld complaints in 23-24 decreased by 34% and 54% on comparison to Sessions 22-23 and 21-22 respectively.

Number of complaints as a % of all complaints closed after escalation

100% of complaints were closed after escalation

In summary, the number of complaints has decreased overall, with notable improvement in complaint handling times and a higher percentage of complaints being resolved within set deadlines, particularly for Stage 2 complaints.

Customer satisfaction with complaints process

To ensure compliance with the College Complaints Handling Procedure we requested feedback from complainants regarding their satisfaction with the service they received, and not the circumstances or outcome of their actual complaint. They were asked to evaluate the service considering the following points:

- ▶ Whether the complaints process was easy to access
- ▶ Whether they received a prompt acknowledgement of their complaint
- ▶ Whether they were dealt with courteously at all times
- ▶ Whether their complaint was thoroughly investigated
- ▶ Whether they received a fair and clear response and within an appropriate timescale

For session 23-24 a survey (via Microsoft Forms platform) was utilised for a consecutive session. This allowed the team to easily produce quantitative data for several outcomes. It was anticipated that complainants would find this approach to providing feedback much easier and be encouraged to respond. However, responses continue to be low. We will continue to monitor the feedback on a regular basis and identify areas where this can be improved.

Prior to utilisation of Microsoft Forms satisfaction emails were issued by the Performance Team.

Response rates for the three sessions are provided below:

Response rates for CHP feedback	23-24	22-23	21-22
Number of responses received	8 (20%)	14 (28%)	5 (30%)
Response method	Microsoft Forms	Microsoft Forms	Email

Despite there being a decrease in the number of responses provided, we can reflect on the responses for Session 23-24 outcomes as indicated in the table below:

Complaint Handling Point	Strongly Agree		Agree		Disagree		Strongly Disagree	
	23-24	22-23	23-24	22-23	23-24	22-23	23-24	22-23
Session:	23-24	22-23	23-24	22-23	23-24	22-23	23-24	22-23
I found the complaints process easy to access	3 (35.7%)	5 (35.7%)	3 (35.7%)	7 (50.0%)	2 (25.0%)	2 (14.3%)	0 (0%)	0 (0%)
I received a prompt acknowledgement of my complaint	1 (12.5%)	3 (21.4%)	5 (62.5%)	9 (64.3%)	2 (25.0%)	2 (14.3%)	0 (0%)	0 (0%)
I was dealt with courteously at all times	3 (37.5%)	3 (21.4%)	4 (50.0%)	11 (78.6%)	1 (12.5%)	0 (0%)	0 (0%)	0 (0%)
I found my complaint was thoroughly investigated	2 (25.0%)	2 (14.3%)	4 (50.0%)	6 (42.9%)	1 (12.5%)	5 (35.7%)	1 (12.5%)	1 (7.1%)
I received a fair and clear response to my complaint, within an appropriate timescale	3 (37.5%)	3 (21.4%)	2 (25.0%)	6 (42.9%)	3 (37.5%)	5 (35.7%)	0 (0%)	0 (0%)

We are satisfied that the complaints handling procedure is easily accessible with the combined response rate for Strongly Agree and Agree being 75.0% (Session 23-24) and 85.7% (Session 22-23). The various methods by which a complaint can be submitted attributes to this.

For the most part, the above responses demonstrate that the complainants were in agreement overall with the handling of their complaints. The combined responses for Strongly Agree and Agree were as follows:

Complaint Handling Point	Combined response for Strongly Agree & Agree	
	23-24	22-23
I received a prompt acknowledgement of my complaint	75.0%	85.7%
I was dealt with courteously at all times	87.5%	100%
I found my complaint was thoroughly investigated	75.0%	57.2%
I received a fair and clear response to my complaint, within an appropriate timescale	62.0%	64.3%

A Positive comment was received regarding the complaints handling process, which included: *“It was well handled, at all times polite and the intention to learn and improve was definitely evident”*.

There are improvements to be made, particularly in relation to ensuring that complainants are provided with a full and thorough response, which addresses all aspects of their complaint. Where complainants noted dissatisfaction with areas of the complaints handling process, a follow-up email was issued asking for feedback on how their complaint could have been handled differently. No further correspondence was received from any of the complaints who indicated dissatisfaction. Any feedback from complainants will be considered and used to improve service delivery where possible.

Learning from Complaints: Service Delivery Improvements

By recording and analysing complaints data we can identify and address the causes of complaints and, where appropriate, identify training opportunities and introduce service improvements.

Following complaints received in Academic Year 2023-24, service delivery has been improved in the following areas:

Digital Services	A student had experienced difficulties uploading a form via the Student Portal. Digital Services will monitor the Student Portal to ensure it is optimised correctly to ensure compatibility with varied mobile devices.
Catering Provision	Free soup is now available at lunchtimes at both Campuses.
Health & Safety	Signage has been installed at both Campuses to clearly mark the smoking/non-smoking areas
Student Fees	Finance department to create and post a document on the College website which clearly shows fees payable.
SVQ service provision	An additional post is to be created in order to split workload across two team leaders in the Work Based Learning Team. It was recognised that due to the high number of SVQ and Modern Apprenticeship candidates additional staffing was required. This change will implemented in order to improve performance in this sector.

Staff Training

Training provided for a member of staff on Neurodiversity Awareness. The students provided feedback and felt that the teaching environment was vastly improved with their learning disabilities now taken into account.

SPSO (Scottish Public Services Ombudsman)

No complaints relating to Dumfries and Galloway College were submitted to SPSO during Academic Session 2023-2024.

The Performance Team, September 2024