

Lancaster City Council | All Services

Annual Complaints Performance and Service Improvement Report

(HRA services reported separately)

2024-2025

Introduction

This is the first annual complaint report for non-Council Housing service functions.

At Lancaster City Council, we value feedback from our residents as it helps us identify areas where our services or properties can be improved. Although we aim to provide the highest standards of service, we know that problems do occur.

We believe our complaints policy and process are fit for purpose and compliant with the Ombudsman complaints code. We recognise however, for us to be fully compliant by April 2026, we need to carry out an honest, thorough and continual self-assessment of complaint handling across our organisation.

We are proud of the progress we have made this year, which includes:

- Formation of a Complaints Working Group. Representatives from all LCC services meet regularly to discuss the findings quality assurance.
- Our staff intranet site has a revised Complaints section, populated by training resources.
- A centralised process has been implemented using the Granicus CRM platform.
- Training workshops covering best practice and use of our CRM process have been introduced.

As will be covered in this report, we acknowledge there is still work to do, but we are committed to improving. Our action plan for 2025 2026 includes significant changes to quality assurance and the staff resource dedicated to oversight of complaints.

To make a complaint or share concerns, residents can reach us via email, online, phone, in person, or even through our social media channels, although complainants should note that social media inquiries may not be monitored daily.

Please note that this report is based on complaint handling data from across all LCC but excludes HRA services which are reported on separately to the Housing Ombudsman.

Annual Self-Assessment

We have conducted an annual self-assessment (May 2025) against the Code of Practice for Complaint Handling, as outlined by the Local Government and Social Care Ombudsman.

This assessment ensures that our complaint handling policy and process remains aligned with the provisions set forth by the Code.

In summary, this assessment has highlighted the following areas for attention in 2025 2026:

- Mandatory training across grades to increase understanding of our complaints policy
- Further develop the quality assurance process already in place
- Introduce a range of KPIs based on the measurable data available from Granicus
- Survey satisfaction of complaint handling
- Review staffing resource for complaints handling

Our full self-assessment is attached as 'Appendix A'.

Performance

Overview:

LCC acknowledges that our records of complaints for 2024/25 and the preceding year are incomplete.

Our record keeping process required complaint handling officers to provide all case details to Customer Services who would maintain a central filing system and summary spreadsheet. Quality assurance audits discovered instances of complaints that were handled by services, but those cases and associated data were not then provided to Customer Services for inclusion in our central records/spreadsheet.

Of the complaint cases that were recorded on this central spreadsheet, there were instances of incomplete data in relation to SLA performance and outcome.

On every quarterly report submitted to our Senior Leadership Team (SLT), it was noted that an estimated 25% of complaint handling data may be missing from centralised systems.



Based on this spreadsheet, LCC recorded 432 Stage 1 complaints in 2024/25. This is a 61% increase against the previous year based on a similar spreadsheet.

6% of these complaints were subsequently escalated to Stage 2 (25 cases). This is a 4% increase against the previous year.

The increase in complaints against the previous year can be explained in by:

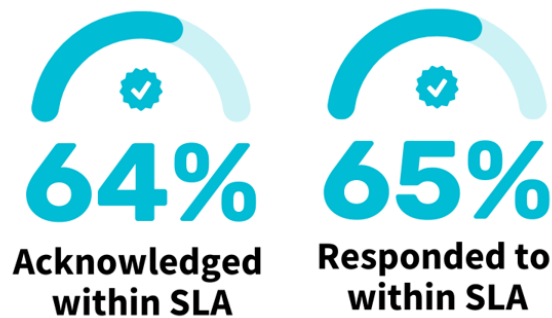
- Increase in staff understanding of our process via training, ensuring complaints are heard and escalated through the formal process where appropriate.
- Attempts to centralise complaint handling records, leading to more accessible data.
- Rollout of a new process using the Granicus CRM platform.

We anticipate that our new Granicus CRM process, which was fully rolled out across the authority by the end of the 2024/25 year, will provide us with significantly more accurate data for the coming financial year.

Stage 1:

Of the 432 Stage 1 complaints recorded in 2024/25:

- 64% were acknowledged within the timescale/SLA of 5 working days.
- 65% were then provided with a full response within the SLA of 10 working days.



When we are unable to meet our response SLA of 10 working days, our policy is to communicate the reasons and revised response date to the complainant. This data was not recorded in 2024/25. Our Granicus process captures this data so therefore in future we will be able to report on what percentage of extensions were communicated to the complainant.

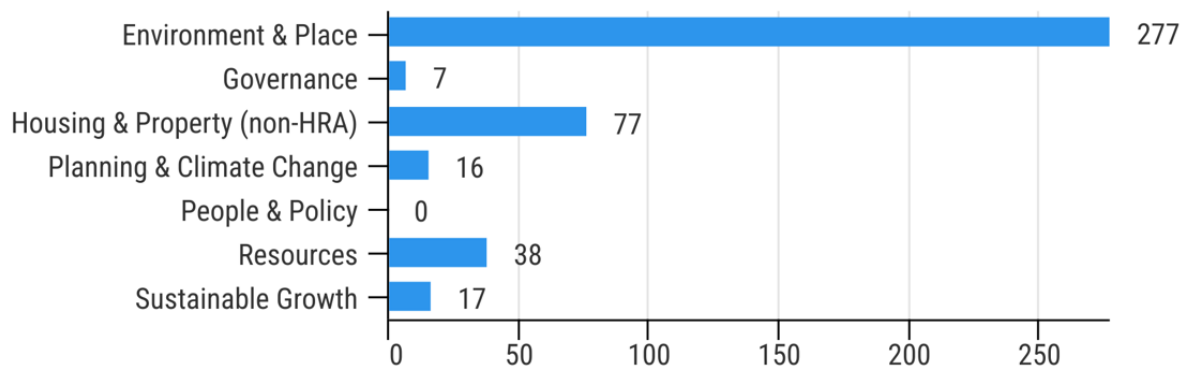
We record complaints into 5 categories to identify themes. In 2024/25 the most common themes were (in order):

1. Failure to follow procedure (159 cases)
2. Failure to take account of relevant matters (106)
3. Neglect or unjustified delay (94)
4. Unhelpful attitude of employee (54)
5. Malice, bias or discrimination (3)



We upheld 35% of our recorded Stage 1 complaints. In line with the Code, complaints are no longer recorded as 'partially upheld'.

Data regarding the reasons why complaints were upheld, what learning points were identified and what resolution measures (such as compensation) were not recorded consistently, therefore no trends could be identified. Use of the Granicus CRM process will rectify this.



We do not view the volume of complaints a service receives as a reflection of the quality of the service they provide or the general customer experience. Services that impact on our largest resident demographics naturally generate a greater amount of public feedback.

We recognise the need to improve on our recording of upheld complaint trends and lessons learned because these are a better indicator of how we are performing and where we need to improve.

The trend every quarter in 2024/25 was for Environment & Place, Housing & Property (non-Council Housing) and Resources to receive the most complaints. The same trend was seen the previous year, as was the breakdown within those service categories.

A breakdown of those 3 services with the highest volume of complaints is as follows:

Breakdown: Environment & Place

- Waste Services 171
- Public Realm 92
- Salt Ayre 17
- Enforcement 8

Breakdown: Housing & Property (non-HRA)

- Homelessness 21
- Housing Standards 9
- Property Group 2

Breakdown: Resources

- Council Tax 34
- Benefits 3

Stage 2:

In 2024/25, we recorded 25 complaint cases as being escalated/progressed to Stage 2. This accounted for 6% of Stage 1 cases.

- 33% were acknowledged within the timescale/SLA of 5 working days.
- 35% were then provided with a full response within the SLA of 20 working days.



When we are unable to meet our response SLA of 10 working days, our policy is to communicate the reasons and revised response date to the complainant. This data was not recorded in 2024/25. Our Granicus process captures this data so therefore in future we will be able to report on what percentage of extensions were communicated to the complainant.

Data regarding if the Stage 2 investigation upheld the Stage 1 outcome/decision or if any additional learning points were identified was also recorded inconsistently. Use of the Granicus CRM process will rectify this.

Complaint Handling Quality

In 2024/25 LCC introduced quality assurance checking under the oversight of the Chief Officer responsible for Customer Services.

Random sampling of complaint cases is used to inform:

- Case studies for discussion at the periodic meeting of the Complaints Working Group
- Bespoke training needs of each service area
- A best practice 'top tips' report cascaded throughout LCC via complaints officers

It is proposed that a scoring framework is incorporated into this checking process in 2025/26. This will add a piece of tangible data that can be reported on as a measurable KPI.

Learning and Service Improvements

Learning points and areas for improvement at LCC and individual service level were not consistently recorded in 2024/25. It is therefore a priority in our 2025/26 action plan to develop a framework where actionable insights gained from complaints can be better monitored.

A random sampling of complaints was subject to quality assurance checks every quarter and these informed a 'top tips' reminder document to share best practice.

The following were common learning needs identified from those checks:

- Better understanding of exclusion reasons
- Need to record everything presented as 'complaints' so we have exclusion data
- Importance of uploading full documentation of an investigation into Granicus
- Need to make telephone contact with complainant to aid with understanding and resolution
- Issuing extension letter when we expect we can't meet response SLA
- Always using latest template letters
- Ensuring response letter is explicit as to whether a complaint is upheld or not upheld
- Using plain English and avoiding abbreviations in letters
- When capturing learning, make this as explicit as possible
- Considering appropriateness of offering compensation
- Using Granicus as the channel for issuing key correspondence

Complainant Satisfaction

This information is not currently collected.

There are proposals to utilise the Granicus CRM process to automatically generate a survey at the closure of every Stage 1 and Stage 2 case.

Such feedback could generate another tangible measure in the form of a 'score' that we can use as a measurable KPI.

Exclusions

Our complaints records spreadsheet for 2024/25 has not captured excluded cases. That means that unfortunately we don't know how many 'complaints' were presented to us in total, only the ones we accepted/acknowledged because they met our definition of a complaint.

Not having this exclusion data also means we were unable to monitor why cases were excluded, if cases were being correctly excluded in line with our policy or if these exclusions were being clearly explained to the complainant.

The Granicus CRM process does capture all this data. This process was rolled out LCC wide in March 2025 so for the next financial year we will have this data to help us monitor Code compliance.

Ombudsman Findings

Our Information Governance team has records of 9 cases taken to the Local Government & Social Care Ombudsman in 2024/2025:

- In 8 cases the LG&SCO made the decision not to investigate
- 1 case was determined as 'premature' because the complainant had not exhausted our complaints process
- There were no cases that included findings of non-compliance

2024/25 Action Plan

Our Action Plan for 2025/26 aims to identify and monitor sub-projects that will aid in our goal of being fully compliant with the LG&SCO Complaint Handling Code by April 2026.

The Action Plan points can be summarised as:

- Develop a programme of training workshops for staff of all grades. Within this training use case studies to educate staff on policy and best practice. Focus should be our definitions of complaint vs excluded, increasing awareness of how residents can access the process, how to correctly use the Granicus CRM process and the quality of communication and correspondence to the complainant.
- Develop a mandatory e-learning course that covers the above.
- Revise our public website pages to help users determine if the complaints process is the appropriate channel for their comments/request.
- Create Granicus survey form for complainants to feedback on their experience of our complaint handling. Integrate an internal scoring framework for a measurable KPI.
- Create Granicus form for quality assurance checks. Integrate a scoring framework for a measurable KPI.
- Build Power BI report so data captured by Granicus process can be effectively interrogated.
- Recruit a new post solely designated to the oversight of complaints handling across LCC.
- Amend the policy to include more guidance on offering compensation (using the following as a reference point <https://www.lgo.org.uk/information-centre/staff-guidance/guidance-on-remedies>)
- Further develop our annual report process in preparation for 2026.