

Minute

Policy and Resources Committee

Wednesday, 23 November 2022, 09:30.

Council Chamber, Council Offices, School Place, Kirkwall.



Present

Councillors James W Stockan, Heather N Woodbridge, Graham A Bevan, Stephen G Clackson, Alexander G Cowie, P Lindsay Hall, Steven B Heddle, Kristopher D Leask, W Leslie Manson, James R Moar, Raymond S Peace, John A R Scott, Gwenda M Shearer, Jean E Stevenson, Ivan A Taylor, Mellissa-Louise Thomson and Owen Tierney.

Present via remote link (Microsoft Teams)

Councillor David Dawson.

Clerk

- Hazel Flett, Service Manager (Governance).

In Attendance

- John W Mundell, Interim Chief Executive.
- Stephen Brown, Chief Officer, Orkney Health and Social Care Partnership (for Items 1 to 12.1 and 13 to 16).
- Karen Greaves, Corporate Director for Strategy, Performance and Business Solutions.
- Hayley Green, Corporate Director for Neighbourhood Services and Infrastructure.
- Gareth Waterson, Corporate Director for Enterprise and Sustainable Regeneration.
- James Wylie, Corporate Director for Education, Leisure and Housing.
- Gavin Mitchell, Head of Legal and Governance.
- Andrew Groundwater, Head of Human Resources and Organisational Development.
- Sweyn Johnston, Head of Enterprise and Economic Growth (for Items 6 to 13).
- Erik Knight, Head of Finance (for Items 1 to 13).
- Kenny MacPherson, Head of Property, Asset Management and Facilities (for Items 1 to 3).
- Lorna Richardson, Interim Head of Neighbourhood Services.
- Alex Rodwell, Head of Improvement and Performance.
- David Custer, Service Manager (Engineering) (for Items 1 to 7).
- David Hannon, Strategic Projects Director (for Items 6 to 13).
- Inga Burton, Programme Manager Islands Deal (for Items 6 to 13).

Observing

- Kirsty Groundwater, Team Manager (Communications) (for Items 1 to 3 and 5 to 16).

Observing via remote link (Microsoft Teams)

- Anna Whelan, Service Manager (Strategy and Partnership) (for Items 2, 3 and 11).

Apologies

- Councillor Rachael A King.
- Councillor Gillian Skuse.
- Councillor Duncan A Tullock.

Declaration of Interest

- Councillor James W Stockan – Item 5.

Chair

- Councillor James W Stockan.

1. Disclosure of Exempt Information

The Committee noted the proposal that the public be excluded from the meeting for consideration of Items 11 to 15, together with Appendix 2 to Items 8 and 9, as the business to be discussed involved the potential disclosure of exempt information of the classes described in the relevant paragraphs of Part 1 of Schedule 7A of the Local Government (Scotland) Act 1973 as amended.

2. Council Plan 2023-28

After consideration of a report by the Corporate Director for Strategy, Performance and Business Solutions, together with an Equality Impact Assessment and an Island Communities Impact Assessment, copies of which had been circulated, the Committee:

Noted:

2.1. That engagement with Orkney's residents during the preceding years, together with the Local Government Election campaign in April and May 2022, as well as further input from elected members, had informed development of the draft Council Plan.

2.2. That the Council Plan reflected national priorities set by both the Scottish and UK Governments and the core services which the Council provided day to day, as well as taking account of new duties arising from recent legislation.

2.3. The draft Council Plan 2023-2028, attached as Appendix 1 to the report by the Corporate Director for Strategy, Performance and Business Solutions, which proposed Strategic Priorities themed under three headings as follows:

- Growing our Economy.
- Strengthening our Communities.
- Developing our Infrastructure.

2.4. That an outcome driven performance monitoring approach was proposed through 'stretch targets', with regular reporting to show the progress or trend towards achieving them.

2.5. The draft Delivery Plan to support the Council Plan 2023-2028, attached as Appendix 3 to the report by the Corporate Director for Strategy, Performance and Business Solutions, which contained a number of priority actions listed to indicate the work which would be undertaken to achieve the target outcome.

Councillor James W Stockan, seconded by Councillor Graham A Bevan, moved that the draft Council Plan 2023-2028 be approved for consultation.

Councillor Stephen G Clackson, seconded by Councillor Mellissa-Louise Thomson, moved an amendment that further consultation be undertaken with elected members in respect of the draft Council Plan 2023-2028, prior to approval for public consultation.

The result of a recorded vote was as follows:

For the Amendment:

Councillors Stephen G Clackson, James R Moar, Jean E Stevenson, Ivan A Taylor, Mellissa-Louise Thomson and Owen Tierney (6).

For the Motion:

Councillors Graham A Bevan, Alexander G Cowie, David Dawson, P Lindsay Hall, Steven B Heddle, Kristopher D Leask, W Leslie Manson, Raymond S Peace, John A R Scott, Gwenda M Shearer, James W Stockan and Heather N Woodbridge (12).

The Motion was therefore carried and the Committee thereafter resolved to **recommend to the Council:**

2.6. That the draft Council Plan 2023-2028, referred to at paragraph 2.3 above, be approved for consultation.

2.7. That the Corporate Director for Strategy, Performance and Business Solutions should submit, to the next meeting of the Committee, a final version of the Council Plan 2023-2028 and supporting Delivery Plan listing the key actions and projects that would deliver the target outcome under each strategic priority theme within the Council Plan.

3. Corporate Risk Register

After consideration of a report by the Corporate Director for Neighbourhood Services and Infrastructure, copies of which had been circulated, and after hearing a report from the Head of Property, Asset Management and Facilities, the Committee:

Noted:

3.1. That, on 20 September 2022, after scrutinising the updated Corporate Risk Register, the Policy and Resources Committee recommended that the updated Corporate Risk Register, as at August 2022, be approved, subject to submission of further revisions to the next meeting of the Committee.

3.2. That, accordingly, the following risks had been revised:

- Risk 1 – ferry fleet replacement to expand this taking account of other transport risks.
- Risk 2 – financial stability to more accurately reflect the financial and consequential risk to the Council.
- Risk 16 – inability to deliver core protection and support services for children and young people to more accurately reflect the staffing challenges faced by Orkney Health and Care as was reported to that Committee.

The Committee resolved to **recommend to the Council**:

3.3. That the updated Corporate Risk Register, as at October 2022, attached as Appendix 1 to this Minute, be approved.

4. Complaints Handling Procedure

After consideration of a report by the Corporate Director for Strategy, Performance and Business Solutions, copies of which had been circulated, and after hearing a report from the Head of Legal and Governance, the Committee:

Noted:

4.1. That the Council's Complaints Handling Procedure, approved in December 2020, was based on the Local Authority Model Complaints Handling Procedure published by the Scottish Public Services Ombudsman.

4.2. That the Local Authority Model Complaints Handling Procedure included a "Customer-facing Guide", which was a separate, but integral, part of the Local Authority Model Complaints Handling Procedure.

4.3. That the Complaints Handling Procedure had been revised to reflect changes to information links in the document, changes in the Council's governance arrangements and to roles and responsibilities in light of the management restructure and guidance published by the Scottish Public Services Ombudsman regarding support of children and young people.

The Committee resolved to **recommend to the Council**:

4.4. That the revised Complaints Handling Procedure, attached as Appendices 2 and 3 to this Minute, be approved.

Councillor Jean E Stevenson left the meeting during discussion of this item and rejoined the meeting at this point.

5. Non-Domestic Rates – Empty Properties Relief Policy

Councillor James W Stockan declared a financial interest in this item, in that he held property interests which could, in the future, fall within the ambit of this policy, and was not present during discussion thereof.

Signed: (Leader's signature).

As the Chair, Councillor James W Stockan, had declared an interest in this item and left the meeting, the Vice Chair, Councillor Heather N Woodbridge, took the Chair for this item.

After consideration of a report by the Corporate Director for Enterprise and Sustainable Regeneration, together with an Equality Impact Assessment, copies of which had been circulated, and after hearing a report from the Head of Finance, the Committee:

Noted:

5.1. That the national scheme of rates relief to empty properties was due to be abolished from 1 April 2023, and local authorities had the power to include relief to empty properties in their local relief schemes.

5.2. That initial research indicated other Scottish local authorities intended to set a local policy broadly mirroring the national scheme of relief.

5.3. The draft scheme, attached as Appendix 1 to the report by the Corporate Director for Enterprise and Sustainable Regeneration, based on the existing national scheme, which aimed to encourage ratepayers to bring empty properties back in to use, by limiting the relief available on longer-term empty properties and protecting the Council from financial risk by applying a 'hard' cap on relief awards of £10,000 per ratepayer, per financial year.

The Committee resolved to **recommend to the Council:**

5.4. That the draft scheme of relief to empty properties, referred to at paragraph 5.3 above, be approved for consultation with local ratepayers.

5.5. That the Corporate Director for Enterprise and Sustainable Regeneration should submit a report, to the next meeting of the Committee, on the outcome of the consultation referred to above, together with a final scheme of relief to empty properties for adoption.

Signed: (Depute Leader's signature).

6. Proposed Salt Storage Facility – Stage 2 Capital Project Appraisal

After consideration of a report by the Corporate Director for Neighbourhood Services and Infrastructure, copies of which had been circulated, and after hearing a report from the Interim Head of Neighbourhood Services, the Committee:

Noted:

6.1. That, on 21 December 2021, the Policy and Resources Committee recommended the allocation of one-off funding towards a series of projects considered to provide recovery prospects from the COVID-19 pandemic, including an allocation of £500,000 towards the provision of a salt storage facility, potentially located at Cursiter Quarry.

6.2. That, on 6 September 2022, when considering options for the provision of a proposed new salt storage facility, the Development and Infrastructure Committee noted:

- That the Winter Maintenance Policy, approved by Council in October 2021, stated that the ability to adequately manage storage conditions for salt and keep it dry was required if national road safety standards were to be met.
- Options for the proposed development of a Salt Storage Facility, as detailed in the Stage 1 Capital Appraisal, attached as Appendix 1 to the report by the Corporate Director for Neighbourhood Services and Infrastructure, with the preferred option being a new build facility at Cursiter Quarry.
- That, should the project be approved for progression through the Capital Project Appraisal process, a further sum of up to £20,000 is required to develop the Stage 2 Capital Project Appraisal, which could be met from existing service budgets.

6.3. That the Development and Infrastructure Committee subsequently recommended that, as an exception to the Capital Project Appraisal process, in order to manage storage conditions for salt to meet national road safety standards, the Corporate Director for Neighbourhood Services and Infrastructure should submit, to the Policy and Resources Committee, a Stage 2 Capital Project Appraisal in respect of a proposed new Salt Storage Facility at Cursiter Quarry.

The Committee resolved to **recommend to the Council:**

6.4. That the Stage 2 Capital Project Appraisal in respect of the proposed salt storage facility at Cursiter Quarry, attached as Appendix 4 to this Minute, be approved.

6.5. That, as an exception to the Capital Project Appraisal process, in order to manage storage conditions for salt to meet national road safety standards, the proposed salt storage facility at Cursiter Quarry be added to the capital programme for 2023/24 onwards, at a gross capital cost of £500,000, funded by the allocation of one-off funding referred to at paragraph 6.1 above.

7. Police and Fire Sub-committee

After consideration of the draft Minute of the Meeting of the Police and Fire Sub-committee held on 28 September 2022, copies of which had been circulated, the Committee:

Resolved, on the motion of Councillor David Dawson, seconded by Councillor Jean E Stevenson, to approve the Minute of the Meeting of the Police and Fire Sub-committee held on 28 September 2022, attached as Appendix 5 to this Minute, as a true record.

8. Nordic Atlantic Cooperation

After consideration of a report by the Corporate Director for Enterprise and Sustainable Regeneration, copies of which had been circulated, and after hearing a report from the Programme Manager Islands Deal, the Committee:

Noted:

8.1. That, on 21 June 2022, when considering international engagement by the Council over the next three years, the Policy and Resources Committee recommended that the Council should continue to develop and enhance relationships with Arctic and Nordic countries to maximise the ongoing promotion of potential economic and cultural opportunities for Orkney.

8.2. That Nordic Atlantic Cooperation (NORA) was an intergovernmental organisation under the regional co-operation programme of the Nordic Council of Ministers that brought together Greenland, Iceland, the Faroe Islands and coastal Norway.

8.3. That NORA was focussed on making the North Atlantic a strong and dynamic part of the Nordic region, focussed on sustainable economic development and cross-border collaboration between the private sector and research and development bodies, extending to Canada and Scotland.

8.4. That NORA's strategic priorities included bioeconomy, sustainable tourism, circular economy, transport, energy and local communities.

8.5. That NORA provided funding to support regional co-operation on projects relevant to their own communities, with funding rounds in March and October each year.

8.6. That projects could secure a maximum of £60,000 per annum from NORA.

8.7. That NORA and the Council would seek to present jointly on the outcomes of wider Orkney community participation in international projects at the Arctic Circle Assemblies and/or related events.

8.8. The proposal to establish a NORA project development fund with the following purposes:

- To support and enable Orkney's wider community to participate in international projects.
- To test/pilot processes for aligning funding with similar organisations internationally to achieve greater value and impact.
- To strengthen relationships with similar communities.

The Committee resolved to **recommend to the Council:**

8.9. That the Council should establish a NORA project development fund, with an opening balance of £20,000, to be met from existing resources within the Enterprise and Sustainable Regeneration revenue budget for 2022/23.

8.10. That the NORA project development fund be made available between 2022 and 2024, to align with the Council's commitment to develop and enhance relationships with Nordic and Arctic Countries and attending the Arctic Circle Assembly.

8.11. That, although applicants should be encouraged to seek match funding, availability and accessibility of the Council's NORA project development funding should not be dependent on securing match funding.

8.12. That the NORA project development fund should be available to support projects beyond 2024, should a project end date extend beyond 2024.

8.13. That powers be delegated to the Corporate Director for Enterprise and Sustainable Regeneration to award grant assistance from the NORA project development fund, on the basis of a maximum award of £5,000 per application.

9. Islands Growth Deal – Full Deal Agreement

After consideration of a report by the Corporate Director for Enterprise and Sustainable Regeneration, copies of which had been circulated, and after hearing a report from the Programme Manager Islands Deal, the Committee:

Noted:

9.1. That the Full Deal Document was proposed to be signed in January 2023 by the respective Council Leaders, following approval by the Islands Growth Deal Joint Committee, along with the Tripartite Financial Agreement, which would be signed by the Accountable Body on behalf of the three Constituent Authorities.

9.2. That the Council's role as a Constituent Authority for the Islands Growth Deal carried specific responsibilities, as set out in the Islands Growth Deal Governance Framework and the Islands Growth Deal Joint Committee Governance Agreement.

The Committee resolved to **recommend to the Council:**

9.3. That the Council delegate authority to the Islands Growth Deal Joint Committee to approve the terms of, and enter into, on the Council's behalf, the terms of the Full Deal Agreement.

9.4. That the Council delegate authority to the Chief Executive of Comhairle nan Eilian Siar (CNES) to approve and execute the Islands Growth Deal Tripartite Financial Agreement, on behalf of the CNES as the Accountable Body for the Islands Growth Deal and on behalf of Orkney Islands Council as one of the three Constituent Authorities within the Islands Growth Deal.

9.5. That powers be delegated to the relevant Council representative on the Joint Islands Programme Board, and the Islands Growth Deal Joint Committee, to deal with change within the Islands Growth Deal in line with the change management process set out by Scottish and UK Government, including making any necessary amendments to the Full Deal Agreement and associated documents.

9.6. That, in principle, the Islands Growth Deal spend profile be managed through the Council ensuring cashflow and/or through the provision of bridging loans to Growth Deal Projects.

10. Exclusion of Public

On the motion of Councillor James W Stockan, seconded by Councillor Heather N Woodbridge, the Committee resolved that the public be excluded for the remainder of the meeting, as the business to be considered involved the disclosure of exempt information of the classes described in the relevant paragraphs of Part 1 of Schedule 7A of the Local Government (Scotland) Act 1973 as amended.

11. Economic Recovery Steering Group

ASPIRE Orkney – Progress Update

Under section 50A(4) of the Local Government (Scotland) Act 1973, the public had been excluded from the meeting for this item on the grounds that it involved the disclosure of exempt information as defined in paragraphs 4 and 6 of Part 1 of Schedule 7A of the Act.

After consideration of a joint report by the Corporate Director for Enterprise and Sustainable Regeneration and the Corporate Director for Strategy, Performance and Business Solutions, copies of which had been circulated, and after hearing a report from the Head of Enterprise and Economic Growth, the Committee:

Noted:

11.1. That, on 25 November 2020, the Council resolved that the detail of the ASPIRE Orkney programme be subject to further consideration, in the context of the Council's corporate plan, by the Policy and Resources Committee, with effect from January 2021, and thereafter as a standing item for the Policy and Resources Committee.

11.2. That progress updates in relation to the ASPIRE Orkney programme of activity had been presented regularly to the Policy and Resources Committee, with the latest update presented on 20 September 2022.

11.3. That significant discussion was held with members of the Economic Recovery Steering Group in this reporting period with regard to the future direction of the group, resulting in the Orkney Partnership Board agreeing that the Economic Recovery Steering Group be disestablished and its role merged into the Sustainable Recovery Delivery Group.

11.4. That the Orkney Partnership Board also agreed that a Business Forum be convened in order to channel the views of Orkney's business community into the Partnership.

The Committee resolved to **recommend to the Council:**

11.5. That, given the Economic Recovery Steering Group no longer existed, the requirement to report on the ASPIRE Orkney programme as a standing item for the Policy and Resources Committee, established in November 2020, be removed.

The above constitutes the summary of the Minute in terms of the Local Government (Scotland) Act 1973 section 50C(2) as amended by the Local Government (Access to Information) Act 1985.

Councillors Graham A Bevan and Steven B Heddle left the meeting during discussion of this item.

12. Orkney's Community Wind Farm Project

12.1. Progress Update

Under section 50A(4) of the Local Government (Scotland) Act 1973, the public had been excluded from the meeting for this item on the grounds that it involved the disclosure of exempt information as defined in paragraphs 6, 8 and 9 of Part 1 of Schedule 7A of the Act.

After consideration of a report by the Corporate Director for Enterprise and Sustainable Regeneration, copies of which had been circulated, and after hearing a report from the Head of Enterprise and Economic Growth, the Committee:

Resolved to **recommend to the Council** what action should be taken with regard to the next stage in progressing projects forming Orkney's Community Wind Farm.

The above constitutes the summary of the Minute in terms of the Local Government (Scotland) Act 1973 section 50C(2) as amended by the Local Government (Access to Information) Act 1985.

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12.2. Contracts for Difference Auction

Under section 50A(4) of the Local Government (Scotland) Act 1973, the public had been excluded from the meeting for this item on the grounds that it involved the disclosure of exempt information as defined in paragraphs 6, 8 and 9 of Part 1 of Schedule 7A of the Act.

After consideration of a report by the Corporate Director for Enterprise and Sustainable Regeneration, copies of which had been circulated, and after hearing a report from the Head of Enterprise and Economic Growth, the Committee:

Resolved to **recommend to the Council** what action should be taken with regard to participation in the Contracts for Difference auction.

The above constitutes the summary of the Minute in terms of the Local Government (Scotland) Act 1973 section 50C(2) as amended by the Local Government (Access to Information) Act 1985.

13. Net Zero Living – Pioneer Places

Under section 50A(4) of the Local Government (Scotland) Act 1973, the public had been excluded from the meeting for this item on the grounds that it involved the disclosure of exempt information as defined in paragraph 6 of Part 1 of Schedule 7A of the Act.

After consideration of a report by the Corporate Director for Enterprise and Sustainable Regeneration, copies of which had been circulated, and after hearing a report from the Head of Enterprise and Economic Growth, the Committee:

Resolved to **recommend to the Council** what action should be taken with regard to involvement in the Net Zero Living – Pioneer Places fund.

The above constitutes the summary of the Minute in terms of the Local Government (Scotland) Act 1973 section 50C(2) as amended by the Local Government (Access to Information) Act 1985.

14. Funding of Drainage Works

Under section 50A(4) of the Local Government (Scotland) Act 1973, the public had been excluded from the meeting for this item on the grounds that it involved the disclosure of exempt information as defined in paragraphs 4 and 6 of Part 1 of Schedule 7A of the Act.

After consideration of a report by the Corporate Director for Neighbourhood Services and Infrastructure, copies of which had been circulated, the Committee:

Resolved to **recommend to the Council** what action should be taken with regard to funding of drainage works.

The above constitutes the summary of the Minute in terms of the Local Government (Scotland) Act 1973 section 50C(2) as amended by the Local Government (Access to Information) Act 1985.

15. Asset Management Sub-committee

Under section 50A(4) of the Local Government (Scotland) Act 1973, the public had been excluded from the meeting for this item on the grounds that it involved the disclosure of exempt information as defined in paragraphs 6 and 9 of Part 1 of Schedule 7A of the Act.

After consideration of the draft Minute of the Meeting of the Asset Management Sub-committee held on 3 November 2022, copies of which had been circulated, the Committee:

Resolved:

15.1. On the motion of Councillor Heather N Woodbridge seconded by Councillor P Lindsay Hall, to approve the Minute of the Meeting of the Asset Management Sub-committee held on 3 November 2022 as a true record.

The Committee resolved to **recommend to the Council:**

15.2. That the recommendation at paragraph 5.5 of the Minute of the Meeting of the Asset Management Sub-committee held on 3 November 2022, attached as Appendix 6 to this Minute, be approved.

16. Conclusion of Meeting

At 12:55 the Chair declared the meeting concluded.

Signed: (Leader's signature).

Appendix 1.

Corporate Risk Register – October 2022

Pages 1420 to 1459.

Corporate Risk Register – October 2022

Strategic Risks

Cluster.	Risk Number.	Risk.	Owner.
Physical.	1.	Transport.	Corporate Director for Enterprise and Sustainable Regeneration.
Financial.	2.	Economic Sustainability.	Chief Executive and Corporate Director for Enterprise and Sustainable Regeneration.
Reputational.	3.	Adverse Communications.	Corporate Director for Strategy, Performance and Business Solutions.
Physical.	4.	Workforce.	Corporate Director for Strategy, Performance and Business Solutions.
Physical.	5.	Asset Management.	Corporate Director for Neighbourhood Services and Infrastructure.
Economic.	6.	Economic.	Corporate Director for Enterprise and Sustainable Regeneration.
Technological.	7.	Cyber Security.	Corporate Director for Neighbourhood Services and Infrastructure.
Technological.	8.	Connectivity.	Corporate Director for Enterprise and Sustainable Regeneration.
Partnership.	9.	Partnerships.	Corporate Director for Strategy, Performance and Business Solutions.
Legislative.	10.	Procurement.	Corporate Director for Strategy, Performance and Business Solutions.
Legislative.	11.	Health and Safety.	Corporate Director for Neighbourhood Services and Infrastructure.
Economic.	12.	EU exit.	Chief Executive and Head of Marine Services and Transportation.
Financial.	13.	Housing.	Corporate Director for Education, Leisure and Housing.
Professional.	14.	Childcare Services.	Corporate Director for Education, Leisure and Housing.
Physical.	15.	Pandemic.	Corporate Director for Neighbourhood Services and Infrastructure.
Legislative.	16.	Children and Young People.	Chief Officer, Orkney Health and Social Care Partnership.

Risks by cluster

Cluster.	Risk Number.	Risk.	Owner.
Economic.	12.	EU exit.	Chief Executive and Head of Marine Services and Transportation.
Economic.	6.	Economic.	Corporate Director for Enterprise and Sustainable Regeneration.
Financial.	2.	Economic Sustainability.	Chief Executive and Corporate Director for Enterprise and Sustainable Regeneration.
Financial.	13.	Housing.	Corporate Director for Education, Leisure and Housing.
Legislative.	16.	Children and Young People.	Chief Officer, Orkney Health and Social Care Partnership.
Legislative.	11.	Health and Safety.	Corporate Director for Neighbourhood Services and Infrastructure.
Legislative.	10.	Procurement.	Corporate Director for Strategy, Performance and Business Solutions.
Partnership.	9.	Partnerships.	Corporate Director for Strategy, Performance and Business Solutions.
Physical.	5.	Asset Management.	Corporate Director for Neighbourhood Services and Infrastructure.
Physical.	1.	Transport.	Corporate Director for Enterprise and Sustainable Regeneration.
Physical.	15.	Pandemic.	Corporate Director for Neighbourhood Services and Infrastructure.
Physical.	4.	Workforce.	Corporate Director for Strategy, Performance and Business Solutions.
Professional.	14.	Childcare Services.	Corporate Director for Education, Leisure and Housing.
Reputational.	3.	Adverse Communications.	Corporate Director for Strategy, Performance and Business Solutions.
Technological.	7.	Cyber Security.	Corporate Director for Neighbourhood Services and Infrastructure.
Technological.	8.	Connectivity.	Corporate Director for Enterprise and Sustainable Regeneration.

Risks by owner

Owner.	Cluster.	Risk Number.	Risk.
Chief Executive and Head of Marine Services and Transportation.	Economic.	12.	EU Exit.
Corporate Director for Education, Leisure and Housing.	Financial.	13.	Housing.
Corporate Director for Education, Leisure and Housing.	Professional.	14.	Childcare Services.
Corporate Director for Enterprise and Sustainable Regeneration.	Physical.	1.	Transport.
Corporate Director for Enterprise and Sustainable Regeneration.	Economic.	6.	Economic.
Corporate Director for Enterprise and Sustainable Regeneration.	Technological.	8.	Connectivity.
Chief Executive and Corporate Director for Enterprise and Sustainable Regeneration.	Financial.	2.	Economic Sustainability.
Corporate Director for Neighbourhood Services and Infrastructure.	Physical.	5.	Asset Management.
Corporate Director for Neighbourhood Services and Infrastructure.	Technological.	7.	Cyber Security.
Corporate Director for Neighbourhood Services and Infrastructure.	Legislative.	11.	Health and Safety.
Corporate Director for Neighbourhood Services and Infrastructure.	Physical.	15.	Pandemic.
Corporate Director for Strategy, Performance and Business Solutions.	Reputational.	3.	Adverse Communications.
Corporate Director for Strategy, Performance and Business Solutions.	Physical.	4.	Workforce.
Corporate Director for Strategy, Performance and Business Solutions.	Partnership.	9.	Partnerships.
Corporate Director for Strategy, Performance and Business Solutions.	Legislative.	10.	Procurement.
Chief Officer, Orkney Health and Social Care Partnership.	Legislative.	16.	Children and Young People.

Risks by rating

Owner.	Cluster.	Risk Number.	Risk.	Risk Rating.
Corporate Director for Enterprise and Sustainable Regeneration.	Physical.	1.	Transport.	25.
Chief Executive and Corporate Director for Enterprise and Sustainable Regeneration.	Financial.	2.	Economic Sustainability.	25.
Corporate Director for Enterprise and Sustainable Regeneration.	Economic.	6.	Economic.	25.
Corporate Director for Strategy, Performance and Business Solutions.	Physical.	4.	Workforce.	16.
Corporate Director for Enterprise and Sustainable Regeneration.	Technological.	8.	Connectivity.	16.
Chief Officer, Orkney Health and Social Care Partnership.	Legislative.	16.	Children and Young People.	15.
Corporate Director for Neighbourhood Services and Infrastructure.	Physical.	15.	Pandemic.	15.
Corporate Director for Neighbourhood Services and Infrastructure.	Technological.	7.	Cyber Security.	12.
Corporate Director for Strategy, Performance and Business Solutions.	Reputational.	3.	Adverse Communications.	12.
Corporate Director for Neighbourhood Services and Infrastructure.	Physical.	5.	Asset Management.	12.
Corporate Director for Education, Leisure and Housing.	Financial.	13.	Housing.	12.
Corporate Director for Education, Leisure and Housing.	Professional.	14.	Childcare Services.	12.
Corporate Director for Strategy, Performance and Business Solutions.	Partnership.	9.	Partnerships.	9.
Chief Executive and Head of Marine Services and Transportation.	Economic.	12.	EU exit.	9.

Owner.	Cluster.	Risk Number.	Risk.	Risk Rating.
Corporate Director for Strategy, Performance and Business Solutions.	Legislative.	10.	Procurement.	9.
Corporate Director for Neighbourhood Services and Infrastructure.	Legislative.	11.	Health and Safety.	9.

Risk matrix

		IMPACT					
		1.	2.	3.	4.	5.	
		Insignificant	Minor	Moderate	Major	Severe	
LIKELIHOOD	5.	Almost Certain.	Medium	Medium	High	High	Extreme
	4.	Likely.	Medium	Medium	Medium	High	Extreme
	3.	Possible.	Low	Medium	Medium	High	High
	2.	Unlikely.	Low	Low	Medium	Medium	High
	1.	Rare.	Low	Low	Low	Medium	High

Risk Number.		Risk Title.				Cluster.		Owner.	
1.		Transport				Physical.		Chief Executive, Corporate Director for Enterprise and Sustainable Regeneration, and Corporate Director for Neighbourhood Services and Infrastructure	
Likelihood:	5.	Impact:	5.	RAG:	Red.	Current Risk Score:	25.	Target Risk Score:	25.

Vulnerability.	Trigger.	Consequences.	Options.	Mitigating Actions.
<p>1a. Internal Ferries.</p> <p>Failure to secure agreement with Scottish Government on appropriate funding arrangements to deliver the Scottish Ferries Plan in relation to ferry and terminal replacement for Orkney.</p> <p>Ferry and Terminal replacement programme currently unfunded with ageing infrastructure.</p>	<p>Internal Ferries.</p> <p>Ferries reach end of service life with no solution in place. High repair costs indicate that buying new would be more cost effective. Unexpected repairs and maintenance following incidents or normal wear and tear, disrupting service availability, and impacting lifeline connectivity.</p> <p>Deterioration of piers infrastructure. Reductions in lifeline provisions for the community are below Scottish Ferries Plan standards. Services become unaffordable.</p>	<p>Internal Ferries.</p> <p>Ferries reach end of life or suffer an unexpected loss of service with no replacement – rapid service deterioration. Excessive support costs as aged ferries kept running. Reduced capacity and flexibility to maintain scheduled services.</p> <p>Excessive running costs of old ferries. No opportunities to achieve expected service levels.</p> <p>Risk of delay in procurement leading to reduced capability to purchase fit for purpose new tonnage. Buying piecemeal also reduces economy of scale; community unrest due to people depopulating</p>	<p>Internal Ferries.</p> <p>Treat</p>	<p>Internal Ferries.</p> <p>Ongoing dialogue with the Scottish Government emphasising the difficulties of a small authority providing the range of public services within reduced budgets across a wide and diverse geographical area.</p> <p>Continue to seek additional specific funding sources to protect lifeline services in Orkney and its outlying communities to ensure they are not significantly disaffected, e.g., Transport Grant for replacement ferries.</p>

Vulnerability.	Trigger.	Consequences.	Options.	Mitigating Actions.
<p>1b. External Ferries.</p> <p>Loss of service to the lifeline ferry route.</p> <p>1c. Air.</p> <p>Loss of internal/ external air service currently operated by Loganair.</p> <p>Reduction in services following the sale of the airline.</p> <p>1d. Causeways.</p> <p>Failure of the Churchill barriers, given their age (now 70+ years old) combined with increasing use of heavier vehicles, especially but not only associated with the freight vehicles using the external ferry service from St Margaret's Hope.</p>	<p>External Ferries.</p> <p>Scottish Government announcement of reduction in ferry timetable, ferry replacement, RET or rescheduling of service.</p> <p>Air.</p> <p>Sale of the business. Collapse of business. Tender application for internal air service.</p> <p>1d. Causeways.</p> <p>Failure in substrate leading to road closure.</p>	<p>the isles due to lack of lifeline transport connectivity.</p> <p>External Ferries.</p> <p>Reduction in available spaces. Transport disruption. Re-routing of supply import/ export lines. Pressure on non-lifeline ferry.</p> <p>Air.</p> <p>Increased demand on internal ferries. Lack of transport provision for itinerant service provision. Increased demand for temporary accommodation.</p> <p>1d. Causeways.</p> <p>No alternative route. Disruption for linked south isles residents. Disruption for businesses due to ferry access, displacement of employees, lack of supply routes. Increased freight costs.</p>	<p>External Ferries.</p> <p>Treat.</p> <p>Air.</p> <p>Tolerate.</p> <p>1d. Causeways.</p> <p>Treat.</p>	<p>External Ferries.</p> <p>Relationship with contract provider. Lobby Scottish Government.</p> <p>Air.</p> <p>Relationship with contract provider. Lobby Scottish Government.</p> <p>1d. Causeways.</p> <p>Engineering studies on barrier road surface and substrate. Previous studies on barrier 2 overtopping with suggested engineering control measures widely known. Traffic management.</p>

Vulnerability.	Trigger.	Consequences.	Options.	Mitigating Actions.
<p>Barrier 1 is known to have a degraded surface and the presence of some voids within the structure.</p> <p>Barrier 2 continues to be problematic to cross in adverse weather conditions, specifically where tidal and wind conditions produce overtopping.</p> <p>Closure of the barriers are required to maintain public safety, usually for 2 hours either side of a high tide when certain weather/ tidal conditions prevail.</p>		<p>Ferry availability during peak periods.</p>		

Risk Number.		Risk Title.				Cluster.	Owner.		
2.		Economic Sustainability				Financial.	Chief Executive and Corporate Director for Enterprise and Sustainable Regeneration.		
Likelihood:	5.	Impact:	5.	RAG:	Red.	Current Risk Score:	25.	Target Risk Score:	16.

Vulnerability.	Trigger.	Consequences.	Options.	Mitigating Actions.
<ul style="list-style-type: none"> • Reduced funding across Council Services. • Reduced income as a result of economic pressures. • Increased costs to capital projects. • Increased costs to revenue budgets. • Increased energy costs. • Increased demands to existing services. • Lack of capacity to deliver core services. • Impacts to supply chain. • Increased costs to capital replacement programme. • Impacts to Council investments. • Inflationary rises. 	<ul style="list-style-type: none"> • Increase to energy costs. • Increase to CPI/RPI costs. • Increase in transportation and delivery costs. • Increase to running costs for Council fleet and internal ferries. • Increase of salaries due to pay awards. • Increase to cost of living. • Increase in expectations from Community. • Increase in rent and Council tax default. • Increase in requests for statutory services. • Reduction in grant from Scottish Government. • Reduction in requests for Council paid services. • Reduction in capacity to deliver services. • Reduction in investments. 	<p>Community unrest. Unhappy service users. Elected members unable to meet need. Loss of credibility of Council. Inability to deliver the range of services expected and legal challenge. Capital projects are delivered late or not at all leading to increased costs and difficulties in delivering services. Local Economy adversely impacted by labour shortages and high price of materials. Non-payment of rent and Council Tax. Inability to pay for Council Services. Increased demand on Food Banks, free school meals, school clothing</p>	<p>Treat.</p>	<p>Ownership of the Budget Setting Process by the Corporate Leadership Team / Extended Corporate Management Leadership Team with openness and transparency around the identification of potential areas for re-provisioning of services. Development of a range of actions (savings and other budget improvement measures) to address whatever financial environment the Council faces going into 2023/24 in order to inform future business and budget planning. A strategy on the use of Reserves. Delivery of budget savings will be monitored within Services and reported to the Policy and Resources Committee. There must be an acknowledgement of reality with the focus on continuation of the delivery of minimum Statutory Provision versus Statutory with Discretion, Non-Statutory but Essential or Discretionary Expenditure whilst having regard to the Council Priorities. Improved project planning with much longer lead in times.</p>

Vulnerability.	Trigger.	Consequences.	Options.	Mitigating Actions.
<ul style="list-style-type: none"> • Council tax levy during period. • Impact on staffing recruitment and retention. • Availability of key products. 	<ul style="list-style-type: none"> • Expectations outstrip capacity to deliver. • The Scottish Government fails to provide sufficient funding for essential services. • Government movement to energy cost caps. 	<p>grants, crisis grants, Scottish Welfare Fund.</p> <p>Financial pressures impacting adversely on mental wellbeing, and relationships leading to increased demand on Council wellbeing services.</p> <p>Strike action on pay leading to disruption in the delivery of Council Services.</p> <p>Inability to recruit or retain staff.</p> <p>Community expectations are not reduced due to a failure to communicate and engage effectively with communities.</p> <p>Failure to demonstrate the value of the Council's ongoing services to the public.</p> <p>Living costs outstrip available income as a result of pay awards, benefits and other income receipts not keeping up with inflation leading to inability to meet household outgoings.</p>		<p>Additional staff capacity in Neighbourhood Services and Infrastructure to manage the capital programme.</p> <p>Development of a Child Poverty Action Plan.</p> <p>Signposting to financial advice.</p> <p>Local Authority Covid-19 Economic Recovery (LACER) funding.</p> <p>Increased use of welfare fund applications.</p> <p>Review of pay and grading model.</p> <p>Exploration of market supplements.</p> <p>Promotion in the reduction of energy usage.</p> <p>Hybrid working policy.</p> <p>Reduction in heating costs for offices.</p>

Risk Number.	Risk Title.				Cluster.	Owner.			
3.	Adverse reaction to communications with staff, the public and stakeholders including social media.				Reputational.	Corporate Director for Strategy, Performance and Business Solutions.			
Likelihood:	4.	Impact:	3.	RAG:	Amber	Current Risk Score:	12.	Target Risk Score:	9.

Vulnerability.	Trigger.	Consequences.	Options.	Mitigating Actions.
<p>The Council's resources made available by Government will continue to reduce or remain static over the next few years despite growing need and demand. The Council must therefore use its general fund and strategic reserve fund resources to maintain services whilst areas for savings / efficiencies and income generation are progressed.</p> <p>The Council must ensure that communities continue to be appropriately engaged about the efficiency measures and inevitable service changes and are proactively informed so that customer expectations are realistic. There is the potential that staff do not feel engaged in Our People Our Plan priorities and the inevitable change processes or valued as active</p>	<p>Customers have unrealistic expectations of what Council services can deliver.</p> <p>Customers do not understand the reasons for the changes and blame the Council.</p> <p>Good ideas are not harvested from effective community consultation.</p> <p>Failure to demonstrate the value of the Council's on-going services to the public.</p> <p>Council is unable to demonstrate the ability to work corporately.</p> <p>Staff are not given the opportunity to engage with and contribute to Our People Our Plan and the subsequent corporate development; staff become disengaged in essential change processes.</p> <p>The Council does not maintain an effective presence on social media as a communication tool.</p>	<p>Reputational risk.</p> <p>Misplaced criticism.</p> <p>Good ideas lost.</p> <p>Confusion about what the Council's priorities are.</p> <p>More difficult to align resources to priorities.</p> <p>Lack of understanding of what the Council wants to achieve.</p> <p>Changes are not achieved.</p> <p>Staff morale is adversely affected.</p> <p>Customers may not get a joined-up service.</p> <p>Inter-service tensions undermine corporate achievements.</p> <p>Legal implications.</p> <p>Exclusion of sectors of the community.</p>	Treat.	<p>Communication and Engagement Plan for Our People or Plan (OPOP) in development.</p> <p>As part of OPOP a workstream on Internal Communication is in place.</p> <p>In addition, work has commenced on the next review of the communication and engagement strategies and plans that are in place to publicise the Council's objectives and priorities, existing services and service change to ensure communities are engaged. The last review included the increased use of social media as a platform and tool for community engagement.</p> <p>Proactive press releases and campaigns are being prepared and released to promote positive stories about the services provided by the Council.</p>

Vulnerability.	Trigger.	Consequences.	Options.	Mitigating Actions.
<p>contributors to corporate change, service realignments or developments.</p> <p>The Council fails to manage how we respond to social media and to take advantage of the potential benefits of social media.</p>				

Risk Number.		Risk Title.				Cluster.	Owner.		
4.		Workforce planning – lack of skills, experience and capacity.				Physical.	Corporate Director for Strategy, Performance and Business Solutions.		
Likelihood:	4.	Impact:	4.	RAG:	Amber.	Current Risk Score:	16.	Target Risk Score:	6.

Vulnerability.	Trigger.	Consequences.	Options.	Mitigating Actions.
<p>Insufficient workforce planning actions underway to shape future workforce through redeployment, succession planning, recruitment, training etc. Capacity issues make it difficult for the service to realise its priorities.</p> <p>Increasingly limited and competitive market for recruitment of key leadership and professional roles</p>	<p>Council staff become overstretched.</p> <p>Council staff become demoralised.</p> <p>The Council does not have the right staff, in the right place, at the right time, to deliver set priorities and / or statutory functions.</p> <p>The Council is unable to meet its statutory obligations.</p> <p>Statutory officers are unable to discharge their statutory functions adequately.</p> <p>EU nationals unable to gain Visas to work in the UK or unwilling to move to the UK under a more challenging post Brexit process.</p>	<p>Council cannot manage within its resources.</p> <p>Existing workforce becomes overstretched.</p> <p>Key pieces of work are not able to be undertaken.</p> <p>Service standards drop and vulnerable people are placed at risk.</p> <p>Council is reactive rather than proactive.</p> <p>An increased risk in legal challenges and complaints.</p> <p>Risk of financial penalties.</p> <p>Recruitment taking place from a smaller pool of potential staff.</p>	Treat.	<p>Review of staffing model seeking to increase staffing resource where possible in pressure areas has been completed and currently being implemented.</p> <p>Projects within Our People, Our Plan initiative targeting improvements across operating model, workforce planning, culture, performance.</p> <p>New corporate People Plan has been developed to identify and address strategic workforce challenges.</p> <p>More proactive approach to recruitment, succession planning and attraction of people to live and work in Orkney.</p> <p>Adoption of Investors in People in 2022.</p> <p>Leadership Development programme to grow / upskill leaders.</p> <p>Development of programmes around youth employment, attracting young people into the workforce and improving career pathways.</p> <p>Continued use and development of remote and flexible working will encourage improved working methods and retention of key staff.</p> <p>Inclusion of staff in re-design of operations.</p>

Vulnerability.	Trigger.	Consequences.	Options.	Mitigating Actions.
				<p>Social Work Traineeship introduced to 'grow our own workforce' and reduce the need for agency staff.</p> <p>Care at Home posts regraded to recognise the increased complexity of the role and make the salary more attractive to those considering a career in care.</p> <p>Joint initiative with Orkney College to create a 6-week 'Introduction to Care' taster course. Guaranteed interviews for participants who complete the course.</p> <p>Increased commitment to proactive communications particularly related to staff and trade unions.</p> <p>Regular monthly Trade Union meeting at Corporate level.</p> <p>Formal Consultation protocol to be agreed with the Trade Unions.</p> <p>Regular staff / Trade Union meetings at Service level, when required.</p> <p>Change in emphasis of staff engagement to include the process of change.</p>

Risk Number.	Risk Title.				Cluster.	Owner.			
5.	Failure to ensure we obtain and retain maximum benefit from Council's assets.				Physical.	Corporate Director for Neighbourhood Services and Infrastructure.			
Likelihood:	4.	Impact:	3.	RAG:	Amber	Current Risk Score:	12.	Target Risk Score:	10.

Vulnerability.	Trigger.	Consequences.	Options.	Mitigating Actions.
<p>The Council may not have enough funds to sustain assets, replace ageing assets and develop key assets (also see Risk 1 which is particularly significant). Essential buildings and infrastructure for travel, communications etc must be maintained to ensure property and roads, IT, telecoms and other infrastructure continue to be able to support the Council's services.</p>	<p>The Council cannot maintain or develop its essential assets to provide public services.</p> <p>The Council cannot implement an asset management strategy.</p> <p>The public is unable to communicate with services.</p> <p>Professionals are unable to communicate with each other to provide effective services.</p>	<p>Roads and buildings deteriorate.</p> <p>IT infrastructure cannot support services.</p> <p>Unused / surplus buildings. Services are not delivered.</p> <p>Lifeline routes compromised.</p> <p>Risk of accident and potential claim.</p> <p>Vulnerable people are at risk.</p> <p>Communication is not possible between agencies to co-ordinate services.</p> <p>Council's reputation is at risk.</p>	<p>Treat.</p>	<p>Corporate Asset Management Plan updated in 2019 and covers the period 2019 to 2023.</p> <p>Existing Property Asset Management Plan is kept up to date and reviewed regularly. The 2019 to 2023 plan was re-written and considered by the Asset Management Sub-committee in November 2019.</p> <p>Existing ICT Asset Management Plan was updated in 2021 and approved by Asset Management Sub-Committee.</p> <p>The Fleet and Plant Asset replacement programme is under review and will be updated in 2022.</p> <p>The capital programme 2018 to 2023 is fully committed. Work is underway to agree the 2024 to 2029 programme in the current financial year, noting that funding pressure will not necessarily see any significant investment in maintaining assets above current levels or address any backlog issues. It should be further noted that the impacts of the Covid-19 Pandemic and Brexit have increased costs and added significant delays to some programmes, including extreme supply chain delays being experienced by our contractors.</p>

Vulnerability.	Trigger.	Consequences.	Options.	Mitigating Actions.
				<p>Service Asset Management Plans has commenced on Open Spaces and thereafter Heritage. They have been completed for Roads in terms of the Roads Asset Replacement Programme 2022-2025 and the Roads Maintenance Programme 2022-2023.</p> <p>Estates PID being progressed, tender for consultancy support was unsuccessful at first attempt, and it will be revised and reissued in August 2022.</p> <p>All asset replacement programmes (budgets) for roads, waste, fleet and property (revenue repairs and capital improvements), are monitored in detail to ensure planned, cyclical, reactive and emergency works are completed in context of significant budget pressures (efficiencies).</p> <p>The Council agreed to draw £2.1 million from reserves to address a backlog of roads maintenance when it set the budget for 2021 / 22. This additional funding is being fed into maintenance budgets over two financial years.</p> <p>The Council agreed in December 2021 to a number of areas where additional one-off funding of £3.9 million on maintenance repair and replacement should be expended.</p> <p>Capital Planning and Asset Management Working Group holds monthly meetings to consider prioritisation of future works.</p>

Risk Number.		Risk Title.				Cluster.		Owner.	
6.		Inability to sustain and enhance economic opportunities.				Economic.		Corporate Director for Enterprise and Sustainable Regeneration.	
Likelihood:	5.	Impact:	5.	RAG:	Red.	Current Risk Score:	25.	Target Risk Score:	20.

Vulnerability.	Trigger.	Consequences.	Options.	Mitigating Actions.
<p>Commercial sectors are vulnerable to market forces and changing national and international economic circumstances. Orkney's population is also ageing, leading to a range of challenges and opportunities in managing the impact of this demographic shift in terms of service provision.</p> <p>Deliverability of key project and political agendas including the Islands Deal, Harbours Masterplan, Grid and Digital Connectivity, Shared Prosperity Fund, Ferry Replacement, Arctic Strategy and Innovation Freeport concepts.</p> <p>COVID 19 Recovery and Response challenges.</p>	<p>The Council fails to support a diverse economy.</p> <p>Decline in farming and other traditional industries.</p> <p>External market forces and economic factors lead to increasing pressure on local businesses.</p> <p>Cost of transportation threatens travel of goods and people to and from Orkney.</p> <p>The Council fails to support emerging industries.</p> <p>The Council fails to ensure community benefits arise from developing industries.</p> <p>The Council fails to secure long term benefits from Renewables sector.</p> <p>Increasing pressure on services for older people.</p> <p>Reducing work age Government fail to deliver on or support economic opportunities and Regulatory change and an appropriately</p>	<p>Local economy struggles pushing additional responsibilities onto the public sector.</p> <p>Council budgets become increasingly pressed.</p> <p>Staffing shortages.</p> <p>Loss of external funding due to Brexit.</p> <p>Loss of jobs, increase in unemployment, reduced economic performance.</p>	<p>Treat.</p>	<p>The budgets for revenue repairs and capital improvements are reviewed annually as part of the Council's budget process.</p> <p>Seek to identify additional options for delivery of the maintenance programmes.</p> <p>Where unavoidable pressures are identified these are managed through an allocated 'contingency' or capacity within the Enterprise and Sustainable Regeneration Directorate given positive trading performance.</p> <p>To ensure the delivery of approved plans is achieved, there has been additional investment in people resources in roads, waste, fleet and soon to be the quarry and property team (as part of workload analysis and mini restructuring).</p> <p>To ensure the size and scale of the capital programme is realistic in terms of affordability, pace and thereby resources, members have agreed the 2018 to 2023 programme. This considers the Council's internal and external people resource, contractor capacity and how funded (internally or externally, noting island deal possibilities).</p>

Vulnerability.	Trigger.	Consequences.	Options.	Mitigating Actions.
	<p>designed and timed Shared Prosperity Fund.</p> <p>Lack of capacity to deliver sufficient support to post COVID-19 economy.</p> <p>Lack of Government support for unique islands impacts of COVID-19 e.g. tourism 3 winters scenario, population.</p>			<p>Political engagement and lobbying at UK and Scottish Government levels.</p> <p>Effective working of Economic Recovery Steering Group.</p> <p>Establishment of Crown Estate Economic Development fund to support local business.</p>

Risk Number.	Risk Title.	Cluster.	Owner.						
7.	Inadequate information security and management, and inadequate cyber security – With the increase in the use of publicly visible technology, there is an increased risk of exposure to threats from criminal and other malicious parties.	Technological.	Corporate Director for Neighbourhood Services and Infrastructure.						
Likelihood:	3.	Impact:	4.	RAG:	Amber.	Current Risk Score:	12.	Target Risk Score:	6.

Vulnerability.	Trigger.	Consequences.	Options.	Mitigating Actions.
<p>The Council fails to maintain an adequate audit trail of all information created.</p> <p>The Council does not handle, share and release all its data adequately.</p> <p>The Data Protection Act 2018 has introduced new duties for the Council.</p> <p>Failure to implement and maintain suitable cyber controls to protect assets.</p>	<p>Inappropriate disclosure, sharing, retention or loss of data.</p> <p>Failure to comply with information governance legislation including the Data Protection Act 2018.</p>	<p>Customer distress and harm.</p> <p>Financial and legal implications.</p> <p>Reputational risk.</p> <p>Inability to access information when required.</p> <p>Failure to deliver services.</p> <p>Failure to share information leading to duplication of effort.</p> <p>Not responding to information requests on time.</p> <p>Complaints against the Council.</p>	Treat.	<p>The Records Management Improvement Plan sets out further actions required to ensure that the Council maintains compliance with its legal responsibilities, including the Data Protection Act 2018.</p> <p>Senior Management leadership in place regarding delivery of the Records Management Improvement Plan.</p> <p>The Council met the Cyber Essential (Basic) accreditation as required by the Scottish Government in February 2018; the target for this was June 2018.</p> <p>Cyber Essential + accreditation achieved, April 2019. Noted that the Information Services Programme Board decided, in June 2019, not to seek re-accreditation of CE+ for 2020 on the basis that all the same criteria, and more, was tested as part of the Public Services Network (PSN) compliance activity.</p> <p>PSN reaccreditation was validated from 1 May 2021 to 1 May 2022 and work is underway to achieve re-accreditation.</p> <p>IT Security is managed proactively and there is an ongoing programme of patching</p>

Vulnerability.	Trigger.	Consequences.	Options.	Mitigating Actions.
				<p data-bbox="1538 167 2107 236">/ updating the hardware and software in operation across the Council.</p> <p data-bbox="1538 248 2159 651">As part of the Council's resilience planning, it has completed an exercise in a box, designed by the National Cyber Security Centre and adapted by officers, focused on a Cybersecurity Ransomware attack with attendance from all Council services and reported to Corporate Leadership Team. Ongoing work on business continuity actions, aligned to Cyber Scotland incident response planning, following this is now in progress.</p> <p data-bbox="1538 663 2136 879">The Council has invested in a new dual site hyperconverged infrastructure to host its on-premises production services and data with work now progressing to deploy the secondary unit to a disaster recovery location.</p> <p data-bbox="1538 892 2130 1107">There has been an extensive programme of replacement to upgrade the council desktop PCs to Windows 10 which has been completed. Any devices which are not compliant are restricted from network access.</p>

Risk Number.		Risk Title.				Cluster.		Owner.	
8.		Inadequate access to superfast Broadband across Orkney and mobile connectivity.				Technological.		Corporate Director for Enterprise and Sustainable Regeneration.	
Likelihood:	4.	Impact:	4.	RAG:	Amber.	Current Risk Score:	16.	Target Risk Score:	8.

Vulnerability.	Trigger.	Consequences.	Options.	Mitigating Actions.
<p>Failure to lobby Governments to address the current digital divide and put in place infrastructure to ensure a step change in speeds.</p> <p>Failure to access mobile coverage.</p> <p>Failure to press the Government to deliver a longer-term plan to ensure that there are the right mechanisms, partnerships and commercial models in place.</p>	<p>Orkney fails to secure maximum and equitable geographic coverage of superfast Broadband, wireless connectivity and significant improvements to Broadband services and mobile network across the islands.</p> <p>Orkney is unable to attract inward investment and sustain fragile communities.</p> <p>Educational infrastructure disadvantaged by lack of service.</p>	<p>Failure to attract inward investment.</p> <p>Failure to attract skilled employees.</p> <p>Digital isolation across age groups.</p> <p>Failure to realise opportunities in respect of Telehealth, Telecare, mobile working and tele-learning.</p> <p>Poor online public service access including welfare benefits, etc.</p>	Treat.	<p>Continue to support political lobbying and seek opportunities to progress policy.</p> <p>Support the Scottish Government in the roll out of R100 infrastructure in Orkney.</p> <p>Support development and introduction of alternative commercial models, including 5G infrastructure.</p> <p>The Council has commissioned development of a digital strategy for Orkney which presents options for enhancing digital connectivity provision. The draft strategy will be reported to Council for consideration in September 2022.</p>

Risk Number.	Risk Title.				Cluster.	Owner.			
9.	Lack of development of effective partnerships.				Partnership.	Corporate Director for Strategy, Performance and Business Solutions.			
Likelihood:	3.	Impact:	3.	RAG:	Yellow.	Current Risk Score:	9.	Target Risk Score:	6.

Vulnerability.	Trigger.	Consequences.	Options.	Mitigating Actions.
<p>The Council must develop partnership working to maximise use of the culminative resource and impact on outcomes for the community Planning Partnership.</p> <p>Working in partnership exposes the Council to some degree of reputational risk, depending on the stability of the arrangements and outcomes delivered.</p> <p>Resource and key staffing constraints may affect the success of partnerships.</p> <p>Changing ministerial roles in UK Government delays progress with key issues.</p> <p>The Scottish Government has not progressed the Local Governance Review pilot of the Single Authority Model.</p> <p>The Scottish Government's intention to create a National Care Service and</p>	<p>The Council does not implement a robust and effective framework for managing its key partnerships.</p> <p>The resource and key staffing pressures on the parent bodies affect the reputation of the partnership.</p> <p>National developments relating to the redesign of adult care services may not take account of the unique requirements of delivering effective care services in remote and rural areas.</p> <p>Ministers in governments change role/ remit.</p>	<p>Impact upon service delivery.</p> <p>Loss of reputation due to inability to meet statutory requirements.</p> <p>Efficiencies not achieved.</p> <p>Reduced ability to deliver on important projects for vulnerable people and their families.</p> <p>Reduced ability to support and protect individuals and families by delivering effective care services within Orkney.</p> <p>Dialogue with ministerial colleagues prolonged and repeated thus delaying progress.</p>	<p>Treat.</p>	<p>The Council will continue to work closely with partners under current frameworks which are monitored closely to ensure they are robust, effective and deliver good governance.</p> <p>The Council will continue to review existing partnerships and explore new ones as opportunities arise to suit Orkney as a whole.</p> <p>Engagement with Scottish Ministers in respect of the Local Governance review which supports joint working will be sought.</p> <p>Engage with the Scottish Government through COSLA. As a separate legal entity, the IJB will consider its own actions relating to this risk on the IJB's risk register.</p> <p>Engagement with UK Ministers will continue.</p>

Vulnerability.	Trigger.	Consequences.	Options.	Mitigating Actions.
<p>to amend the functions of Integration Joint Boards could see social care in Orkney delivered in a different way.</p> <p>Scottish Government referendum may cause further instability and delays in decision making.</p>				

Risk Number.	Risk Title.				Cluster.	Owner.			
10.	Inadequate procurement compliance and sustainable communities.				Legislative.	Corporate Director for Strategy, Performance and Business Solutions.			
Likelihood:	3.	Impact:	2.	RAG:	Yellow.	Current Risk Score:	6.	Target Risk Score:	6.

Vulnerability.	Trigger.	Consequences.	Options.	Mitigating Actions.
<p>Financial and non-financial savings have not yet been fully explored.</p> <p>Further work to be done to support local businesses to help them participate in procurement opportunities, building on the Meet the Buyer event which was first held in August 2016.</p>	<p>Legal challenge is a possibility unless the Procurement Regulations are complied with and processes followed.</p> <p>Officers fail to understand the limitations that the Procurement Regulations place on the Council.</p> <p>Officers do not follow due process and tendering must be repeated.</p> <p>Anticipated savings may not be fully realised through collaborative contracts.</p> <p>The local economy may not be as well supported as it could be.</p> <p>Member / officer disharmony due to lack of understanding of responsibilities.</p>	<p>Financial loss due to legal challenge.</p> <p>Reputational harm.</p> <p>Delays in services being procured due to re-tendering or court action.</p> <p>Loss to the local economy.</p> <p>Loss of effectiveness and efficiency.</p> <p>Lost opportunity in terms of savings.</p>	Treat.	<p>Procurement Consultative Group comprising Elected Members and Officers is in place and meets when required.</p> <p>Procurement Working Group (Officers with delegated procurement authority) set up to provide training, support and a corporate approach to procurement exercises and priorities.</p> <p>Frequent communication with this group is in place and training on the use of the new Procurement Plan and the Sustainable Procurement Impact Assessment was completed in Spring/Summer 2021.</p> <p>Procurement Improvement Plan developed and kept under review. A new Procurement Strategy will be drafted and go out for consultation following the finalisation of the new Council Plan for 2023 onwards and will align with any new Council priorities.</p> <p>Sustainable Procurement Strategy approved by Members in February 2018.</p> <p>Following external consultation in Summer 2021 a new version, including a Sustainable Procurement Impact Assessment, was agreed by Council in March 2022.</p>

Vulnerability.	Trigger.	Consequences.	Options.	Mitigating Actions.
				<p>Procurement Manual, updated in April 2019, is currently under review and is due to be finalised in Autumn 2022.</p> <p>Procurement and Commercial Improvement Programme (PCIP) assessment by Scotland Excel completed in September 2019. OIC score showed a good improvement from 49% to 58%. Action plan to meet recommendations is being implemented.</p> <p>Meet the Buyer event for October 2019 was held successfully. Event for 2020 put on hold due to the pandemic and targeted event held in 2021. Smaller contract-specific Meet the Buyer Events have been held, such as the Isles Kerbside Collection Services in 2021 and Food Supply Catering Contracts in August 2022.</p> <p>Contracts Register is now updated continuously with reference to the Procurement Plan, and the importance of the Contracts Register is stressed to all staff who are making purchasing decisions.</p> <p>Proactive work with the Corporate Admin Group to look at the creation and use of local Framework Agreements, for example, a local framework for stationery.</p> <p>Contract Standing Orders under regular review, with the last formal review carried out in Spring 2022. This update incorporated the new OIC Management Structure and updates to financial thresholds.</p> <p>COVID-19 Supplier Relief Programme implemented.</p>

Vulnerability.	Trigger.	Consequences.	Options.	Mitigating Actions.
				<p>Actions following the Internal Audit review of Quarry Procurement Procedures in March 2021 have been progressed as planned. Procurement Plan process has been implemented and all officers with Delegated Procurement Authority have attended a workshop, as have a number of other key OIC staff.</p>

Risk Number.	Risk Title.				Cluster.	Owner.			
11.	Health and Safety non-conformance.				Legislative.	Corporate Director for Neighbourhood Services and Infrastructure.			
Likelihood:	3.	Impact:	2.	RAG:	Yellow.	Current Risk Score:	6.	Target Risk Score:	4.

Vulnerability.	Trigger.	Consequences.	Options.	Mitigating Actions.
Non-compliance with health and safety policies, rules and procedures by employees, members of the public, contractors etc.	Reportable accidents, work related ill health and dangerous occurrences.	<p>Staff exposed to unnecessary risk or harm. Increase in staff absence or sickness. Reduction in staff morale. Enforcement action from the Health and Safety Executive. This may include Improvement and prohibition notices and prosecution.</p> <p>Material breaches, if identified, are subject to cost recovery by way of 'fees for intervention'.</p> <p>Civil action resulting in the payment of compensation for injury or damage etc.</p>	Treat.	<p>Frequency of Safety Committee meetings increased including a review of adverse events.</p> <p>Corporate Leadership Team to promote a positive health and safety culture.</p> <p>Revamp of Health and Safety Policy and supporting guidance.</p> <p>Proactive health and safety to feature as a standing item in Senior Management meetings as appropriate.</p> <p>IOSH 'Leading Safely' training has been refreshed for the majority of Corporate Leadership Team and Extended Corporate Leadership Team members. Assessment of training needs for new members to be completed in Sept 2022 and recommendations implemented in Q3 2022/23</p> <p>Proactive Health and Safety campaigns organised and promoted to all Council employees started in April 2018.</p> <p>Review and potential investment of additional service-focused resources to strengthen operational health and safety effectiveness (one 0.6 FTE additional post within Neighbourhood Services and Infrastructure agreed April 2022).</p>

Vulnerability.		Trigger.		Consequences.		Options.	Mitigating Actions.		
Risk Number.		Risk Title.				Cluster.		Owner.	
12.		Continued impact of EU exit.				Economic.		Chief Executive and Head of Marine Services and Transportation.	
Likelihood:	3.	Impact:	3.	RAG:	Yellow.	Current Risk Score:	9.	Target Risk Score:	9.

Vulnerability.	Trigger.	Consequences.	Options.	Mitigating Actions.
<p>Loss of access to the single market, with associated implications around trade delays and reduction in supply.</p> <p>Loss of EU funding for projects and businesses in Orkney.</p> <p>Shared Prosperity Fund does not provide the same level of funding as EU predecessor.</p> <p>Disruption to current workforce and future restrictions on ability to recruit.</p>	<p>Restrictions to the supply chain.</p> <p>Restrictions on the free movement of people and workers' rights within the EU area.</p>	<p>Insufficient supply of essential commodities (food, medical supplies, fuel).</p> <p>Negative impact on projects and businesses in Orkney should funding streams end and not be replaced.</p> <p>Difficulty in retaining staff and attracting new staff from the EU to work for the Council, possibly leading to service delivery difficulties due to staff shortages, as well increased pressure on other staff.</p> <p>Requirement for Export Health Certificates (issued by Environmental Health service) for all aquaculture and shellfish exports.</p>	<p>Treat.</p>	<p>The Council 'Island proofed' any Scottish Government response and fully participates in discussions with CoSLA, the Scottish Government and other groups as needed.</p> <p>Ongoing discussions within the Community Planning Partnership once the terms of Brexit are known.</p> <p>Initially, urgent escalation of high / severe risks to the Scottish Government, including the operational difficulties with regard to Export Health Certificates.</p> <p>Working with CoSLA to develop and deliver key communications and guidance for existing staff from EU countries.</p> <p>Initial concerns relating to the impact on the Council to recruit from EU countries has not manifested itself in a downturn in our ability to recruit for positions within the Council. Whilst we did see some employees leave in the early stages of Brexit discussions, the EU settlement scheme has ensured we have been able to retain staff who meet those criteria.</p> <p>The framework for response met initially to determine the Council's response to emerging issues, however as much of the</p>

Vulnerability.	Trigger.	Consequences.	Options.	Mitigating Actions.
				<p>issues have come within existing business, these meetings have ceased. Internally, the No Deal EU Exit action plan is actively managed and reviewed regularly.</p> <p>Initial concerns relating to the impact to the Council on leaving the EU have not been as severe as initially thought. The fears surrounding the demand for Export Health Certification has not reached the reasonable worst-case scenarios and is deemed manageable within the Service.</p> <p>Initial planning arrangements to deal with concurrent events have now been relaxed across the HILRP area with some return to a normal meeting structure. This follows the ability of organisations to respond to concurrent events. To date, we have responded to eight incidents in addition to the pandemic and Brexit.</p>

Risk Number.		Risk Title.				Cluster.	Owner.		
13.		House Build Programme – Risk of being unable to fully utilise Affordable Housing Supply Programme funding from the Scottish Government.				Financial.	Corporate Director for Education, Leisure and Housing.		
Likelihood:	4.	Impact:	3.	RAG:	Amber	Current Risk Score:	12.	Target Risk Score:	9.

Vulnerability.	Trigger.	Consequences.	Options.	Mitigating Actions.
<p>A range of factors are affecting the Council's ability to spend the Affordable Housing Supply Programme's funding, in partnership with Orkney Housing Association Ltd. These factors include:</p> <p>Contractors are currently under significant pressure with substantial amounts of work and limited resources.</p> <p>Issues affecting Scottish Water's sewerage system in Kirkwall and a need to separate surface water run off to free up capacity.</p> <p>The Housing Revenue Account holds a relatively high level of debt, and debt repayments are substantial.</p> <p>The cost of meeting the Energy Efficiency Standard for Social Housing 2 by 2032 is serving to</p>	<p>Inability to commit to fully utilising the funding that the Scottish Government allocate to Orkney each financial year.</p>	<p>Loss of funding that is essential to Orkney meeting need for social / affordable housing.</p> <p>Rising pressure as more applicants further increase pressure on the Council's growing housing waiting list.</p> <p>Difficulties in OIC meeting its statutory homelessness requirements through placing households into permanent accommodation.</p> <p>Barriers to implementing the Rapid Rehousing Transition Plan.</p> <p>Inflationary impact on other housing sectors, particularly the private rented sector.</p> <p>Negative impact on local economy if economically active households or those requiring to live and work in Orkney cannot</p>	<p>Treat.</p>	<p>A house-build group has been established and meets regularly, drawing membership from the Council's Housing Service, Environmental, Property and IT Services, the Scottish Government, Scottish Water and Orkney Housing Association Ltd.</p> <p>Multiple actions are being progressed. These include:</p> <p>Four properties to be developed at Moar Drive, Kirkwall.</p> <p>The third stage of the build project at Carness, Kirkwall is planned with 14 further properties to be developed.</p> <p>45 design and build properties are being sought to include 8 mid-market rent properties.</p> <p>A project to develop the infrastructure at Soulisquoy, Kirkwall will be taken which will ultimately support 130 properties.</p> <p>Works are being taken forward to endeavour to address some of issues around water / sewerage in part of Kirkwall.</p> <p>Orkney Housing Association Ltd has social rented housing projects planned for Evie (4), Toab (2) and Holm (4) and a programme of 15 new supply shared equity properties at various locations.</p>

Vulnerability.	Trigger.	Consequences.	Options.	Mitigating Actions.
<p>exacerbate Housing Revenue Account challenges.</p> <p>Price rises impacting on materials and labour, coupled with supply issues, will impact on the affordability of the house build programme and more generally on the Housing Revenue Account.</p> <p>The impact of the above on the level of affordability of rents for tenants, given that a small Housing Revenue Account suffers from limited economies of scale. Orkney generally has rents which are within the highest 6 in Scotland.</p> <p>Given the cost of living crisis, there will be a pressure to limit rent rises for financial year 2022/23.</p> <p>There is a lack of resource across all partner agencies (and the construction sector) which places limitations on responsiveness to additional demands.</p> <p>Orkney Housing Association Limited is also limited in the number of properties that it can</p>		<p>secure affordable housing in the area.</p> <p>Young Orkney families are increasingly being priced out of the private rented sector, cannot secure a suitable mortgage and / or are not high enough up the priority list to secure social rented housing. The frustration this causes can increase the likelihood that some of these households leave Orkney, resulting in further inhibition to the social fabric and economy of Orkney.</p>		<p>Off the shelf purchases are being investigated and considered (while considering the ability for the properties concerned to be brought up to the energy efficiency standards required by the Council where relevant). Currently house prices are such that the number of off the shelf purchases is likely to be low.</p>

Vulnerability.	Trigger.	Consequences.	Options.	Mitigating Actions.
develop due to financial constraints of their own. This increases the pressure on the Council to build to utilise the available funding.				

Risk Number.	Risk Title.				Cluster.	Owner.			
14.	Early Learning and Childcare Expansion Plan.				Reputational.	Corporate Director for Education, Leisure and Housing.			
Likelihood:	4.	Impact:	3.	RAG:	Amber	Current Risk Score:	12.	Target Risk Score:	10.

Vulnerability.	Trigger.	Consequences.	Options.	Mitigating Actions.
Leadership capacity.	Failure to recruit high quality candidates.	Lack of leadership in settings.	Treat.	Refocus the Leadership pathway to develop leadership capacity within the workforce.
Insufficient number of high quality and / or qualified practitioners.	Failure to recruit high quality candidates.	Vacant posts and repeated recruitment. Impact on quality and outcomes for children. Failure to meet National Standard.		Support practitioners to gain BA in Childhood Practice and establish requirement within job description. Implementation of head teacher training to support development of pedagogical leadership capacity. Work with the Orkney College UHI and the Scottish Government ELC Improvement team to plan alternative pathways. Work with Orkney College UHI to review the availability and quality of courses on offer.
Insufficient budget to meet emerging demands of Scottish Government.	New legislation/policy insufficiently funded for the local context (e.g. discretionary deferrals, nursery milk and snack).	Budget overspend.		Lobby Scottish Government so that they take account of the unique island challenges relating to new policies. Ensure Orkney attendance at national meetings / forums to ensure the remote and rural voice is heard.
Financial model for 0-3 service becomes unviable.	Inability to appoint adequate numbers of practitioners to	Greater than acceptable losses.		Ensure Elected Members and the Corporate Leadership Team are well briefed prior to national meetings. Review and revise parental service contract with consideration for advance payments.

Vulnerability.	Trigger.	Consequences.	Options.	Mitigating Actions.
	ensure maximum ratio and maximum income.	Service failure in workplaces due to lack of childcare available.		Carefully monitor occupancy, staff ratios and fee payment to ensure the setting is running as efficiently as possible.

Risk Number.	Risk Title.				Cluster.	Owner.			
15.	Pandemic.				Pandemic.	Corporate Director for Neighbourhood Services and Infrastructure.			
Likelihood:	5.	Impact:	3.	RAG:	Amber.	Current Risk Score:	15.	Target Risk Score:	10.

Vulnerability.	Trigger.	Consequences.	Options.	Mitigating Actions.
The spread of a pandemic virus is likely to significantly hamper the ability of the Council to perform its statutory functions.	World Health Organisation declaration of a global pandemic. The declaration of a Major Emergency has led to the appointment of an Emergency Controller and the introduction of Emergency Governance Arrangements, approved by Council on 23 March 2020 which included temporary amendments to the Council's Standing Orders.	Service Delivery: Failure to carry out statutory duties - demand outstrips capacity. Cessation of non-urgent and elective work. Unable to provide certain services. Delays to capital programmes. Ability to successfully resolve emergency incidents. Ability to respond to concurrent events including Brexit or those contained within the Community Risk Register. Deterioration in staff experience adversely affecting team performance. Financial management and budgetary impact: Incurring additional unbudgeted COVID-19 spend.	Treat.	Ongoing monitoring of workforce to give early indication of potential issues. Business Continuity Plans were invoked. As the pandemic has progressed, the initial reliance on Service Operational Recovery Teams has subsided. Redeployment to move staff from non-critical areas to more front-line roles. Amended operational procedures to reflect physical distancing and enhanced hygiene requirements to control/minimise spread of the virus within ongoing operational activities. Consideration of issues within Strategic, Tactical and Operational environments. Creation of RENEW framework. Enhanced risk assessments in relation to COVID-19. Regular staff updates online and directly from Chief Executive. Positive staff leadership. Provision of online support packages through HR. Continuation of Duty Tactical Lead arrangements through the emergency.

Vulnerability.	Trigger.	Consequences.	Options.	Mitigating Actions.
		<p>Increased costs, reduced income, impact on capital projects etc.</p> <p>Appropriate governance.</p> <p>Ability to pay staff.</p> <p>Legacy financial impact.</p> <p>Impact on Strategic Reserve Fund.</p> <p>Health and Safety:</p> <p>Failure to provide appropriate PPE.</p> <p>Ability to carry out statutory duties and support frontline response.</p> <p>Exposure to virus, potential spreading and related absences.</p> <p>Potential harm to critical service users and providers.</p> <p>Demand outstrips supply for business as usual supplies.</p> <p>Demand outstrips supply for PPE.</p> <p>If the organisation does not seek to maintain and improve officer and staff wellbeing during the response to COVID-19, there is a risk of increased absences, loss of discretionary effort and</p>		<p>Specific Finance code organised to record all spending relating to COVID-19.</p> <p>Central tracker evolving to capture COVID-19 costs, develop forecasts (revenue, capital, cash flow, procurement), management of stock, policy changes and Scottish Government reporting.</p> <p>Finance embedded in Strategic Incident Management Team.</p> <p>Communication with Scottish Government ongoing regarding forecast additional costs and corresponding additional funding required to deliver services to the standard required.</p> <p>Home working solutions in place for staff where required.</p> <p>Dialogue with Banks regarding processes.</p> <p>Some internal audit capacity maintained.</p> <p>Co-ordination of ordering of Personal Protective Equipment (PPE) through Selbro.</p> <p>Collaboration with NHS Orkney regarding PPE availability.</p> <p>Initial ordering issues overtaken with use of Scotland Excel.</p> <p>Pre planner and continual procurement of relevant supplies to support frontline response.</p> <p>Use of NHS National Services Scotland (NSS) and own routes to market.</p> <p>Critical identification of PPE need.</p>

Vulnerability.	Trigger.	Consequences.	Options.	Mitigating Actions.
		<p>overall decrease in operational capacity.</p> <p>Lack of scrutiny surrounding Council functions.</p> <p>Mandatory duties of the Council – schooling, social services.</p> <p>Permissive duties of the Council – education and economic development.</p> <p>Regulatory powers – trading standards, environmental health and licensing.</p> <p>Joint working arrangements.</p>		<p>Engagement with Highland and Islands Local Resilience Partnership to identify shortages and need.</p> <p>Procurement reviewing suppliers to allow fast track enabling of different routes to market.</p> <p>Guidance in respect of available support published on Council website.</p> <p>Advice provided regarding managerial and physical distancing - reduction in face-to-face meetings.</p> <p>Alternative solutions for meetings and working for home were implemented around Microsoft Teams, Microsoft OneDrive and Microsoft SharePoint with additional remote access secure VPN services used when necessary.</p> <p>Council meetings can be held online through Microsoft Teams and audiocast to the public. Recordings of these are published on the Council website together with the associated minutes.</p> <p>Confidential meetings held with Corporate Leadership Team and Elected members when required to discuss COVID-19 matters.</p> <p>The Strategic Incident Management Team meets regularly to enable swift determination of strategic matters.</p> <p>The Incident Management Team meets regularly to manage operational and tactical issues.</p>

Vulnerability.	Trigger.	Consequences.	Options.	Mitigating Actions.
				<p>Corporate Leadership Team and Extended Corporate Leadership Teams continue to meet to address ongoing Council business.</p> <p>The response and recovery arrangements are regularly reviewed to ensure the declaration of a major emergency still remains relevant.</p> <p>Emergency response working strategy and structural arrangements are regularly reviewed.</p> <p>Debriefs arranged to capture initial identified points from initial response to the pandemic. Actions arising from the debriefs are being progressed.</p>

Risk Number.		Risk Title.			Cluster.		Owner.		
16.		Inability to deliver core protection and support services for children and young people.			Legislative.		Chief Officer, Orkney HSP.		
Likelihood:	3.	Impact:	5.	RAG:	Amber.	Current Risk Score:	15.	Target Risk Score:	10.

Vulnerability.	Trigger.	Consequences.	Options.	Mitigating Actions.
Children and young people are vulnerable due to the Council's need to improve policies, procedures and services as part of multi-agency child protection and support services, highlighted in the 'Report of a joint inspection of services for children and young people in need of care and protection in Orkney', February 2020.	Children and young people in need of protection and/or support do not have their needs met by the multi-agency team.	Children and young people are exposed to harm; children and young people are not provided with the best chances in early life; children and young people are not supported in closing the opportunity gap. When performance shortfalls are highlighted in inspection reports, this clearly drives improvement. However, a collateral consequence can be that it makes it more difficult to attract permanent good quality staff to work in Orkney children's and young people's social work and social care services, exacerbating vulnerabilities.	Treat.	Comprehensive multi-agency improvement plan has been developed which addresses all areas for improvement. Progress with this plan is closely monitored by the Chief Officers' Group and the relevant partner governance bodies. A follow-up inspection was undertaken by the Care Inspectorate and reported in August 2021. The findings indicate we have made significant progress and there is still considerable work to be done. Findings are mainly consistent with our own view of where we are in children's services improvement from a self-evaluation perspective which is positive. The findings have been reported to Council and IJB and the Improvement Plan had been adjusted to reprioritise key actions. A further Progress Review by the Care Inspectorate, focusing on outcomes, will commence in February 2022 and will be reported in August from which we shall evaluate our improvement position. The Second Progress Review was undertaken by the Care Inspectorate and reported in May 2022. The findings indicated that considerable further work had been completed since the first

Vulnerability.	Trigger.	Consequences.	Options.	Mitigating Actions.
				Progress Review and key improvement areas were being progressed. The Care Inspectorate will not require a further Progress Review and have asked for a further Position Statement to be submitted in spring 2023.



Complaints Handling Procedure

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Document Control Sheet.

Review / Approval History.

Date.	Name.	Position.	Version Approved.
February 2012.	General Meeting of the Council.	N/A.	Version 1.0.
8 December 2020.	General Meeting of the Council.	N/A.	Version 2.0.

Change Record table.

Date.	Author.	Version.	Status.	Reason.
11 October 2022	Paul Kesterton	V. 2.1	Amendment	Minor updates required reflecting Council's new organisational structure.
11 October 2022	Paul Kesterton	V. 2.1	Update	Addition of paragraph supporting accessibility for children and young people.

Part 1: Introduction and Overview

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Foreword

The Council's Complaints Handling Procedure reflects our commitment to valuing complaints. It seeks to resolve customer dissatisfaction as close as possible to the point of service delivery and to conduct thorough, impartial and fair investigations of customer complaints so that, where appropriate, we can make evidence-based decisions on the facts of the case.

The local authority procedure was first developed by local government complaints handling experts, working closely with the Scottish Public Services Ombudsman (SPSO). A separate procedure for social work complaints was developed by social work experts and third sector organisations working with SPSO.

The Model Complaints Handling Procedures (MCHPs) were revised in 2019 by the SPSO in consultation with all sectors. As part of this, the local authority and social work procedures were combined into a single procedure. This new edition includes a core text, which is consistent across all public services in Scotland, with some additional text and examples specific to local authorities and health and social care partnerships (HSCPs) handling social work complaints. The procedural elements tie in very closely with those of the National Health Service Complaints Handling Procedure, so where complaints cut across services, they can still be handled in much the same way as other complaints.

As far as is possible we have produced a standard approach to handling complaints across Scotland's public services, which complies with the [SPSO's guidance on a MCHP](#). This procedure aims to help us 'get it right first time'. We want quicker, simpler and more streamlined complaints handling with local, early responses by capable, well-trained staff.

All staff across the Council must cover this procedure as part of their induction and must be given refresher training as required, to ensure they are confident in identifying complaints, empowered to resolve simple complaints on the spot, and familiar with how to apply this procedure (including recording complaints).

Complaints give us valuable information we can use to improve service provision and customer satisfaction. Our Complaints Handling Procedure will enable us to address a customer's dissatisfaction and may help us prevent the same problem from happening again. For our staff, complaints provide a first-hand account of the customers' views and experience and can highlight problems we may otherwise miss. Handled well, complaints can give our customers a form of redress when things go wrong and can also help us continuously improve our services.

Handling complaints early creates better customer relations. Handling complaints close to the point of service delivery means we can deal with them locally and quickly, so they are less likely to escalate to the next stage of the procedure. Complaints that we do not handle swiftly can greatly add to our workload and are more costly to administer.

The Complaints Handling Procedure will help us provide better services, improve relationships with our customers and enhance public perception of the Council. It will help us keep the user at the heart of the process, while enabling us to better understand how to improve our services by learning from complaints.

Structure of the Complaints Handling Procedure

1. This Complaints Handling Procedure (CHP) explains to staff how to handle complaints. The CHP consists of:

- Overview and structure (part 1) – this section.
- When to use the procedure (part 2) – guidance on identifying what is and what is not a complaint, handling complex or unusual complaint circumstances, the interaction of complaints and other processes, and what to do if the CHP does not apply.
- The complaints handling process (part 3) – guidance on handling a complaint through stages 1 and 2, and dealing with post-closure contact.
- Governance of the procedure (part 4) – staff roles and responsibilities and guidance on recording, reporting, publicising and learning from complaints.
- The customer-facing CHP (separate document) – information for customers on how we handle complaints.

2. When using the CHP, please also refer to the 'SPSO Statement of Complaints Handling Principles' and good practice guidance on complaints handling from the SPSO.

www.spsso.org.uk.

Overview of the CHP

3. Anyone can make a complaint, either verbally or in writing, including face-to-face, by phone, letter, email or via the Council's website – www.orkney.gov.uk/feedback.

4. We will try to resolve complaints to the satisfaction of the customer wherever this is possible. Where this isn't possible, we will give the customer a clear response to each of their points of complaint. We will always try to respond as quickly as we can (and on the spot where possible).

5. Our complaints procedure has two stages. We expect the majority of complaints will be handled at stage 1. If the customer remains dissatisfied after stage 1, they can request that we look at it again, at stage 2. If the complaint is complex enough to require an investigation, we will put the complaint into stage 2 straight away and skip stage 1.

Stage 1: Frontline response	Stage 2: Investigation	Independent external review (SPSO or other)
<p>For issues that are straightforward and simple, requiring little or no investigation.</p> <p>‘On-the-spot’ apology, explanation, or other action to put the matter right.</p> <p>Complaint resolved or a response provided in five working days or less (unless there are exceptional circumstances).</p> <p>Complaints addressed by any member of staff, or alternatively referred to the appropriate point for frontline response.</p> <p>Response normally face-to-face or by telephone (though sometimes we will need to put the decision in writing).</p> <p>We will tell the customer how to escalate their complaint to stage 2.</p>	<p>Where the customer is not satisfied with the frontline response, or refuses to engage at the frontline, or where the complaint is complex, <u>serious</u> or 'high-risk'.</p> <p>Complaint acknowledged within three working days.</p> <p>We will contact the customer to clarify the points of complaint and outcome sought (where these are already clear, we will confirm them in the acknowledgement).</p> <p>Complaint resolved or a definitive response provided within 20 working days following a thorough investigation of the points raised.</p>	<p>Where the customer is not satisfied with the stage 2 response from the service provider.</p> <p>The SPSO will assess whether there is evidence of service failure or maladministration not identified by the service provider.</p> <p>In relation to social work decisions the SPSO can also look at professional decisions.</p> <p>Some complaints may also have an alternative route for independent external review.</p>

6. For detailed guidance on the process, see **Part 3: The complaints handling process**.

Expected behaviours

7. We expect all staff to behave in a professional manner and treat customers with courtesy, respect and dignity. We also ask customers bringing a complaint to treat our staff with respect. We ask customers to engage actively with the complaint handling process by:

- Telling us their key issues of concern and organising any supporting information they want to give us (we understand that some people will require support to do this).
- Working with us to agree the key points of complaint when an investigation is required.
- Responding to reasonable requests for information.

8. We have a policy in place for when these standards are not met which is our Policy on Unacceptable Actions and Challenging Behaviour by Service Users and Complainants.

9. We recognise that people may act out of character in times of trouble or distress. Sometimes a health condition or a disability can affect how a person expresses themselves. The circumstances leading to a complaint may also result in the customer acting in an unacceptable way.

10. Customers who have a history of challenging or inappropriate actions, or have difficulty expressing themselves, may still have a legitimate grievance, and we will treat all

complaints seriously. However, we also recognise that the actions of some customers may result in unreasonable demands on time and resources or unacceptable behaviour towards our staff. We will, therefore, apply our policies and procedures to protect staff from unacceptable actions such as unreasonable persistence, threats or offensive behaviour from customers. Where we decide to restrict access to a customer under the terms of our policy, we have a [Policy on Unacceptable Actions and Challenging Behaviour by Service Users and Complainants](#) in place to communicate that decision, notify the customer of their right of appeal, and review any decision to restrict contact with us.

11. If we decide to restrict a customer's contact, we will be careful to follow the process set out in our policy and to minimise any restrictions on the customer's access to the complaints process. We will normally continue investigating a complaint even where contact restrictions are in place (for example, limiting communication to letter or to a named staff member). In some cases, it may be possible to continue investigating the complaint without contact from the customer. Our policy allows us in limited circumstances to restrict access to the complaint process entirely. This would be as a last resort, should be as limited as possible (for a limited time, or about a limited set of subjects) and requires manager approval. Where access to the complaint process is restricted, we must signpost the customer to the SPSO (see Part 3: Signposting to the SPSO).

12. The SPSO has [guidance on promoting positive behaviour and managing unacceptable actions](#).

Maintaining confidentiality and data protection

13. Confidentiality is important in complaints handling. This includes maintaining the customer's confidentiality and confidentiality in relation to information about staff members, contractors or any third parties involved in the complaint.

14. This should not prevent us from being open and transparent, as far as possible, in how we handle complaints. This includes sharing as much information with the complainant (and, where appropriate, any affected staff members) as we can. When sharing information, we should be clear about why the information is being shared and our expectations on how the recipient will use the information.

15. We must always bear in mind legal requirements, for example data protection legislation, as well as internal policies on confidentiality and the use of customer information. The Council's Privacy Notice can be accessed via the following link: <https://www.orkney.gov.uk/Online-Services/privacy.htm>.

16. Where a complaint has been raised against a staff member and has been upheld – we will advise the customer that their complaint is upheld, but would not share specific details affecting staff members, particularly where disciplinary action is taken.

17. Where someone has raised a concern about a child or an adult's safety and is unhappy about how that has been dealt with – we would look into this to check whether the safety concern had been properly dealt with, but we would not share any details of our findings in relation to the safety concern.

Part 2: When to use this Procedure

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What is a complaint?

1. The Council's definition of a complaint is: 'an expression of dissatisfaction by one or more members of the public about the Council's action or lack of action, or about the standard of service provided by or on behalf of the Council.
2. For clarity, where an employee also receives a service from the Council as a member of the public, they may complain about that service.
3. A complaint may relate to the following, but is not restricted to this list:
 - Failure or refusal to provide a service.
 - Inadequate quality or standard of service, or an unreasonable delay in providing a service.
 - Dissatisfaction with one of our policies or its impact on the individual.
 - Failure to properly apply law, procedure or guidance when delivering services.
 - Failure to follow the appropriate administrative process.
 - Conduct, treatment by or attitude of a member of staff or contractor (**except** where there are arrangements in place for the contractor to handle the complaint themselves: see **Complaints about contracted services**).
 - Disagreement with a decision, (**except** where there is a statutory procedure for challenging that decision, or an established appeals process followed throughout the sector).
4. **Appendix 1** provides a range of examples of complaints we may receive, and how these may be handled.
5. A complaint **is not**:
 - A routine first-time request for a service (see **Complaints and service requests**).
 - A first-time report of a fault (for example, potholes or street lighting).
 - A request for compensation only (see **Complaints and compensation claims**).
 - Issues that are in court or have already been heard by a court or a tribunal (see **Complaints and legal action**).
 - Disagreement with a decision where there is a statutory procedure for challenging that decision (such as for freedom of information and subject access requests), or an established appeals process followed throughout the sector – such as council tax, planning, or a parking ticket appeal (see also **Complaints and social work appeals**).
 - Disagreement with decisions or conditions that are based upon social work recommendations, but determined by a court or other statutory body, for example decisions made by a children's panel, parole board or mental health tribunal.
 - A request for information under the Data Protection or Freedom of Information (Scotland) Acts.
 - A grievance by a staff member or a grievance relating to employment or staff recruitment.
 - A concern raised internally by a member of staff (which was not about a service they received, such as a whistleblowing concern).

- A concern about a child or an adult's safety.
- An attempt to reopen a previously concluded complaint or to have a complaint reconsidered where we have already given our final decision.
- Abuse or unsubstantiated allegations about our organisation or staff where such actions would be covered by our Policy on Unacceptable Actions and Challenging Behaviour by Service Users and Complainants.
- A concern about the actions or service of a different organisation, where we have no involvement in the issue (**except** where the other organisation is delivering services on our behalf: see **Complaints about contracted services**).

6. We will not treat these issues as complaints, and will instead direct customers to use the appropriate procedures. Some situations can involve a combination of issues, where some are complaints and others are not, and each situation should be assessed on a case-by-case basis.

7. If a matter is not a complaint, or not suitable to be handled under the CHP, we will explain this to the customer, and tell them what (if any) action we will take, and why. See **What if the CHP does not apply**.

8. **Appendix 2** gives examples of more complex complaints, some of which are not appropriate for this CHP (**Appendix 3** gives examples specific to social work). The section on **Complaints relevant to other agencies** provides information about some of the other agencies that may be able to assist customers if their complaint is not appropriate for this CHP.

Who can make a complaint?

9. Anyone who receives, requests, or is affected by our services can make a complaint. This is not restricted to 'service users' and their relatives or representatives, but may also include people who come into contact with or are affected by these services, for example people who live in close proximity to a social work service provision, such as a care home or day centre. In this procedure these people are termed 'customers', regardless of whether they are or were using a service.

10. We also accept complaints from the representative of a person who is dissatisfied with our service. See **Complaints by (or about) a third party**.

Supporting the customer

11. All members of the community have the right to equal access to our complaints procedure. It is important to recognise the barriers that some customers may face complaining. These may be physical, sensory, communication or language barriers, but can also include their anxieties and concerns. Customers may need support to overcome these barriers.

12. We have legal duties to make our complaints service accessible under equalities and mental health legislation. For example:

- The Equality Act (Scotland) 2010 – this gives people with a protected characteristic the right to reasonable adjustments to access our services (such as large print or BSL translations of information).

- The Mental Health (Care and Treatment) (Scotland) Act 2003 – this gives anyone with a ‘mental disorder’ (including mental health issues, learning difficulties, dementia and autism) a right to access independent advocacy. This must be delivered by independent organisations that only provide advocacy. They help people to know and understand their rights, make informed decisions and have a voice.

13. Examples of how we will meet our legal duties include:

- Proactively checking whether members of the public who contact us require additional support to access our services.
- Providing interpretation and / or translation services for British Sign Language users.
- Helping customers access independent advocacy (the Scottish Independent Advocacy Alliance website has information about local advocacy organisations throughout Scotland).

14. In addition to our legal duties, we will seek to ensure that we support vulnerable groups in accessing our complaints procedure. Actions that we may take include:

- Helping vulnerable customers identify when they might wish to make a complaint (for example, by training frontline staff who provide services to vulnerable groups).
- Helping customers access independent support or advocacy to help them understand their rights and communicate their complaints (for example, through the Scottish Independent Advocacy Alliance or Citizen’s Advice Scotland).
- Providing a neutral point of contact for complaints (where the relationship between customers and frontline staff is significant and ongoing).

It is also important that complaints handling processes both enable children and young people to exercise their rights, and ensure those handling complaints hear and respect children and young peoples’ views and voices.

15. These lists are not exhaustive, and we must always take into account our commitment and responsibilities to equality and accessibility.

How complaints may be made

16. Complaints may be made verbally or in writing, including face-to-face, by phone, letter, email or on our Customer Services Platform – www.orkney.gov.uk/feedback.

17. Where a complaint is made **verbally**, we will make a record of the key points of complaint raised.

18. Complaint issues may also be raised on digital platforms (including social media).

19. Where a complaint issue is raised via a digital channel managed and controlled by the Council (for example our Twitter address or Facebook page), we will normally respond by explaining that we do not normally take complaints on social media and telling the person how they can complain.

- In exceptional circumstances, we may respond to very simple complaints on social media. This will normally only be appropriate where an issue is likely to affect a large

number of people, and we can provide a very simple response (for example, an apology for a cancelled bus service or late cancellation of a class).

20. We may also become aware that an issue has been raised via a digital channel not controlled or managed by us (for example a Youtube video or post on a private Facebook group). In such cases we **may** respond, where we consider it appropriate, by telling the person how they can complain.

21. We must always be mindful of our data protection obligations when responding to issues online or in a public forum. See **Part 1: Maintaining confidentiality and data protection**.

Time limit for making complaints

22. The customer must raise their complaint within six months of when they first knew of the problem, unless there are special circumstances for considering complaints beyond this time (for example, where a person was not able to complain due to serious illness or recent bereavement).

23. Where a customer has received a stage 1 response, and wishes to escalate to stage 2, unless there are special circumstances they must request this either:

- Within six months of when they first knew of the problem; or
- Within two months of receiving their stage 1 response (if this is later).

24. We will apply these time limits with discretion, taking into account the seriousness of the issue, the availability of relevant records and staff involved, how long ago the events occurred, and the likelihood that an investigation will lead to a practical benefit for the customer or useful learning for the organisation.

25. We will also take account of the time limit within which a member of the public can ask the SPSO to consider complaints (normally one year). The SPSO have discretion to waive this time limit in special circumstances (and may consider doing so in cases where we have waived our own time limit).

Particular circumstances

Complaints by (or about) a third party

26. Sometimes a customer may be unable or reluctant to make a complaint on their own. We will accept complaints from third parties, which may include relatives, friends, advocates and advisers. Where a complaint is made on behalf of a customer, we must ensure that the customer has authorised the person to act on their behalf. It is good practice to ensure the customer understands their personal information will be shared as part of the complaints handling process (particularly where this includes sensitive personal information). This can include complaints brought by parents on behalf of their child, if the child is considered to have capacity to make decisions for themselves.

27. The provision of a signed mandate from the customer will normally be sufficient for us to investigate a complaint. If we consider it is appropriate we can take verbal consent

direct from the customer to deal with a third party and would normally follow up in writing to confirm this.

28. In certain circumstances, a person may raise a complaint involving another person's personal data, without receiving consent. The complaint should still be investigated where possible, but the investigation and response may be limited by considerations of confidentiality. The person who submitted the complaint should be made aware of these limitations and the effect this will have on the scope of the response.

29. See also **Part 1: Maintaining confidentiality and data protection**.

Serious, high-risk or high-profile complaints

30. We will take particular care to identify complaints that might be considered serious, high-risk or high-profile, as these may require particular action or raise critical issues that need senior management's direct input. Serious, high-risk or high-profile complaints should normally be handled immediately at stage 2 (see **Part 3: Stage 2: Investigation**).

31. We define potential high-risk or high-profile complaints as those that may:

- Involve a death or terminal illness.
- Involve serious service failure, for example major delays in providing, or repeated failures to provide, a service.
- Generate significant and ongoing press interest.
- Present a serious risk to our operations.
- Present issues of a highly sensitive nature, for example concerning:
 - Immediate homelessness.
 - A particularly vulnerable person.
 - Child protection.
 - Adult protection.

Anonymous complaints

32. We value all complaints, including anonymous complaints, and will take action to consider them further wherever this is appropriate. Generally, we will consider anonymous complaints if there is enough information in the complaint to enable us to make further enquiries. Any decision not to pursue an anonymous complaint must be authorised by an appropriate manager.

33. If we pursue an anonymous complaint further, we will record it as an anonymous complaint together with any learning from the complaint and action taken.

34. If an anonymous complainant makes serious allegations, these should be dealt with in a timely manner under relevant procedures. This may not be the complaints procedure and could instead be relevant child protection, adult protection or disciplinary procedures.

What if the customer does not want to complain?

35. If a customer has expressed dissatisfaction in line with our definition of a complaint but does not want to complain, we will explain that complaints offer us the opportunity to

improve services where things have gone wrong. We will encourage the customer to submit their complaint and allow us to handle it through the CHP. This will ensure that the customer is updated on the action taken and gets a response to their complaint.

36. If the customer insists they do not wish to complain, we are not required to progress the complaint under this procedure. However, we should record the complaint as an anonymous complaint (including minimal information about the complaint, without any identifying information) to enable us to track trends and themes in complaints. Where the complaint is serious, or there is evidence of a problem with our services, we should also look into the matter to remedy this (and record any outcome).

37. Please refer to the example in **Appendix 1** for further guidance.

Complaints involving more than one area or organisation

38. If a complaint relates to the actions of two or more areas within our organisation, we will tell the customer who will take the lead in dealing with the complaint, and explain that they will get only one response covering all issues raised.

39. If a customer complains to us about the service of another organisation or public service provider, but we have no involvement in the issue, the customer should be advised to contact the appropriate organisation directly.

40. If a complaint relates to our service and the service of another organisation or public service provider, and we have a direct interest in the issue, we will handle the complaint about the Council through the CHP. If we need to contact an outside body about the complaint, we will be mindful of data protection. See **Part 1: Maintaining confidentiality and data protection**.

41. Such complaints may include:

- A complaint made to us about a claim for housing benefit where the customer's dissatisfaction relates to the service we have provided and the service the DWP has provided.
- A complaint made to us about anti-social behaviour where the customer's dissatisfaction relates to the service we have provided and the service the housing association has provided.

Complaints relating to a social work service and another service

42. A complaint may relate to a social work service and another service provided by the Council. An example is: a social work service and a housing service both provided by the local authority.

43. In such cases, a joint response must be given following the guidance above.

44. Alternatively, a complaint may involve services from different organisations. Examples are:

- A complaint about a social work service provided by the Council and a care service provided by a contractor.

- A complaint about a social work service provided by the Council and a housing service provided by a housing association.

45. The aim with such complaints is still to provide a joint response (particularly where the organisations are linked, eg. NHS providers), though this may not always be possible. Contact must be made with the customer to explain that their complaint partly relates to services which are delivered by another organisation, and that to respond to their complaint, we will need to share information with this organisation. Staff must check whether specific consent is needed from the customer before we can share their information with the other services, and take appropriate action where necessary, bearing in mind any data protection requirements. See **Part 1: Maintaining confidentiality and data protection**.

46. If it is possible to give a joint response, a decision must be taken as to which service will lead the process. We must ensure that all parties are clear about this decision. The response must cover all parts of the complaint, explain the role of both services, and (for investigation stage complaints) confirm that it is the final response from both services.

47. If a joint response is not possible, you should explain to the person making the complaint the reasons why they will receive two separate responses, and who they can get in contact with about the other aspects of their complaint. You must also write to both the customer and the other services involved, setting out which parts of the complaint you will be able to respond to.

Complaints about contracted or commissioned services / ALEOs

48. The Council uses Arm's Length External Organisations (ALEOs), such as Orkney Ferries, to deliver certain services. They are 'arm's-length' because the Council retains a degree of control or influence, usually through a funding agreement, and 'external' because they have a separate identity to the Council. An example might be a charitable organisation delivering leisure and culture services on our behalf.

49. Where we use an ALEO or contractor to deliver a service on our behalf we recognise that we remain responsible and accountable for ensuring that the services provided meet the Council's standard (including in relation to complaints). We will either do so by:

- Ensuring the contractor complies with this procedure; or
- Ensuring the contractor has their own procedure in place, which fully meets the standards in this procedure. At the end of the investigation stage of any such complaints the contractor must ensure that the customer is signposted to the SPSO.

50. We will confirm that service users are clearly informed of the process and understand how to complain. We will also ensure that there is appropriate provision for information sharing and governance oversight where required.

51. The Council has discretion to investigate complaints about organisations contracted to deliver services on its behalf even where the procedure has normally been delegated.

Commissioned social work services

52. Where social work services are commissioned on behalf of the Council, customers can make complaints under this CHP in relation to the assessment of need, the commissioning

or recommendation process, and any element of the service that has been publicly funded. Complaints about any part of service that has been privately funded cannot be considered through this CHP.

53. These services may also be registered as a care service with the Care Inspectorate to deliver a care or support service. If this is the case, customers have the right to complain directly to the Care Inspectorate or to make use of the provider's CHP and thereafter make a complaint to the Care Inspectorate: see **Complaints for the Care Inspectorate**.

Complaints about senior staff

54. Complaints about senior staff can be difficult to handle, as there may be a conflict of interest for the staff investigating the complaint. When serious complaints are raised against senior staff, it is particularly important that the investigation is conducted by an individual who is independent of the situation. We must ensure we have strong governance arrangements in place that set out clear procedures for handling such complaints. Each service has a head of service or senior manager trained to carry out investigations of complaints about members of senior staff.

Complaints and other processes

55. Complaints can sometimes be confused (or overlap) with other processes, such as disciplinary or whistleblowing processes. Specific examples and guidance on how to handle these are below.

Complaints and service requests

56. If a customer asks the Council to do something (for example, provide a service or deal with a problem, such as a pot hole), and this is the first time the customer has contacted us, this would normally be a routine service request and not a complaint.

57. Service requests can lead to complaints, if the request is not handled promptly or the customer is then dissatisfied with how we provide the service.

Complaints and disciplinary or whistleblowing processes

58. If the issues raised in a complaint overlap with issues raised under a disciplinary or whistleblowing process, we still need to respond to the complaint.

59. Our response must be careful not to share confidential information (such as anything about the whistleblowing or disciplinary procedures, or outcomes for individual staff members). It should focus on whether the Council failed to meet expected standards and what we have done to improve things, in general terms.

60. Staff investigating such complaints will need to take extra care to ensure that:

- We comply with all requirements of the CHP in relation to the complaint (as well as meeting the requirements of the other processes).
- All complaint issues are addressed (sometimes issues can get missed if they are not also relevant to the overlapping process).
- We keep records of the investigation that can be made available to the SPSO if required. This can be problematic when the other process is confidential, because the SPSO will normally require documentation of any correspondence and interviews to

show how conclusions were reached. We will need to bear this in mind when planning any elements of the investigation that might overlap (for example, if staff are interviewed for the purposes of both the complaint and a disciplinary procedure, they should not be assured that any evidence given will be confidential, as it may be made available to the SPSO).

61. The SPSO's report [Making complaints work for everyone](#) has more information on supporting staff who are the subject of complaints.

Complaints and compensation claims

62. Where a customer is seeking financial compensation only, this is not a complaint. However, in some cases the customer may want to complain about the matter leading to their financial claim, and they may seek additional outcomes, such as an apology or an explanation. Where appropriate, we may consider that matter as a complaint, but deal with the financial claim separately. It may be appropriate to extend the timeframes for responding to the complaint, to consider the financial claim first.

Complaints and legal action

63. Where a customer says that legal action is being actively pursued, this is not a complaint.

64. Where a customer indicates that they are thinking about legal action, but have not yet commenced this, they should be informed that if they take such action, they should notify the complaints handler and that the complaints process, in relation to the matters that will be considered through the legal process, will be closed. Any outstanding complaints must still be addressed through the CHP.

65. If an issue has been, or is being, considered by a court, we must not consider the same issue under the CHP.

Social work complaints and appeals

66. While some social work decisions may be reviewed under alternative arrangements at a local level (for example through appeal or peer review), the SPSO has the power to consider professional social work decisions. The customer should not be required to seek a reconsideration of a decision under both appeal and complaint processes, nor should they be required to make further complaint if dissatisfied with the outcome of an appeal.

67. Therefore, whilst we have discretion to operate appeals procedures, these must be regarded as a special form of complaint investigation (stage 2 of this CHP). Such appeals processes must be compliant with this procedure in terms of the rigour and documentation of the process, must be concluded within 20 working days where possible with a written response to the customer, and must be recorded as a stage 2 complaint on the relevant complaints database (unless recorded elsewhere as an appeal). If the customer raises additional issues of dissatisfaction as well as challenging a professional decision, then the process must consider and respond to every element of the customer's dissatisfaction so that no additional complaint process is required.

68. The final response letter must provide relevant text advising the customer of their right to refer the matter to the SPSO for independent consideration. The SPSO will then investigate matters in full, in line with their standard procedures.

Social Work Complaints and the Duty of Candour

69. In some cases, a complaint may be prompted by a duty of candour disclosure, or a complaint investigation may itself prompt a disclosure. In such cases, we must comply with both this CHP and our duty of candour requirements.

70. It will often be possible to conduct a single review for the purposes of both the complaint investigation and the duty of candour. We should, however, take care to ensure that all the issues raised in the complaint are dealt with (including any that are not relevant to the duty of candour disclosure).

Complaints for the Care Inspectorate

71. Local Authorities and any contractors that provide care services must be registered with the Care Inspectorate. This is the independent scrutiny and improvement body for care and social work across Scotland, which regulates, inspects and supports improvement of care services.

72. The Care Inspectorate has a procedure for receiving information, concerns and investigating complaints from members of the public, or their representatives, about the care services they use. The Care Inspectorate's complaints procedure is available even when the service provider has an alternative complaints procedure in place.

73. The Care Inspectorate encourages people to complain directly to the organisation they receive a service from. However, some people are not comfortable doing this and to support them, the Care Inspectorate may take complaints about care services directly.

74. When complaints are brought to us about registered care services, we have the right to share complaint information about the registered care provider with the Care Inspectorate, to decide who is best placed to investigate the complaint. We can also share the outcome of complaints about contracted and registered services with the Care Inspectorate.

Contact details for the Care Inspectorate can be found on their [website](#).

Complaints about Personal Assistants

75. Where an individual directly employs a Personal Assistant to provide their support, using a Direct Payment (as part of a Self-directed Support package), the Personal Assistant is not subject to registration with the Care Inspectorate under the Public Services Reform (Scotland) Act 2011, its regulations and amendments. The individual directly employing the Personal Assistant remains responsible for the management of their employee, including their performance management. The Care Inspectorate would only be able to take complaints about such support workers if they work for a registered care agency.

Complaints relevant to other agencies

76. Customers may raise concerns about issues which cannot be handled through this CHP, but which other agencies may be able to provide assistance with or may have an interest in. This may include:

- [Mental Welfare Commission](#).
- [Children and Young People's Commissioner Scotland](#).

- [Scottish Social Services Council](#).

77. This list is not exhaustive, and it is important to consider the circumstances of each case, and whether another organisation may also have a role to play.

What to do if the CHP does not apply

78. If the issue does not meet the definition of a complaint or if it is not appropriate to handle it under this procedure (for example, due to time limits), we will explain to the customer why we have made this decision. We will also tell them what action (if any) we will take (for example, if another procedure applies), and advise them of their right to contact the SPSO if they disagree with our decision not to respond to the issue as a complaint.

79. Where a customer continues to contact us about the same issue, we will explain that we have already given them our final response on the matter and signpost them to the SPSO. We may also consider whether we need to take action under our Policy on Unacceptable Actions and Challenging Behaviour by Service Users and Complainants.

80. The SPSO has issued a [template letter for explaining when the CHP does not apply](#).

Appendix 1 – Complaints

The following tables give examples of complaints that may be considered at the frontline stage and suggest possible actions. For ease of reference, examples of social work complaints are provided in a separate table.

Complaint.	Possible actions.
The customer complains that her council tax direct debit has been set up wrongly.	Apologise to the customer and update the direct debit details.
The customer has provided evidence to verify his claim for benefits, but the Benefits Service has not updated his case records with this information.	<ul style="list-style-type: none"> • Apologise to the customer. • Update the customer's benefit record to record receipt of evidence. • Check that the benefit award is corrected from the appropriate date.
The customer complains that a workman did not attend to carry out a housing repair as we had agreed.	<ul style="list-style-type: none"> • Speak to the workman, the service or the service manager to explain the customer's complaint and to agree how to address the issue, for example by arranging a new time and date to do the repair. • Explain the reasons for the failed appointment and apologise to the customer.
The quality of repair done by us or our contractor is not satisfactory.	<ul style="list-style-type: none"> • Ask the service department to examine the repair to assess whether or not it is acceptable. • If appropriate, agree that the service department should do more work. • Explain and apologise to the customer. • Obtain a report from the service or contractor to confirm that the repair is now complete. • Feedback the lessons learned from the complaint into a service improvement plan.
The customer complains that a road which is on our winter gritting route has not been gritted despite previous assurances that it would be.	<ul style="list-style-type: none"> • Confirm if the roads are on our agreed gritting routes. • If assurance had been provided that the road would be gritted, check to confirm if this action occurred, and when. • Where appropriate, provide an explanation and apologise to the customer. • Obtain confirmation from the service to confirm when the road will be gritted.

Complaint.	Possible actions.
	<ul style="list-style-type: none"> • Feedback the lessons learned from the complaint into a service improvement plan.
<p>The customer complains that his home carer turned up late and was smoking.</p>	<ul style="list-style-type: none"> • Contact the care service to discuss the matter with a service manager. • The care service should check the timetable for visits and discuss with the home carer the complaint about smoking. The care service should let you know the outcome. • You in turn contact the customer to explain the policy, confirm the timing of visits (for example between 08:00 and 12 noon) and, where appropriate, apologise for the inconvenience.
<p>The customer complains that a night-working refuse collector woke her up by making excessive noise.</p>	<ul style="list-style-type: none"> • Explain our policy on refuse collection, in particular the approach to night working. • Tell the customer that you will pass on details of the complaint to the service to highlight the noise issue and ask the service to do what they can to control noise. • Apologise to the customer for the inconvenience.
<p>The customer expresses dissatisfaction in line with the definition of a complaint, but says she does not want to complain – just wants to tell us about the matter.</p>	<ul style="list-style-type: none"> • Tell the customer that we value complaints because they help to improve services. Encourage them to submit the complaint. • In terms of improving service delivery and learning from mistakes, it is important that customer feedback, such as this, is recorded, evaluated and acted upon. Therefore, if the customer still insists that they do not want to complain, record the matter as an anonymous complaint. This will avoid breaching the complaints handling procedure. Reassure the customer that they will not be contacted again about the matter.

Social work complaint.	Possible actions.
A service user complains that a social worker did not turn up for a planned visit.	<ul style="list-style-type: none"> • Apologise to the service user. • Explain that you will look into the matter. • Contact the social worker / manager to find out the reason for the missed appointment, then • Explain the reasons and offer a new appointment.
A member of the public complains that a home carer parked in a private resident's car parking place.	<ul style="list-style-type: none"> • Take the customer's details and explain that you will look into the matter. • Contact the home care service to find out if this is the case. • If so, request that this does not happen again, and • Contact the customer, apologise and advise that the worker has been asked to find alternative parking.
A member of public complains that his neighbours (residents of a children's house) have been playing football in the street where they live and are being abusive to passers-by.	<ul style="list-style-type: none"> • Explain to the customer that you will look into the matter and call them back. • Contact the manager of the children's house to verify the facts. • Request that the manager meet with the neighbour to apologise and engender good relations, then • Call back the customer to update them.
A complaint about a service provider commissioned by social work services.	<ul style="list-style-type: none"> • Discuss with the customer the different ways for this complaint to be handled, ie by a complaint to the Care Inspectorate or through the provider's own CHP, and • Ensure, whatever process is agreed, that the customer is clear how they can progress their complaint to the next stage, should they remain dissatisfied. This may be within the provider's CHP, to the Council, or to the Care Inspectorate. The customer should be advised that they can come back to the Council for further advice if they need to at any stage.
A service user complains that their care needs assessment does not accurately reflect their needs, or that the care package proposed would not meet the needs identified in their assessment.	<ul style="list-style-type: none"> • Clarify with the customer whether the complaint relates to an assessment of needs or a proposed care package. Establish specifically what the customer is complaining about and what has happened so far. Ask them what they

Social work complaint.	Possible actions.
	<p>are seeking from their complaint, and explain that you will look into the matter.</p> <ul style="list-style-type: none"> • Make internal enquiries to establish what stage the assessment and care planning processes are at. • While considering the complaint, if the team indicate that a new assessment or care planning meeting may be offered, pass this offer onto the customer, and ask the team to contact the customer to take this forward, and • If the team are not prepared to look at the matter again, explain why the assessment or care package decision is considered to be adequate, and signpost to the next stage of the CHP.
<p>A customer complains about social work services impacting on their discharge from hospital.</p>	<ul style="list-style-type: none"> • Check with the hospital social work team about the customer's care planning in relation to discharge from hospital, and the timing of medical decisions and social work input. • It may become apparent at that stage that the discharge process was complicated by a range of issues, in which case it may be appropriate to escalate the complaint to investigation. • It may also become apparent that the customer is still in hospital, and may or may not be considered ready for discharge. If they are ready, then pass the complaint onto the team directly involved to respond to as quickly as possible. • If the situation is not current, and there were delays from social work services, find out why these happened, and • Respond to the customer by their preferred method, to inform them of the outcome of their complaint. Offer an apology if appropriate, and outline what steps have been put in place to prevent a recurrence of the situation.

Appendix 2 – What is not a complaint?

1. A concern may not necessarily be a complaint. For example, a customer might make a routine first-time request for a service. This is not a complaint, but the issue may escalate into a complaint if it is not handled effectively and the customer has to keep on asking for service.
2. In some cases a measure of discretion or further clarification is required in determining whether something is a complaint that should be handled through this procedure or another matter which should be handled through another process. There are also some specific circumstances when complaints should be handled in a particular manner.
3. The following paragraphs provide examples of the types of issues or concerns that must not be handled through the complaints handling procedure. This is not a full list, and you should decide the best route based on the individual case.

Planning.

4. Customers may express dissatisfaction after the refusal of planning or other related permissions. An example would be dissatisfaction with a condition of consent or an enforcement action.
5. Planning applicants, or their agent, have the right to appeal to Scottish Ministers or the Local Review Body on planning or related matters determined by Committee or decided under delegated powers. Appeals to Scottish Ministers are usually, but not always, decided by a Reporter from the Directorate of Planning and Environmental Appeals and can be considered on the basis of written submissions or by a hearing or public inquiry. The Reporter appointed to consider the appeal will manage the whole process and consider how to gather enough information to make a decision.
6. Customers who are dissatisfied with one of our planning decisions, and who have a right to appeal to Scottish Ministers, should be directed to this service. However, some complaints about planning matters are from third parties such as neighbours. These customers do not have the right of appeal to Scottish Ministers. These complaints should, therefore, be considered through the CHP.

Benefits.

7. A customer may be dissatisfied or disagree with a decision about their housing or council tax benefit claim. This is not a complaint. The customer may ask us to review the decision. If they remain dissatisfied at the outcome of the review or reconsideration of their claim, they may also appeal against our decision to an independent appeal tribunal. Where they want to do so, you should direct them appropriately.

Claims for compensation.

8. A customer may seek compensation from us if they consider us liable. This includes issues such as personal injury or loss of or damage to property. Claims for compensation only are not complaints, so you must not handle them through the complaints handling procedure. You should be clear, however, that where a customer wants to complain about the matter leading to their request for compensation, for example workmen damaging their home, or the condition of a public road causing damage to a motor vehicle, you may

consider that matter as a complaint, but deal with the request for compensation separately. You may decide to suspend complaint action pending the outcome of the claim for compensation. If you do this, you must notify the customer and explain that the complaint will be fully considered when the compensation claim has been decided.

9. If you receive a compensation claim, you should explain to the customer the process for claiming compensation in line with our policy on these claims.

10. The Council can still make 'time and trouble' payments for inconvenience suffered by customers, in line with our policy on such matters. This is distinct from compensation claims.

Licence decisions.

11. We are responsible for issuing various licences, including public entertainment, HMO (houses in multiple occupation), liquor and taxi licences. These have their own legal redress. Customers who are dissatisfied with these decisions will have to pursue this through the correct procedure for the type of licence they want.

School exclusions and placing requests.

12. Decisions on appeals against a pupil's exclusion from school or a refusal of a school placing request are made by Committee. Once the Committee has ruled, the customer cannot then use the complaints process to continue their case.

School exam results.

13. Schools have devolved authority to offer examinations on the awarding body's behalf. In most cases this will be the SQA. If a customer is dissatisfied with the result of an exam, the school should refer it to the awarding body.

14. Remember that although there may be an alternative form of redress for the customer as detailed above, you must consider carefully whether or not a customer's representations should be managed within the complaints handling procedure. Dissatisfaction with certain local authority decisions may simply require an explanation and directing to the correct route. If, however, a customer says they are dissatisfied with the administrative process we have followed in reaching a decision, you may consider that dissatisfaction through the complaints handling procedure. An example may be a complaint from a customer who is dissatisfied with a decision and alleges that we failed to follow or apply the appropriate guidance in reaching that decision.

Appendix 3 – Complex social work scenarios

Child or adult protection concerns.

15. Customers may express concerns that a child or adult is at risk, but frame their concern in terms of dissatisfaction that 'nothing has been done about this'. The member of staff will need to consider whether the person is authorised to make complaints on behalf of the child or adult in question, whether they expect the matter to be handled as a complaint and whether the professional view is that these matters are best addressed through initiating the applicable protection procedures. Where the need to initiate protection procedures and investigate concerns within those procedures is identified, the complaint should be closed. The person making the complaint should be advised of this and signposted to the SPSO.

16. Where a complaint is received about some aspect of protection processes that have already been initiated, for example in relation to the way the processes was applied, this should be considered a complaint, and progressed within the complaints handling procedure.

Complaints about professional social work decisions.

17. A customer may wish to complain about or appeal against a social work decision. Such decisions must be considered in line with the timescales for complaints as specified in the CHP.

18. Some decisions may be considered through an internal appeal procedure. However, any such appeal route must be considered as constituting a special form of stage 2 of this procedure, in that it will result in a thorough response to **all concerns** and onward referral to the SPSO. See also **Social work complaints and appeals**.

Legal action.

19. Legal action takes several forms and each must be handled in a distinctive way:

19.1. Judicial Review: If a person wishes to seek judicial review of a decision then they should be encouraged to seek legal advice.

19.2. Litigation: Where a customer says that they are seeking compensation and that legal action is being actively pursued, this is not a complaint. Where a customer indicates that they intend to litigate but have not yet commenced legal action, they should be informed that if they take such action, they should notify the complaints handler and / or the Complaints Manager and that the complaints process, in relation to the matters that will be considered through the legal process, will be closed. If it becomes apparent that legal action is being pursued, the complaints handler must clarify with the customer if all the issues they have raised will be considered through legal action; any outstanding issues must still be addressed through the CHP.

19.3. Legal tribunals, etc: Sometimes the matter complained of may be the subject of ongoing consideration by a relevant legal body, for example where a customer complains of lack of contact with their child who is being looked after by the Council, when that matter falls to be determined by the Children's Panel. In such cases the customer should be

directed to raise the matter either directly or through their legal representatives within that other defined process and the matter should not be accepted as a complaint.

This is distinct from a complaint that the Council and its staff have failed to properly carry out their roles and responsibilities. In the example above, a Children's Panel may have set contact frequency but it is not being properly facilitated by social work staff due to staffing shortages or some other factor. That is a matter of legitimate complaint under this procedure.

Complaints about the content of social work reports submitted to legal bodies.

20. The Council may receive complaints about the accuracy of reports by professional social work staff submitted to Courts or other bodies such as Children's Panels, Parole Boards or Mental Health Tribunals. In such circumstances, the report is provided as a service to the court or tribunal, not as a service to the customer. The customer has no right to veto such reports or insist that content is subject to their approval but they can complain about the content of the report.

21. The Council should consider each complaint and it will usually be necessary to undertake a short screening process to establish whether the issue is appropriate for the CHP. This will depend on the nature and seriousness of alleged inaccuracy, and the status of the report in relation to the progress of court or other proceedings. In particular the Council should consider whether the complaint relates to accuracy of facts, to opinion or to the standard and quality of the work carried out by the professional concerned, and should take one of three actions accordingly:

21.1. Advise the customer that, due to the timescales involved, the issue should be raised when the report is presented in court / to the relevant body, as that is the appropriate forum for deciding on the matter.

21.2. Advise the customer that the complaint raises issues that will be considered under the CHP (such as issues of fact), and progress accordingly, or

21.3. Advise the customer that the complaint raises a mixture of issues that will be considered under the CHP and other issues that should be raised within the relevant forum when the report is submitted.

22. If you refuse to consider some or all issues as per 21.1 or 21.3 above and direct the customer to raise the matter within the legal process, you must still provide clear information about the reason for this decision, and signpost the customer to the SPSO for access to a review of this decision.

23. The Council should also consider whether the complaint relates to a breach of data protection legislation, in which case it must be processed accordingly. See **Part 1: Maintaining confidentiality and data protection.**

Campaigns.

24. The introduction of a new policy or changes in service, such as the closure of a facility, may lead to a high volume of complaints being received. These should be handled under this procedure on an individual basis on their merits, addressing the issue of how that

particular customer is affected by the change. It may be appropriate to provide information about the process that led to the changes, or when the policy may next be reviewed.

25. Occasionally, however, such complaints are evidently part of an organised campaign. Indicators may be that all complaints have identical content or are on a 'form' letter or that all complainers are known to be members of a pressure group that has made separate representations through the Council's petitions or elected members.

26. The Council should not accept an unreasonable burden on its complaints processes produced by an organised campaign. Instead, the Council may either issue a single 'form' response or may ask the organisers to nominate a single person to make a single complaint on behalf of the group. In such circumstances it would be important to be clear that all the complaints being brought to the Council are identical, and setting out clearly what issues are being considered under the complaint. Any other additional concerns that individuals may have would need to be handled as new complaints.

Persons under investigation.

27. The Council is likely to have a role in investigating the actions of individuals towards other, more vulnerable people, for example those suspected of child or adult abuse or Guardians and Powers of Attorney who are allegedly misusing their powers.

28. Those individuals are still customers as defined within this procedure and any complaint from them must be considered on its individual merits. For example, a complaint about an improper exercise of investigative procedures should be looked into as a complaint. Any response should take into account any confidentiality issues, and this should be explained to the customer.

29. However, if it is evident that the person is not complaining about the process or the actions of staff, but is complaining that they are under investigation, this should not be accepted as a complaint. Instead it should be explained to the customer that the Council has a statutory obligation to investigate such matters, and this is not conditional upon their agreement or approval. Their objection to the process is not considered to be a complaint, though they may be directed to seek appropriate legal advice to protect their rights.

Looked after and accommodated children / adults under local authority guardianship.

30. The Council has a special duty of care to children in its care or adults for whom it exercises decision-making powers. Special care should be taken when investigating complaints made by or on behalf of those individuals.

31. Artificial barriers of confidentiality should not be imposed to prevent people with a relevant interest in the affairs of an incapacitated adult from complaining on their behalf.

32. Children who are looked after by the Local Authority may complain. They may have little in the way of a support network and may be estranged from their family. It may also be inappropriate for the family to represent the child's interests. Particular care, therefore, should be taken to ensure that the child's complaint is understood and, particularly for younger children, that the response is understood by them.

33. In both cases, the need for personal contact with the customer, and the possible involvement of advocacy services, should be actively considered. We must also always bear in mind our obligations under data protection information. See **Part 1: Maintaining confidentiality and data protection**.

Allegations of fraud / criminality / professional malpractice or incompetence.

34. Discretion is required where the complaint is so serious as to immediately merit investigation under disciplinary processes or referral to another agency.

35. If it is determined that the complaint falls into this category, you should be careful to follow the CHP and mindful of our obligations under data protection legislation. See **Part 1: Maintaining confidentiality and data protection**.

Complaints brought by foster carers.

36. Complaints brought by foster carers can relate to the support services they receive from the Council, the way our staff engage with them, or services a child in their care is or was receiving or has requested from us.

37. Any complaint brought by a foster carer on behalf of a foster child in the care, or formerly in their care, should be considered under this CHP. Where possible, the views of the child should also be taken into account.

38. Foster carers who are recruited and supported by us may bring complaints about these services. However, approval and de-registration of the carer by the Council may be considered through alternative appeal mechanisms. As noted under **Social work complaints and appeals**, these appeals must be handled in line with the CHP timescales, where possible, and end with signposting to the SPSO.

39. Complaints from foster carers supported by private agencies will not be addressed within this CHP if the complaint is wholly about their own circumstances and support rather than those of the child. Such complaints should be directed to the complaints process of the relevant agency.

40. An agency foster carer may still complain about the way our staff have interacted with them or about any element of service that they might reasonably expect to be provided by the Council for example invitations to meetings, provision of information about the child in their care or the manner and content of communications with the Council. This list is not exhaustive and such complaints should be carefully considered in terms of the role of the Council's staff, before directing them to pursue their complaint with their fostering agency.

41. Where a complaint cannot be considered in part or in whole by the Council, the customer must be given a clear explanation as to why this is, what (if any) parts of their complaint will be investigated and how they may refer the matter to the SPSO.

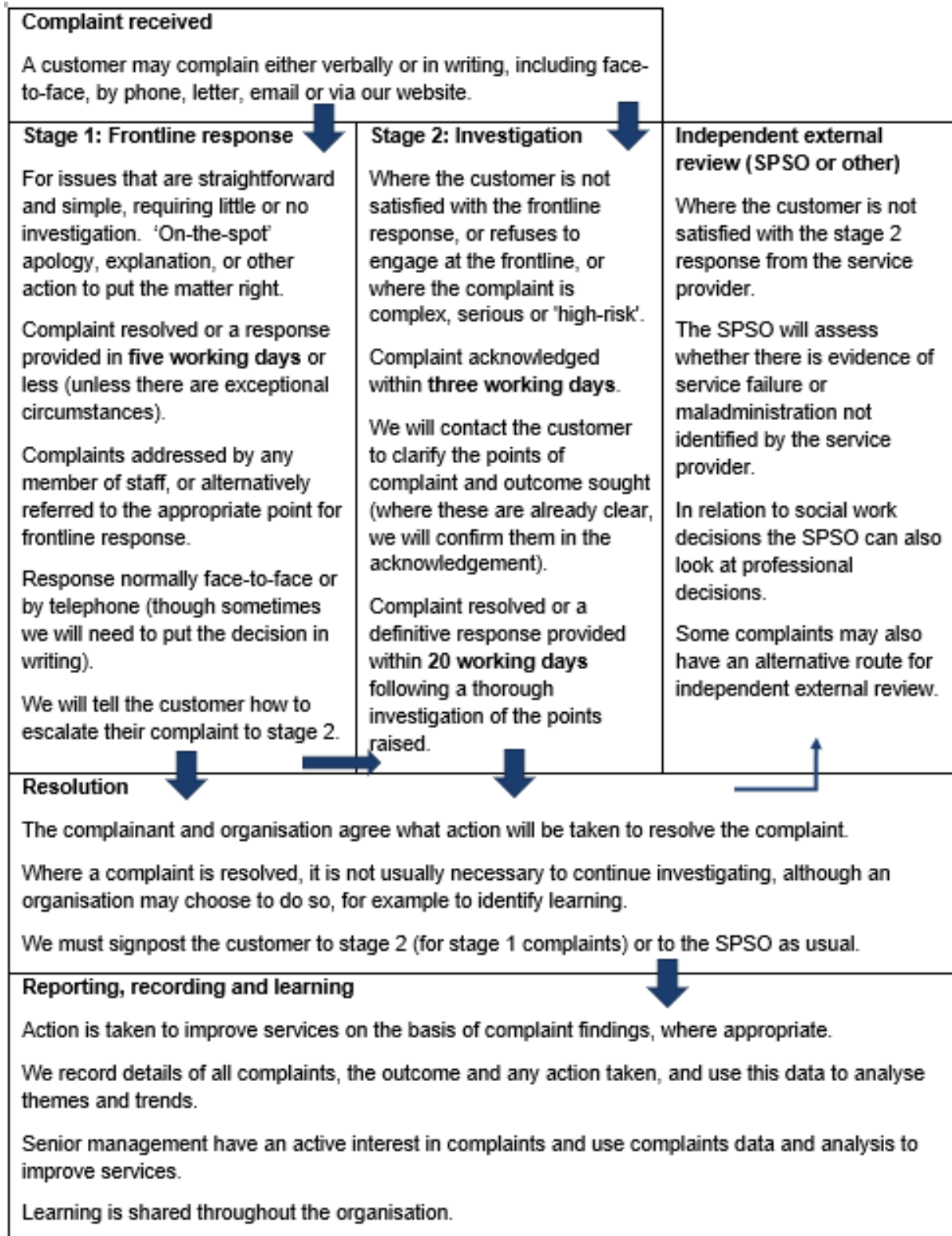
Part 3: The Complaints Handling Process

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The complaints handling process

1. Our Complaints Handling Procedure (CHP) aims to provide a quick, simple and streamlined process for responding to complaints early and locally by capable, well-trained staff. Where possible, we will resolve the complaint to the customer's satisfaction. Where this is not possible, we will give the customer a clear and reasoned response to their complaint.



Resolving the complaint

2. A complaint is **resolved** when both the Council 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. We will try to resolve complaints wherever possible, although we accept this will not be possible in all cases.
4. A complaint may be resolved 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. It may be helpful to use alternative complaint resolution approaches when trying to resolve a complaint. See **Alternative complaint resolution approaches**.
6. Where a complaint is resolved, we do not normally need to continue looking into it or provide a response on all points of complaint. There must be a clear record of how the 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 to continue looking into the issue, for example where there is evidence of a wider problem or potential for useful learning. We will use our professional judgment in deciding whether it is appropriate to continue looking into a complaint that is resolved.
7. In all cases, we must record the complaint outcome (resolved) and any action taken, and signpost the customer to stage 2 (for stage 1 complaints) or to the SPSO as usual (see **Signposting to the SPSO**).
8. If the customer and the Council are not able to agree a resolution, we must follow this CHP to provide a clear and reasoned response to each of the issues raised.

What to do when you receive a complaint

9. Members of staff receiving a complaint should consider four key questions. This will help them 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. We may need to ask the customer for more information and probe further to get a full understanding.
11. We will need to decide whether the issue can be defined as a complaint and whether there are circumstances that may limit our ability to respond to the complaint (such as the time limit for making complaints, confidentiality, anonymity or the need for consent). We 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, we will explain this to the customer (and signpost them to SPSO). There is detailed guidance on this step in **Part 2: When to use this procedure**.

13. In most cases, this step will be straightforward. If it is not, the complaint may need to be handled immediately at stage 2 (see **Stage 2: Investigation**).

What does the customer want to achieve by complaining?

14. At the outset, we will clarify the outcome the customer wants. Of course, the customer may not be clear about this, and we may need to probe further to find out what they expect, and whether they can be satisfied.

Can I achieve this, 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 should do so.

16. The customer may expect more than we can provide. If so, we will tell them as soon as possible.

17. Complaints which can be resolved or responded to quickly should be managed at stage 1 (see **Stage 1: Frontline response**).

If I cannot respond, 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, they should pass the complaint to someone who can respond quickly.

19. If it is not a simple and straightforward complaint that can realistically be closed within five working days (or ten, if an extension is appropriate), it should be handled immediately at stage 2. If the customer refuses to engage at stage 1, insisting that they want their complaint investigated, it should be handled immediately at stage 2. See **Stage 2: Investigation**.

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. We 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. We may also explain that, as an organisation that values complaints, we may use the information given when we review service standards in the future. If we consider an apology is appropriate, we may wish to follow the [SPSO guidance on apology](#).

23. **Part 2, Appendix 1** gives examples of the types of complaint we may consider at this stage, with suggestions on how to resolve them.

24. Complaints which are not suitable for frontline response should be identified early and handled immediately at stage 2: investigation.

Notifying staff members involved

25. If the complaint is about the actions of another staff member, the complaint should be shared with them, where possible, before responding (although this should not prevent us responding to the complaint quickly, for example where it is clear that an apology is warranted).

Timelines

26. Frontline response must be completed **within five working days**, although in practice we would often expect to respond to the complaint much sooner. 'Day one' is always the date of receipt of the complaint (or the next working day if the complaint is delivered by letter after 3pm when the day's post has already been received, stamped and allocated, or on a weekend or public holiday).

Extension to the timeline

27. 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 must be agreed with an appropriate manager. We will tell the customer about the reasons for the extension, and when they can expect a response. The maximum extension that can be granted is five working days (that is, **no more than ten working days** in total from the date of receipt).

28. If a complaint will 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 if it is clear that it can be handled within the extended timeframe of up to ten working days.

29. If a complaint has not been closed within ten working days, it should be escalated to stage 2 for a final response.

30. **Appendix 1** provides further information on timelines.

Closing the complaint at the frontline response stage

31. If we convey the decision face-to-face or on the telephone, we are not required to write to the customer as well (although we may choose to). We must:

- Tell the customer the outcome of the complaint (whether it is resolved, upheld, partially upheld or not upheld).
- Explain the reasons for our decision (or the agreed action taken to resolve the complaint, or the agreed action taken to resolve the complaint (see **Resolving the complaint**)).

- Explain that the customer can escalate the complaint to stage 2 if they remain dissatisfied and how to do so (we should not signpost to the SPSO until the customer has completed stage 2).

32. We will keep a full and accurate record of the decision given to the customer. If we are not able to contact the customer by phone, or speak to them in person, we will provide a written response to the complaint where an email or postal address is provided, covering the points above.

33. If the complaint is about the actions of a particular staff member / s, we will share with them any part of the complaint response which relates to them, (unless there are compelling reasons not to).

34. The complaint should then be closed and the complaints system updated accordingly.

35. At the earliest opportunity after the closure of the complaint, the staff member handling the complaint should consider whether any learning has been identified. See **Part 4: Learning from complaints**.

Stage 2: Investigation

36. 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, insisting they wish their complaint to be investigated. 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 (see **Part 2: Time limits for making a complaint**).
- 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 we can establish what happened and / or what should have happened).
- The complaint relates to serious, high-risk or high-profile issues (see **Part 2: Serious, high-risk or high-profile complaints**).

37. 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. Wherever possible, complaints should be investigated by someone not involved in the complaint (for example, a line manager or a manager from a different area).

38. Details of the complaint must be recorded on the complaints system. 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.

39. The beginning of stage 2 is a good time to consider whether complaint resolution approaches other than investigation may be helpful (see **Alternative complaint resolution approaches**).

Acknowledging the complaint

40. Complaints must be acknowledged within three working days of receipt at stage 2.

41. We must issue the acknowledgement in a format which is accessible to the customer, taking into account their preferred method of contact.

42. Where the points of complaint and expected outcomes are clear from the complaint, we must set these out in the acknowledgement and ask the customer to get in touch with us immediately if they disagree (See **Agreeing the points of complaint and outcome sought**).

43. Where the points of complaint and expected outcomes are not clear, we must tell the customer we will contact them to discuss this.

Agreeing the points of complaint and outcome sought

44. 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. We may also need to manage the customer's expectations about the scope of our investigation.

45. Where the points of complaint and outcome sought are clear, we can confirm our understanding of these with the customer when acknowledging the complaint (see **Acknowledging the complaint**).

46. Where the points of complaint and outcome sought are not clear, we must contact the customer to confirm these. We will normally need to speak to the customer (by phone or face-to-face) to do this effectively. In some cases it may be possible to clarify complaints in writing. The key point is that we need to be sure we and the customer have a shared understanding of the complaint. When contacting the customer we will be respectful of their stated preferred method of contact. We should keep a clear record of any discussion with the customer.

47. In all cases, we must have a clear shared 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 points of complaint should be specific enough to direct the investigation, but broad enough to include any multiple and specific points of concern about the same issue.
- We will make every effort to agree the points of complaint with the customer (alternative complaint resolution approaches may be helpful at this stage). 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). We will manage any such cases in accordance with our Policy on Unacceptable Actions and Challenging Behaviour by Service Users and Complainants, bearing in mind that we should continue to investigate the complaint (as we understand it) wherever possible.

- **Is there anything we can't consider under the CHP?**
 - We must explain if there are any points that are not suitable for handling under the CHP (see **Part 2: What to do if the CHP does not apply**).
- **What outcome does the customer want to achieve by complaining?**
 - Asking what outcome the customer is seeking helps direct the investigation and enables us 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 we can provide, or has unrealistic expectations about the scope of the investigation. If so, we should make this clear to the customer as soon as possible.

Notifying staff members involved

48. If the complaint is about the actions of a particular staff member / s, we will notify the staff member/s involved (including where the staff member is not named, but can be identified from the complaint). We will:

- Share the complaint information with the staff member / s and their line manager (unless there are compelling reasons not to).
- Advise them how the complaint will be handled, how they will be kept updated and how we will share the complaint response with them.
- Discuss their willingness to engage with alternative complaint resolution approaches (where applicable).
- 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).

49. If it is likely that internal disciplinary processes may be involved, the requirements of that process should also be met. See also **Part 2: Complaints and disciplinary or whistleblowing processes**.

Investigating the complaint

50. It is important to plan the investigation before beginning. The staff member investigating the complaint should consider what information they have and what they need about:

- What happened? (this could include, for example, records of phone calls or meetings, work requests, recollections of staff members or internal emails).
- What should have happened? (this should include any relevant policies or procedures that apply).
- Is there a difference between what happened and what should have happened, and is the Council responsible?

51. In some cases, information may not be readily available. We 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).

52. If we need to share information within or outwith the organisation, we will be mindful of our obligations under data protection legislation. See **Part 1: Maintaining confidentiality and data protection**.

53. The SPSO has resources for conducting investigations, including:

- [Investigation plan template](#).
- [Decision-making tool for complaint investigators](#).

Alternative complaint resolution approaches

54. Some complex complaints, or complaints where customers and other interested parties have become entrenched in their position, may require a different approach to resolving the matter. Where we think it is appropriate, we 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.

55. 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.

56. The SPSO has guidance on alternative complaint resolution approaches.

57. If the Council 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

58. To effectively investigate the complaint, it may be necessary to arrange a meeting with the customer. Where a meeting takes place, we 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.

59. 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, we may provide a record of the meeting in another format. We will notify the person making the complaint of the timescale within which we expect to provide the record of the meeting.

Timelines

60. 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 on a weekend or 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

61. 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 we think it will not be possible to meet the 20 day timeframe, and why. We should bear in mind that extended delays may have a detrimental effect on the customer.

62. Any extension must be approved by an appropriate manager. We will keep the customer and any member / s of staff complained about updated on the reason for the delay and give them a revised timescale for completion. We will contact the customer and any member/s of staff complained about at least once every 20 working days to update them on the progress of the investigation.

63. The reasons for an extension might include the following:

- Essential accounts or statements, crucial to establishing the circumstances of the case, are needed from staff, customers or others but the person is not available because of long-term sickness or leave.
- We cannot obtain further essential information within normal timescales.
- The customer has agreed to alternative complaint resolution approaches as a potential route for resolution.
- The complaint is remitted by agreement to an external investigator.

These are only a few examples, and we will judge the matter in relation to each complaint. However, an extension would be the exception.

64. **Appendix 1** provides further information on timelines.

Closing the complaint at the investigation stage

65. 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 relevant Head of Service or an officer authorised by the Head of Service.

66. We will tell the customer the outcome of the complaint (whether it is resolved, upheld, partially upheld or not upheld). The quality of the complaint response is very important and in terms of good practice should:

- 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.
- Include an apology where things have gone wrong (this is different to an expression of empathy: see [the SPSO's guidance on apology](#)).

- Highlight any area of disagreement and explain why no further action can be taken.
- Indicate that a named member of staff is available to clarify any aspect of the letter.
- Indicate that if they are not satisfied with the outcome of the local process, they may seek a review by the SPSO (see **Signposting to the SPSO**).

67. Where a complaint has been resolved, the response does not need to provide a decision on all points of complaint, but should instead confirm the resolution agreed. See **Resolving the complaint**.

68. If the complaint is about the actions of a particular staff member / s, we will share with them any part of the complaint response which relates to them, (unless there are compelling reasons not to).

69. We will record the decision, and details of how it was communicated to the customer, on the complaints system.

70. The SPSO has guidance on responding to a complaint:

- [Template decision letter](#).
- [Apology guidance](#).

71. At the earliest opportunity after the closure of the complaint, the staff member handling the complaint should consider whether any learning has been identified. See **Part 4: Learning from complaints**.

Signposting to the SPSO

72. Once the investigation stage has been completed, the customer has the right to approach the SPSO if they remain dissatisfied. We must make clear to the customer:

- Their right to ask the SPSO to consider the complaint.
- The time limit for doing so.
- How to contact the SPSO.

73. The SPSO considers complaints from people who remain dissatisfied at the conclusion of our complaints procedure. The SPSO looks at issues such as service failure and maladministration (administrative fault), and the way we have 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 signpost to the SPSO.

74. The SPSO recommends that we 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 Council'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 local authorities. 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 Council, 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.
- 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](#) or call them on Freephone 08003777330.

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: 08003777330.

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

Website: www.spsso.org.uk.

Factoring complaints and complaints from shared owners

75. 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 can be found [here](#).

76. Where the complaint relates to social housing, we 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 we have handled their complaint). However, we 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

77. If a customer contacts us for clarification when they have received our final response, we may have further discussion with the customer to clarify our response and answer their questions. However, if the customer is dissatisfied with our response or does not accept our findings, we will explain that we have 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. We do not count non-working days, for example weekends, public holidays and days of industrial action where our service has been interrupted.
2. We do 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.
3. Complaints by letter handed in after 3pm, when post has been sorted, stamped and allocated to the relevant service, will be treated as being received on the next working day.

Timelines at frontline response (stage 1).

4. We 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.
5. If we have extended the timeline at the frontline response stage in line with the CHP, the response should be provided (or the complaint escalated) on day ten, at the latest.

Transferring cases from frontline response to investigation.

6. If the customer wants to escalate the complaint to the investigation stage, the case must be passed for investigation without delay. In practice this will mean on the same day that the customer is told this will happen.

Timelines at investigation (stage 2).

7. 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 we receive the complaint, if it is handled immediately at stage 2.

8. We must acknowledge the complaint within three working days of receipt at stage 2 i.e. by day three.

9. We should respond in full to the complaint by day 20, at the latest. We have 20 working days to investigate the complaint, regardless of any time taken to consider it at the frontline response stage.

10. Exceptionally, we may need longer than the 20 working day limit for a full response. If so, we will explain the reasons to the customer, and update them (and any staff involved) at least once every 20 working days.

Frequently asked questions.

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

11.1. 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 (we have 20 working days from this date, unless an extension is granted).

12. What happens if we cannot meet an extended timeframe?

12.1 If we cannot meet the extended timeframe at stage 1, the complaint should be escalated to stage 2. The maximum timeframe allowed for a stage 1 response is ten working days.

12.2. If we 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 a further extension is agreed, we should explain the situation to the customer and give them a revised timeframe for completion. We must update the customer and any staff involved in the investigation at least once every 20 working days.

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

13.1 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). See **Part 2: Time limits for making a complaint.**

Appendix 2 – The complaint handling process (flowchart for staff)

<p>A customer may complain verbally or in writing, including face-to-face, by phone, letter or email.</p> <p>Your first consideration is whether the complaint should be dealt with at stage 1 (frontline response) or stage 2 (investigation).</p>	
↓	↓
<p>Stage 1: Frontline response</p> <p>Always try to respond quickly, wherever we can</p>	<p>Stage 2: Investigation</p> <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
↓	↓
<p>Record the complaint and notify any staff complained about</p>	<p>Record the complaint and notify any staff complained about</p> <p>Acknowledge the complaint within three working days</p>
↓	↓
	<p>Contact the complainant to agree:</p> <ul style="list-style-type: none"> • Points of complaint • Outcome sought • Manage expectations (where required) <p><i>(these can be confirmed in the acknowledgement where the complaint is straightforward)</i></p>
↓	↓
<p>Respond to the complaint within five working days unless there are exceptional circumstances</p>	<p>Respond to the complaint as soon as possible, but within 20 working days unless there is a clear reason for extending the timescale</p>
↓	↓
<p>Is the customer satisfied?</p> <p>You must always tell the customer how to escalate to stage 2</p>	<p>Communicate the decision, normally in writing</p> <p>Signpost the customer to SPSO and advise of time limits</p>
↓	↓
<p>(Yes) Record outcome and learning, advise complaints officer and close complaint.</p> <p><i>(No) -> to Stage 2: Investigation</i></p>	<p>Record outcome and learning, advise complaints officer and close complaint</p>
↓	↓
<p>Follow up on agreed actions flowing from the complaint</p> <p>Share any learning points</p>	

Part 4: Governance

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Roles and responsibilities

1. All staff will be aware of:

- The Complaints Handling Procedure (CHP).
- How to handle and record complaints at the frontline response stage.
- Who they can refer a complaint to, in case they are not able to handle the matter.
- The need to try and resolve complaints early and as close to the point of service delivery as possible.
- Their clear authority to attempt to resolve any complaints they may be called upon to deal with.

2. Training on this procedure will be part of the induction process for all new staff. Refresher training will be provided for current staff on a regular basis.

3. Senior management will ensure that:

- The Council's final position on a complaint investigation is signed off by an appropriate manager or officer in order to provide assurance that this is the definitive response of the Council and that the complainant's concerns have been taken seriously.
- It maintains overall responsibility and accountability for the management and governance of complaints handling (including complaints about contracted services).
- It has an active role in, and understanding of, the CHP (although not necessarily involved in the decision-making process of complaint handling).
- Mechanisms are in place to ensure a consistent approach to the way complaints handling information is managed, monitored, reviewed and reported at all levels in the Council.
- Complaints information is used to improve services, and this is evident from regular publications.

4. **Chief Executive:** The Chief Executive provides leadership and direction in ways that guide and enable us to perform effectively across all services. This includes ensuring that there is an effective CHP, with a robust investigation process that demonstrates how we learn from the complaints we receive. The Chief Executive may take a personal interest in all or some complaints or may delegate responsibility for the CHP to senior staff. Regular management reports assure the Chief Executive of the quality of complaints performance.

5. The Chief Executive is also responsible for ensuring that there are governance and accountability arrangements in place in relation to complaints about contractors / ALEOs. This includes:

- Ensuring performance monitoring for complaints is a feature of the service/management agreements between the Council and contractors / ALEOs
- Setting clear objectives in relation to this complaints procedure and putting appropriate monitoring systems in place to provide the Council with an overview of how the contractor / ALEO is meeting its objectives

6. **Chief Social Work Officer (CSWO):** The CSWO has an important role in the consideration of social work complaints information and, on occasion, the content of

individual complaints. Their role in overseeing the effective governance of social work services and monitoring these arrangements includes complaints about social work services. The CSWO should also take appropriate account of complaints information in fulfilling their obligations to promote continuous improvement and best practice. Furthermore, the CSWO or their delegated officers may have specific interest in complaints relating to individuals for whom they have decision-making responsibilities.

7. Corporate Directors and Members of Corporate Leadership Team (CLT): On the Chief Executive's behalf, Corporate Directors and Members of the Council's CLT may be responsible for:

- Managing complaints and the way we learn from them.
- Overseeing the implementation of actions required as a result of a complaint.
- Investigating complaints.
- In the case of Corporate Directors, deputising for the Chief Executive on occasion.

8. They may also be responsible for preparing and signing off decisions for customers, so they should be satisfied that the investigation is complete and their response addresses all aspects of the complaint. However, Corporate Directors and members of CLT may decide to delegate some elements of complaints handling (such as investigations and the drafting of response letters) to other senior staff. Where this happens, Corporate Directors and members of CLT should retain ownership and accountability for the management and reporting of complaints.

9. Heads of Service: Heads of Service may be involved in the operational investigation and management of complaints handling. As senior officers they may be responsible for preparing and signing decision letters to customers, so they should be satisfied that the investigation is complete, and their response addresses all aspects of the complaint.

10. Complaints Officer: The Complaints Officer's responsibilities include:

- Co-ordinating the Complaints Officers' Group (COG), which includes the Service Complaints Officers and their Deputies.
- Providing advice to staff and the COG on the CHP.
- Ensuring that training is available on the CHP for members of the COG and for Complaints Investigators.
- Representing the Council on the Network of Local Government Complaints Handlers (NLGCH).
- Reporting performance statistics, in line with the complaints performance indicators published by the SPSO, to the NLGCH, the Council's SMT and the COG.
- Producing reports to the Council's Corporate Leadership Team capturing the lessons learnt from the handling of complaints.
- Producing the Council's Annual Complaints Handling Report.

11. Service Complaints Officers: Each Directorate has at least one nominated service complaints officer and a deputy. The complaints officers' responsibilities include:

- Recording complaints.

- Carrying out Stage 2 investigations (noting that other members of staff within services can be asked to carry out a Stage 2 investigation).
- Drafting decision letters to customers.
- Offering advice on the CHP to other staff in their service.

The nominated complaints officers for each Service are as follows:

- Strategy, Performance and Business Solutions – Information Governance Officer and Team Manager (Business Support).
- Enterprise and Sustainable Regeneration – Operational Support Manager (deals with all complaints for Enterprise and Sustainable Regeneration except complaints made against Orkney Ferries).
- Enterprise and Sustainable Regeneration – Senior Administrative Officer, Orkney Ferries (deals with complaints only against Orkney Ferries).
- Education, Leisure and Housing – Service Manager (Resources) and Team Leader (Resources).
- Orkney Health and Care – Planning and Performance Officer and Administrative Manager.
- Neighbourhood Services and Infrastructure – Directorate Business Support Team Manager

12. Complaints investigator: The complaints investigator is responsible and accountable for the management of the investigation. They may work in a service delivery team or as part of a centralised customer service team, and will be involved in the investigation and in coordinating all aspects of the response to the customer. This may include preparing a comprehensive written report, including details of any procedural changes in service delivery and identifying wider opportunities for learning across the organisation.

13. The HR / training officer: The HR or training officer is responsible for ensuring all new staff receive training on the CHP as part of the induction process, and that refresher training is provided for current staff on a regular basis.

14. The Council's SPSO liaison officer: Our SPSO liaison officer is the Council's Head of Legal and Governance. The SPSO liaison officer's role includes providing complaints information in an orderly, structured way within requested timescales, providing comments on factual accuracy on our behalf in response to SPSO reports, and confirming and verifying that recommendations have been implemented.

Recording, reporting, learning from and publicising complaints

15. Complaints provide valuable customer feedback. One of the aims of the CHP is to identify opportunities to improve services across the Council. 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.

16. We also have arrangements in place to ensure complaints about contractors or ALEOs are recorded, reported on and publicised in line with this CHP.

Recording complaints

17. It is important to record suitable data to enable us to fully investigate and respond to the complaint, as well as using our complaint information to track themes and trends. As a minimum, we should record:

- The customer's name and contact details.
- The date the complaint was received.
- The nature of the complaint.
- The service the complaint refers to.
- Staff member responsible for handling the complaint.
- Action taken and outcome at frontline response stage.
- Date the complaint was closed at the frontline response stage.
- Date the investigation stage was initiated (if applicable).
- Action taken and outcome at investigation stage (if applicable).
- Date the complaint was closed at the investigation stage (if applicable).
- The underlying cause of the complaint and any remedial action taken.
- The date when the customer feedback form was issued.

18. If the customer does not want to provide any of this information, we will reassure them that it will be managed appropriately, and record what we can.

19. Individual complaint files will be stored in line with our document retention policy.

Learning from complaints

20. We must have clear systems in place to act on issues identified in complaints. As a minimum, we must:

- Seek to identify the root cause of complaints.
- Take action to reduce the risk of recurrence.
- Systematically review complaints performance reports to improve service delivery.

21. Learning may be identified from individual complaints (regardless of whether the complaint is upheld or not) and from analysis of complaints data.

22. Where we have identified the need for service improvement in response to an individual complaint, we will take appropriate action, which will include the following:

- The action needed to improve services should be authorised by an appropriate manager.
- An officer (or team) should be designated the 'owner' of the issue, with responsibility for ensuring the action is taken.
- A target date must be set for the action to be taken.
- The designated individual must follow up to ensure that the action is taken within the agreed timescale and report accordingly to the service complaints officer.

- Where appropriate, performance in the service area should be monitored to ensure that the issue has been resolved.
- Any learning points should be shared with relevant staff.

23. SPSO has guidance on learning from complaints.

24. Senior management will review the information reported on complaints regularly to ensure that any trends or wider issues which may not be obvious from individual complaints are quickly identified and addressed. Where we identify the need for service improvement, we will take appropriate action (as set out above). Where appropriate, performance in the service area should be monitored to ensure that the issue has been resolved.

Reporting of complaints

25. We have a process for the internal reporting of complaints information, including analysis of complaints trends. Regularly reporting the analysis of complaints information helps to inform management of where services need to improve.

26. We will report at least quarterly to senior management on:

- Performance statistics, in line with the complaints performance indicators published by SPSO.
- Analysis of the trends and outcomes of complaints (this should include highlighting where there are areas where few or no complaints are received, which may indicate either good practice or that there are barriers to complaining in that area).

Publicising complaints information

27. We publish on an annual basis information on complaints outcomes and actions taken to improve services.

28. This demonstrates the improvements resulting from complaints and shows that complaints can help to improve our services. It also helps ensure transparency in our complaints handling service and will help to show our customers that we value their complaints.

29. We will publish an annual complaints performance report on our website in line with SPSO requirements and provide this to the SPSO on request. This report will be presented to the Council's Monitoring and Audit Committee. It includes:

- Performance statistics, in line with the complaints performance indicators published by the SPSO.
- Complaint trends and the actions that have been or will be taken to improve services as a result.

30. These reports must be easily accessible to members of the public and available in alternative formats as requested.



Complaints Handling Procedure

Customer-facing Guide

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Orkney Islands Council is committed to providing high-quality customer services.

We value complaints and use information from them to help us improve our services.

1. If something goes wrong or you are dissatisfied with our services, please tell us. This leaflet describes our complaints procedure and how to make a complaint. It also tells you about how we will handle your complaint and what you can expect from us.

What is a complaint?

2. We regard a complaint as any expression of dissatisfaction about our action or lack of action, or about the standard of service provided by us or on our behalf.

What can I complain about?

3. You can complain about things like:

- Failure or refusal to provide a service.
- Inadequate quality or standard of service, or an unreasonable delay in providing a service.
- Dissatisfaction with one of our policies or its impact on the individual.
- Failure to properly apply law, procedure or guidance when delivering services.
- Failure to follow the appropriate administrative process.
- Conduct, treatment by or attitude of a member of staff or contractor (**except** where there are arrangements in place for the contractor to handle the complaint themselves).
- Disagreement with a decision, (**except** where there is a statutory procedure for challenging that decision, or an established appeals process followed throughout the sector).

4. Your complaint may involve more than one organisation or service or be about someone working on our behalf.

What can't I complain about?

5. There are some things we can't deal with through our complaints handling procedure. These include:

- A routine first-time request for a service.
- A first-time report of a fault (for example, potholes or street lighting).
- A request for compensation only.
- Issues that are in court or have already been heard by a court or a tribunal (if you decide to take legal action, you should let us know as the complaint cannot then be considered under this process).
- Disagreement with a decision where there is a statutory procedure for challenging that decision (such as for freedom of information and subject access requests), or an established appeals process followed throughout the sector – such as council tax, planning (including internal appeal to Local Review Body or external appeal to Scottish Ministers), or a parking ticket appeal.

- Disagreement with decisions or conditions that are based upon social work recommendations, but determined by a court or other statutory body, for example decisions made by a children's panel, parole board or mental health tribunal.
- A request for information under the Data Protection or Freedom of Information (Scotland) Acts.
- A grievance by a staff member or a grievance relating to employment or staff recruitment.
- A concern raised internally by a member of staff (which was not about a service they received, such as a whistleblowing concern).
- A concern about a child or an adult's safety.
- An attempt to reopen a previously concluded complaint or to have a complaint reconsidered where we have already given our final decision.
- Abuse or unsubstantiated allegations about our organisation or staff where such actions would be covered by our Policy on Unacceptable Actions and Challenging Behaviour by Service Users and Complainants.
- A concern about the actions or service of a different organisation, where we have no involvement in the issue (**except** where the other organisation is delivering services on our behalf).

6. If other procedures or rights of appeal can help you resolve your concerns, we will give information and advice to help you.

Who can complain?

7. Anyone who receives, requests or is directly affected by our services can make a complaint to us. This includes the representative of someone who is dissatisfied with our service (for example, a relative, friend, advocate or adviser). If you are making a complaint on someone else's behalf, you will normally need their written consent. Please also read the section on **Getting help to make your complaint** below.

How do I complain?

8. You can complain in person at any of our offices, by phone, in writing, by email or online via our Customer Services Platform.

9. It is easier for us to address complaints if you make them quickly and directly to the service concerned. Please talk to a member of our staff at the service you are complaining about, so then they can try to resolve the issue.

10. When complaining, please tell us:

- Your full name and contact details.
- As much as you can about the complaint.
- What has gone wrong.
- What outcome you are seeking.

Our contact details

Address: Orkney Islands Council, Council Offices, School Place, Kirkwall, Orkney, KW15 1NY.

Telephone: 01856873535.

Website: <https://www.orkney.gov.uk/feedback>.

How long do I have to make a complaint?

11. Normally, you must make your complaint within six months of:

- The event you want to complain about; or
- Finding out that you have a reason to complain.

12. In exceptional circumstances, we may be able to accept a complaint after the time limit. If you feel that the time limit should not apply to your complaint, please tell us why.

What happens when I have complained?

13. We will always tell you who is dealing with your complaint. Our complaints procedure has two stages.

Stage 1: Frontline response

14. We aim to respond to complaints quickly (where possible, when you first tell us about the issue). This could mean an on-the-spot apology and explanation if something has clearly gone wrong, or immediate action to resolve the problem.

15. We will give you our decision at stage 1 in five working days or less, unless there are exceptional circumstances. Please note that a complaint delivered by letter after 3pm when the post has already been received, stamped and allocated to the service, will be held to have been received on the morning of the following day for the purposes of calculation of timescales for responding.

16. If you are not satisfied with the response we give at this stage, we will tell you what you can do next. If you choose to, you can take your complaint to stage 2. You must normally ask us to consider your complaint at stage 2 either:

- Within six months of the event you want to complain about or finding out that you have a reason to complain; or
- Within two months of receiving your stage 1 response (if this is later).

17. In exceptional circumstances, we may be able to accept a stage 2 complaint after the time limit. If you feel that the time limit should not apply to your complaint, please tell us why.

Stage 2: Investigation

18. Stage 2 deals with two types of complaint: those that have not been resolved at stage 1 and those that clearly require investigation, and so are handled directly at this stage. If

you do not wish your complaint to be handled at stage 1, you can ask us to handle it at stage 2 instead.

19. When using stage 2:

- We will acknowledge receipt of your complaint within three working days. If a complaint is delivered by letter after 3pm when post has already been received, stamped and allocated to the service, receipt will be acknowledged within three working days of the day after the complaint was received.
- We will confirm our understanding of the complaint we will investigate and what outcome you are looking for.
- We will try to resolve your complaint where we can (in some cases we may suggest using an alternative complaint resolution approach, such as mediation); and
- Where we cannot resolve your complaint, we will give you a full response as soon as possible, normally within 20 working days.

20. If our investigation will take longer than 20 working days, we will tell you. We will tell you our revised time limits and keep you updated on progress.

What if I'm still dissatisfied?

21. After we have given you our final decision, if you are still dissatisfied with our decision or the way we dealt with your complaint, you can ask the Scottish Public Services Ombudsman (SPSO) to look at it.

The SPSO are an independent organisation that investigates complaints. They are not an advocacy or support service (but there are other organisations who can help you with advocacy or support).

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 our final response to your complaint. You can do this [online](#) or call them on Freephone 08003777330.

You may wish to get independent support or advocacy to help you progress your complaint. See the section on **Getting help to make your complaint** below.

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: 08003777330.

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

Website: www.spsso.org.uk.

22. There are some complaints that have an alternative route for independent review. We will tell you how to seek independent review when we give you our final response on your complaint.

Care complaints

23. If your complaint relates to a care service we provide, you can choose whether to complain to us or the Care Inspectorate. You can find out more about their complaints procedure, or make a complaint, by contacting them.

The Care Inspectorate has several offices around Scotland. Please refer to: <https://www.careinspectorate.com/index.php/complaints>.

Getting help to make your complaint

24. We understand that you may be unable or reluctant to make a complaint yourself. We accept complaints from the representative of a person who is dissatisfied with our service. We can take complaints from a friend, relative, or an advocate, if you have given them your consent to complain for you.

25. You can find out about advocates in your area by contacting the Scottish Independent Advocacy Alliance:

Scottish Independent Advocacy Alliance.

Telephone: 01315109410.

Website: <http://www.siaa.org.uk>.

26. You can find out about advisers in your area through Citizens Advice Scotland:

Citizens Advice Scotland.

Website: <http://www.cas.org.uk>.

You can also check your phone book for your local citizens advice bureau.

27. We are committed to making our service easy to use for all members of the community. In line with our statutory equalities duties, we will always ensure that reasonable adjustments are made to help you access and use our services. If you have trouble putting your complaint in writing, or want this information in another language or format, such as large font, or Braille, please tell us in person or contact us using the details below.

Contact details for queries about this guide

Address: Orkney Islands Council, Council Offices, School Place, Kirkwall, Orkney, KW15 1NY.

Telephone: 01856873535.

Website: <https://www.orkney.gov.uk/feedback>.

How we will use your information

28. We will use the information that you provide us so that we can look into your complaint and attempt to resolve it. More information about how the Council uses personal information and your rights is available on the website here:

<https://www.orkney.gov.uk/Online-Services/privacy.htm>.

Quick guide to our complaints procedure

Complaints procedure

You can make your complaint in person, by phone, by email or in writing.

We have a **two-stage complaints procedure**. We will always try to deal with your complaint quickly. But if it is clear that the matter will need investigation, we will tell you and keep you updated on our progress.

If your complaint relates to a care service you can choose to complain to us or to the Care Inspectorate.



Stage 1: Frontline response

We will always try to respond to your complaint quickly, within **five working days** if we can.

If you are dissatisfied with our response, you can ask us to consider your complaint at stage 2.



Stage 2: Investigation

We will look at your complaint at this stage if you are dissatisfied with our response at stage 1. We also look at some complaints immediately at this stage, if it is clear that they need investigation.

We will acknowledge your complaint within **three working days**.

We will confirm the points of complaint to be investigated and what you want to achieve.

We will investigate the complaint and give you our decision as soon as possible. This will be after no more than **20 working days** *unless* there is clearly a good reason for needing more time.



Scottish Public Services Ombudsman

If, after receiving our final decision on your complaint, you remain dissatisfied with our decision or the way we have handled your complaint, you can ask the SPSO to consider it.

There are some complaints that have an alternative route for independent review. We will tell you how to seek independent review when we give you our final response on your complaint.

We will tell you how to do this when we send you our final decision.

Stage 2 Capital Project Appraisal

Capital Programme: General Fund.
 Client Service: Neighbourhood Services.
 Project Name: Salt Storage Facility (Cursiter Quarry).

1. Background

Currently, salt used in the winter road safety programme is stored in a pile at Cursiter Quarry, covered by tarpaulins. The current storage method is not particularly robust as there is a clear risk of the salt getting damp as the covers are moved back once the salt pile starts to be used. Wet salt is difficult to control in terms of distributing it across the road network and is also less effective with regards to managing road conditions. Manually removing tarpaulins to access salt is a challenging and potentially hazardous operation made more difficult in winter weather eg. high winds.

An ability to adequately manage storage conditions for the salt and keep it dry is required if national road safety standards are to be met, as agreed in the revised Winter Maintenance Policy, recommended for approval by the Development and Infrastructure Committee in September 2021. It is expected that savings will be realised as a result of a better storage solution and hence more efficient use of the salt. In addition, road treatment will be more effective and meet the required national standards.

Some work has already been done to identify potential storage solutions, taking into account methods used by other local authorities and road maintenance organisations.

2. Options Available

Three options have been considered:

- Option 1 – Steel Portal Frame with Cement Fibre cladding (3.5m high reinforced concrete retaining walls on all sides excluding door opening).
- Option 2 – As above with polyester PVC stretch membrane outer cladding
- Option 3 – Timber Dome over reinforced concrete retaining walls (dome comprising laminated timber frame with timber purlins and bitumen roofing shingles fixed to plywood cladding)

The Service requirements are to provide a covered salt storage facility to maintain 5,000 tonnes of salt to the standard of BS 3247:2011 Specification for Salt for Spreading on Highways for Winter Maintenance. This standard provides minimum requirements for moisture content (to be no greater than 4%) as well as required grading for spreading using standard road maintenance vehicles and equipment. The building will be designed to relevant structural design standards and codes of practice including Structural Eurocodes using applicable National Annexes to define local environmental and climatic conditions eg. wind and snow loadings. The other key technical requirements are those relating to durability and design life of the facility with different solutions from the market being offered with varying service life and warranty.

A summary of the main options available is given below as well as what are understood to be typical design life for the main components.

Options Summary

	Option 1	Option 2	Option 3
<u>Building Geometry</u>			
Length (m)	36	40	30 dia (dome)
Width(m)	23	24	-
Height to ridge (m)	12.5	10.0	14.5
<u>Storage Capacity</u>			
Dry Salt (tonnes)	5000	5000	5000
<u>Design Life (years)</u>			
Substructure	50+	50+	50+
Superstructure (frame)	25	25	30
Cladding	20	20	20
<u>Indicative Cost (£'000)</u>			
Site preparation	100	100	80
Structure incl. concrete walls	340	670	450
Services	30	30	30
Fees	30	30	30
(Total)	(500)	(830)	(590)

3. Land Purchase Requirement

A suitable location for a salt storage facility has been identified at Cursiter Quarry, in the location where currently recycled glass is located – see Indicative Site Layout Plan included as Annex 1. As such there are no requirements to purchase additional land, although the glass storage area will need to be re-located prior to construction works beginning in Spring 2023.

4. Project Appraisal

	Criteria	Response
1.	Protects Existing Statutory Provision	The project will ensure the Council is able to meet existing statutory provisions for winter maintenance as set out in the national Code of Practice (CoP) - Well-managed Highway Infrastructure.
2.	Meets Corporate Priority / Community Planning Goal	<p>The provision of a salt storage facility will assist with the following Council Priorities:-</p> <ul style="list-style-type: none"> • Priority 1.3. Retain and where possible enhance public road infrastructure and coastal flood protection of public road infrastructure • Priority 3.11. We will review and develop the Empowering Communities Project to create a sustainable model which will enable and empower communities in the delivery of services and projects in their community. The service on the isles will be supported by providing and funding local delivery.

	Criteria	Response
3.	Protects Existing Assets	The project will improve the Council's resilience to winter weather by significantly improving the storage capacity for rock salt, complying with current industry best practice concerning the storage and handling of rock salt which will further help to keep roads open and safe for vehicles and pedestrians during the winter period.
4.	Minimises Capital Cost	The project will be procured via competitive design and build tender to ensure that the technical solution adopted allows for market innovation in terms of final design. This will ensure not just the most economical solution in terms of capital costs but also ensure a long term salt storage solution is put in place that will generate revenue savings on a yearly basis.
5.	Maximises Investment from External Sources	No external investment sources are available for this project.
6.	Beneficial Impact on Revenue Expenditure	<p>The project will allow for more effective and efficient winter maintenance to be carried out. Access to dry salt throughout the winter months will typically mean that less salt is used to treat roads.</p> <p>Experience elsewhere has indicated that the provision of a Salt Storage Facility will reduce typical winter maintenance costs by some £5,000 per year per 1,000 tonnes of salt used. The facility will accommodate 5,000 tonnes, so the savings could amount to £25,000 per annum.</p> <p>This is achieved by reducing gritting spread rates by using dry (covered) salt rather than damp salt which clumps together leading to less even spread rates and can cause blockages of the gritting equipment.</p> <p>Operational costs could be reduced even further by optimising the salting routes as spreading dry salt is far more efficient than when wet salt has to be used.</p>
7.	Linked to Other Council Provision	
(a)	Enhances Statutory Provision	There is no direct link to other statutory provisions.
(b)	Protects or Enhances Discretionary Provision	There is no direct link to other discretionary provisions.
8.	Re-use of Derelict Land or Building	This project will not reuse derelict land or buildings.
9.	Promote or Enhance Orkney's Environment	The project will have no adverse impact on the Environment. Housing salt in a dry covered facility will mean less product wastage, more efficient winter maintenance and therefore savings in overall

	Criteria	Response
		tonnages of salt required over the lifetime of the facility. This will have environmental benefits in terms of less shipping to deliver salt to the island and less vehicle miles in delivering effective winter maintenance.
10.	Promote or Enhance Orkney's Heritage	This project will not directly promote or enhance Orkney's Heritage.
11.	Economic Prosperity or Sustainable Communities	Salt contained in a dry storage facility will be easier to manage, load and distribute across the road network so should lead to improved or more efficient winter maintenance. This should in turn result in less disruption to the road network in general and ensure disruption to businesses and the economy from adverse winter weather is able to be better managed.
12.	Enhances Council operations or Improves Health and Safety	The project will enhance winter maintenance operations through improved efficiency rates in terms of spreading and less wastage. The project will also improve health and safety of operations at Cursiter Quarry by removing the current practices of using heavy tarpaulins to cover salt in the open. At present operatives have to manually place and remove tarpaulins over the stockpile to allow access to salt. These activities often have to take place during adverse weather.

5. Financial Implications

A summary of the financial implications is attached as Annex 2 and Annex 3, which details the capital and revenue implications associated with the project. The total estimated capital cost of the project is £500,000, with £40k required in FY22/23 for design and consents and then £440k in FY23/24 and a further £20k for retention release in FY24/25.

Anticipated Revenue savings of approx. £25k per annum due to efficiencies (reduced waste, lower spread rates) have not been shown in Annex 3, at this time as there will inevitably be increased costs (product costs and transport costs) that will offset against these. Notwithstanding it should be recognised that efficiency savings in the face of market volatility are real, nonetheless.

6. Risk Assessment

The main risks in relation to the project progressing mostly relate to timescales. In order to achieve the Service objective of having a new covered salt storage facility in place by Winter 2023 then construction will need to start early Summer 2023. It is proposed to deliver the project under a design and build type contract whereby the successful contractor is appointed to complete the detailed design and also secure all necessary consents including planning and building warrant.

As there is quite a range of bespoke salt barn solutions available from the market a procurement exercise will be required first to identify the most economically advantageous solution that meets the Technical Specification for the project. This means that the overall size, geometry and height of the building will not be known until a preferred supplier has been identified. As a result, planning permission can only be sought based on the preferred supplier's outline proposals.

To mitigate this risk an application for planning in principle has been submitted based on the outline design proposal developed by Engineering Services. This will ensure that key parameters and design criteria are clearly understood and stated within the Technical Specification issued to tenderers.

7. Conclusion

The proposed new salt storage facility at Cursiter Quarry is required to deliver effective winter maintenance and ensure national road safety standards are met, as set out in the revised Winter Maintenance Policy recommended for approval by the Development and Infrastructure Committee in September 2021.

There are a range of solutions available from the market to meet the Service requirements and technical specification which range from £500,000 to £900,000 in capital cost . The benefits of the more expensive solutions, which are perceived to offer increased durability and longer service life do not appear to justify the additional higher expenditure over more traditional solutions eg. steel portal frame buildings.

Therefore, the technical specification that is being developed ahead of a design and build procurement exercise should not preclude any of the options that have been examined to date. This will ensure that the Council obtains the most economically advantageous solution from the market. It will also allow local contractors to participate in the procurement exercise.

8. Recommendations

It is recommended that the proposed Salt Storage Facility at Cursiter Quarry is added to the capital programme, at a cost of £500,000.

9. Accountable Officers

Hayley Green, Corporate Director for Neighbourhood Services and Infrastructure, extension 2309, Email Hayley.green@orkney.gov.uk

Lorna Richardson, Interim Head of Neighbourhood Services, extension 2322, Email lorna.richardson@orkney.gov.uk

David Custer, Service Manager Engineering, extension 2328, Email david.custer@orkney.gov.uk

10. Annexes

Annex 1 – Location Plan

Annex 2 – Financial Assessment of Capital Expenditure.

Annex 3 – Financial Assessment of Revenue Expenditure.

Notes

1. All levels are metres above Ordnance Datum (m AOD).

Indicative shed - dimensions/
form of structure shown only for
context not OIC requirements.



Entrance to quarry

Weighbridge

Approx.
road edge.
Main road in
and out of
quarry.



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FOR INFO

1	First issue	10/05/22	CM	MD	DC
Rev	Desc	Date	By	Chk	App

G:\Tec\TRANS\PROJECTS\1003122 Quarry Salt Barn\Drawings\Quarry Salt Barn - Planning.dwg

File Ref. 1003122		Drawing No. 3			
Revision	1				
Drawn CM	Checked MD	Approved DC			
Date 10/05/22	Scale 1:500	Original drawing size 420mm x 297mm (A3)			

Cursiter Quarry Salt Barn

Indicative Layout

ENGINEERING

NEIGHBOURHOOD SERVICES
AND INFRASTRUCTURE

Council Offices, Kirkwall
Orkney, KW15 1NY
tel (01856) 873535

Corporate Director:-
Hayley Green, MBA

1525

STAGE 2 - CAPITAL PROJECT APPRAISAL
FINANCIAL ASSESSMENT OF ASSOCIATED CAPITAL EXPENDITURE IMPLICATIONS

Capital Programme: **General Fund**

Client Service: **Neighbourhood Services**

Project Name: **Salt Storage Facility (Cursiter Quarry)**

		1	2	3	4	5		
CAPITAL COSTS	Total £ 000	2022/23 £ 000	2023/24 £ 000	2024/25 £ 000	2025/26 £ 000	2026/27 £ 000	Onwards £ 000	Notes
1. Initial Costs (at inflated prices)								
Land or Property Purchase	-	-	-	-	-	-	-	1
Other Site Costs (including Fees)	5.0	5.0	-	-	-	-	-	
Construction or Improvements	470.0	25.0	425.0	20.0	-	-	-	
Information Technology Costs	-	-	-	-	-	-	-	
Plant, Vehicles & Equipment	-	-	-	-	-	-	-	
Professional Fees - Consultancy	-	-	-	-	-	-	-	
- In-house	25.0	10.0	15.0	-	-	-	-	
Gross Capital Expenditure	500.0	40.0	440.0	20.0	-	-	-	
2. Initial Funding (at inflated prices)								
Government Grants	-	-	-	-	-	-	-	
Other Grants	-	-	-	-	-	-	-	
Other Financial Assistance	-	-	-	-	-	-	-	
Total Grants Recievable, etc.	-	-	-	-	-	-	-	
Net Capital Cost of Project	500.0	40.0	440.0	20.0	-	-	-	
Net Present Value	477.2	40.0	419.0	18.1	-	-	-	
Cost of Capital		5%	5%	5%	5%	5%	5%	
Year		0	1	2	3	4	5	

Notes - Additional narrative on main assumptions and support working papers

1. Planning and Building Warrant fees

STAGE 2 - CAPITAL PROJECT APPRAISAL
FINANCIAL ASSESSMENT OF ASSOCIATED REVENUE BUDGET IMPLICATIONS

Capital Programme:	General Fund
Client Service:	Neighbourhood Services
Project Name:	Salt Storage Facility (Cursiter Quarry)

		1	2	3	4	5	Onwards	Notes
REVENUE COSTS / (SAVINGS)	Total £ 000	2022/23 £ 000	2023/24 £ 000	2024/25 £ 000	2025/26 £ 000	2026/27 £ 000	£ 000	
1. Operating Costs (at inflated prices)								
Staff Costs	-	-	-	-	-	-	-	
Other Staff Costs (incl. recruitment, etc.)	-	-	-	-	-	-	-	
Property Costs	-	-	-	-	-	-	-	
Supplies and Services	20	20	-	-	-	-	-	1
Transport, Vessel and Plant Costs	-	-	-	-	-	-	-	
Administration Costs	-	-	-	-	-	-	-	
Apportioned Costs	-	-	-	-	-	-	-	
Third Party Payments	-	-	-	-	-	-	-	
Finance and Loan Charges	-	-	-	-	-	-	-	
Miscellaneous Expenditure	-	-	-	-	-	-	-	
Gross Revenue Expenditure/(Saving)	20	20	-	-	-	-	-	
2. Operating Income (at inflated prices)								
Government Grants	-	-	-	-	-	-	-	
Other Grants	-	-	-	-	-	-	-	
Rents and Lettings	-	-	-	-	-	-	-	
Sales	-	-	-	-	-	-	-	
Fees and Charges	-	-	-	-	-	-	-	
Miscellaneous Income	-	-	-	-	-	-	-	
Gross Revenue Income	-	-	-	-	-	-	-	
Net Expenditure/(Saving) of Project	20	20	-	-	-	-	-	
Net Present Value	20	20	-	-	-	-	-	
Cost of Revenue		3%	3%	3%	3%	3%	3%	
Year		0	1	2	3	4	5	

Notes - Additional narrative on main assumptions and support working papers

1. £20k for in-house engineering costs associated with preparing and submitted planning application (PIP) and tender documents.

Minute

Police and Fire Sub-committee

Wednesday, 28 September 2022, 14:00.

Council Chamber, Council Offices, School Place, Kirkwall.



Present

Councillors David Dawson, Duncan A Tullock, Alexander G Cowie, Raymond S Peace and Jean E Stevenson.

Present via remote link (Microsoft Teams)

Councillors Graham A Bevan and Mellissa-Louise Thomson.

Clerk

- Sandra Craigie, Committees Officer.

In Attendance

- Hayley Green, Corporate Director for Neighbourhood Services and Infrastructure.
- Kenny MacPherson, Head of Property, Asset Management and Facilities.
- Les Donaldson, Service Manager (Safety and Resilience).
- Peter Trodden, Solicitor.

Scottish Fire and Rescue Service:

- John McKenna, Station Commander.

In Attendance via remote link (Microsoft Teams)

Police Scotland:

- Chief Inspector Alasdair MacLeod – South Highland Command Area.

Declarations of Interest

- No declarations of interest were intimated.

Chair

- Councillor David Dawson.

1. Scottish Fire and Rescue Service

Performance Against Orkney Fire and Rescue Plan

After consideration of a report by Iain Macleod, Local Senior Officer, copies of which had been circulated, and after hearing a report from the Station Commander, Scottish Fire and Rescue Service, the Sub-committee:

Scrutinised the statistical performance of the Scottish Fire and Rescue Service, Orkney Islands area, for the period 1 April to 30 June 2022, detailed in the Quarterly Performance Report, attached as Appendix 1 to the report by the Local Senior Officer, and obtained assurance that progress was being made against the objectives.

2. Performance Against Local Policing Plan – 1 April 2021 to 31 March 2022

After consideration of a report by the Area Commander, copies of which had been circulated, and after hearing a report from Chief Inspector Alasdair MacLeod, the Sub-committee:

Scrutinised progress in respect of the Orkney Islands Local Policing Plan 2020-2023, for the period 1 April 2021 to 31 March 2022, attached as Appendix 1 to the report by the Area Commander, and obtained assurance that progress had been made against the objectives.

3. Performance Against Local Policing Plan – 1 April to 30 June 2022

After consideration of a report by the Area Commander, copies of which had been circulated and after hearing a report from Chief Inspector Alasdair MacLeod, the Sub-committee:

Scrutinised progress in respect of the Orkney Islands Local Policing Plan 2020-2023, for the period 1 April to 30 June 2022, attached as Appendix 1 to the report by the Area Commander, and obtained assurance that progress was being made against the objectives.

4. Conclusion of Meeting

At 15:45 the Chair declared the meeting concluded.

Signed: David Dawson.

Minute

Asset Management Sub-committee

Thursday, 3 November 2022, 11:30.

Council Chamber, Council Offices, School Place, Kirkwall.



Present

Councillors Heather N Woodbridge, P Lindsay Hall, Steven B Heddle, James W Stockan and Ivan A Taylor.

Present via remote link (Microsoft Teams)

Councillors Jean E Stevenson and Mellissa-Louise Thomson.

Clerk

- Sandra Craigie, Committees Officer.

In Attendance

- Hayley Green, Corporate Director for Neighbourhood Services and Infrastructure.
- Sweyn Johnston, Head of Enterprise and Economic Growth.
- Kenny MacPherson, Head of Property, Asset Management and Facilities.
- Shonagh Merriman, Service Manager (Corporate Finance).
- Ian Rushbrook, Service Manager (Capital Programme and Property).
- Michael Scott, Solicitor.

Declarations of Interest

- No declarations of interest were intimated.

Chair

- Councillor Heather N Woodbridge.

1. Disclosure of Exempt Information

The Sub-committee noted the proposal that the public be excluded from the meeting for consideration of Item 5, as the business to be discussed involved the potential disclosure of exempt information of the classes described in the relevant paragraphs of Part 1 of Schedule 7A of the Local Government (Scotland) Act 1973 as amended.

2. Revenue Expenditure Monitoring

After consideration of a report by the Head of Finance, copies of which had been circulated, and after hearing a report from the Service Manager (Corporate Finance), the Sub-committee:

Noted:

2.1. The revenue financial summary statement, in respect of service areas for which the Asset Management Sub-committee was responsible, for the period 1 April to 30 September 2022, attached as Annex 1 to the report by the Head of Finance, indicating a budget overspend position of £82,700.

2.2. The revenue financial detail by service area statement, in respect of service areas for which the Asset Management Sub-committee was responsible, for the period 1 April to 30 September 2022, attached as Annex 2 to the report by the Head of Finance.

The Sub-committee scrutinised:

2.3. The explanations given and actions proposed in respect of significant budget variances, as outlined in the Budget Action Plan, attached as Annex 3 to the Head of Finance, and obtained assurance that action was being taken with regard to significant budget variances.

3. Corporate Asset Improvement Programmes – Expenditure Monitoring

After consideration of a report by the Head of Finance, copies of which had been circulated, and after hearing a report from the Service Manager (Corporate Finance), the Sub-committee:

Noted:

3.1. The summary position of expenditure incurred, as at 30 September 2022, against the approved corporate asset capital improvement and replacement programmes for 2022/23, as detailed in section 4.1 of the report by the Head of Finance.

The Sub-committee scrutinised:

3.2. The detailed analysis of expenditure figures and project updates, attached as Appendix 1 to the report by the Head of Finance, and obtained assurance with regard to significant budget variances and progress being made with delivery of the approved corporate asset capital improvement and replacement programmes for 2022/23.

4. Corporate Asset Maintenance Programmes – Expenditure Monitoring

After consideration of a report by the Head of Finance, copies of which had been circulated, and after hearing a report from the Service Manager (Corporate Finance), the Sub-committee:

Noted:

4.1. The summary position of expenditure incurred, as at 30 September 2022, against the approved corporate asset maintenance programmes for 2022/23, as detailed in section 4.1 of the report by the Head of Finance.

The Sub-committee scrutinised:

4.2. The detailed analysis of expenditure figures and project updates, attached as Appendix 1 to the report by the Head of Finance, and obtained assurance with regard to significant budget variances and progress being made with delivery of the approved corporate asset maintenance programmes for 2022/23.

Councillor James W Stockan left the meeting at this point.

5. Request for Transfer of Asset

On the motion of Councillor Steven B Heddle, seconded by Councillor Mellissa-Louise Thomson, the Sub-committee resolved that the public be excluded from the meeting for this item on the grounds that it involved the disclosure of exempt information as defined in paragraphs 6 and 9 of Part 1 of Schedule 7A of the Local Government (Scotland) Act 1973 as amended.

After consideration of a report by the Corporate Director for Enterprise and Sustainable Regeneration, copies of which had been circulated, and after hearing a report from the Head of Enterprise and Economic Growth, the Sub-committee:

Resolved to **recommend to the Council** what action should be taken with regard to a request to transfer an asset.

The above constitutes the summary of the Minute in terms of the Local Government (Scotland) Act 1973 section 50C(2) as amended by the Local Government (Access to Information) Act 1985.

6. Conclusion of Meeting

At 12:23 the Chair declared the meeting concluded.

Signed: Heather Woodbridge.