

# **Complaints Handling Report**

Quarter 1 (August - October)

Academic Year AY2021-22



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#### 1. Introduction

North East Scotland College (NESCol) is committed to ensuring all clients and customers receive the best possible service. The College monitors stakeholder complaint feedback and ensures any lessons learned are actioned to improve its services. Reports measuring the College's complaints handling performance will be published online quarterly and issued to the Executive Team.

NESCol complaints handling procedures are subject to regular review and alteration as required. This could be as a result of stakeholder experiences, internal changes or external initiatives. The College is a member of the sector Complaints Handling Advisory Group, operating with the College Development Network (CDN) and in association with the Scottish Public Sector Ombudsman (SPSO).

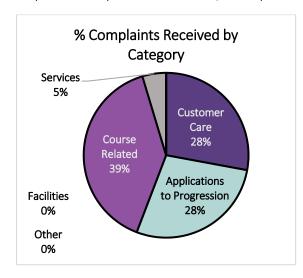
NESCol is an equal opportunities College therefore all complaints are administered in compliance with the Data Protection Act 2018, The General Data Protection Regulation (GDPR) and Freedom of Information (Scotland) Act 2002.

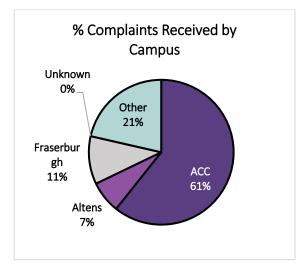
### 2. Quarterly Trends

For this quarter, NESCol received 28 complaints. The majority of complaints made are Course Related (C3), linked to Customer Care (C1) and Applications to Progression (C2). Common themes regarding the cause of complaints are:

- Application, Admission, Interview, Enrolment, Induction
- Assessment, Exams & Certification
- Staff conduct

The pie chart to the left shows the percentage of complaints received for each complaint category. The pie chart to the right shows a breakdown of the percentage of complaints received this quarter for each campus. The Aberdeen City (17), Fraserburgh (3) and Altens (2) campuses received complaints this quarter. In addition, 6 complaints were raised in relation to other college locations.







# 3. Impact on Service Delivery

Upon closing a complaint, the quality team request details of any lessons learned or actions for completion (where applicable) from the relevant departments. The feedback received from stakeholders through the complaints process can alter our service delivery and highlight areas for improvement in order to better our practices. The below example/s from this quarter highlights the value of stakeholder feedback.

Improving communication with the curriculum over the summer break

A complaint highlighted difficulties contacting staff to discuss unit and course completion over the summer break. The department has reflected and in the future will ensure clear information outlining who to direct course queries to over the summer period and when they can expect a response is accessible to students prior to the summer.

Improving the communication of changes to courses as a result of COVID-19 measures

Complaints were received in regards to the communication of changes to a course as a result of COVID-19 measures. The curriculum teams must ensure students are directly informed of changes to their course as a result of COVID-19 measures. Curriculum Managers will ensure future decisions which impact course content and the award achieved by students are clearly communicated to students through Blackboard and through class representatives.

Improving communications about devices for BYOD courses

A complaint was raised regarding a lack of clarity about the availability of and eligibility for laptops for BYOD courses. The relevant department has reflected on the college communication to student about bursary and devices. Future communications will be more explicit and will encourage students to enquire about eligibility before personally purchasing a device.

Improving the storage of student portfolio pieces

Complaints were received in regards to issues with students portfolio work. The relevant department identified the following lessons for future practice:

- Protcol assessors must be managed and supported more effectively
- As a matter of urgency the department will implement e-portfolio's rather than paper copies
- Reinforcing to assessors and verifiers that physical portfolios should not be transferred without a clear trail of the movements and an acknowledgement from the recipient.



# 4. Further Education Complaints Performance Indicators – Definitions

The following definitions for stage 1, stage 2, and escalated should be consistently applied throughout all indicators.

#### Stage 1

This means those responded to at stage 1 (frontline resolution). This does not include those escalated from stage 1 to stage 2. These will be counted in the escalated complaints. This includes those where the extended timeline (i.e. + additional 5 working days) was used.

#### Stage 2

This means those responded to at stage 2 (investigation). This includes those where the extended timeline (i.e. + additional 20 working days) was used.

This refers to those complaints considered directly at stage 2 for the following reasons:

- \* straight away by complainant (this refers to customers who did not wish to be dealt with at stage 1 and wished to go straight to stage 2)
- \* straight away by the College, or within a day or so after due consideration (i.e. College recognised complex, serious, high risk nature of the complaint and felt it was not suitable to be considered at stage 1)

#### **Escalated**

This means those escalated from stage 1 to stage 2.

This refers to those complaints where the complainant remains dissatisfied with the outcome of the frontline resolution and have requested that their case be escalated to stage 2 for investigation.

This includes those complaints where escalation was required because frontline resolution timescales were not met (i.e. 11 working days or more). Therefore automatic escalation rules apply.

#### Population

This figure will represent the total student population. For example the number of matriculated students at an agreed date.

The College, when reporting on the complaints handling KPIs for each quarter adheres to the above definitions to ensure consistency and accuracy.



# 5. Complaints Handling Key Performance Indicators – Quarter 1

COMPLAINTS HANDLING PROCEDURE INDICATORS		Q1		
Total no. of complaints received & complaints received per 100 population		%		
Number of complaints Received		100.0%		
College Population and Number of Complaints received per 100 population		0.3%		
Number of complaints closed at each stage and as a % of all complaints closed		%		
Number of complaints closed at Stage 1 and % of total closed		75.0%		
Number of complaints closed at Stage 2 and % of total closed	6	21.4%		
Number of complaints closed after Escalation and % of total closed		3.6%		
Open		0.0%		
Number of complaints upheld, partially upheld and not upheld at each stage and as a % of complaints				
closed at that stage				
Stage 1	No.	%		
Number and % of complaints upheld at Stage 1	6	28.6%		
Number and % of complaints partially upheld at Stage 1	8	38.1%		
Number and % of complaints not upheld at Stage 1	7	33.3%		
Number and % of complaints resolved at Stage 1	0	0.0%		
Stage 2	No.	%		
Number and % of complaints upheld at Stage 2	3	50.0%		
Number and % of complaints partially upheld at Stage 2	3	50.0%		
Number and % of complaints not upheld at Stage 2		0.0%		
Number and % of complaints resolved at Stage 2	0	0.0%		
Escalated		%		
Number and % of complaints upheld after Escalation	0	0.0%		
Number and % of complaints partially upheld after Escalation	1	0.0%		
Number and % of complaints not upheld after Escalation	0	0.0%		
Number and % of complaints resolved at Stage Escalation	0	0.0%		
Total working days and average time in working days to close complaints at each stage	No.	%		
Total working days and average time in working days to close complaints at Stage 1	103	4.9		
Total working days and average time in working days to close complaints at Stage 2	137	22.8		
Total working days and average time in working days to close complaints after Escalation	18	18.0		
Number and % of complaints closed within set timescales (S1=5 workings days; S2=20 working days; Escalated = 20 working days)	No.	%		
No. and % of Stage 1 complaints closed within 5 working days	17	81.0%		
No. and % of Stage 1 complaints not closed with 5 working days		19.0%		
No. and % of Stage 2 complaints closed within 20 working days		50.0%		
No. and % of Stage 2 complaints not closed within 20 working days		50.0%		
No. and % of Escalated complaints closed within 20 working days	1	100.0%		
No. and % of Escalated complaints not closed within 20 working days	0	0.0%		



#### 6. Escalation and Extension Rationale

In this quarter, four frontline complaints were granted an extension. The rationale for these complaints were either that the complaint required slightly more time to investigate fully or due to annual leave of staff. Although the SPSO state that annual leave is not a reason to extend a complaint, they also acknowledge that a full response may require the input of particular members of staff and if they are on annual leave during the deadline an exception can be made. These complaints were received either during or just before the October break so the decision was made based on availability of key staff members.

There was one frontline complaint escalated in the first quarter of AY2021-22. This complaint was originally responded to as a stage 1 complaint. As per SPSO procedure the complainant is given the option to reopen their complaint at stage 2, which on this occasion was requested and an investigation was completed.

Two investigations were granted an extension in the first quarter of AY2021-22. The complexity of the issues raised were significant and warranted further investigation. In both instances, the complainants were made aware of the extension to the deadlines as per SPSO guidance.

#### 7. Complaints Handling Feedback Questionnaire

Following the receipt of a response to their complaint, complainants are sent a complaints handling questionnaire so they can indicate their satisfaction with the different components of the complaints process.

This is monitored on a regular basis and the quality team review feedback received in relation to the handling process. This can influence future practice and alterations to the procedure followed.