

<b>Meeting</b>	OLC Board Meeting	<b>Agenda Item No. Paper No.</b>	8 104.7
<b>Date of meeting</b>	27 April 2020	<b>Time required</b>	15 Minutes

<b>Title</b>	Quality Assurance Update
<b>Sponsor</b>	Rebecca Marsh
<b>Status</b>	OFFICIAL

**Executive summary**

This paper provides an update on key trends identified from the quality assurance framework in Q4 2019/20. Board are referred to the data sheet at Appendix 1 to be considered alongside the narrative.

Performance against quality measures remained broadly stable in Q4, with the level of risk generally low with the key risk remaining the wait time at the front end. Some positive improvements were noted in relation to the resolution of service complaints and overall performance against quality measures (summarised in IQR report).

For reference the framework includes: the Quality & Feedback Model; file reviews of open and closed cases; call handling reviews; RAG feedback provided by ombudsmen on every case plus specific feedback on any cases sent back; review of data relating to service complaints and escalations that do not proceed to a formal complaint; customer satisfaction data for customers using the CAT form to bring a complaint; at investigation stage and at the end of our process.

At the January 2020 Board meeting information was provided about the implementation of the 'Individual Quality Report' (IQR) which draws together key quality assurance metrics for Investigators into a single reporting tool for the first time and applies a risk rating logic. As requested at that meeting, the data sheet at Appendix 1 now includes a high-level summary for the IQR, illustrating the proportion of Investigator staff achieving a red / amber / green rating.

<b>Recommendation/action required</b>
Board is asked to note.

## Quality Assurance Update - Quarter 4 2019/20

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### Introduction

1. LeO's quality assurance framework includes a number of controls that identify potential problems while a case is ongoing, providing an opportunity for matters to be put right before closure. For the small number of cases that result in a service complaint, a dedicated team are increasingly effective at resolving those matters at the first attempt. The framework provides line managers with data to support the recognition of strong performance and identification of development needs. LeO's Quality Committee, whose members include the Chief and Head Ombudsmen, regularly reviews trend data from the framework and oversees improvement activity.
2. Overall the level of risk in relation to the quality of LeO's service, as considered against LeO's customer service principles and standards, remains low in Q4. While there are areas for improvement, the most significant area of risk remains the front end wait time. This risk is clearly understood and remains a key priority for the Executive.

### Customer Satisfaction

3. Satisfaction with LeO's service for complainants and service providers satisfied with the outcome of their complaint remained strong in Q4: 95% and 82% respectively (App 1. Fig CEQ1a&b). This has remained consistent over the year with the key driver of satisfaction for this group being quality of contact with LeO staff.
4. For complainants dissatisfied with the outcome of their complaint, satisfaction with our service remains below tolerance (7%). This too has remained relatively stable during the year and is in line with the previous year's results. Key drivers of dissatisfaction are concern about the thoroughness of our investigation; about our understanding of the complaint and bias. These issues can be difficult to unpick from dissatisfaction with outcome. Implementation of the Quality & Feedback model continues to improve communication at key stages to ensure that where customers do not get the outcome they wanted, they are clear about why and have been prepared for that outcome.
5. Concerns about timeliness also drive dissatisfaction for this group, and for service providers at the investigation stage (App1:CEQ1c), particularly in relation to front end wait times. Ensuring efficient progression of cases once

our investigation starts remains a key focus, as does providing more frequent communication for those customers waiting for assessment.

## Service Complaints

6. Service complaints represented less than 2% of the cases LeO received in Q4, and the number of new service complaints fell (26 in Q4). The proportion of complaints progressing to stage 2 and 3 of the process has continued to reduce to very low levels as it had in Q3, confirming an improvement in the efficacy of the dedicated Service Complaints Team in resolving concerns at the first attempt. Front end wait times continue to drive approximately 25% of service complaints and therefore further reduction is not expected until the front end wait time reduces.

## Quality Assuring our Service

7. Achieving outcomes for customers that are consistent with the scheme rules and guidance remain strong areas of performance in Q4, with almost all cases reviewed achieving a fair and reasonable outcome (Appendix 1 CEQ4b). The proportion of cases sent back by the ombudsman team for further investigation also remained well within the KPI limit of 10%.
8. Where outcomes were found not to have been fair and reasonable (5 cases in GET and 4 in RC) this was generally due to individual performance issues, rather than wider trends. Those 9 matters have been reviewed by a senior member of staff and coaching feedback provided. None of them resulted in potential disadvantage that meant the file needed re-opening. 3 of the RC matters related to understanding of the case fee. Quality Committee has agreed refresher training on this area will be provided.
9. Performance in relation to achieving customer service standards is more variable (Appendix 1:CEQ4(a&b)). GET performance remained strong (94%). Pool / Level 2 ombudsman performance has also been strong during the year. The dip in performance for this group in Q4 is accounted for by 8 cases dealt with by pool ombudsmen. Following review, 3 of those matters were addressed by provision of feedback, and in relation to the remainder a decision was made not to place further work with a pool ombudsman.
10. The proportion of Investigator / Level 1 Ombudsman cases fully meeting our customer service principles (Q4 78%) has remained below the 90% target during the year. 'We will make good use of everyone's time' (Q4 62% green / 18% amber) has been the key service area where shortcomings have meant the overall level of service was inadequate. 'We will be understanding and approachable' (Q4 71% green / 24% Amber) is also an area for improvement, though shortcomings in this area are much less likely to result in the service overall being assessed as unreasonable. Amber ratings reflect limited, rather than persistent, shortcomings in an area of service during the life of a file. Efficient progression of cases; and progression through the stages of the

Quality & Feedback model, are key factors in improving these aspects of the customer experience.

11. The IQR Summary chart (Appendix 1), which applies a RAG rating in relation to a range of quality measures for each active Investigator, illustrates that despite significant attrition, there has been improvement during the year with an increase in 'high amber' ratings and a decrease in 'low amber' across a range of measures.
12. LeO's quality committee continues to review quality performance on a monthly basis and oversee related improvement activity. Ability to progress improvement activity beyond line management activity, and progression through the QaF model, is significantly constrained by resource limitations.

## Conclusion

13. In summary, performance in Q4 was largely static but with welcome signs of improvement in relation to the resolution of service complaints and the proportion of Investigators achieving high amber rather than low amber ratings across a range of quality measures summarised in the IQR report.

Appendix 1: Quality Assurance Data Q4 2019-20

**LeO Quality KPI & Tolerance Report -Q4 (2019-20)**

**External KPIs**

**Customer Satisfaction- (CEQ1a & CEQ1b)**

Tolerance	% Customer Satisfied with Outcome	Complainants		Service Providers					
		Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
<b>85%</b>		97%	93%	92%	95%	80%	83%	84%	82%
<b>15%</b>		7%	14%	6%	7%	11%	7%	10%	12%

Tolerance: < 5% below target in one reporting period

**Quality (Internal KPI)**

**Cases assessed as meeting appropriate customer service (CEQ4a) & as having fair and reasonable outcome( CEQ4b)**

Tolerance	% All Cases that met our Customer Service Principles	General Enquiry Team			Investigator & Level 1			Pool & Level 2 Ombudsman					
		Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
<b>90%</b>		81%	93%	89%	94%	77%	85%	60%	78%	100%	88%	89%	78%
<b>95%</b>		88%	98%	91%	91%	96%	96%	93%	95%	93%	96%	100%	91%

Tolerance: < 5% below target for 2 consecutive reporting period

**Customer Satisfaction- (CEQ1c)**

Tolerance	% Customer Satisfied at Investigation Stage	Complainants		Service Providers					
		Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
<b>65%</b>		61%	58%	65%	62%	49%	50%	53%	52%

Tolerance: < 5% below target for 2 consecutive reporting period

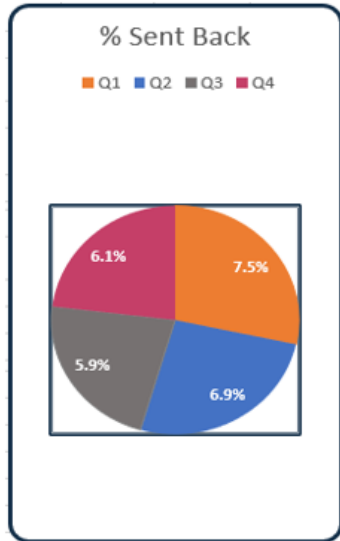
**Q4 IQR Summary- ( Green = 3, High Amber = 2.5-3, Low Amber= 1-2.5, Red = 1)**

2019-20	Investigators	Green		High Amber		Low Amber		Red	
Q1	<b>145</b> (inc 26 Lv1's)	77 (14)	53%	19 (1)	13%	47 (11)	32%	2	1%
Q2	<b>146</b> (inc 27 Lv1's)	94 (15)	64%	25 (4)	17%	27 (8)	18%	0	-
Q3	<b>114</b> (inc 7 Lv1's)	59 (5)	52%	34 (1)	30%	21 (1)	18%	0	-
Q4	<b>103</b> (inc 4 Lv1's)	54 (3)	52%	32	31%	17 (1)	17%	0	-

Continued...

**% Tasks & Decisions Sent Back by Ombudsman (IRE7)**

Tolerance: < 10%



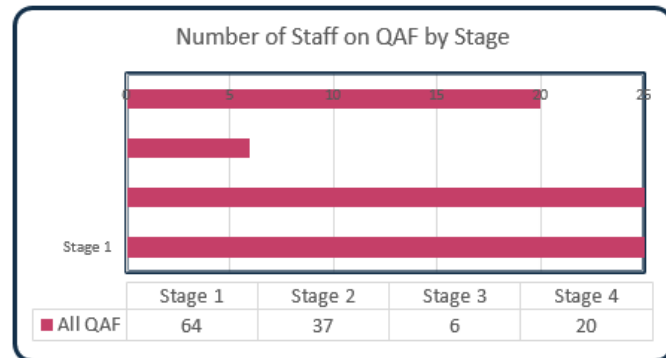
**Monthly Send Back %**

Apr	-5.6%
May	-8.4%
Jun	-7.9%
Jul	-7.8%
Aug	-6.6%
Sept	-4.9%
Oct	-7.0%
Nov	-4.7%
Dec	-5.9%
Jan	-4.8%
Feb	-7.4%
Mar	-6.1%

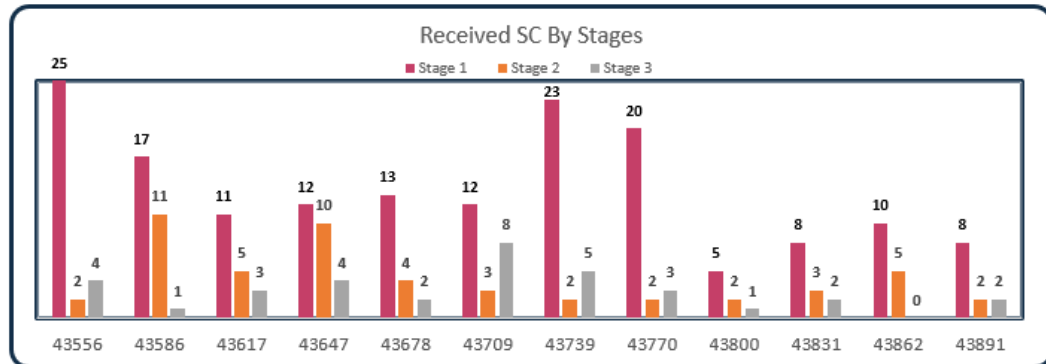
**Service Complaints Trends- (CEQ6a)**

Stages	Upheld % against all cases accepted for investigation	Quarter 1		Remedy Awarded
		% Issues Upheld against issued Closed		
1	3.35%	55.12%		£1,550 in Q1
2	0.63%	68.57%		
3	0.42%	55.56%		
Quarter 2				
Stages	Upheld % against all cases accepted for investigation	Quarter 2		Remedy Awarded
		% Issues Upheld against issued Closed		
1	1.99%	68.42%		£1,505 in Q2, Cummulative of £3,055
2	1.10%	59.38%		
3	0.31%	57.14%		
Quarter 3				
Stages	Upheld % against all cases accepted for investigation	Quarter 3		Remedy Awarded
		% Issues Upheld against issued Closed		
1	1.95%	63.10%		£2,250 in Q3, Cummulative of £5,305
2	0.44%	72.73%		
3	0.88%	59.18%		
Quarter 4				
Stages	Upheld % against all cases accepted for investigation	Quarter 4		Remedy Awarded
		% Issues Upheld against issued Closed		
1	1.78%	52.22%		£1,045 in Q4, Cummulative of £6,350
2	0.50%	73.91%		
3	0.50%	78.95%		

**Number of Staff on QAF by Stage**



**Total Service Complaints Received by Stage (2019/20)**



£1,045 in Q4, Cummulative of £6,350

FoI Exempt S42