

Annual Report and Accounts 2020-21



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PERFORMANCE: OVERVIEW

In this section of our report we explain who we are and what we do, highlighting key themes, achievements and risks.

The year in numbers

We handled
2,359 calls

First contact: [page 22](#)



Of all investigated complaints we upheld **246** and did not uphold **157** (61% of cases closed after investigation)

Complaints overview:
[page 26](#)



We received **3,130 complaints** (4,226 total when carried over last year's), and **closed 3,176**

Complaints overview:
[pages 25, 26](#)



Our Standards team responded to **251 enquiries**

Model Complaint Handling Procedures: [page 46](#)

251

We did not meet our **timescale** KPIs for public service complaints, the area of business most affected by **COVID-19**



Complaints overview: [page 29](#)

We **reduced our carbon footprint** by 29% against 2015-16 baseline



Managing the organisation: governance: [page 76](#)

We met or exceeded our SWF KPIs

Scottish Welfare Fund independent review service: [page 40](#)



91% enquiries were handled within **10 days**, just 4% short of our target, despite the impact of COVID-19

Complaints overview: [page 29](#)

We maintained **Investors in People accreditation gold status**

Managing the organisation: our team: [page 69](#)



We launched our **new online training courses** and delivered 11 complaints handling courses in Q4

Stakeholder engagement: [page 59](#)



We developed and delivered online training about the **Whistleblowing Standards**

Independent National Whistleblowing Officer service: [page 43](#)



We received **199 requests to review complaint decisions**, changing or investigating further just 0.3% of all decisions taken

Managing the organisation: governance: [pages 74, 75](#)

We received **funding of £6,079K**. Our expenditure was £5,882K

Managing the organisation: governance: [page 81](#)



We received **91 FOIs** and responded to 95% within timescales

Managing the organisation: openness and transparency: [pages 65, 66](#)



We made **740 recommendations to public bodies**, 52% being about learning and improvement

Learning from complaints: [page 50](#)

740

Ombudsman's introduction



To say 2020-21 was a challenging year is an understatement. Being subject to lockdown restrictions had a significant impact on everyone, complainants, Scottish public bodies and us. Significant does not necessarily mean negative. Lockdown presented the SPSO with challenges, but equally it presented us with opportunities to develop our business and approach.

I cannot begin to express how grateful I am for the dedication, commitment and adaptability of my team; my leadership team who steered and supported the organisation, managers at all levels who guided and supported colleagues, officers who endeavoured to deliver as close to business as usual as possible, colleagues who developed and delivered new functions, and the small group of volunteers who provided key worker support to the whole office.

I reported last year that 2019-20 was the year we implemented many changes and were starting to embed them. We knew we would end that year with a backlog

of unallocated cases, but were confident that the recovery plans in place, would reduce that backlog significantly in 2020-21. Lockdown affected our capacity to do this in a number of ways. Our approach was driven by values and risk.

- It took most of the first quarter to bring everyone onto the same technical platform so that we could carry out most functions remotely; this was not a new plan, but acceleration of an existing upgrade programme. This was critical to secure working and ensuring colleagues were equipped to carry out their functions and communicate and work collaboratively.
- Some functions took longer because of restricted access to the office (e.g. to open and process post). We had to adapt some processes and policies. This included, for example, Human Resources policies to support more flexible working, finance procedures to ensure that delivered remotely they remained robust and fit for

purpose and mitigated fraud risk, and information and data management to mitigate remote working risks.

- Investigations themselves were delayed because of our own reduced staffing resource, reduced availability of some clinical advisers, and delays in obtaining information from public bodies who themselves were struggling to maintain services. As explained later in this report, our staffing capacity was reduced by the equivalent of 3.6 full-time members of staff, 2.5 of them in public service complaints handling (a reduction of 8.5% of investigative capacity), because of the direct impact of the pandemic (but excluding COVID-19 related sickness absence). We do not have the flexibility to deploy staff for short periods, particularly into investigative roles, which require many months of training and building up of expertise. We also have other statutory functions that we were required to deliver.
- We continued to deliver an advice service for all stakeholders, particularly complainants. Unfortunately, our Freephone advice service was reduced to set hours, rather than our usual

office hours. This reflected the need to balance the well-being of colleagues working remotely with being as accessible to those who needed us. Our Improvement, Standards and Engagement team also provided an advice service for public bodies in relation to complaint handling.

The impact of this was both positive and negative, for example:

- There were unavoidably increasing delays in case investigation times, as reflected in case investigation performance. While complaint volumes reduced in the early part of 2020-21, our capacity to process what we had at that point was negatively impacted by other factors, such as reduced staffing because of the impact of home schooling and the timing of the rolling-out of IT. By quarter four we began to see complaints handling performance improve to being close to the previous year. We also saw a rise in public service complaints at the end of the year and going into 2021-22.
- We were unable to complete all of the project work in our business plan, as we focused as much resource as

possible delivering business as usual. Positively, however, we were able to seize the opportunity to bring forward other work, particularly on IT systems aimed at promoting more efficient and secure ways of sharing and managing information.

- While we did not reduce the number of unallocated cases, we reviewed how we managed and communicated with people about delays. We also took an active approach to identifying complaints from vulnerable complainants, those that were urgent because of a direct link to the COVID-19 pandemic, and those where there was an ongoing health and safety risk.
- Contact with our Assessment and Guidance team reflected the increasing difficulty complainants were having in getting responses from public bodies, to their complaints. This added significantly to the team's workload. The impact was mitigated by ensuring there was information for public bodies and complainants on our website, and by us actively communicating with public bodies to remind them of their duties to respond to complaints. We recognised the difficulties public bodies faced, but

If I could sum-up SPSO's performance in one statement, it is this: We performed well in the phase of adversity, never lost sight of our values, duties or commitments, and discovered innovative new talents we never knew we had.

equally, communication and complaint handling became more important than ever under lockdown.

- The vulnerability of people accessing Scottish public services became more acute. For some, this was caused directly by the COVID-19 pandemic. Irrespective of the pandemic, we achieved our aim of protecting staff and ensuring that we identify and prioritise complaints from vulnerable people. During the pandemic, not only did we prioritise complaints, we also ensured that our Scottish Welfare Fund review service was maintained with no drop in performance.

- The implementation date of the new Independent National Whistleblowing Officer for the NHS was delayed. We took the opportunity to deliver extra resources such as online training, engage with stakeholders and bring forward development of our own casework approach.

If I could sum-up SPSO's performance in one statement, it is this: We performed well in the phase of adversity, never lost sight of our values, duties or commitments, and discovered innovative new talents we never knew we had.

Risk and business development

Our two significant areas of risk over the last year were data security and resources.

In terms of data security, this required immediate guidance for staff who were unused to being home based, and close and continuous monitoring. It was also a major driver in accelerating our IT systems development. While the underlying aim was to reduce the likelihood of data loss, there were other business benefits; development

of our business model to being more electronically based, and of our digital services, being the main ones.

Inadequate resourcing remains our most significant area of risk. This would be the case, irrespective of the impact of COVID-19.

What COVID-19 has shown us is that our business resilience is undermined by events that reduce capacity. We went into the year recognising that we were operating on the minimum resource required to meet our statutory functions to the standard and quality our values demand of us. We also knew we were unlikely to receive an increase in our budget. To mitigate resourcing constraints, we had already been focusing on efficiencies, including revised ways of working and decision-making on public service complaints (as set out in last year's performance report). We were confident that we could maintain and in some areas improve performance should we receive similar volumes of complaints. COVID-19 interrupted that *and* reduced our capacity further.

The impact of resources constraints was not uniform across our functional teams, and different mitigating actions were taken as a result. For example, to ensure we met the challenges COVID-19 presented to the delivery of the Scottish Welfare Fund, we prioritised the roll-out of updated IT and home-based working. We also sought additional resource to cover the introduction of the Self-Isolation Support Grant. The result was that we met or exceeded KPIs.

Public service complaints resources were more challenging to mitigate, as we did not have the flexibility to allocate additional resources from other areas of the organisation. Where possible we sought contingency funding, we also put in place supporting administrative functions, and managed communication about unallocated cases with complainants. COVID-19 related and urgent cases were prioritised, and in line with our existing approach, we focused on older complaints. While productivity in the handling of public service complaints had improved by the end of the year, the final quarter showed a dramatic rise in the number of complaints we received and the risk has now shifted to being one of ensuring impact.

We monitored the impact of EU withdrawal. The main impact of EU withdrawal was unlikely to emerge for some time, but this was not a significant risk for the SPSO as it is indirect. We were mindful of the Scottish Government's publications on the impact of EU withdrawal on different sectors in Scotland. We anticipated that the likely impact for SPSO would be in relation to complaint volumes in those sectors whose capacity was most likely to be affected. In practice, complaint volumes were more affected by COVID-19, which masked the actual impact, if any, of EU withdrawal.

Looking forward

We continue to learn from our experience and to build on the positive learning and improvements, as well as mitigate the negative. Our values remain at the heart of what we do and inform how we balance the needs of our users, with supporting colleagues, driving complaint handling improvements and being as efficient and effective as we can.

We are looking forward to building on the very positive outcome of our staff survey which showed significant improvement in many areas, particularly management and leadership. We will use the learning and feedback from this, and our Investors in People review to build on this.

We also need to be realistic, and as I discuss in the looking ahead part of the report, capacity and resourcing are key to this. Staff resources are not only of concern in relation to performance and service user satisfaction, but are an area shown to be of concern to staff in the response to our staff survey.

Finally, I would like to thank everyone who has taken the time to give us positive feedback, particularly recognising the work of individual staff. One positive word makes a huge difference at any time, but even more so during lockdown.



Rosemary Agnew
Scottish Public Services
Ombudsman

SPSO's role and function

Our role

The Scottish Public Services Ombudsman's role is defined and created by statute. The Ombudsman's powers and duties are set out in the SPSO Act 2002:

- we are the final stage for complaints about most devolved public services in Scotland including councils, the health service, prisons, water and sewerage providers, Scottish Government, universities and colleges
- we have specific powers and responsibilities to publish complaints handling procedures, and monitor and support best practice in complaints handling
- we are also the independent review service for the Scottish Welfare Fund with the power to overturn and substitute decisions made by councils on Community Care Grant and Crisis Grant applications
- we are the Independent National Whistleblowing Officer for the NHS in Scotland, since 1 April 2021

Like any other public body, we are also subject to other legislation and statutory guidance in relation to how we manage our staff and deliver our statutory functions.

While the majority of our resources are consumed in and the most public of our work is public service complaints handling, we are adding value to Scottish public services in many ways. We:



set and monitor complaints and whistleblowing standards and performance



help people in crisis and need



promote the importance of local resolution, consistency of decision-making and the value of good complaint handling



encourage learning for improvement to enable more efficient delivery of Scottish public services long-term.

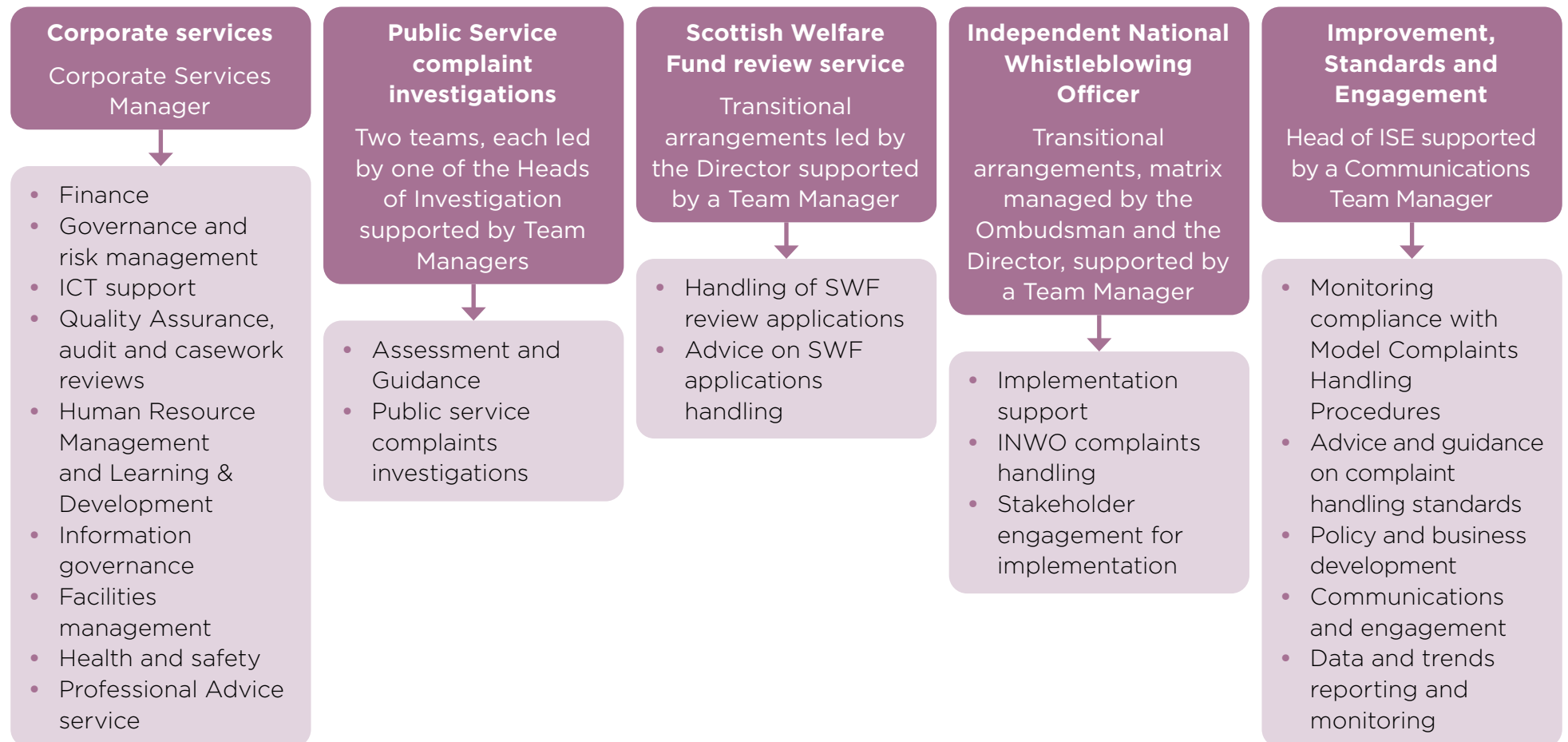


Who does what?

Leadership responsibility

- The Ombudsman has overall responsibility for the organisation, case decisions and is the accounting officer
- Our leadership team set the strategic direction of the organisation, are responsible for governance and consider and approve policies

Operational delivery by function



Our vision, values and strategic aims

At the SPSO, we are driven by our values and vision. In particular, we are people-centred and improvement focused.

Vision

We contribute actively and positively to high performing Scottish public services. Recognised for our innovative world-leading approach, we put people and learning at the heart of all we do.

Values

We are committed to living our values to deliver our functions efficiently, effectively and economically. While our remit is wide, and expanding, we aspire to deliver our business coherently and consistently across all functions. We strive to continue to give great service to all who come to us; whether to make a complaint about a public body, seek our advice and support, ask for a review of a Scottish Welfare Fund decision or complain about how the NHS has handled a whistleblowing concern.

Strategic themes

We live our values through four strategic themes that drive our activity and annual business plans. Our **Strategic Plan 2020-2024** defines our strategic themes and objectives as, Accessibility, Access to justice, Capacity and Standards.

Sitting under each of these strategic themes are fifteen strategic aims. Progress against these is on page 16.



PERFORMANCE: ANALYSIS

In this section of our report we explain our performance in more detail, setting out for each of our functional areas achievement against key performance indicators (KPIs) and how the COVID-19 pandemic affected our performance.

Please note that percentages in this report are rounded. Therefore, totals may not always equal 100%.

Quarterly figures are provided in some sections to illustrate the fluctuation in figures across the year and to enable broad comparisons with previous years. These figures are taken from management information gathered at the end of each quarter. They represent a snapshot at the time, and therefore will not necessarily add up to the overall annual figure, as annual statistics are gathered and quality assured based on the position at the year-end.

For example, a case may be opened in one quarter, closed as a premature complaint in another quarter and subsequently reopened again. This case would appear as an open case in the annual statistics, but would have been identified as a closed case in the relevant quarter where that activity happened.

Quarterly figures for 2019-20 were recreated, based on year-end figures so there will be small inconsistencies.

Progress against strategic themes

Although we did not deliver every item to plan, we made good progress against our strategic aims, as the examples below illustrate.

Accessibility

Everybody who uses Scottish public services can access them without barriers, when they need them, in the way they need to. People are always treated with dignity, respect and kindness.

Strategic aim	Progress
1. We will develop and monitor the Model Complaints Handling Procedures and Model National Whistleblowing Standards, to ensure accessibility is integral to public bodies' complaints handling	<ul style="list-style-type: none"> ✓ We supported public bodies in achieving compliance with updated model complaint handling procedures ✓ We engaged with the NHS to support preparation of the Whistleblowing Standards in April 2021 ✓ We reported outcomes and findings of casework regularly, through a variety of media
2. We will make our own services as accessible as they can be	<ul style="list-style-type: none"> ✓ We made improvements to our online complaint form ✓ While we maintained a phone service, this was on reduced hours. We offered, and continue to offer, the service. It is available at different times on different days so it is accessible to all ✓ We continued to review and update our website to ensure all stakeholders received timely information about our services during lockdown
3. We will push for legislative change to enable us to make our services and those of other Scottish public bodies accessible	<ul style="list-style-type: none"> ✗ The pressure on resources and the impact on parliamentary business meant we did not publish a report calling for a review and extension to our powers (in particular the ability to take complaints in any format and to conduct investigations under our own initiative without the need for a complaint) as planned. This was carried forward to 2021-22 ✓ We contributed to a range of consultations
4. We will continue to develop relationships with our stakeholders to both learn from and to contribute to fair, accessible Scottish public services	<ul style="list-style-type: none"> ✓ We worked with the Scottish Government to implement the new Self-Isolation Support Grant ✓ We reviewed our memoranda of understanding with a number of public bodies, replacing some with information sharing agreements that enable sharing of learning

Access to justice

People have, and understand how to, access gateways to justice if things go wrong with public services. They receive proper explanations and fair redress, in a way that they feel listened to and supported.

Strategic aim	Progress
5. We will deliver our statutory functions in line with legislative requirements and our published customer service standards and performance targets	<ul style="list-style-type: none"> ✓ We maintained our full range of services during lockdown ✗ We did not meet all of our performance targets for public service complaints ✓ We met or exceeded all of our SWF Review service targets
6. We will contribute to the development of the wider access to justice environment through engagement with relevant groups and stakeholders such as the UK Access to Justice Council, the Open Government Partnership, and other commissioners and ombudsman services	<ul style="list-style-type: none"> ✓ We are active members of the Access to Justice Council ✓ We had regular stakeholder contact with other Ombudsman services and groups, to identify and share learning and good practice



Capacity

SPSO and Scottish public services have the capacity to deliver their functions effectively and fairly. They are adequately resourced, and have the necessary enabling infrastructure and well-trained staff who are supported to deliver the service.

Strategic aim	Progress
7. We will continue to push for adequate funding for our functions and seek to develop a more sustainable funding model, recognising the annual budget process but challenging, where appropriate, how it is applied	<ul style="list-style-type: none"> ■ Ongoing dialogue with Scottish Parliamentary Corporate Body (SPCB) and other Parliamentary office holders, interrupted by COVID-19 restrictions ✗ COVID-19 enduring impact will require additional resources for successful recovery in relation to public service complaints performance
8. We will assess and mitigate the impact of the COVID-19 pandemic on our capacity and that of public bodies and other stakeholders to deliver an effective service which meets published standards	<ul style="list-style-type: none"> ✓ We actively monitored the impact of COVID-19 through performance and governance systems ✓ We made temporary changes to some systems, such as flexitime recording to ensure we could monitor impact ✓ We accelerated our IT replacement programme to bring all staff onto the same IT platform
9. We will be acknowledged for having well-trained, properly supported people, who have the tools they need to deliver our services	<ul style="list-style-type: none"> ✓ We maintained our IIP Gold status
10. We will build or maintain our capacity, financial, human and infrastructure, to implement and deliver our statutory functions	<ul style="list-style-type: none"> ✓ We accelerated delivery of a number of IT projects to enable more efficient and secure electronic data sharing ✓ We put in place a range of wellbeing support resources ✓ We developed online induction training for staff ✓ We implemented and continue to develop use of online collaborative tools and platforms
11. We will review and develop the support, guidance and training we offer to public bodies, complainants and whistleblowers to enable them to develop their own capacity, in particular the NHS in developing its capacity in respect of whistleblowing	<ul style="list-style-type: none"> ✓ We developed, and delivered web-based complaint handling training ✓ We developed and delivered online training modules on the INWO standards ✓ We contributed to the induction of Whistleblowing Champions

Standards

Public services are delivered to the standard required and expected. They are supported and enabled by robust governance structures that ensure that public bodies comply with legislation and standards, and learn from experience; theirs and others, good and poor.

Strategic aim	Progress
12. We will monitor Scottish public bodies' complaint handling, Scottish Welfare Fund applications and whistleblowing handling, holding them to account for poor performance and giving credit for good performance	<ul style="list-style-type: none"> ✓ We communicated with the Scottish Government about changes to SWF guidance ✓ We maintained our approach of identifying and raising learning for public bodies through recommendations, feedback and our Support and Intervention policy ✓ We communicated directly with Scottish public bodies about their continuing duties to respond to complaints
13. We will develop our capacity to gather and share information to enable us to make informed and beneficial interventions when complaint, whistleblowing and Scottish Welfare Fund services fall below accepted standards	<ul style="list-style-type: none"> ✓ We reviewed and redesigned our management reporting dashboard to improve our monitoring and decision-making in relation to resources and capacity ✓ We continued to develop our intelligence gathering from casework across all our functions ✓ We are members of the Sharing Intelligence for Health and Care group ✓ When able to work fully online, we continued to share learning and experience internally through a number of communities of practice
14. We will review the Model Complaints Handling Procedures and National Whistleblowing Standards, to ensure they remain fit for purpose	<ul style="list-style-type: none"> ✓ We developed additional guidance to support the updated public service model complaints handling procedures, e.g. guidance on vulnerability and a video overview of the changes made to the MCHP
15. We will contribute to the development and/ or review of other standards and guidance to ensure they deliver services to the standards required	<ul style="list-style-type: none"> ■ We continued to monitor and report against customer service standards. While performance was generally good, complaints about delay caused by the impact of COVID-19 and the ages of unallocated cases, were upheld ✓ We contributed to a range of public consultations ✓ We contributed and continue to contribute to the Scottish Government's implementation of a Patient Safety Commissioner ✓ We contributed to international standards discussion and development, for example The Venice Principles

Business plan

Strategic themes and aims drive our business planning. There is a direct link between every part of our business plan and our strategic themes and aims. Progress over the year was, as explained elsewhere in this report, impacted by COVID-19.

Of our 211 items in our business plan, we met our objectives in 158 of them. Some items we carried forward because we could not pursue them under lockdown, and some were completed but failed to meet performance targets (recorded as not achieved).

Further detail about our performance against our business plan is available on [our website](#).

Business plan progress	Total
Exceeded	4
Completed	111
Ongoing work on target	43
Ongoing work where there is slippage	17
Not achieved	3
Discontinued	3
Not started	5
Carried forward	25
Total	211



First contact

Delivering a responsive and accessible frontline service during 2020-21 was testing. While working from home during the pandemic, our Assessment and Guidance team has continued to provide a largely uninterrupted service to members of the public and prisoners.




Where, when and how we deliver our service had to change. Our dedicated frontline team of six members of staff prioritised work and matched skills and resources to focus on continually changing pressure points. We worked hard to support service users and each other during an unprecedented year.

Whilst the year presented challenges, it also created opportunity to develop our communication channels and the guidance and support that we offer. As a result, we have experienced a channel shift in how members of the public are accessing our service and we have improved our capacity to process complaints entirely electronically.

67% of complaints that we received during 2020-21 were submitted via our webform.



We receive enquiries and complaints through a variety of channels:

-  0800 Freephone telephone number
-  email and website forms
-  post

During the last year we have experienced a rise in enquiries and complaints being submitted to our office via our website.

Electronic complaint submissions have increased; 67% of complaints that we received during 2020-21 were submitted via our webform. We developed our webform to ensure we are receiving the right amount of detail and supporting documentation from complainants. The improved form allows us to make an initial assessment of complaints as early as possible and offer a realistic timescale of when complaint investigation staff will be in a position to consider the complaint in detail.

We improved the accessibility of our service for prisoners by developing a telephone message function that prisoners can access at any time to tell us that they plan to submit a complaint and request a hard-copy complaint form.

We have offered flexible times for members of the public to contact us for advice throughout the week and offered advice on 2,359 calls. Our general email address was very busy and we had one dedicated staff member responding to all email messages within only a few days.

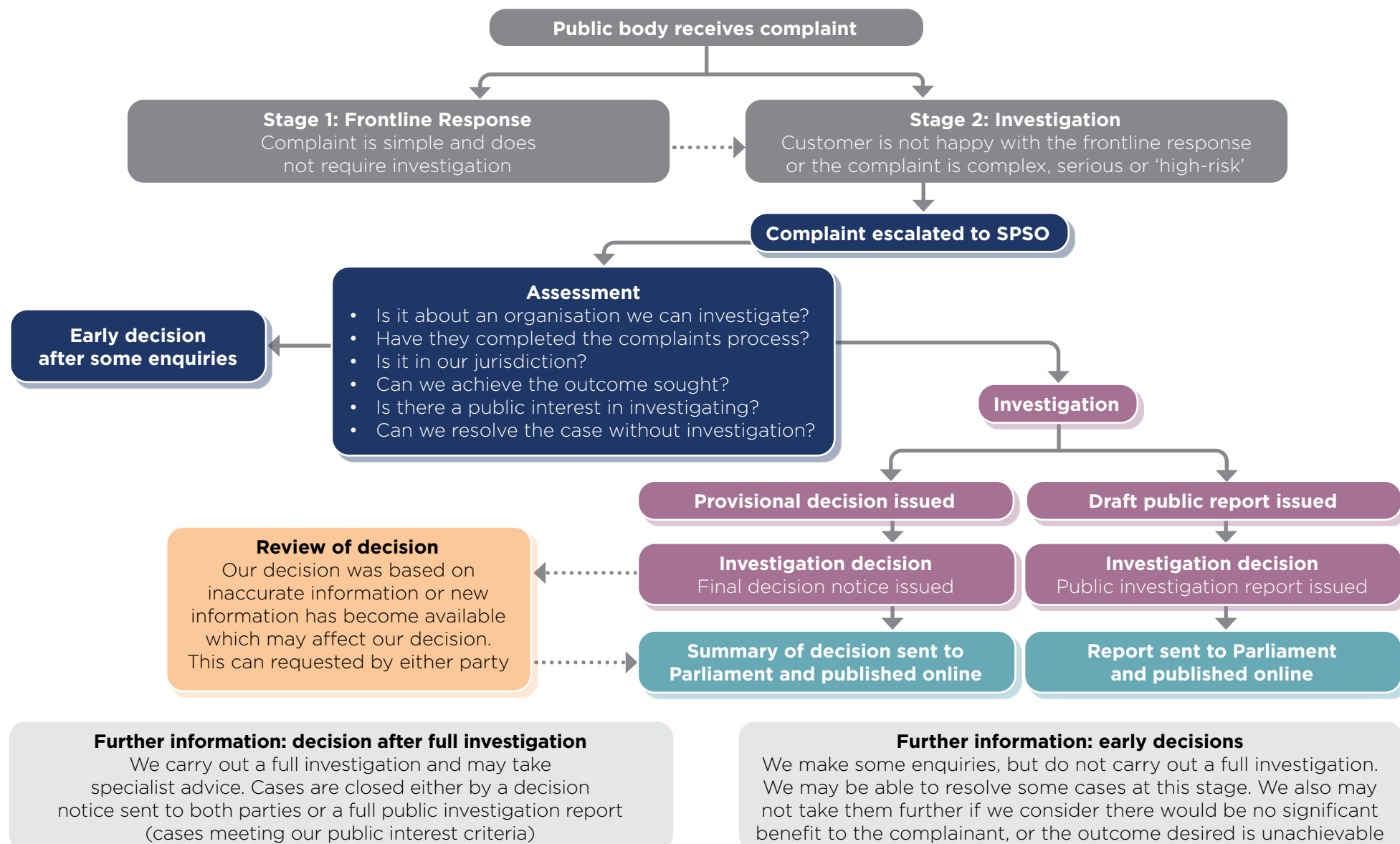
In recognition of the increased online contact, we have produced a video, which gives information on how to complain to public sector organisations and when and how SPSO consider complaints. The video is available on our website.



We met with the Patient Advice and Support Service, the Scottish Independent Advocacy Alliance and the Equality Advice and Support Service who advise and/or support members of the public with complaints to learn more about their services and when it is appropriate for us to refer to these organisations. Refreshing and developing our links and understanding of support and advocacy services was particularly important this year. Our frontline team regularly observed the difficulties that the pandemic had on our service users. We developed information about organisations that we can signpost to for specific support. Further to a presentation that was delivered to all SPSO staff from the Scottish Independent Advocacy Alliance, a page is now available on [our website](#) detailing the benefits of advocacy and how to access an advocacy service.

We have also been increasingly made aware of the delays and difficulties that complainants have experienced in receiving a response to their complaints from various public service providers during 2020-21. The team provided extra assistance to many complainants to help them to obtain a response to their complaint. This experience will help SPSO to develop an approach to support complainants effectively and highlight these issues to public service organisations and water providers during 2021-22.

Complaints overview



Caseload

We monitor casework numbers closely throughout the year. This is important for our performance management and resource planning. We publish and share this information with the organisations we work with and other stakeholders to help support and improve complaints handling at a local level, and to reduce the numbers which escalate to us. We also use it to inform how we design our own systems and measure effectiveness.

	2020-21	2019-20	% change	2018-19	2017-18
Complaints received	3,130	4,332	-27.7%	4,188	4,125
Complaints carried forward from previous year	1,096	841	+30.3%	595	702
% of caseload carried forwards	26%	16%		12%	15%
Total caseload	4,226	5,173		4,783	4,827

In 2020-21 we received 3,130 complaints.

The fall in case numbers received in 2020-21 was largely as a result of a fall in cases within the first three months of the year during the first lockdown. Unlike other years, the cases received varied and by the end of the year the number of cases being received had returned to 2019-20 levels. As the cases received by quarter show, it was only in quarter four that case volumes were comparable with the previous year.

Cases received by quarter	Q1	Q2	Q3	Q4
Number received 2020-21	627	809	892	1,025
Number received 2019-20	1,200	1,116	1,078	1,070

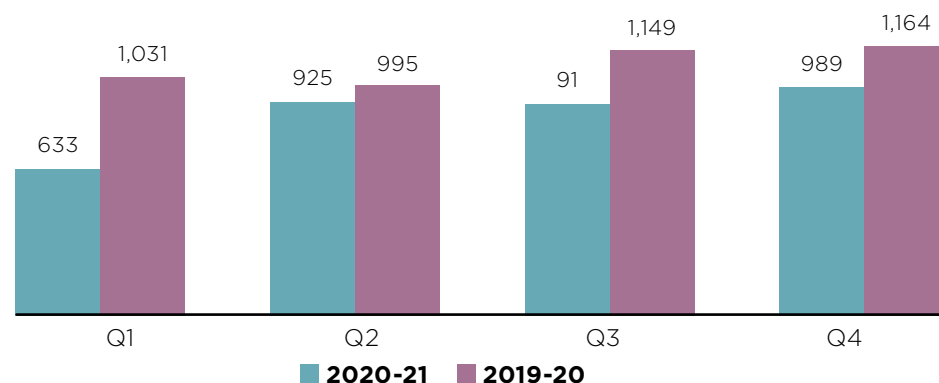
Cases carried forward - compared to the two years before 2020-21, the number of cases carried forward as a proportion of the total caseload for the year was much higher than normal. This is largely the result of the sharp rise in cases received towards the end of quarter three, and in quarter four.



Complaints at a glance

Type	2020-21	2019-20	% change	2018-19
Total cases closed at assessment	2,756	3,511	- 21.5%	3,285
Out of jurisdiction	194	329	-41%	351
Premature	651	784	-17%	798
Not investigated further	1,911	2,398	-20%	2,136
Total cases closed after investigation	420	588	-29%	670
Upheld in full	145	182	-20%	237
Upheld in part	101	150	-33%	142
Not upheld	157	239	-34%	272
Not duly made, or withdrawn	12	11	+9%	14
Outcome unachievable	0	1	-100%	0
Resolved	5	5	0%	5
Total number of cases closed (at assessment and after investigation)	3,176	4,099	-22.5%	3,955

Cases closed by quarter



As with cases received, there was a significant impact for SPSO on closure rates during the first part of the year as a result of the lockdown, contributing to the overall lower output than the previous year. In line with Scottish Government guidance, SPSO moved to home-working for the majority of our team. We took quick and decisive steps to ensure that our complaints service continued to function throughout, but it took several weeks to equip all staff fully to be home-based. There was inevitably an impact on productivity during the year during the transition to home working. This is reflected in the drop in case closures and the lower output in the first quarter.

Lockdown itself had significant impact on us, for example working time lost for caring, home-schooling and simply the logistics of keeping the organisation running remotely. We tracked this and have calculated that during lockdown, we lost working days equivalent to 2.5 full-time complaints reviewers, 8.5% of our investigative capacity in COVID-19 related absences, as well as having to re-deploy some investigative resources to key worker duties.

Premature complaints rate

The actual number of premature complaints received fell along with all other areas of complaint (a premature complaint is one that has not been considered by the public body first). However, for the first time in a number of years the proportion of premature complaints within our overall caseload grew slightly (by 1%). Against a backdrop of good progress over several years, this increase reflects the fact that some public bodies have found it challenging to meet the timescales set out in the **Model Complaints Handling Procedures** during the pandemic. The SPSO issued advice to public bodies by letter and on our website about how to approach these challenges, ensuring that they continue to communicate well with service users even where they are unable to meet timescales, giving reasons and anticipated timescales.

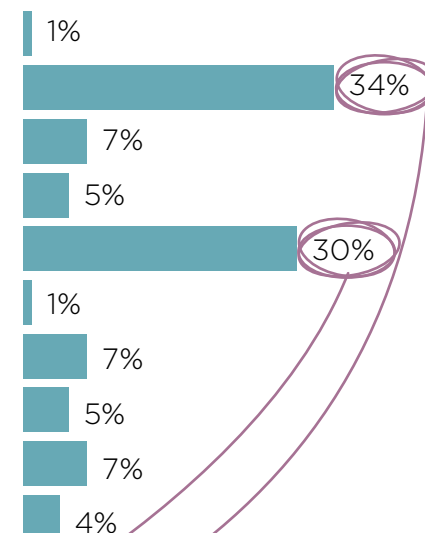


Complaints received by sector

Cases received by sector

Authority Sector	2020-21	2019-20	% change 2019-20 to 2020-21	2018-19	2017-18
Colleges	21	29	-28%	32	40
Health (including prison health)	1,056	1,562	-32%	1,451	1,403
Housing Associations	224	338	-34%	323	325
Joint Health and Social Care	163	214	-24%	209	126
Local Authority	951	1,327	-28%	1,301	1,474
Other	33	28	18%	50	59
Prisons	219	310	-29%	313	275
Scottish Government & Devolved Administration	147	220	33%	181	199
Universities	205	161	27%	164	129
Water	111	143	-22%	164	95
Total	3,130	4,332	-28%	4,188	4,125

Proportion of complaints by sector



The biggest changes from last year are the fall in the number of complaints in our two largest sectors, health and local authority complaints. We think this reflects the fall in the first two quarters and that it took longer for some people to complete the local process first.

Key performance indicators (KPIs)

Responding to complaints in a timely manner is one of SPSO's key **service standards**. Case age is monitored regularly and closely throughout the year. This year, performance indicator (PI) 3 has been particularly impacted by the process and resourcing challenges of lockdown, and we have not maintained the level of output to which we aspire.

Performance indicator	Description	2020-21	Q1	Q2	Q3	Q4	2019-20	2018-19	2017-18
PI1	95% of advice stage complaints handled within 10 working days	91%	84%	80%	95%	97%	100%	100%	100%
PI2	95% of early resolution complaints decided or moved to more complex investigation stage within 70 working days	60%	62%	56%	60%	65%	66%	89%	85%
PI3	85% of investigation complaints decided within 260 working days	46%	68%	50%	47%	26%	81%	97%	97%

Performance against KPIs by quarter

There have been different challenges throughout the year working to our three performance measures. For PI1, which measures timescales for providing advice, once we were able to have our systems and processes functioning as normal we were able to work to our usual PI. For PI2 and PI3, the lack of access to IT systems at the start of lockdown and ongoing resourcing challenges throughout, meant that whilst we have managed to raise productivity levels in line with 2019-20 levels, case ages have increased significantly and this impacted particularly on our investigation cases. This will be a trend that continues into quarters one and two of 2021-22, as we simply do not have the investigative capacity to close more cases.

Case assessment

We tell people as soon as we can what action we can and will take on a complaint. We explain whether their case can be resolved, is something that we can legally look into, and whether an SPSO investigation is beneficial to them. We call this stage assessment. In 2020-21 we introduced new ways of coding these decisions. This allows us to provide more transparent information about when and why we are making decisions not to investigate.

Assessment outcomes	Number of cases	Description
Cases we legally can't investigate	137	These are cases where someone brings us a complaint the law says we can't investigate. In 2020-21 these were mostly because the organisation (30) or the subject matter (86) was not in jurisdiction
Cases where a legal test says we can't investigate unless we identify reasons to dis-apply the test	57	These are cases where the law says we shouldn't investigate unless we identify good reasons why the test shouldn't apply, for example, 40 were out of time.
Cases closed before investigation	1,338	These are cases which met the statutory tests but there were good reasons not to investigate. We explain these in more detail below. Our aim is to provide a realistic and efficient service that focuses on public interest and, in particular, what can be achieved for the complainant.
Premature	651	Premature complaints are cases that have not completed the public body's complaints process. It is important that authorities are given the opportunity to address complaints first as it is to the complainant's advantage, and provides an opportunity for learning.
Unable to proceed	573	These are cases where we had a contact from someone but then couldn't proceed. This was usually because we asked for more information but the person did not respond.
Total	2,756	

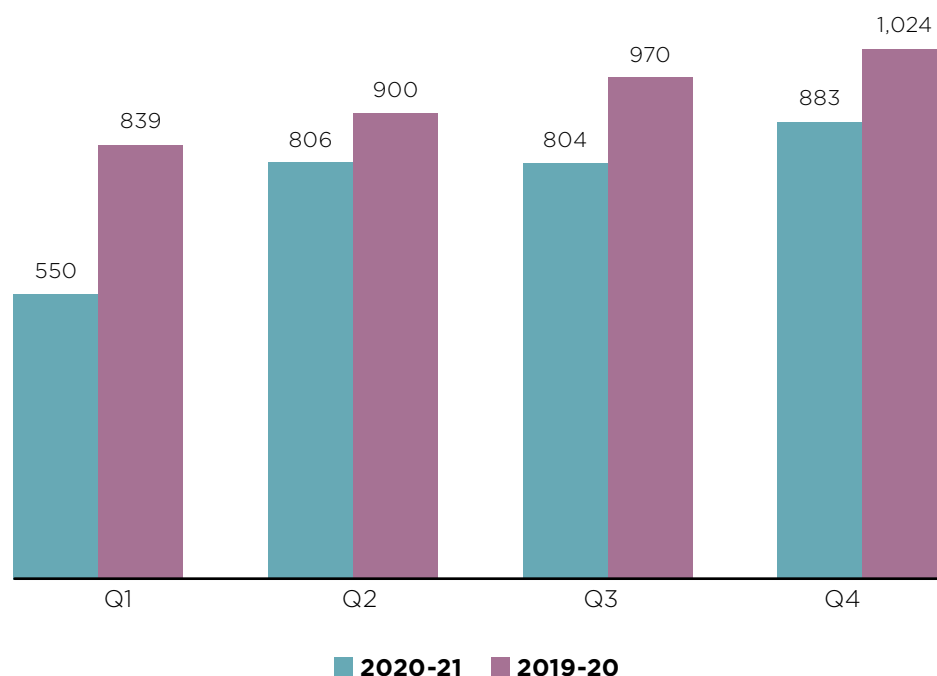
Breakdown of cases we decided not to consider further

Reason we did not investigate	Number of cases	Description
Referred back to organisation	89	Cases where the complaint handling had been poor and we asked the organisation to take steps to remedy this
SPSO proposed alternative action	55	Cases where we considered there was action the organisation should take and asked them to do this. If they comply, these cases don't go to investigation
Alternative route used or available	30	Cases where there is another organisation who already has or could investigate
Good complaint handling	908	Cases where the complaint had been well-handled by the organisation and we decided not to consider further. This is new, and is designed to help us show when we don't investigate fully because a good investigation has already been completed by the organisation (682) or where the organisation has accepted a failing and offered an appropriate solution or suggested an option to resolve (226).
No further benefit could be achieved by an investigation	256	Cases where we considered we could not achieve more by considering further
Total	1,338	

Impact of COVID-19

SPSO closed around 13% fewer cases at the assessment stage in the process compared to 2019-20, largely as a result of the impact of lockdown in particular at the start of the year. This is consistent with other performance and statistical information.

Cases closed at assessment stage per quarter

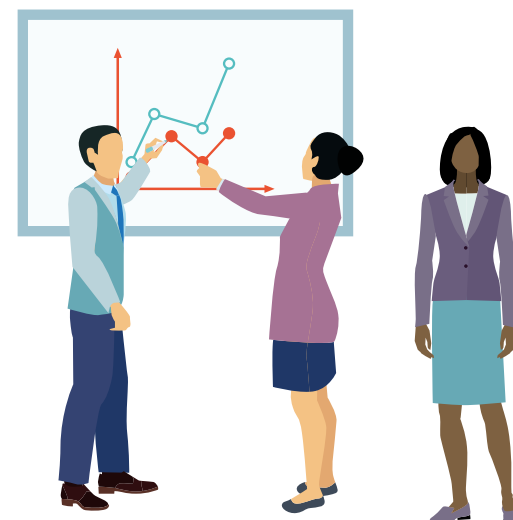


Normally, to help us manage our caseloads, following initial assessment all cases that require further consideration are held in an allocation pool pending allocation. Before cases are held, they are assessed to identify high priority, time critical cases.

We reviewed this approach in light of the pandemic, and as a result we extended our criteria for prioritising cases to ensure the most vulnerable complainants were prioritised.

We also reviewed what we communicate about cases being held in the allocation pool, as we felt it important to be realistic with people. As a result we confirmed the length of time people could expect for it to take before their case would be allocated and invited them to contact us with any additional information.

Despite operational and resourcing challenges, the number of unallocated cases remained around the same level throughout the year as a result of close monitoring and targeted work to manage it. The challenge for SPSO moving into 2021-22 is to continue to focus on reducing the waiting times for allocation for cases within the allocation pool.



Complaints investigations

Investigations completed

As with assessment cases, investigation case closures were lower for the year as a whole and in particular quarter one of the year due to the impact of lockdown. Lockdown impacted directly on both our capacity and the capacity of public bodies to respond to our enquiries. This had the double impact of resulting in few cases closed, and of the time taken to close them.

Cases closed per quarter

	Q1	Q2	Q3	Q4
Closed at investigation 2020-21	83	119	112	106
Closed at investigation 2019-20	138	149	169	136

Public reports

Each year we publish a number of cases in full where there is evidence of significant personal injustice or hardship, systemic failure, significant complaints handling failures or where it is a test case in a new area that others could learn from. In 2020-21 we published seven public reports.

Cases that are not published in full as public investigation reports are usually published as decision summaries. Public reports and decision summaries can be found on [our website](#).

Uphold rate

2020-21	2019-20	2018-19	2017-18
61%	58%	58%	59%

In 2020-21, we continued to develop our approach to ensure proportionate, but robust, investigation of cases. We want our case handling to deliver good outcomes, not unrealistically raise expectations of what we can achieve for complainants, promote learning and improvement and to be effective and efficient use of limited public resources. This means where we have evidence that the public body has already carried out a thorough investigation and/or taken appropriate action in response to complaints, we do not consider them further by carrying an investigation beyond our initial enquiries.

The rise in the uphold rate at investigation reflects the impact of this approach because we focus greater resource on the cases where the public body hasn't carried out a thorough investigation, implemented actions, or identified and acted on lessons learned.



Independent advice¹

Number of advice requests completed

Type	2020-21	2019-20	2018-19	2017-18
Clinical	524	821	935	1,002
Social work	66	69	120	34
Other	41	91	109	133
Total	631	981	1,164	1,169

Overall the number of advice requests fell by around 36%. This was anticipated given the fall in cases received in particular within the area of health, where the demand for advice is greatest. At points in the year there have been difficulties in sourcing timely clinical advice particularly for specialisms most impacted by COVID-19 but we have been successful in progressing all advice requests, with great thanks to the clinicians who act as advisers under at times very difficult circumstances.

Closed cases requiring multiple independent advice

Number of requests	2020-21	2019-20	2018-19	2017-18
1 request for advice	399	530	560	512
2 or more requests for advice	232	178	254	254
Total	631	708	814	766

The increase in the number of cases requiring two or more requests for advice is an indication of increasing multi-specialism of casework. In 2019-20, 75% of requests were for a single piece of advice whereas this fell to 63% in 2020-21.



¹ Expert, independent advice SPSO takes to inform decisions.

Scottish Welfare Fund independent review service

Handling applications for reviews of local authority (council) decisions about the Scottish Welfare Fund (SWF) is a priority area of work for us. This is because it is subject to statutory timescales, but more importantly for us, it is access to justice for people in need; often very vulnerable and in difficult circumstances.

Our highly committed SWF team delivered a seamless service going into lockdown. Our leadership team ensured they had the equipment and access to IT systems to continue to deliver services as normally as possible.

Contacts

We record two types of contact: those we signpost to other organisations, and those relating directly to SWF review applications.

The SWF review team were contacted by 2,405 people during 2020-21; this represents a 29% increase from the previous year. The overall 29% increase in contacts from the previous year was largely linked to 60% increase in the volume of signposting enquiries. We only started to record enquiries from councils towards the end of the previous year and so this change is also likely to have contributed to the overall increase.

Type of contact	2020-21	2019-20	% increase 2019-20 to 2020-21	2018-19	2017-18
Signposting	1,312	821	60%	762	424
Review application	1,093	1,038	5%	805	748
Total	2,405	1,859	29%	1,567	1,172

5% increase from the previous year

833 reviews decisions were made in 2020-21, which is comparable to the previous year



Signposting enquires

806

contacts were contacting us in error instead of their council

155

applicants told us that they were unable to contact their council as they did not have a Freephone number

55

applicants reported different accessibility concerns such as the telephone lines being busy or it or it not being clear on the council's website how to request a first tier review

90

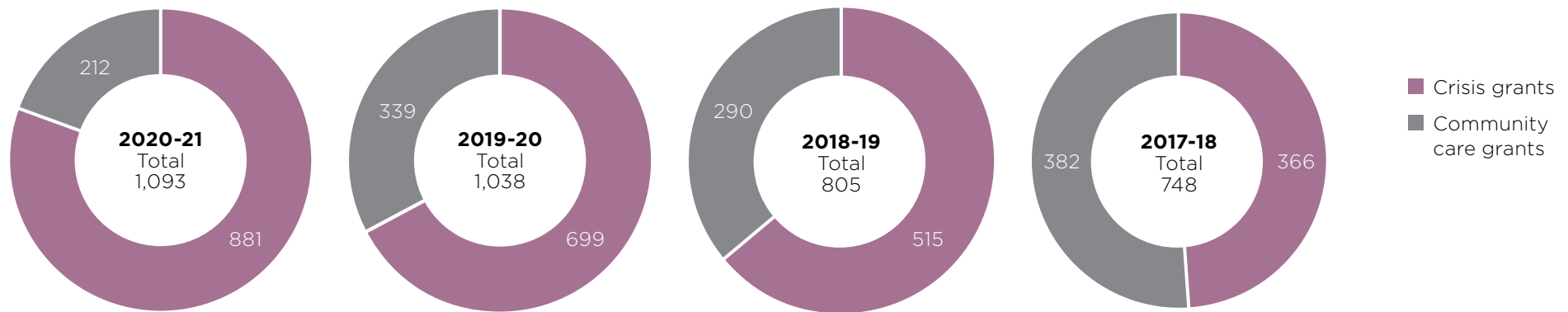
council staff we spoke to who were seeking advice about applications.

Review applications received and handled

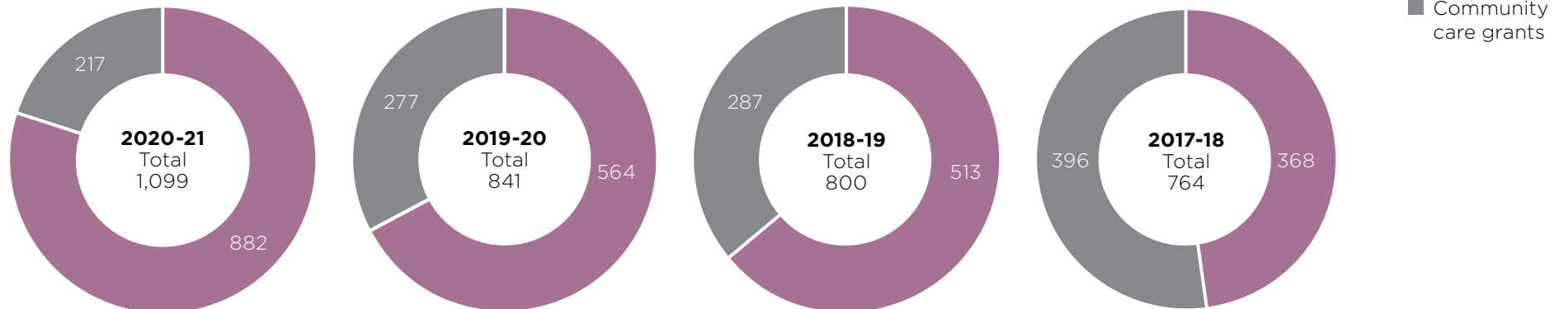
Review applications received and handled in 2020-21 by quarter

	Q1		Q2		Q3		Q4	
	Received	Handled	Received	Handled	Received	Handled	Received	Handled
SWF Crisis Grants (CG; excluding SIS)	210	211	211	210	142	137	180	184
Self-Isolation Support Crisis Grants (SIS; Qs3 /4 only)					61	57	78	82
Total Crisis Grants (SIS + CG)	210	211	211	210	203	194	258	266
Community Care Grants	61	62	57	59	50	61	46	39
Total	271	273	268	269	253	255	304	305

Review applications received yearly comparison



Review applications handled yearly comparison



Review application outcomes

Uphold rates by grant – yearly comparison

	2020-2021		2019-2020		2018-2019		2017-18	
	Upheld	Not upheld	Upheld	Not upheld	Upheld	Not upheld	Upheld	Not upheld
Crisis Grants	25%	75%	27%	73%	32%	68%	35%	65%
Community Care Grants	53%	47%	53%	47%	51%	49%	52%	48%
Self-Isolation Support Grants	29%	71%	n/a	n/a	n/a	n/a	n/a	n/a

Grant applications reviewed and closed – by quarter

	Q1	Q2	Q3	Q4
Crisis Grants (excluding SIS)	146	166	106	134
<i>% upheld</i>	33%	24%	21%	21%
Referred back to the council	0	0	0	0
Self-Isolation Support Grants (SIS; Qs3/4 only)			50	68
<i>% upheld</i>			34%	24%
<i>Referred back to the council</i>	0	0	0	1
Crisis Grants – total	146	166	156	202
<i>% upheld</i>	33%	24%	25%	22%
Community Care Grants – total	48	47	41	27
<i>% upheld</i>	65%	49%	51%	41%
Referred back to the council	0	0	0	0
Closed – total	194	213	197	229

Key points

As can be seen, although overall application numbers (excluding Self-Isolation Support Grants (SIS Grants)) rose by 5% on the previous year, the trend towards more Crisis Grants (CG) than Community Care Grants (CCG) continued. It is not clear why there was a 37% fall in CCGs, but we consider it likely to be the indirect result of lockdown.

We upheld approximately one in four CG applications reviewed, a small reduction on the 27% upheld in the previous year.

We noted that our 'uphold rate' fluctuated slightly throughout the year. For example, in quarter one, we upheld one in three CG applications compared to just over one in five in quarters three and four.

In quarter one, during the initial stages of the COVID-19 pandemic, there were more applications which we assessed had been made under exceptional circumstances.

In the later stages of the year, a higher proportion of applications were linked to ongoing or recurrent situations. In many cases, we therefore agreed with councils that the circumstances were not exceptional as defined in the statutory guidance.

We upheld more CCG reviews in quarter one than the rest of the year. In some cases, this was linked to councils not considering the impact of the COVID-19 pandemic when assessing the qualifying conditions or priority of certain items.

We upheld 29% of SIS Grants, which were introduced near the start of quarter three. A higher proportion were upheld in quarter three than in quarter four and this is likely to be linked to initial ambiguity surrounding the statutory guidance and eligibility criteria which were resolved in latter months.

Key performance indicators (KPIs)

The COVID-19 pandemic presented a number of unprecedented challenges for the SWF team during 2020-21. Despite these we achieved all of our KPIs. This reflects both the dedication and commitment of the SWF team, and the support from the leadership team and colleagues across the office. As an organisation we kept our focus on our values in the delivery of service.

Of particular note is that the SWF team met the crisis grant target in 100% of cases. This was more important than ever before given the vulnerability of many applicants to the SWF and their increased vulnerability due to the COVID-19 pandemic.

Quarterly performance

	Q1	Q2	Q3	Q4
% PI-1 met (CG timescales)	99%	100%	100%	99%
% PI-2 met (CCG timescales)	100%	98%	89%	93%
% PI-3 met (correct decision)	100%	100%	100%	99%
%PI- 4 met (SIS timescales)			98%	94%

Yearly comparison

KPI	2020-21	2019-20	2018-19	2017-18
PI-1 95% of crisis grants determined within one working day	100%	100%	100%	99%
PI-2 95% of community care grants determined within 21 working days	95%	96%	98%	99%
PI-3 95% of reconsiderations (internal review of our decisions) – decision is correct	100%	99.9%	100%	100%
New KPI for 2020-21 – PI 4 95% of self-isolation support grants determined within one working day	96%	n/a	n/a	n/a

National context: Initial applications to SWF in Scotland, Tier 1 reviews
Initial applications to the welfare fund received (all Scotland)

	2020-21			2019-20		2018-19	
	CCG	CG	SIS (Oct to March)	CCG	CG	CCG	CG
Initial applications all Scotland	84,325	271,295	24,562	76,715	220,150	71,035	193,305
Award rate all of Scotland	57%	69%	36%	55%	64%	58%	65%
First tier reviews all of Scotland	2, 570	7,535	Not available	3,570	6,200	3,210	4,820
Original decision revised whole of Scotland	50%	46%	Not available	45%	43%	48%	43%

Taken from: <https://www.gov.scot/publications/scottish-welfare-fund-statistics-annual-update-2020-2021/>

In comparison to the previous year:

- **Crisis Grants** – there was a 22% increase in applications, and a 21% increase in first tier reviews. SPSO also experienced a rise in applications for independent review of crisis grants, but the uplift was only 6% on the previous year, which is not so pronounced an increase as that seen at the local level.
- **Community Care Grants** – this was a slightly different picture, with an 8% increase in applications, but a 24% fall in the number of first tier reviews sought to challenge councils' decisions. Applications to SPSO also fell, with 37% fewer applications than in the previous year.

There were small increases in the proportions of decisions changed by councils at first tier review, and of applications that resulted in an award. This may have reduced review applications to us as fewer applicants are likely to have received a decision with which they were dissatisfied. The reason for the fall in CCG first tier reviews and review applications to us is unclear. One possible contributory factor was decision letters were not being issued by some local authorities (meaning applicants were unaware of their right to review). This is something we will continue to monitor. There was no comparative data for SIS Grants as it was only introduced during 2020-21.

2020-21 SWF developments

Introduction of Self-Isolation Support Grants

In addition to lockdown and home-based working, the SWF team took on new work; applications for review of council decisions on SIS Grants. The successful expansion of our remit

at short notice was a key achievement for the SWF team. While this created additional pressures, we were keen to play a role in supporting some of those who had been affected most severely by the pandemic. We are grateful to the Scottish Government for making additional resources available to us for this work.

SIS Grants were introduced on 12 October 2020. They provide a one off grant of £500 to assist those who needed to self-isolate during the COVID-19 pandemic. Only employed people on a low income who could not work from home, who had experienced a reduction in their income were eligible for the grant.

We received 141 review applications for SIS Grants between 12 October 2020 and 30 April 2021 and made 119 decisions.

The scheme was introduced quickly, recognising the urgent need for support. This meant there was little time for anyone to prepare. This resulted in some early challenges in processing SIS Grant applications. For example:

- unintended anomalies concerning eligibility and verification of the parents of self-isolating children not being eligible, creating childcare issues, and
- difficulties confirming that applicants had formally been asked to self-isolate by the Test and Protect service or another official means.

We maintained a regular dialogue with the Scottish Government and other stakeholders, and changes have since been made to the guidance and eligibility criteria. We also signposted a number of applicants who were dissatisfied with the service that they had received, to make a complaint to the relevant organisation.

Independent National Whistleblowing Officer service

2020-21 was a busy and productive year for our new Independent National Whistleblowing Officer (INWO) team and service. The start of the year saw us setting up and recruiting a new INWO team during lockdown. At that time the implementation date of the INWO role and the National Whistleblowing Standards (the Standards) was still unconfirmed. When the date was delayed from 27 July 2020 to 1 April 2021 we were given an ideal opportunity to develop training materials, our support for implementation and establish our own investigation procedures, ahead of the intended timescales.

Supporting boards with implementation of the Standards

During 2020-21 we engaged with NHS boards and other stakeholders through a wide range of events, sharing our expectations of the implementation of the Standards, and answering questions. This included meetings with chief executives, board chairs, non-executive Whistleblowing Champions, NHS HR directors and chief officers of Health and Social Care Partnerships. In addition, we engaged directly with several boards, and provided responses to wide-ranging enquiries, which we saw increase as implementation approached.

Stakeholder engagement

Over the year we met with regulators who receive whistleblowing concerns that may overlap with the INWO's jurisdiction. This included Healthcare Improvement Scotland's Raising Concerns team and the Care Inspectorate. We also engaged directly with the key NHS professional regulatory bodies (General Medical Council, Nursing and Midwifery Council, General Dental Council) and kept them up to date with our progress and plans. We developed a regular newsletter from the INWO team, to share our latest news and additions to our website. In due course this will include information about our investigations and findings.

Website

Our INWO website was launched to help organisations and whistleblowers. It includes documents to support organisations with internal communications and implementation, guidance to help staff to raise concerns, and it sets out the expectations and requirements under the Standards on managers right up to board level.

Advice line

In November 2020 we took on a Freephone 0800 line, providing information and advice to organisations, potential whistleblowers and members of the public interested in hearing more about the INWO role and service. This enabled us to engage early with people thinking of raising concerns. We were able to give them detailed, accurate information about their options, and how the implementation of the Standards might impact on their situation. It also gave NHS boards and other providers a single point of contact with the INWO team for resolution to any queries they had relating to implementation of the Standards.

Online training on the Standards

A core element of our support for implementation was the development of a comprehensive suite of training modules for NHS Scotland staff. This was achieved with help and support from NHS Education for Scotland (NES) who host it on their e-learning portal, Turas Learn. This gives access to training for all NHS service providers, and allows staff to provide evidence of completion.

The modules consist of 14 presentations across two whistleblowing learning programmes; one for managers and the other for staff needing an overview of the procedure. The

	11-Jan	18-Jan	25-Jan	01-Feb	08-Feb	15-Feb	22-Feb	01-Mar	08-Mar	15-Mar	22-Mar	29-Mar
Training presentations accessed	104	61	90	107	94	137	318	506	498	537	892	1864
Number of staff accessing first presentation per week	9	11	19	14	12	21	72	90	78	86	140	297
Number of managers accessing first presentation per week	9	4	3	6	4	3	18	19	38	43	53	104

programme for managers is more in depth, reflecting their additional responsibilities under the Standards.

We successfully launched the training on Turas Learn, on 6 January 2021. By the end of 2020-21 we recorded around 1,800 users accessing the training.

Far fewer managers than staff accessed the training during the first three months up to the end March 2021 (roughly a 1:4 ratio). While we recognise that there will be proportionally fewer managers in an organisation, this may still be a cause for concern. This is because managers will have a key role in embedding and implementing the handling of concerns under the Standards.

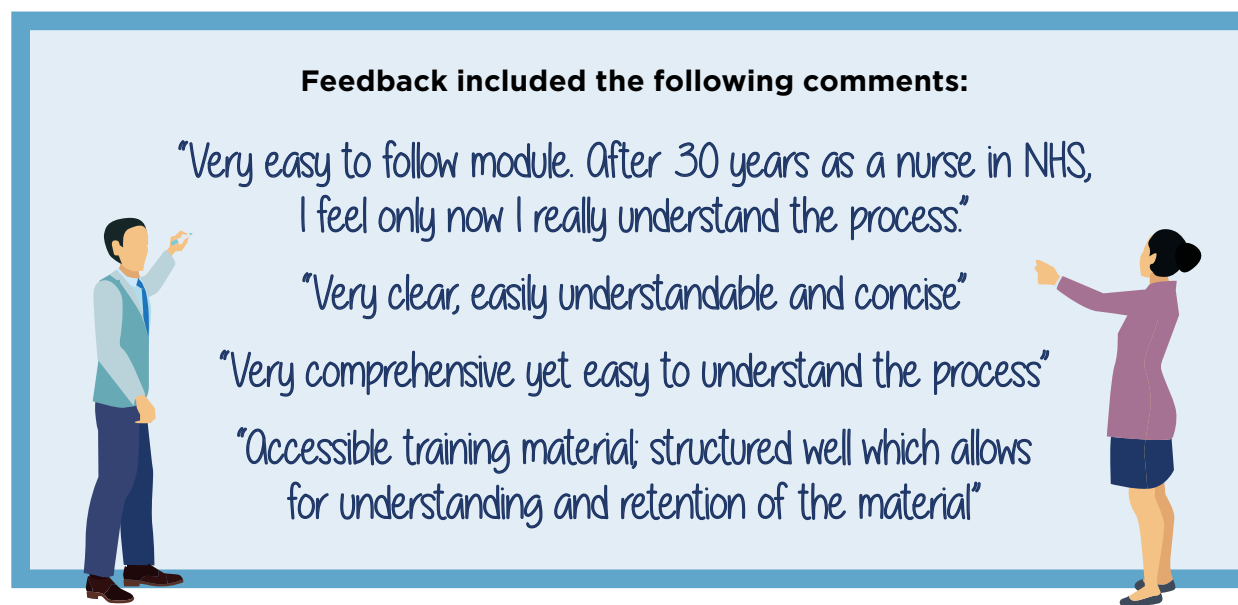
As an organisation that values learning, we ask learners to complete an anonymous feedback survey at the end of each of our presentations. Learners rate their knowledge before and

after doing the presentation, to measure “knowledge shift” and whether it met their learning needs: It was gratifying to see that all respondents felt that their knowledge was adequate, good or excellent after the presentation:

47% number of respondents that stated they had very poor or poor knowledge of the subject area before training (only 11% stated their knowledge was good or excellent)

86% number of respondents that stated after training their knowledge was good or excellent (no one felt their knowledge was still poor)

98% number of respondents that felt the presentation had met their learning needs



INWO team internal procedure for complaints handling

We developed a comprehensive suite of guidance documents to prepare for our new powers on 1 April 2021. The guidance steers INWO complaints reviewers through the handling of complaints, from receipt through to outcome and recommendations. While some of the principles and approaches are similar in approach to how the SPSO handle public service complaints, there are differences which need careful management. These include:

- need for strict confidentiality
- increased likelihood of having significant patient safety issues to address

- increased likelihood of engagement with regulators during investigations
- need for reduced timescales for investigations
- need to embed trust and confidence in the NHS to speak up through the new Standards
- complex interaction between whistleblowing and Human Resources
- powers to consider treatment of staff and culture of the working environment in relation to raising concerns
- ensuring protection of whistleblowers (and other involved) is integral to our approach

To support confidentiality and protect those involved, the SPSO's case management system limits access to INWO cases to only the INWO team and a limited number of other key staff, and we have implemented INWO specific procedures for engaging with our professional advisers, during investigations.



Model Complaint Handling Procedures

With the Model Complaints Handling Procedure (MCHP) now fully adopted across Scottish public bodies under SPSO's jurisdiction, much of our focus is on monitoring compliance and supporting improvement. We monitor in various ways, for example through conducting compliance assessments of organisations' complaints handling procedures, following up issues identified from the complaints made to SPSO, acting on what we learn from complaints, and working directly with organisations to share and support good practice in complaints handling.

Advice to public bodies

Advice and guidance provided by SPSO for authorities includes:

- sharing tools and guidance for effective complaints handling
- reviewing and providing feedback about draft complaints handling procedures
- contributing to complaints handling network events for key sectors
- clarification on how to apply the MCHP to real-life (non-case specific) situations
- delivering presentations and workshops on good complaints handling

Requests for advice or support 2020-21

2020-21	2019-20	2018-19	2017-18
251	254	259	228

Types of advice requests

	2020-21	2019-20	2018-19	2017-18
Request for advice	153	158	156	125
General enquiries	46	31	59	45
Request for comment / input	7	7	21	13
Request for tools & guidance	11	20	18	33
MCHP compliance	34	38	5	12

Overall, the total number of requests is consistent with last year. This shows that we were able to maintain our level of support in this area throughout the COVID-19 pandemic. There is a slight shift in the nature of requests we received. There:

- was an increase in general enquiries. This relates to requests for information around MCHP implementation e.g. reporting requirements and the key performance indicators for complaints handling, as well as enquiries about adopting the procedure in different contexts.
- were less requests for tools and guidance. This could be due to increased familiarity with our website and the resources available online; it may also be because of the impact of COVID-19 and the focus on providing essential services across the public sector.

Advice requests by sector

	2020-21	2019-20	2018-19	2017-18
Local authorities	76	58	73	56
Health	33	65	61	70
Housing	50	53	40	28
Scottish Government & Devolved Administration	51	37	30	21
Further and higher education	19	19	20	21
Water	4	4	4	2
Other	18	18	31	30

The main changes from last year in where requests came from were:

- an increase in the volume of contacts received from the local authority sector when compared to the previous year (back to the levels of 2018-19)
- around half the amount of contacts received from the health sector compared with the previous year
- almost 40% more contacts received from the Scottish Government and Devolved Administration sector

We see the increase in contacts in the Local Authority and the Scottish Government and Devolved Administration sectors being linked to MCHP implementation and enquiries received around this. The decrease in contacts from the Health sector may be due to the impact of COVID-19 on this sector.

Supporting the complaint handling community

In addition to our support work with organisations under jurisdiction, we also met virtually with a variety of organisations looking to find out more about the MCHP and Scotland's approach to complaints handling. We are always pleased to share what we have learned from the introduction of the MCHP over the years and share some of the good practice that we see across the sectors. This year we provided information about the history and the work of the Complaints Standards Authority to standardise and simplify complaints handling across public services in Scotland to other Ombudsman offices around the UK and to consultants conducting research on behalf of a UK wide non-ministerial government department about best practice in complaints handling at local level.

Supporting MCHP implementation

In January 2020, we published revised MCHPs for all sectors (except the NHS) to be adapted and adopted during the year with a final implementation date of 1 April 2021. Our focus in 2020-21 has been on supporting organisations with implementing the MCHP relevant for their sector and during the course of the year we provided 15 information sessions on key changes to the MCHP with individual organisations and sector-wide groups and many of the 75 meetings we attended as part of our external stakeholder engagement activities involved detailed discussions about implementation. During the year we also developed and published a **video presentation and other resources** highlighting the key aspects and changes that were introduced to the MCHP as part of the review.

Learning from complaints

Premature complaints by sector

Sector	Total Pems 2020-21	Pems as % of total cases per sector	Total Pems 2019-20	Pems as % of total cases per sector	Difference in % points 2020-21 to 2019-20	Pems as % of total 2018-19	Difference in % points 2019-20 to 2018-19	Pems as % of total 2017-18
Further education	5	24%	1	3%	+21	9%	-6	13%
Higher education	25	12%	14	9%	+3	16%	-7	11%
Health	168	16%	261	17%	-1	17%	-	22%
Housing associations	50	22%	56	17%	+5	22%	-5	31%
Joint health & social care	16	10%	26	12%	-2	16%	-4	14%
Local authorities	255	27%	267	20%	+7	24%	-4	28%
Scottish Government & Devolved Admin (excluding prisons)	27	18%	39	18%	-	15%	+3	17%
Scottish Prison Service	60	27%	61	20%	+7	21%	-1	21%
Water	43	39%	55	38%	+1	37%	+1	39%
Other (incl out of jurisdiction)	2	6%	4	14%	-8	6%	+8	n/a
Total	651	21%	784	18%	+3	20%	-2	24%

SPSO uphold rates by sector

Uphold rates by sector	2020-21	2019-20	Difference in % points 2020-21 to 2019-20	2018-19	Difference in % points 2019-20 to 2018-19	2017-18
Local authorities	65%	64%	+1	59%	+5	58%
Health	60%	55%	+5	59%	-4	60%
Scottish Government and Devolved Admin	71%	67%	+4	67%	-	65%
Scottish Prison Service	100%	92%	+8	73%	+19	33%
Housing associations	50%	60%	-10	50%	+10	57%
Water	71%	71%	-	55%	+16	73%
Further education	100%	0%	+100	100%	-100	58%
Higher education	90%	64%	+26	33%	+31	45%
Joint health & social care	42%	55%	-13	55%	-	50%

Overview of SPSO recommendations

We work continuously with our stakeholders to promote learning and drive improvements to ensure that complainants have their rights respected, and to avoid a future repeat of the problem for others. Integral to this is the making of recommendations resulting from investigations.

We are most likely to ask for a specific action to be taken in relation to individual remedies. With complaint handling, and learning and improvement we take a slightly different approach and focus on the outcomes we require and the evidence that they have been achieved. This, we believe, promotes more sustainable and embedded learning and improvement.

Recommendations made in 2020-21

Recommendation type	2020-21	% of total recommendations	2019-20	% of total recommendations	2018-19	2017-18
Complaints handling	81	11%	130	13%	130	109
Individual – apology	234	32%	326	31%	342	379
Individual – financial	10	1%	18	2%	8	17
Individual – other	30	4%	53	5%	36	52
Individual – total	274	37%	397	38%	386	448
Learning & improvement	385	52%	511	49%	644	635
Total	740	100%	1,038	100%	1,160	1,192

Although the absolute number of recommendations issued was lower in 2020-21, the relative proportions of types of recommendations remained in line with the profile of the SPSO's workload in previous years.



Just over a third of recommendations relate to changing something for an individual, and nearly two thirds are asking organisations to make changes to their systems, processes, policies or practices, which will in turn improve their service for their service users.

Recommendations in 2020-21 – by sector

Sector	Complaints handling remedy	Individual remedy – apology	Individual remedy – financial payment	Individual remedy – other	Learning and Improvement remedy	Sector total	% of total
Further education	1	2	0	0	2	5	1%
Health	41	157	1	7	271	477	64%
Housing associations	1	3	1	0	1	6	1%
Joint health and social care	3	9	1	4	9	26	4%
Local authorities	17	41	4	13	78	153	21%
Scottish Government & Devolved Administration	2	3	0	0	3	8	1%
Scottish Prison Service	3	3	0	1	2	9	1%
Higher education	11	11	0	2	13	37	5%
Water	2	5	3	3	6	19	3%
Total	81	234	10	30	385	740	
Proportion of total recommendations issued	11%	32%	1%	4%	52%	100%	

We give feedback to organisations if during the course of an investigation we identify either a matter of concern that in itself is not the subject of the complaint, but is related to the general matter under investigation, or to good practice. Such feedback ranges from comments on the organisation's complaint handling or interaction with SPSO, to alerting the public body to key points within our decision, like comments by an adviser.



Feedback to organisations – 2020-21 by sector

	Total no. of feedback 2020-21 by sector	Complaints handling	Points to note	Response to SPSO investigation
Further education	1	0	1	0
Health	184	46	125	13
Housing associations	5	4	1	0
Joint health and social care	7	2	4	1
Local Authority	52	17	27	8
Scottish Government & Devolved Administration	6	2	4	0
Scottish Prison Service	1	0	0	1
Higher education	7	2	5	0
Water	4	2	0	2
Total	267	75	167	25

Feedback

In many cases, we will also issue feedback to organisations. This ranges from positive feedback on examples of good practice or good service, to feedback about issues where we have identified potential learning.

In 2020-21, some examples of feedback issued to organisations about how they might learn from the complaints we considered includes:

- making suggestions to a university about enhancements they could make to their complaints process to make it more accessible to people who may need additional support
- noting to several health boards the importance of confirming the complaint which is being investigated at the outset, to avoid any possibility of misunderstanding further down the line
- guidance for organisations about engaging in post-decision correspondence with complainants
- general guidance about adhering to elements of the MCHP, including keeping complainants informed, signposting correctly, and recording outcomes for learning and improvement.

We noted on several cases that organisations had responded promptly to our requests for information, and supplied information in a clear and organised format, but also had cause to note instances of poor interaction with SPSO on a number of occasions, most notably failings in providing SPSO with the necessary information to conduct our investigations. We have had multiple instances of organisations failing to supply all requested information, or supplying large volumes of potentially relevant documentation (which they had available at the time we initially asked for information) at a very late stage of the process. In a handful of cases, this was supplied after a provisional decision had been reached by SPSO. This causes further delay to all parties, in particular to the member of the public bringing the complaint. While the provision of information was understandable to a point during lockdown, we will monitor this as it is unacceptable in the longer term.

Examples of feedback



Recognition of good service

“I consider the Investigating Officer to have carried out a high standard and thorough investigation.”

Council, kinship care



Highlighting compassionate care

“It was good practice that nursing staff took steps to try to support Mr A’s family emotionally in what was a very difficult time for them, such as arranging to have Mr A and his wife in the same ward and giving the family access to a shower.”

Health Board, complaint upheld, but recognising good practice too



Impact on vulnerable complainants

“The board originally provided selected case notes in response to my enquiry. It was not until the fuller case notes were requested that it became apparent how long A had been in the system awaiting a diagnosis and treatment. Given the complaint concerned CAMHS treatment, it was unfortunate that a number of requests had to be made before the full CAMHS case notes were forthcoming.”

Health board, child and adolescent mental health services



Triggering Support & Intervention policy

“I had significant difficulty obtaining timely and full responses to my enquiries in this case. Whilst some of the delays appeared to have been a result of COVID-19 and are understandable, I do not consider that this explains all of the delays and the conflicting explanations that were given for these delays. Ultimately, action under our Support and Intervention Policy was taken.”

Council, anti-social behaviour



Promoting an accessible service

“It has also been noted that while it was stated letter is your preferred means of communication, it was not explained why this was the case. Your complaint handling procedure makes reference to complainants providing their email address, therefore it would be my understanding that correspondence by email is an option. In any case, I would like to suggest that you review this policy, ensuring that your communication is accessible to all.”

GP practice

Compliance with recommendations

We set a deadline for implementation of recommendations and follow them all up until we are satisfied that they have been implemented.

Timescales for compliance with SPSO recommendations (recommendations signed off as completed in 2020-21)

	Total closed	Within target	% closed within target	Completed - Over Target - under 1 month	% closed within target or within 1 month of target	Completed - Over Target - under 3 months	% closed within target or within 3 months of target
Further education	4	1	25%	3	100%	3	100%
Health	438	204	47%	128	76%	177	87%
Housing associations	7	5	71%	0	71%	0	71%
Joint health and social care	39	10	26%	6	41%	9	49%
Local authorities	174	103	59%	41	83%	59	93%
Scottish Government & Devolved Administration	10	6	60%	1	70%	2	80%
Scottish Prison Service	14	14	100%	0	100%	0	100%
Higher education	32	10	31%	22	100%	22	100%
Water	27	24	89%	3	100%	3	100%
Total	745	377	51%	204	78%	275	88%

2020-21 performance in this area remained broadly in line with previous years, though with the notable exception of the Joint Health and Social Care sector, where several organisations exceeded recommendation timescales by over three months past the deadline set.

This year, 51% of recommendations were closed within the target set, which is almost exactly in line with previous years; 52% in both 2019-20 and 2018-19.

88% of recommendations closed in 2020-21 were closed within three months of the target date. In spite of operational

challenges presented by the pandemic, this level of recommendation compliance is only marginally lower than the previous two years, 92% in 2019-20 and 94% in 2018-19. In 2020-21, 78% of recommendations were implemented within the target or within 1 month of target, compared to 84% in 2019-2020.

There were extensions granted to organisations in specific circumstances where they could evidence that they needed a longer timeframe to fulfil recommendations within the particular constraints at the time, but the fact that compliance with SPSO recommendations remained high during this year is a fact worth noting.

2020-21 recommendation compliance by recommendation type

	Total closed	Within target	% closed within target	Completed - Over Target - under 1 month	% closed within target or within 1 month of target	Completed - Over Target - under 3 months	% closed within target or within 3 months of target
Individual remedy: apology	233	138	59%	64	87%	81	94%
Individual remedy: financial	12	8	67%	2	83%	2	83%
Individual remedy: other	43	23	53%	8	72%	10	77%
Learning and Improvement	375	165	44%	109	73%	155	85%
Complaints Handling	82	43	52%	21	78%	27	85%
Total	745	377	51%	204	78%	275	88%

Support and Intervention Policy

2020-21 was the second year of the Support and Intervention Policy (S&IP) in operation.

The policy formalises the mechanisms we already used to offer support to organisations and take intervention when required. It helps us to focus our resources on public bodies who require support in order to help them improve their practice or address poor performance, or where intervention action is more appropriate to ensure the public body takes specific action to improve performance in relation to complaints handling, handling of SWF reviews or engagement with SPSO. This in turn benefits complainants who (notwithstanding the challenges of lockdown) get faster local resolution. It also promotes system-wide improvement as good local investigations mean SPSO in turn do not always need to investigate a case. It also informs public bodies of what they can expect from us.

Following a review of the S&IP, the policy has been revised from April 2021 onwards. There has been an additional layer of escalation added, which is in line with our general approach to resolve issues at the earliest possible opportunity.



There are now six levels of intervention, level one being the most informal, and level six being the application of legal powers. There is more information about this on our website.

Activity under the S&IP might be as straightforward as further contact from one of our Complaints Reviewers chasing up overdue information or, in situations of continued non-compliance or repeated difficulties, the Ombudsman may ultimately decide to issue a report to Parliament drawing their attention to the problem. By logging and monitoring these additional and further contacts, we can build a better overall picture of how organisations are responding to complaints as well as identifying problems in their interactions with us.

Support and Intervention actions (management level)

Closed at level	No. of Support and Intervention actions 2020-21
2 - Leadership team	3
3 - Project plan	0
4 - Ombudsman direct contact	0
5 - Report to Scottish Parliament	0

- Glasgow City Health & Social Care Partnership (issue with interactions with SPSO and poor complaints handling)
- Dundee City Council (failure to follow SWF Scottish Government guidance)
- Clackmannanshire Council (failure to follow SWF Scottish Government guidance)

We are pleased to report that our interventions have been successful and resulted in positive outcomes, without the need to apply formal powers. We see the S&I as an opportunity to engage constructively with public bodies to drive better outcomes for complainants.



Sharing learning from complaint outcomes

In 2020-21, we shared our findings and learning with organisations and the wider public through:

- summaries of all our decisions are published on our **website**
- a monthly **e-newsletter** which signposts to our decision summaries and highlights trends and learning
- working with a variety of stakeholders such as Healthcare Improvement Scotland (HIS), sharing anonymised data to inform a wider view of public service delivery across Scotland
- publication of SWF case studies on our **website**.

Stakeholder engagement

Through our Improvement, Standards and Engagement (ISE) team, we engage with a range of stakeholders and organisations to provide support and advice, drive improvements in standards of complaints handling and contribute to public sector improvement.

Meetings

COVID-19 pandemic restrictions meant the team did not attend any meetings in person during 2020-21. Instead, we embraced technology along with many others, and attended virtual meetings and events. ISE participated in 75 virtual meetings. This compares to 85 meetings in 2019-20 and 76 in 2018-19.

Engagements included:

- complaints handlers' network groups
- Standards & Improvement network meetings with UK & Ireland Ombudsman offices and independent review bodies
- meetings with organisations across all sectors to provide support with MCHP implementation ahead of the 1 April 2021 deadline
- sharing our experience with other Ombudsman offices and regulatory bodies around the UK of standardising and simplifying complaints handling procedures
- general complaints handling support across all sectors e.g. dealing with challenging behaviour, recording and reporting complaints, etc

We focused on preparation for implementation of the revised MCHP, and delivered a number of information sessions upon request to complaints handling, performance management as well as senior management staff to raise awareness of the key changes to the revised MCHP. During the course of the year, we presented to:

- delegates representing 42 registered social landlords at a webinar hosted by the Scottish Federation of Housing Associations
- senior managers representing eight housing associations at a session hosted by one of the UK housing sector's largest membership organisations
- delegates from 22 colleges at a workshop arranged by the college complaints handlers' advisory group
- six individual housing associations and
- a local authority with attendees from across different service areas.

Our outreach and engagement activity in relation to SWF was limited during 2020-21, due to the operational pressures during COVID-19. In 2021-22 we look forward to having more of a focus on engagement with stakeholders and on improving our impact.



ISE participated in
75 virtual meetings

Digital engagement

We regularly engage with our external stakeholders via our digital corporate communication channels. In 2020-21 we recorded:



78,823 visitors to the SPSO website, 5,665 to the INWO website and 4,941 visitors to the SWF website



3,262 subscribers to our monthly SPSO newsletter and 271 subscribers to our new INWO ebulletin



1,707 followers and 13,203 profile visits on Twitter, and 369 followers and 8,346 impressions on our new LinkedIn account.

In quarter four we delivered 33 modules, i.e. 11 complete CIS courses. The course has proved to be very popular and feedback has been extremely positive.



Training

We developed, piloted and implemented online training during 2020-21. COVID-19 presented us with a timely opportunity to refresh and relaunch our courses including online Complaints Investigation Skills (CIS). We piloted in quarter three, and it was available to book in quarter four. This course consists of three modules and we deliver it to small groups of up to 15 people to make it as interactive as possible. The course is available in house for staff from a single organisation or as an “open” course that people from different organisations can attend.

In quarter four we delivered 33 modules, i.e. 11 complete CIS courses. The course has proved to be very popular and feedback has been extremely positive.

We also:

- launched a narrated video presentation summarising the main points in the revised MCHP which is available on our website. This provides an accessible overview of the MCHP, for anyone to view
- developed training for the INWO service
- set up an Ombudsman service training network, focusing on sharing and developing best practice in delivery of complaints handling training. The group met six times in 2020-21 and includes members from the Parliamentary and Health Service Ombudsman, the Local Government and Social Care Ombudsman, the Northern Ireland Public Services Ombudsman, the Public Services Ombudsman for Wales, Housing Ombudsman Service, the Office of the Independent Adjudicator and the Irish Ombudsman.

In 2021-22, our training unit will focus on increasing our range of online courses, including the introduction of an online Good Complaints Handling course aimed at frontline staff dealing with complaints at stage 1 of the MCHP.

Parliamentary engagement

In 2020-21 we continued to share the learnings from our investigations and complaint handling monitoring through our responses to inquiries and consultations undertaken by the Scottish Parliament, Scottish Government and others.

We responded to a number of consultations, including the Scottish Government's review of mental health and the review of adult social care in Scotland, a consultation on the revised National Guidance for Child Protection in Scotland, and the Equalities and Human Rights Committee's bill on the incorporation of the United Nation's Convention on the Right of the Child. Details about further contributions are available on [our website](#).



Due to COVID-19 restrictions, this year we did not attend an accountability hearing before the Local Government and Communities Committee but we provided a written update on some of our work in February 2021.

Customer service

We are committed to providing high-quality services that meet or exceed **our customer service standards**. The Standards set out our service delivery commitments and what can be expected from us. We review feedback we receive continually; this includes information from user satisfaction survey responses, customer service complaints, compliments and unsolicited feedback.

Customer satisfaction



“Thank you so much. You have no idea how much pressure this has taken off me, I’m so grateful for your help.”

SWF applicant



“I appreciate that you took the trouble to investigate my complaint so long after the event. I found you to be caring, considerate and very professional, that was a comfort after my initial experiences.”

Complainant



“The incredible amount you put into my case is very much appreciated. Thank you so much again.”

SWF applicant



“We really appreciate your time and effort that’s been put into this investigation. I’d like to thank you for everything you have done to investigate this for us. It has meant the world to us not only the hard word put into every part of this but the dignity & respect you have showed us along the way.”

Complainant



“Thank you for the information. I have read and understood your provisional decision notice and have nothing to add. I would like to say thank you for taking time to assess my case as at last I feel someone has listened to me so thank you.”

Complainant

Results from our annual customer satisfaction surveys are available on **our website**.

However, not all feedback is positive, and we aim to learn from it and make improvements.



“You [could] do so much more for people having trouble receiving a final response from the organisations they are complaining about.”

In response to this comment and to increasing contact from complainants who were having trouble receiving a response from the organisation they were complaining to, the Ombudsman wrote to all bodies under her jurisdiction during 2020-21 to remind them of their responsibilities under the MCHP to keep complainants informed when they could not meet their timeframe for handling complaints.

“It took 7-8 months to hear from SPSO after receiving my complaint. There was no update until the SPSO complaint reviewer got in touch.”

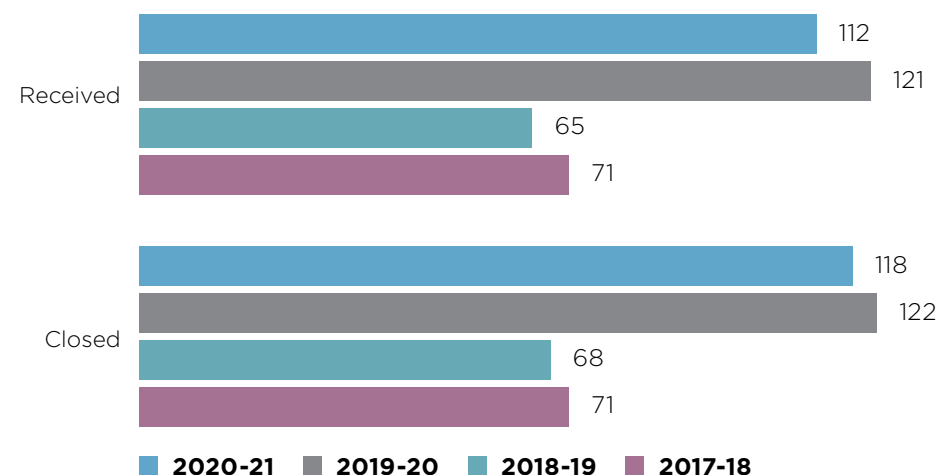
In order to address this and similar concerns, we made changes to our communications in 2020-21 to explain timescales and delays more clearly. At the outset, we now advise complainants how long we expect it to take before their complaint is allocated to a complaints reviewer.

Customer service complaints

We hold ourselves to the same high standards as we hold public bodies. Our customer service complaints (CSC) process is the same as the MCHP, except instead of signposting to the Ombudsman, we have a contract in place with an independent customer complaints reviewer (ICCR) to whom we signpost complainants. The ICCR makes decisions about SPSO's complaints handling independently.

We identify and record complaints about our service, and are committed to learning from them to put things right or drive improvement where needed.

Customer service complaints – total (all stages)



Quarterly breakdown 2020-21

	Q1	Q2	Q3	Q4
Customer service complaints received	16	35	33	24
Customer service complaints closed	19	40	24	35

Customer service complaints – 2020-21 breakdown

Stage	Received	Closed
Stage 1 – Frontline resolution	56	50
Stage 2 – Investigation & escalated complaints	42	35
Total	98	85

Where a difference exists in the number of cases received in the year and the number of cases closed in the year (as is the case in 2018-19 and 2019-20), this is due to cases being received in the previous year, but closed in the following year.

This year we held awareness sessions with our staff to raise the profile of our service standards and to encourage all expressions of dissatisfaction about the way we provide our service, to be recorded as service complaints. We also empowered our staff to handle and work to resolve these complaints as close to the point of service delivery as possible. In taking these steps, we anticipated that the number of service complaints we recorded this year would increase. We consider this to be a positive outcome in response to increasing awareness, demonstrating that we value complaints and holding ourselves to high customer service standards.

Delays in handling public service complaints, not keeping complainants updated and clarity of communication were the commonest drivers of complaints.

Timescales

We aim to respond to complaints in line with the timescales set out in the MCHP. The timescales to close complaints are:

- 5 working days at stage 1
- 20 working days at stage 2
- 20 working days for 'escalated' complaints

Customer service complaints outcomes during the year 2020-21

Stage	Upheld	Not Upheld	Total	% upheld	% upheld 2019-20	% upheld 2018-19	% upheld 2017-18
Stage 1 – Frontline resolution	27	23	50	54%	44%	29%	14%
Stage 2 – Investigation & escalated complaints	14	20	34	41%	27%	19%	38%
Total	41	43			n/a	n/a	n/a

Numbers do not total the closed figures as withdrawn complaints are not included in the uphold rate calculation.

Performance against the timescales in 2020-21

Stage	Met timescale (no. of cases)	Did not meet timescale (no. of cases)	Total number of working days	Average time in working days to close
Stage 1 – Frontline resolution	41	9	249	4.4
Stage 2 – Investigation & escalated complaints	24	10	703	21.4

Independent Customer Complaints Reviewer

Where a customer remains unhappy with either the decision we make on their CSC or the way we handled it, they can ask the Independent Customer Complaints Reviewer (ICCR) to review our handling of the complaint and the decision(s) we made.

During the year, 19 (same as in 2019-20) service complaints were sent to the ICCR, all which were independently reviewed with final decisions issued. The ICCR did not uphold any complaints at first hand this reporting year. Each of ICCR's decisions resonated with the customer service decisions taken by SPSO on the customer service complaints escalated to her office that ICCR independently determined were also the correct decisions. Four customers had multiple customer service complaints of between two and three separate complaints raised to ICCR.

Of the 19 matters referred to ICCR there was no evidence of a service failure or maladministration by SPSO, or a failure by SPSO to effectively handle a service complaint against its customer service standards.

The ICCR also handled four subject access requests, one request for documentation from a Member of Scottish

Parliament during the year and one complaint about an abusive SPSO customer to the ICCR's company.

The ICCR's annual report can be read on [our website](#).

In March 2021, the ICCR conducted a random review of customer service complaint files during the year. The review consisted of eight files (four stage 1 decisions and four stage 2 decisions) not previously examined by ICCR and selected from an aggregate complaint reference listing. The ICCR concurred with all SPSO decisions taken, but made a number of recommendations for improvements regarding setting realistic time expectations, clearly addressing customers' data security concerns and reviewing SPSO process for allocating cases from officers who are on leave.

The review also recognised that SPSO customer service complaints have been impacted throughout the pandemic which has caused pressures on the SPSO system and its resources with staff having to balance their own personal circumstances, new methods of work pressures and increased displaced aggression from customers as evidenced on the files randomly reviewed.

Managing the organisation: openness and transparency

Freedom of information and environmental information requests

Freedom of information and environmental information

Type	2020-21	2019-20	2018-19	2017-18	2016-17
Information requests received	91	148	169	127	119
Information requests handled	92	151	164	131	116
Review requests received	3	11	6	16	6
Review requests handled	3	12	6	18	7
Appeals to Scottish Information Commissioner (SIC)	1	3	0	1	2

Quarterly breakdown

FOI/EIR	2020-21				2019-20			
	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
Information requests received	14	27	23	27	38	42	40	28
Information requests handled	14	28	19	31	37	46	38	30
Review requests received	1	0	2	0	3	4	1	3
Review requests handled	1	0	2	0	4	3	1	4
Appeals to SIC	0	0	0	1	2	1	0	0

We have seen a reduction in Freedom of Information (FOI) request numbers this year.

From the information available on the Scottish Information Commissioner's (SIC) statistics database, in comparison to the 93 other public bodies in the same sector as the SPSO (others e.g. non-departmental public bodies) that submitted data we received:

- the fifth highest number of FOI requests
- the eleventh highest number of Environmental Information Requests (EIR).

Outcomes

We carried out two FOI reviews, where we upheld our original decision in one, and determined we had failed to respond to the original request within timescale in the other. A further FOI request for review was withdrawn. There were no EIR reviews.

We were notified of one request for a decision from the SIC relating to dissatisfaction with our handling of a request for information. The SIC was satisfied that we did not hold the requested information.

- 95% of FOI requests and 100% of FOI review requests were responded to within the statutory timescale.
- 100% of EIR requests were responded to within the statutory timescale.

Publication scheme

The SPSO has adopted the SIC's Model Publication Scheme, and we publish a guide to the information that we make available on **our website**.

Data protection

We assess our compliance with data protection law, and continually work on ensuring we achieve best practice. All of our staff continue to receive regular data protection training.

Internal Audit of Data Management was undertaken in 2020-21, achieving the highest audit grade of 'strong', 17 areas of good practice and no recommendations of medium and low level.

Our data protection officer (DPO), who is independent of the SPSO was assured, and provided us with assurance, that during the period covered by this report the SPSO has provided them with sufficient information and opportunity to carry out their role fully.



Subject Access Requests

Subject Access Requests (SARs)

Type	2020-21	2019-20	2018-19	2017-18	2016-17
SARs received	91	104	102	75	56
SARs handled	80	107	100	72	57
SAR review requests received	3	5	8	4	3
SAR review requests handled	5	3	8	4	3
Appeals to UK Information Commissioner	1	0	1	0	1

Quarterly breakdown

SARs	2020-21				2019-20			
	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
SARs received	10	31	28	22	25	23	34	22
SARs handled	3	21	22	34	25	26	24	32
SAR review requests received	0	2	1	0	1	1	1	2
SAR review requests handled	2	1	1	1	0	1	2	0
Appeals to UK Information Commissioner (ICO)	0	0	0	1	0	0	0	0

We have seen a slight reduction in subject access requests (SAR) this year.

From the information available on the SIC's statistics database, in comparison to the 93 other public bodies in the same sector as the SPSO (others e.g. non-departmental public bodies) that submitted data, we received the second highest number of SARs.

Outcomes

- Five SAR reviews:
 - Four we wholly/partially upheld our original decisions
 - One we determined that we had failed to respond to the original request within timescale
- One decision from the UK Information Commissioner's Office (ICO) about delay. The ICO determined that there was more work for SPSO to do to address any outstanding issues with the requestor. However, by the time we received notification of the appeal and decision from the ICO, the matter had been resolved and all information provided.
- 68% of SARs were responded to within the statutory timescale. Our ability to meet targets was impacted by availability and resourcing challenges during the pandemic.



Data security

We reported two personal data security breaches to the ICO.

1. paperwork being returned to an old address that had been incorrectly used from within the paperwork itself. The paperwork was subsequently returned to us undelivered.
2. the theft of a file from an adviser's car.

The ICO decided no further action on their part was necessary for either, nevertheless we continue to remind staff about following data security guidelines and we highlighted data security to our independent advisers. We also updated security guidance, and are reviewing internal mail handling processes.

We have clear guidelines governing how we handle personal data, and established breach detection, investigation and internal reporting procedures are in place. Our **Information Governance** handbook is available on our website.

Managing the organisation: our team

Our objective is to be acknowledged for having well trained, properly supported people, who have the tools they need to deliver our services. We strive to have the capacity, financial, human and infrastructure, to implement and deliver our statutory functions. In 2020-21 we:



Maintained Living Wage Employer accreditation



Reviewed our organisation structure to meet the increased requirements of an extended jurisdiction



Encouraged and supported our colleagues to learn and develop their skills and leadership through a structured learning and development programme



Continued to invest in the resilience and flexibility of our digital services



Continued preparation for the INWO function with the development of new roles and recruitment for the team



Supported colleagues to work flexibly so they can balance their working lives with their other responsibilities



Continued to deliver a broad range of activities to support staff to achieve a balance of work and life and positive health and wellbeing



Maintained our Investors in People gold status.

Our people

Our workforce was an average of 71 FTE for 2020-21. We have been growing with each new jurisdiction added to the Ombudsman's statutory responsibility.

A focus in the past year was on our recruitment drive to prepare for Scotland's new INWO function. We continue to monitor our approach to recruitment so that it follows good practice across all diversity and equality strands.

On 31 March 2021, the ratio of females to males in the organisation is 76:24 percent (not including seconded and temporary staff). Two of the three members of our leadership team and 82% of our management team are female.

COVID-19 management

Throughout the year, the priority of the SPSO has been the health, safety and wellbeing of our people and the public. In order to follow Scottish Government guidance, we have closed our Bridgeside House offices to visitors and all but key worker staff from 23 March 2020. Our key workers are a very small team of volunteers that attend on a limited basis to carry out the key work to enable the rest of the team to work as normal from home. This included processing mail, complaint allocations and supplying office equipment and technology to our home workers.

Since we closed our offices, we have worked hard to keep people connected and supported with a focus on health and wellbeing and this included:

- temporarily relaxing HR policy to allow more flexibility in working arrangements
- delivering a range of sessions on health and wellbeing, resilience
- increasing the frequency of organisation-wide meetings
- setting up virtual coffee mornings to improve social connections through work
- communities of practice adapting to virtual meetings to enable knowledge-sharing and social connections
- adopting online collaborative tools and resources to enable virtual communication and working

We have also safeguarded the connectivity and security of our digital network, embracing this new way of working and we continue to adapt to the new ways of working and carrying out our responsibilities.



Training and development

We continued to meet the people development needs of the organisation through a range of activities. Learning and development activities were delivered around key areas including:

- mandatory training (e.g. Health and Safety, GDPR, Cyber security)
- specific subject matter learning events (e.g. investigation skills, vulnerability, wellbeing, and sessions with the Coalition for Racial Equality and Rights and the Child Poverty Action Group)
- COVID-19 related wellbeing support to staff (e.g. Thrive, the Science of Kindness, Working under pressure and Building your Resilience at Work)
- COVID-19 impacts on the public sector (e.g. Reflections and updates during the pandemic from NHS professionals) in response to the development needs identified as part of individual personal development plans and as learning opportunities (e.g. Challenging Calls and Promoting Positive Behaviour, Spotlight on HR Topics for Managers, Microsoft Excel, Civil Service Pension Scheme-specific training).

Investors in People accreditation

SPSO achieved Investors in People (IIP) accreditation recognition in 2011 and has maintained a gold accreditation status since February 2017. Accreditation status is reviewed on a three-year basis, with a formal activity undertaken on an annual basis. SPSO's formal reaccreditation took place in March 2020.

Findings indicate that there is a stringent but supportive recruitment process and once people are recruited to the organisation they are clear about their roles and responsibilities; they receive a strong foundation and support through the induction process through to employment policies, procedures, performance management process and structured learning and development that supports individual and organisational needs.

People have a clear and consistent understanding of the SPSO vision, values, aims and objectives, developed through the involvement of all in the business planning activities and the introduction of Communities of Practice groups providing people with an additional opportunity to make a positive contribution to the SPSO aims, objectives and long-term sustainability.

People recognised the effectiveness of change management with the success of the office move being cited as a key example of this.

Recommendations for ongoing improvement included aligning our values, behaviours and management capabilities, and additional measurement of the impact of learning and development and people management practices on organisational objectives and performance indicators.

Staff survey

The SPSO conducts an annual staff survey and the summary reports are published on our website.

2020-21 highlights:

- 88% response rate
- 80% of questions scored above 70% positive with 24% scoring above 90% positive
- scores improved in 55 out of 88 questions compared to the last survey
- the most improved scores were under the theme of leadership (improved by 30% on average)
- health and wellbeing was the highest scoring theme (85% on average).

Each year the staff survey results, along with our IIP assessment findings, are combined to create an annual action plan to ensure we maintain our focus on commitment to building a people-centred organisation.

Communities of Practice and working together

A number of staff-led, cross-team working groups continued over the last year to promote and support interaction, cooperation and knowledge sharing across the organisation. The groups established include Communities of Practice, Health and Wellbeing, Internal Communications, Charities and Climate Change groups.

As a result of feedback on wellbeing and lockdown working over the last year, we launched three project work streams to review our learning and to recommend improvements. These working groups are focusing on future working arrangements, casework intelligence and communications.

Community, social and human rights

Many of our staff are involved in community and social rights engagement activities outside of work, including, for instance, volunteering for:

- the Children's Panel
- the Law Society of Scotland's Regulatory committee
- Fresh Start, a charity helping previously homeless people who have been offered a tenancy assistance to move into their new home
- Membership of the Administrative Justice Council

We also developed a policy to support staff to undertake volunteer work in response to COVID-19.

In 2020-21 we observed mental health awareness week with a series of informative communications, including sharing resources and advice for wellbeing during the pandemic. We also held a wellbeing sessions with speakers who talked about working under pressure and the science of kindness and we held a virtual coffee morning.

We also observed the Scotland's climate change week on 14 to 20 September 2020, with a personal carbon footprint challenge, environmental pledges and webinars such as Love Food Hate Waste, Looking After the Climate by Looking After Your Energy Bills, Reduce Your Waste, Sustainable Transport, Love Your Clothes.

Managing the organisation: governance

Governance and risk

As Accountable Officer, the Ombudsman has responsibility for maintaining a sound system of governance and internal control that supports the achievement of organisational policies, aims, and objectives, whilst safeguarding public funds and the organisation's assets for which she is responsible. The Scheme of Control outlines the arrangements in place to assure good governance practices are followed. This is published in **our finance handbook**.

The Ombudsman is supported by the Advisory Audit Board (AAB), which provides advice about risk, assurance, audit quality and governance. The AAB receives internal and external audit reports and the annual accounts. Our **external auditors** are appointed by Audit Scotland.

Risk is managed actively through a risk management policy that sets out the approach to risk management for the delivery of strategic aims. The most significant strategic risk to the organisation remained the adequacy of resources to provide a quality service that delivers our statutory functions, in particular our complaint handling and SWF review services, within an acceptable timescale. The majority of the SPSO's workload is demand-led. Consequently, the number and complexity of complaints, enquiries, and SWF review applications received is outside our control and fluctuates. The leadership team monitor this closely and focus carefully on financial and workforce planning.

The most significant areas of risk were, and increasingly are, capacity to carry our statutory functions and the impact of COVID-19 on performance and service delivery.

Further details on the SPSO governance arrangements can be read in our full accountability report.

Quality Assurance

Led by the SPSO's value of learning and improvement, the SPSO operates a Quality Assurance (QA) programme specifically designed to meet our commitment to improve quality and consistency. The QA programme is a mix of risk-based and standardised assessments carried out independently of the case handling teams.

In 2020-21, the QA programme covered:

- a general assessment of casework
- a general assessment of SWF decisions
- a general assessment of the professional advice received
- a risk-based assessment of the provisional decision process.

To embed the learning we identified through the QA process, the findings of the QA (including the identification and highlighting of good practice) were discussed in a learning and reflective way with the individuals involved and shared with

managers. The findings, including any recommendations for improvement (such as training or guidance changes), were also reported to the SPSO leadership team to inform wider learning and improvement, and fed back through the relevant internal performance meetings.

In 2020-21, we amended one decision as a result of QA. This gave the Leadership Team a high degree of confidence in the quality of decision making, especially when considered with outcomes of complaint reviews.

Complaint reviews

In line with SPSO's values to work fairly, be people-centred and to learn and improve, we operate a review process whereby the complainant or public body can ask for a review of a complaint decision (not closed by public report where the process is slightly different). Reviews are a valuable source of learning, and are considered personally by the Ombudsman, with support from Executive Case Officers, who had no part in the original investigation or decision.

In 2020-21, we received 199 requests for review. This represents 6% of all decisions made this year. The Ombudsman responded to 184 of these.

2020-21 quarterly breakdown

	Q1	Q2	Q3	Q4	Total
Review requests received	34	54	59	52	199
Reviews closed	33	34	54	63	184

In quarter one, we received lower numbers of review requests than usual. This reflects the drop in numbers we saw across the office at the beginning of the pandemic, as our office, public bodies and complainants became used to this new way of life.

Review outcomes

This year, we decided to capture more information about the outcomes of decision reviews, in order to have better understanding of the reasons we revise decisions. In doing so, we distinguished between cases:

- re-opened for further investigation
- where the outcome was changed (either from an 'uphold' to a 'not uphold' or where the decision not to investigate was overturned)
- where the outcome remained but explanations, recommendations or feedback were added or amended

Outcome	Number
Decision unchanged	151
Re-opened for further investigation	12
Outcome changed	4
Outcome unchanged but we either amended the decision to give more robust or clearer explanations, or to add or amend recommendations or feedback	15
Ineligible or withdrawn	2
Total	184

Reasons for revised decisions

Of the 12 cases re-opened for further investigation, five of these were cases which had originally been closed in the early stages. Three of these five was because new information was received at the review stage. This indicates both that we are willing to listen and act, and that we can have a high degree of confidence in early-stage decision making.

Of the seven cases re-opened for further investigation following an investigation decision, six of these were re-opened on the basis of factually inaccurate information being relied upon in the original decision, or a mistake being made in the original decision. It is important to note that, whilst the cases were re-opened for further investigation, this does not necessarily indicate that the final decision will be different. It simply shows that further consideration is required.

Of the four cases in which the outcome was changed, three of these were due to new information being provided.

Overall, there were only nine cases in which the outcome was changed or further investigation was required due to a mistake being made or factual inaccuracy relied upon in the original decision. This represents 0.3% of all complaints determined by the office.

Performance against KPIs

In 2019, we piloted timescales in which we aim to respond to review requests. These were realistic and achievable, but challenging. Despite lockdown, and knowing that we were unlikely to have the capacity to meet them, we decided nevertheless to implement them fully to enable us to assess the impact of COVID-19 and other staffing changes. Taking a person-centred approach, we focused capacity on the older cases, as the figures demonstrate. Meeting the 90 day target in 97% of cases was a great achievement given the challenges of the last year.

KPI	Actual achieved
Respond to 40% of reviews in 50 days	14%
95% of reviews in 90 days	97%

Bridgeside House accommodation

Our move to Bridgeside House accommodation in December 2018 enabled a co-location arrangement with the Scottish Human Rights Commission (SHRC) and the Children and Young People Commissioner Scotland (CYPSCS). This colocation provided the opportunity to share common services such as facilities, health, safety and security management, postal services, and shared areas such as the boardroom and training facilities.

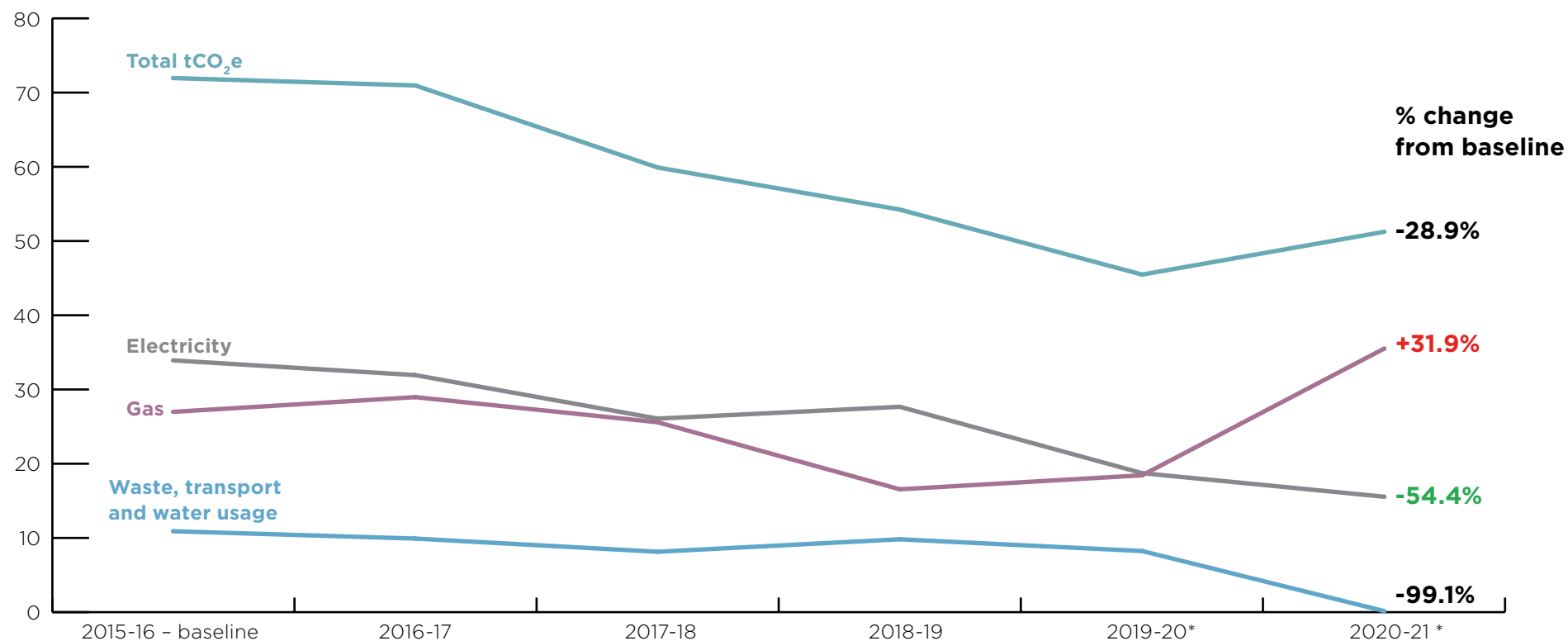
Home-based working

Bridgeside House was closed on 23 March 2020 to most staff. The Building Coordinator continued as the Display Screen Equipment (DSE) Assessor, supporting staff with home-working advice and guidance, self-assessments, sourcing equipment, and completing virtual online home-working assessments. Over 475 items of equipment has been supplied to support remote working.

Environmental and sustainable development

The Climate Change (Duties of Public Bodies: Reporting Requirements) (Scotland) Amendment Order 2020 places a statutory duty on all public sector bodies in Scotland to report their carbon emissions.

We continue to reduce our level of carbon emissions year-on-year. We have reduced our carbon footprint by 29% against our 2015-16 baseline.



* SPSO plus CYPCS and SHRC (shared accommodation in Bridgeside House)

Under the Bridgeside House shared accommodation arrangement, SPSO have responsibility for reporting on the waste and energy carbon emissions for all three organisations. We also report the emissions from business travel for SPSO. Bridgeside House carbon emissions equate to less than 0.004 (tCO₂e) per sq ft.

- ✓ The COVID-19 lockdown has enabled the SPSO to reduce business travel, electricity and waste emissions from Bridgeside House. We aim to maintain as this as far as possible and continue to explore alternative working arrangements practices put in place during lockdown.
- ✗ This year we are reporting an increase in carbon emissions figures from gas. This is due to 2020-21 being the first year in Bridgeside House that the SPSO had been able to access accurate meter readings for gas, rather than using estimated figures calculated from average business use. This will provide a useful baseline to report against in future years.
- ✓ In 2020-21, the SPSO completed Resource Efficient Scotland's Climate Change Assessment Tool through workshops involving representatives from all teams. This generated an action plan which the SPSO will implement in the coming years to further reduce emissions and embed awareness of climate change within the organisation with the aim to be NET ZERO by 2030.

Further details of carbon emission reductions are in our Climate Change Duties Reports on [our website](#).

Biodiversity

The Nature Conservation (Scotland) Act 2004 places a statutory duty on all public sector bodies in Scotland to further the conservation of biodiversity and the Wildlife and Natural Environment (Scotland) Act 2011) by introducing a requirement for all public bodies to make a report publicly available on their compliance with biodiversity duty. Biodiversity duty reports are required every three years. We report on biodiversity annually.

SPSO does not own or manage land and therefore has limited opportunity to carry out activities for biodiversity. We support biodiversity through:

- reducing our carbon footprint
- minimising waste and reducing waste to landfill through recycling
- reducing the total kilometres we travel on business and choosing more sustainable travel options
- raising awareness of biodiversity and sustainability issues
- using local suppliers where possible

Further details are in our Environment, Sustainability and Biodiversity report on [our website](#).



Information and communications technology and cyber security

Digital technologies are an important tool underpinning our service. We manage these closely to protect the personal data and sensitive information we hold and use, and to ensure our systems are robust and resilient. Continued cyber-attacks on organisations have highlighted the importance of, and reliance on, digital systems. Digital technology offers transformational opportunities, but also increases dependence on digital services for the delivery of our work.

The importance of cyber resilience has never been greater, and in 2020-21, we continued implementing the Cyber Resilience Public Sector Action Plan, renewing Cyber Essentials accreditation in December 2020. SPSO utilise SCOTS Connect to host our network services to provide a safe and secure digital environment. SCOTS is the name for the Scottish Government's range of managed IT services and products that hold Cyber Essentials Plus accreditation. Our emails are sent over the secure Public Services Network (PSN) and all traffic is scanned for inappropriate or harmful content, which protects our systems, people and data.

As lockdown led to SPSO staff being required to work from home, we accelerated a number of IT projects to improve ICT infrastructure. These had all been planned but were brought forward and implemented ahead of the planned time, to ensure we continued to provide our service in an efficient and secure IT environment. These adaptations included:

- purchased and issued an additional 47 secure laptops
- prior to the new laptops arriving, we worked with our casework management system (CMS) provider to develop a secure VPN so casework staff could access the CMS securely from a non-SPSO device
- provided staff with facilities to divert their work telephone number to a personal device allowing them to take calls outside the office
- installed a secure electronic file-sharing platform to enable files to be shared safely and securely with external partners
- introduced video conferencing platforms including WebEx and Microsoft Teams to allow staff to meet remotely in a secure environment.

Accessible service

We are committed to ensuring that all members of the public have access to all of the Ombudsman's services and that we can assist them to find support in using our service if required. We continually develop our policies and build upon legislation in place to ensure that our service is accessible to a broad range of people and communities.

Recognising the challenges that the pandemic has had on our service users, their families and their businesses, accessibility has been at the forefront of our minds during 2020-21. We have made substantial progress in developing our accessibility, approach and understanding to respond to service users' needs.

Vulnerability guidance

We established Vulnerability Guidance in early 2020 and this has been embedded in all areas of our service delivery, and published to support the MCHP. We are committed to ensuring equal opportunity to access our services and recognise our duties under the Equality Act 2010, to promote equality of opportunity for all. In addition to considerations of equality and diversity matters, we are mindful of a complainant's vulnerabilities. We recognise that types and levels of vulnerability can vary from person to person and may be influenced by situational circumstances linked to a complaint. We continue to develop and expand our knowledge on vulnerability. This commitment is also recognised in our customer service standards, in particular our commitment to communicate effectively with the people who use our service.

Actions we have taken in respect of vulnerability includes:

- prioritising cases so they do not sit unallocated
- prioritising complaints within caseloads
- identifying and signposting to sources of support
- contacting organisations that are being complained about if a complainant is struggling to access or complete their complaints procedure
- changing how we communicate with someone, for example how we contact them and how often
- we developed guidance for staff to manage discussions preventing suicide and self-harm. This was in response to increased conversations with vulnerable service users who were particularly affected by the unprecedented circumstances of 2020-21. This guidance has been endorsed

as good practice by the Samaritans and has proved effective in handling very sensitive conversations

- we developed a comprehensive list of organisations that we can signpost complainants to for support.

Developing our knowledge and understanding

We held meetings and arranged staff training and awareness sessions to help us continually develop our understanding and knowledge. These were with:

- Patient Advice and Support Service (PASS)
- Scottish Independent Advocacy Alliance (SIAA)
- Equality Advice and Support Service (EASS)
- Equality and Human Rights Commission or Scottish Human Rights Commission (EHRC. SHRC)
- Coalition for Race Equality and Rights (CRER)
- Deaf Scotland

The presentation from SIAA resulted in us developing a website page detailing the benefits of advocacy with a list of advocacy services.

IDEA Community of Practice

Our Inclusion Diversity Equality and Accessibility (IDEA) staff community of practice resumed meetings at the end of 2020. Pressures of home-working impacted on the group meeting as often as they normally would; however, they now have a plan to meet on a monthly basis during 2021-22.

Inclusion Scotland internships

We were delighted to host two work placements from Inclusion Scotland – ‘We Can Work’ scheme, which provides disabled people with valuable paid work experience to help develop their careers, by offering increased flexibility and support in the workplace. One intern was employed in our Assessment and Guidance team in an administrative role. The other, in our Communications team, conducted a research project reviewing the entire communications journey that a complainant would go through when accessing the SPSO complaints handling service, and made recommendations on how to improve our communications according to best practice principles. The ‘We Can Work’ scheme offered our interns valuable and practical work experience and was an excellent opportunity for all our staff to learn from the lived experiences of two disabled colleagues.

Equalities

We ask for information to help us understand our service user profile. 2020-21 data showed that, for the first time in some years, there had been changes to those coming to the SPSO. Key information:

- users remain broadly representative of the population in terms of ethnicity (consistent with previous years)
- there were marginally more women than men (that proportion varies slightly every year)
- our users remain older than across the country’s population because few children or young people access us directly
- a significant proportion of those who access our services

were in the 40–60 years age range, reflecting that people complain about services they have received themselves, and on behalf of those for whom they have caring responsibilities

- we have a high proportion of users reporting they have a disability that affects them long-term. This has been routinely around 40% for users as a whole and often significantly higher for welfare fund applicants. This year saw the first (albeit slight) fall to 37%. We undertook some additional analysis which suggested the reasons are different for SWF applicants and complainants.

There was a significant *increase* in the numbers of SWF applicants who said they did not have a disability. The increase was around 90% and, while there was also an increase in disabled applicants of 12%, it was the increase in non-disabled applicants which explained the population change. Even with that significant increase, the proportion of disabled to non-disabled applicants remained high with 50% of all applicants telling us they were disabled.

- there was a smaller but still notable increase in the percentage of SWF applicants who said they were between 40 to 50 compared to younger groups. We think the most likely explanations for these changes amongst welfare fund applicants were the impact of COVID-19 pandemic on groups not previously in crisis and the reduction in community care grant applications being processed by local authorities in the early months of the pandemic. Community Care Grants are often of particular benefit to disabled people needing support to stay in their communities.

- some of that change will reflected the overall drop in complaint numbers but, even taking that into account, we noted there was a steeper decrease in disabled users compared to non-disabled.
- 34% of all complainants with a disability is high but the drop from 40% last year was significant. We think this is likely related to the pandemic, for example: the higher risk for disabled people during the pandemic leading to people accessing services less often, feeling more dependent on the services they were using, reluctant to change and being less confident about complaining. We are also aware that advocacy services were under significant pressure and that support can make a real difference in confidence to complain. This is something we will continue monitor carefully.

Equality rights

While we cannot determine whether or not an individual's rights under equalities legislation have been formally breached, we can, and do, comment on public bodies' consideration of such rights if we find failures while investigating complaints. Two examples of this work, which we publicly reported on in 2020-21, demonstrated the need for public organisations to proactively offer adjustments and ensure that they implement adjustments properly when they agree these are needed:

- [Decision Report 201900616 | SPSO](#)
- [Decision Report 201900614 | SPSO](#)

Financial position

Our finance processes and procedures are published on [our website](#).

Sources of funding

Total funding approved by the SPCB was £6,079K. This was separated between SPSO's budget of £5,504K, and the Bridgeside House Shared Accommodation budget of £576K, which is managed by the SPSO on behalf of CYPSCS, SHRC and SPSO. Only £5,971K of the approved budget was accessed from the SPCB, and £6K of income was generated from providing online training courses in quarter four.

Expenditure

Total expenditure was £5,882K. This included:

Amount	Area
£4,760K	Expenditure on staff and pension costs
£230K	Fees and expense paid to firms
£268K	Other SPSO operating expenditure
£624K	Bridgeside House shared accommodation expenditure managed for CYPSCS, SHRC and SPSO

Review of financial performance

We are required to produce annual accounts detailing the resources acquired, held or disposed of during the financial year and the way in which they were used. The Scottish Public Services Ombudsman has been appointed as Accountable Officer and is responsible for the preparation of these accounts. For information about how we managed our finances, please see our full financial statements.

We operate a prompt payment policy in line with the Scottish Public Finance Manual and our values of being fair and acting with integrity. We track our payment performance against the 10 and 30 calendar-day targets.

Payments slowed at the beginning of 2020-21 due to the impact of the COVID-19 pandemic lockdown. This was due to the reduced access to colleagues involved in the finance approval and payment process, and the move to full electronic financial processing. Good financial governance, including appropriate controls and separation of duties were maintained.

Pay Performance	2020-21					2019-20					2018-19
	Q1	Q2	Q3	Q4	YE	Q1	Q2	Q3	Q4	YE	YE
% paid within 10 calendar days	22%	32%	36%	63%	42%	66%	61%	73%	80%	71%	79%
% paid within 30 calendar days	93%	94%	98%	98%	96%	100%	100%	99%	100%	100%	99%
Total invoices paid	191	295	253	287	1,026	242	277	293	337	1,149	1,148
Number paid over 30 days	13	17	7	5	38	0	0	2	0	2	15
Oldest payment in days	78	78	89	45		0	0	35	0		0

Resources required for 2021-22

The 2021-22 budget was approved by the Scottish Parliament with revenue resources totalling £6,191K.

Value	Area
£5,567K	Scottish Parliament SPSO budget
£624K	Scottish Parliament Bridgeside House shared accommodation budget managed for CYPCS, SHRC and SPSO

Looking forward

We go into 2021-22 with a clear strategic direction and an ambitious business plan. We also go into the year recognising that the priorities within our business plan will change because of the uncertainty surrounding the progress of the COVID-19 pandemic and lockdown easing.

We will need to balance:

Ongoing commitments

- supporting staff wellbeing
- improving accessibility of our services
- delivering statutory functions as usual
- business development drawing on what we learn from business as usual across all functions
- implementing and delivering new functions

with

COVID-19

- recovering from the enduring impact of COVID-19
- business development based on learning from COVID-19

The maintaining the balance, requires us to recognise and manage the interrelationship and risks. If we do not have the resources to recover from the enduring impact of COVID-19 and capitalise on learning, then the delivery of business as usual and business development to achieve greater impact and maintain performance, particularly in complaint handling, will be impacted negatively.

Ongoing commitments

We will:

- ✓ finally see the implementation of INWO after many months of work by SPSO and stakeholders across the NHS. As part of that we will develop our approach in light of learning, and support whistleblowers and the NHS through our INWO function which went live in line with our plans and expectations. The resourcing of this function will be reviewed over time to ensure it meets workloads
- ✓ build on the very positive staff survey results available [on our website](#).

- ✓ maintain our excellent performance in delivery of the SWF review service. We acknowledge with thanks the additional resource we were given to enable us to maintain performance in light of rising caseloads and the new Self-Isolation Support Grant
- ✓ deliver our public service complaints service, endeavouring to meet our customer service standards and performance targets, while achieving good outcomes for complainants and driving public service improvement
- ✓ maintain and develop how we manage, motivate and support the team, building on the wellbeing and training resources we developed during lockdown
- ✓ drive more efficient ways of working, learning from quality assurance, internal audit, customer service complaints and feedback
- ✓ continue to provide support and advice to members of the public and public bodies alike through advice lines and training
- ✓ maintain stakeholder engagement particularly in relation to access to justice and accessible services
- ✓ continue to look for opportunities to develop shared services

We are committed to being part of Scotland's integration of the UN Convention on the Rights of the Child (UNCRC) into the delivery of public services. We see this as being an integral and critical part of a wider focus on taking the rights based approach underpinning our own strategic aims.



COVID-19

- ✓ We are working collaboratively across the office to drive improvement and efficiency, based on learning from COVID-19. Integral to this approach are the three working groups, casework intelligence, future ways of working and communication. We are involving everyone in this through surveys and consultation. For example: the majority of staff have expressed a preference to be part office and part home based, adoption of Teams is opening up new ways of working and communicating, and reflecting on how we have developed our approach to data during COVID-19.
- ✗ The most significant issue for us, and the area of greatest risk, is the enduring impact of COVID-19, in particular the combined impact of reduced capacity over the last year, and a surge in public service complaint volumes over recent months.
- ✗ We have reached a point of crisis where we consider that without additional resource to deliver a recovery programme, we will see increased delays and dissatisfaction with our complaint investigation services. Importantly, it will undermine delivery of our strategy, particularly in relation to accessibility, access to justice and capacity.

Rosemary Agnew
Scottish Public Services Ombudsman
23 September 2021

ACCOUNTABILITY REPORT & FINANCIAL STATEMENTS

This section of our report sets out:

- Our corporate governance report, including the:
 - Statement of Accountable Officer's responsibilities
 - Governance statement
 - Governance framework
 - Remuneration and staff report
 - Summary of Resource Outturn
 - Independent auditor's report

and

- Our financial statements

Corporate governance report

1. Ombudsman's report

Background

These accounts for the financial year ended 31 March 2021 are presented in accordance with the direction given by the Scottish Ministers, in pursuance of paragraph 15 (1) of schedule 1 of the Scottish Public Services Ombudsman Act 2002.

Leadership team

- Ombudsman
- Director
- Head of Improvement, Standards and Engagement

The Head of Improvement, Standards and Engagement retired in February 2021, and following a successful recruitment exercise, the post was filled on 4 May 2021.

Register of interests

The Ombudsman, Director, and Advisory Audit Board (AAB) members publish declarations of interest on the SPSO website with their biographies. Declarations of interest of other staff are held on the relevant case where required in accordance with the SPSO Code of Professional Conduct.²

² Our declarations of interest are published here: <https://www.spsso.org.uk/senior-management>
<https://www.spsso.org.uk/advisory-audit-board>

System of internal control

A Scheme of Control³ and Scheme of Delegation are in place and are periodically reviewed, as required by the Scheme of Control, and amended as necessary to ensure principal risks to the achievement of the organisation's objectives are managed efficiently, effectively and economically. An Annual Report disclosure guide and statutory accounts checklist have been completed for 2020-21 to inform the assessment of the Ombudsman's governance arrangements, from the assurance framework established with the Scottish Public Finance Manual (SPFM).

Provision of information to employees

We have adopted the principles of openness and participation and place a high level of importance on both informing and consulting staff. We do so by providing access to management papers, through oral and written briefings, by regular staff meetings and events. Information is only withheld where this can be shown to be justified or where a duty of confidence is owed to a third-party.

Data protection

We reported two personal data security breaches to the UK Information Commissioner's Office in 2020-21 (one in 2019-20, two in 2018-19) regarding the theft of a file from an adviser's car, and the return of paperwork to an old address that had

³ Our Scheme of Control can be found in the Governance and Risk handbook here: <http://www.spsso.org.uk/spso-policies>

been incorrectly taken from within the paperwork itself (the paperwork was subsequently returned to SPSO undelivered). The Commissioner decided that no further action by them was necessary on these occasions.

We have clear guidelines governing how we handle data. There is an established process for recording and investigating potential breaches in data security. All incidents must be logged using an incident recording system and, following an investigation, any identified risks are mitigated as far as possible.⁴

The Data Protection Officer provided an annual assurance statement to the Leadership Team and AAB. This states that in 2020-21 the SPSO continued to operate robust data protection compliance measures, in line with GDPR requirements.

Internal audit and risk management

The SPSO's AAB supports the Ombudsman in relation to responsibilities for risk, internal control, and governance. Each year the chair of the SPSO AAB produces an annual report on behalf of the AAB. The purpose of the report is to summarise the AAB's work over the previous financial year and provide their opinion in relation to our governance. Jean Couper CBE, chair of the AAB, provided her detailed report, which is published on our website.⁵

The AAB met three times in 2020-21 and considered each of the internal audit reports. Our internal auditors, Wylie and Bisset, audited at the areas of data management (GDPR), cyber resilience, business continuity planning in relation to the COVID-19 pandemic and reviewed the recommendations made in activities from 2019-20 internal audits. The internal audit annual report concluded SPSO had adequate and effective risk management, control and governance processes to manage the achievement of SPSO's objectives, and proper arrangements to promote and secure value for money.

Audit

The SPSO's accounts are audited by auditors appointed by the Auditor General for Scotland in accordance with paragraph 15 (2) of schedule 1 of the Scottish Public Services Ombudsman Act 2002. The Auditor General has appointed Deloitte as the Ombudsman's auditors for the five-year period from 2016-17 to 2020-21, then extended to 2021-22..

⁴ Our Information Governance handbook can be found at <http://www.spsso.org.uk/spsso-policies>

⁵ Our Advisory Audit Board annual reports can be found at <https://www.spsso.org.uk/advisory-audit-board>

2. Statement of Accountable Officer's responsibilities

Under paragraph 15 (1) of schedule 1 of the Scottish Public Services Ombudsman Act 2002, the Ombudsman is required to prepare financial statements for each financial year in the form as directed by Scottish Ministers. The financial statements are prepared on an accruals basis and must give a true and fair view of the Ombudsman's affairs at the year-end, and of its net resource outturn, application of resources, changes in taxpayers' equity and cash flows for the financial year.

In preparing the financial statements, the Ombudsman is required to:

- observe direction issued by Scottish Ministers, including the relevant accounting and disclosure requirements, and apply suitable accounting policies on a consistent basis
- make judgements and estimates on a reasonable basis
- state whether applicable accounting standards have been followed, and disclose and explain any material departures in the financial statements, and
- prepare the financial statements on a 'going concern' basis, unless it is inappropriate to presume that the Ombudsman will continue in operation.

The Scottish Parliamentary Corporate Body (SPCB) designated the Ombudsman as the Accountable Officer for the SPSO. The relevant responsibilities as Accountable Officer are set out in the Memorandum to Accountable Officers of Other Public Bodies

issued by the Scottish Government and published in the Scottish Public Finance Manual. These include the propriety and regularity of the public finances for which the Accountable Officer is accountable, the keeping of proper records, and safeguarding the SPSO's assets.

As Accountable Officer for the SPSO, I can confirm that:

- I have taken all the steps that I ought to have taken to make myself aware of any relevant audit information and to establish that the auditors are aware of that information.
- The Annual Report and Accounts as a whole is fair, balanced and understandable.
- I take personal responsibility for the Annual Report and Accounts and the judgements required for determining that they are fair, balanced, and understandable.

Disclosure of information to auditors

As Accountable Officer, I am aware of no relevant audit information of which our auditors are unaware. I have taken all necessary steps to ensure that I am aware of any relevant audit information, and to establish that the auditors are also made aware of this information.

As Accountable Officer, I authorised these financial statements for issue on 23 September 2021.



Rosemary Agnew
Scottish Public Services Ombudsman

3. Governance statement

I took up the post of Scottish Public Services Ombudsman and Accountable Officer on 1 May 2017 for an eight-year appointment. As Accountable Officer, the Ombudsman has responsibility for maintaining a sound system of governance and internal control that supports the achievement of organisational policies, aims, and objectives, whilst safeguarding the public funds and the organisation's assets for which I am responsible.

I have in place a scheme of control, the key features of which are:

- the Ombudsman is the Accountable Officer.
- the Ombudsman is supported by the Leadership Team (LT), which comprises the Ombudsman, the Director, and the Head of Improvement, Standards and Engagement. Individual members of the LT have delegated authority to make decisions as set out in the Ombudsman's Scheme of Delegation.
- the Ombudsman chairs formal governance meetings of the LT to consider finance and audit matters, the annual business plan, the risk register, and the strategic direction of the organisation every quarter.
- the LT also meets, usually weekly, to oversee the day-to-day running of the operation.
- the Ombudsman is supported by the AAB, which provides assurance and advice about governance, including management of risk and internal control. The AAB meets at least twice a year to consider audit matters and the SPSO's approach to management of risks to the business in relation to strategic direction of the organisation.
- external scrutiny is provided by an internal audit function. In 2020-21, this was provided by Wylie and Bisset. There is a rolling three-year internal audit programme in place, of which 2020-21 was the final year of the three-year plan for 2018-21.
- risk is managed actively through a risk management policy that sets out the approach to risk management for the delivery of strategic aims. The risk register identifies the key risks facing the organisation, and is reviewed and updated with the business plan on an annual basis with input from all staff. It is also reviewed by the LT each quarter and the AAB at each meeting.
- The most significant strategic risk to the organisation in 2020-21 was COVID-19 pandemic and the resulting Government lockdown. This amplified the existing risk of adequacy of resources to deliver our statutory functions, in particular our complaint handling and Scottish Welfare Fund review services, within an acceptable timescale and quality of service. The majority of the SPSO's workload is demand-led. Consequently, the number and complexity of complaints, enquiries, and Scottish Welfare Fund review applications received is outside our control and fluctuates. The LT monitors this closely.
- the system of internal financial control is based on agreed administrative procedures and the system of delegation and accountability.

- compliance with generally accepted best practice principles and relevant guidance on corporate governance has been assessed using an internal control checklist. The checklist is based on that provided within the SPFM and a proportionate approach has been adopted, reflecting the relatively small size and simple structure of the SPSO whilst recognising the wider impact of its duties.

3.1 Fraud, corruption and bribery

Our policies and procedures on fraud, corruption, and bribery include the anti-fraud policy, Codes of Professional Conduct, the terms and conditions for the supply of goods and services, and the broader financial governance arrangements.

We maintain a hospitality and gifts register, which is updated regularly.

We declare any fraud, whistleblowing or control failure incidents to the AAB and this forms part of the annual assurance process. In 2020-21, there were no instances of fraud or bribery identified or detected in the SPSO.

3.2 Review of effectiveness of internal control and risk management

I am satisfied that the current Scheme of Control provides a robust and appropriate framework for good governance and internal control. My office formally complies with the principles of the Scottish Public Finance Manual (SPFM) in line with the Financial Memorandum agreed with the SPCB.

I am assured that throughout 2020-21 until the date of this report the LT have ensured consistent adherence to procedures for internal control, especially in the key business areas of financial management, operational and employee data management and risk management. The system of internal control is designed to manage rather than eliminate the risk of failure to achieve policies, aims, and objectives; therefore, it can only provide reasonable and not absolute assurance of effectiveness. The system of internal control will continue to evolve to identify the principal risks to the achievement of the organisation's policies, aims, and objectives, to evaluate the nature and extent of those risks and to manage them efficiently, effectively and economically.

The preparation of the annual business plan takes account of the Public Service Improvement Framework, Audit Scotland reports, and Best Value in Public Services characteristics.

The SPSO strategic risk register covers the years of the Strategic Plan and addressing the areas of reputation, communication, governance, resources, business continuity, and withdrawal of the UK from the European Union. This register is reviewed quarterly and published on our website⁶.

The overall operational risk profile for 2020-21 remained low to moderate. The significant risks to carry forward into 2020-21 were the risks associated with: the impact of the COVID-19 pandemic, the effective application of new powers for the Independent National Whistleblowing Officer for the NHS (INWO), an increase in public service complaint cases received with the potential to increase our backlog of cases, and the

⁶ Our Strategic Risk Register can be found at <https://www.spsso.org.uk/corporate-planning>

risk of inadequate funding to maintain and develop capacity to deliver our statutory functions to an appropriate standard.

Control actions for these risks include fully implementing the Business Continuity Plan in accordance with the Government directives, enabling working from home arrangements for staff during lockdown, implementing processes to maintain workflow, maintaining full engagement with the Scottish Government preparations for the introduction of INWO, drawing on the SPCB contingency fund if we are unable to cover unexpected costs, and approaching the SPCB for ongoing increases in funding and through continuous improvement aimed at improving efficiency in future years. The internal audit function has reviewed the process for managing risk.

We have clear guidelines that govern how we handle data. There is a clearly established process for recording and investigation of any potential breaches in data security. All incidents must be logged using an incident recording system and, following an investigation, any identified risks mitigated as far as possible. There were no known or reported serious breaches of data security in the year.

A handwritten signature in black ink, reading "Rosemary Agnew". The signature is written in a cursive, flowing style.

Rosemary Agnew
Scottish Public Services Ombudsman
23 September 2021

Remuneration and staff report

4. Remuneration report

The information disclosed in the tables below which is subject to external audit, includes total remuneration, pension tables, fair pay disclosures and analysis of staff numbers and costs. The other sections in the Remuneration and Staff Report are reviewed by the external auditors to ensure they are consistent with the financial statements.

4.1. Advisory Audit Board

The Ombudsman's Advisory Audit Board (AAB) has three independent members including the Chair. The independent members of the AAB, which is set by the Ombudsman, are remunerated by the Scottish Parliamentary Corporate Body (SPCB) as part of a shared service agreement. All independent AAB member appointments are part-time and are non-pensionable.

4.2. Leadership Team

Set out in the table below are the salaries (including overtime, but excluding employer's superannuation and national insurance contributions), benefits in kind, and pension entitlements of the three members of the Leadership Team. Information is presented for the whole year to 31 March 2021.

Remuneration	2020-21 £'000	2019-20 £'000
Ombudsman		
Salary	85-90	85-90
Benefits in kind	-	-
Pension benefits (i)	34	34
Total	120-125	120-125
Director (part-time)		
Salary (FTE)	85-90	85-90
Salary (actual)	70-75	70-75
Benefits in kind	-	-
Pension benefits (i)	14	14
Total (actual)	85-90	85-90
Head of Improvement, Standards and Engagement (retired 28 February 2021)		
Salary (FTE)	65-70	65-70
Benefits in kind	-	-
Pension benefits (i)	32	48
Total	100-105	105-110

Due to the retirement of the Head of Improvement, Standards and Engagement, the total 2020-21 salary banding, including a payment of annual leave, was 70-75.

Pension benefits	Accrued pension at pension age as at 31 March 2021 and related lump sum	Real increase in pension and related lump sum at pension age	CETV at 31 March 2021	CETV at 31 March 2020	Real increase in CETV funded by the employer	Employer contribution to private pension account
	£'000	£'000	£'000	£'000	£'000	£'000
Ombudsman	15-20	0-2.5	263	225	22	-
Director (ii)	-	-	-	-	-	14
Head of Improvement, Standards and Engagement (retired 28 February 2021)	35-40	1-2	881	858	33	-

Notes:

- (i) The value of pension benefits accrued during the year is calculated as the real increase in pension multiplied by 20, plus the real increase in any lump sum less the contributions made by the individual. The real increases exclude increases due to inflation or any increase or decreases due to a transfer of pension rights.

In 2015, the Government introduced reforms to public sector pensions, meaning most public sector workers were moved into new pension schemes in 2015. In December 2018, the Court of Appeal ruled that the 'transitional protection' offered to some members of the judges and firefighters schemes, as part of the reforms, amounted to unlawful discrimination. On 15 July 2019 the Government issued a written ministerial statement and confirmed that as 'transitional protection' was offered to members of all the main public service pension schemes, the difference in treatment will need to be remedied across all those schemes, including the civil service pension schemes. Civil Service Pensions are still assessing the impact

of the McCloud judgement in relation to changes to benefits in 2015. The benefits and related Cash Equivalent Transfer Values (CETV) disclosed do not allow for any potential future adjustments that may arise from this judgement.

- (ii) The Director's pension is a private defined contribution scheme and is recognised in the Ombudsman's accounts on a cash basis.

4.3. The cash equivalent transfer value (CETV)

A CETV is the actuarially assessed capitalised value of the pension scheme benefits accrued by a member at a particular point in time. The benefits valued are the member's accrued benefits and any contingent spouse's pension payable from the scheme. A CETV is a payment made by a pension scheme or arrangement to secure pension benefits in another pension scheme or arrangement when the member leaves a scheme and chooses to transfer the benefits accrued in their former scheme. The pension figures shown relate to the benefits that the individual has accrued as a consequence of their total

membership of the pension scheme, not just their service in a senior capacity to which disclosure applies.

The figures include the value of any pension benefit in another scheme or arrangement that the member has transferred to the civil service pension arrangements. They also include any additional pension benefit accrued to the member as a result of their buying additional pension benefits at their own cost. CETVs are worked out in accordance with The Occupational Pension Schemes (Transfer Values) (Amendment) Regulations 2008 and do not take account of any actual or potential reduction to benefits resulting from Lifetime Allowance Tax which may be due when pension benefits are taken.

4.4. The real increase in the value of the CETV

This reflects the increase in CETV effectively funded by the employer. It takes account of the increase in accrued pension due to inflation, contributions paid by the member (including the value of any benefits transferred from another pension scheme or arrangement) and uses common market valuation factors for the start and end of the period.

4.5. Service contracts

The SPCB set the Ombudsman's remuneration. Her Majesty the Queen appoints the Ombudsman following nomination by the Scottish Parliament.

The Director and Head of Improvement, Standards and Engagement hold appointments that are open-ended until retirement. The terms of employment are set by the Ombudsman and approved by the SPCB, in line with the SPSO Act (2002).

4.6. Severance payments

No severance payments were made during the year 2020-21 (none in 2019-20).

4.7. Fair pay disclosure

Reporting bodies are required to disclose the relationship between the remuneration of the highest-paid director in their organisation and the median remuneration of the organisation's workforce. Total remuneration includes salary, non-consolidated performance-related pay, and benefits-in-kind of employees. It does not include severance payments, employer pension contributions and the cash equivalent transfer value of pensions. These figures do not include secondees, temporary staff or contractors.

	2020-21	2019-20
Staff remuneration	£16,926 – £89,804	£16,926 – £87,188
Workforce median	£51,314	£49,819
Ombudsman remuneration	£85,000-£90,000	£85,000-£90,000
Ratio	1.7 times median of workforce	1.8 times median of workforce

The change in ratio is due to applying a cost of living increase to all pay bands and the shortening of pay-scale journey times in line with legal obligations. During the 2020-21 accounting period, the SPSO maintained the Living Wage Accreditation status.

5. Staff report (excluding the Ombudsman⁷)

5.1. Staff numbers – total number of people employed

	2020-21					2019-20				
	Male	%	Female	%	Total	Male	%	Female	%	Total
Full-time	18	20.2%	41	46.1%	59	12	15.2%	36	45.6%	48
Part-time	4	4.5%	22	24.7%	26	7	8.9%	21	26.6%	28
Other	1	1.1%	3	3.4%	4	-	-	3	3.8%	3
Total	23	25.8%	66	74.2%	89	19	24%	60	75.9%	79
Permanent FTE ⁸	17.5	24.4%	53.1	74%	70.6	16.5	25.3%	47.2	72.4%	63.7
Other FTE	0.6	0.8%	0.6	0.8%	1.2	-	-	1.5	2.3%	1.5
Total FTE	18.1	25.2%	53.7	74.8%	71.8	16.5	25.3%	48.7	74.7%	65.2

5.2. Staff numbers – average number of people employed (full-time equivalent)

The average number of full-time equivalent (FTE) persons employed by the SPSO during the year was as follows:

	2020-21 FTE	2019-20 FTE
Staff	70.6	63.7
Other	1.2	1.5
Total	71.8	65.2

⁷ The Ombudsman is appointed by the Scottish Parliament, therefore, not a member of the SPSO staff.

⁸ The average number of full-time equivalent (FTE) persons employed by the SPSO during the period.

The increase in staff numbers reflected the taking on of additional staff for the Independent National Whistleblowing Officer for the NHS in Scotland, and an additional member of staff to meet increased caseloads in the Scottish Welfare Fund review team.

Staffing capacity was also directly impacted by COVID-19 (excluding sickness absence). Working days lost because of home schooling, child care, other care responsibilities or where staff were unable to work their full hours was the equivalent of 3.6 FTE (2.5 FTE in public service complaints handling). That represents a 5% reduction in capacity against an average staffing level of 70.6 FTE and an 8.5% reduction in investigative capacity.

5.3. Staff numbers by pay band

Note: these figures do not include secondees, temporary staff or contractors.

	2020-21					2019-20				
Pay band ⁹	Male	%	Female	%	Total	Male	%	Female	%	Total
1	-	-	6	7%	6	-	-	7	9%	7
2	2	2%	13	15%	15	2	3%	11	15%	13
3	16	19%	35	41%	51	14	18%	31	41%	45
4	2	2%	5	6%	7	1	1%	4	5%	5
5	1	1%	2	2%	3	1	1%	2	3%	3
6	-	-	1	1%	1	-	-	1	1%	1
Living wage (internship)	1	1%	1	1%	2	1	1%	1	1%	2
Total	22	26%	63	74%	85	19	24%	57	75%	76

5.4. Total staff costs

	2020-21 £'000			2019-20 £'000		
	Permanent	Other	Total	Permanent	Other	Total
Salaries / wages	3,361	61	3,422	2,885	96	2,981
Social security costs	348	-	348	297	-	297
Pension costs	866	-	866	760	-	760
Total	4,575	61	4,636	3,942	96	4,038

⁹ We publish our pay bands here: <https://www.spsso.org.uk/class-5-how-we-manage-our-human-physical-and-information-resources>

5.5. Staff composition

	2020-21					2019-20				
	Male	%	Female	%	Total	Male	%	Female	%	Total
Director	-	-	1	100%	1	-	-	1	100%	1
Employees	22	24.7%	62	69.7%	84	19	24%	56	70.9%	75
Other	1	1.1%	3	3%	4	-	-	3	100%	3
Total	23	25.8%	66	74.2%	89	19	24%	60	75.9%	79

5.6. Employee sickness absence

Note: these figures do not include secondees, temporary staff or contractors.

Absence is monitored and reported to management on a monthly, quarterly, and annual basis.

	31 March 2021	31 March 2020
Total members of staff for the full year	85	76
Total absence days for year	525.5	538
Average absence days per employee	6.18	7.08
Total absence days excluding long-term absence ¹⁰	161.5	221.5
Average absence days per employee excluding long-term absence	1.9	2.91
% staff with a period of absence	49%	61%

The overall figure of 6.18 days per employee (including long-term absence) is below the average figure of 8 days reported for public sector employees in 2020 (*'Chartered Institute of Personnel Health and Wellbeing at Work 2020: Public Sector Summary'*. Published March 2020).

¹⁰ Sickness absence is divided into short and long term; long-term absence is defined as any period of or over 10 consecutive days.

5.7. Employee turnover and staffing changes

In 2020-21, three members of staff retired or resigned. As part of our preparations for taking on the Independent National Whistleblowing Officer (INWO) function, we created an additional two roles. Alongside this, an additional temporary post was created in the Scottish Welfare Fund team to review cases relating to the new Self-Isolation Support Grant. We had one member of staff on parental leave during 2020-21 and another member of staff was seconded out to another public sector organisation. We responded to staffing changes by recruiting for and filling 17 vacancies.

Two internship roles that had been created and filled in partnership with Inclusion Scotland came to the end of the contract arrangements in 2020-21.

The turnover rate of staff employed by SPSO (i.e. not including temps, secondees or contractors) was 6.5%. This rate has been calculated according to Cabinet Office Guidance¹¹.

5.8. Succession planning

As part of our quarterly Corporate Assurance Meetings, HR statistics are produced and include a report on employment changes and the workforce age profile. This, alongside regular reviews of organisational resources and monthly budget planning by the Director identifies any areas for succession planning.

5.9. Working paper for higher paid employees

We do not have a management working paper to support the disclosure for Higher Paid Employees

5.10. Staff engagement

Percentage scores from the annual staff survey. (Note that we did not carry out an annual survey in 2019-20 because we focused our surveying on staff wellbeing and lockdown working arrangements in response to the COVID-19 pandemic.)

	2020-21	2018-19	2017-18
Your job	81%	75%	81%
Internal relations	82%	72%	79%
External customers	75%	74%	87%
Management	86%	86%	84%
Leadership	84%	54%	77%
Learning and development	75%	75%	81%
Equal opportunities and diversity	79%	80%	88%
Perceptions of SPSO	79%	70%	78%
Corporate social responsibility	69%	76%	N/A
Health and wellbeing	89%	76%	N/A

¹¹ [Annex_A_-_Turnover_Definition__1___2_.pdf \(publishing.service.gov.uk\)](#)

5.11. Staff policies for disabled persons

The SPSO is committed to providing a fair and inclusive workplace free from discrimination, which promotes equality of opportunity for all. As part of standard recruitment practice, applications are encouraged from those with disabilities who meet the essential selection criteria.

The SPSO is committed to recognising and valuing what everyone has to offer. This includes a commitment to improving our policies and practices on disability. We are aware of our equality duties under the Equality Act 2010. In our policy development and our decision-making, we consider the implications for staff who are protected under the Equality Act. Staff with management responsibilities receive training and HR advice and support in relation to working with individual team members to ensure all staff are well supported in their roles; adjustments are made and monitored as individual circumstances change over time and in line with the relevant HR policies.

This year we continued with our focus on health and wellbeing. We had a particular focus on support to staff during the pandemic and, while working from home, isolated. We continued with the relaxation of our enhanced flexible working policies and time-bands to support home-working arrangements, including where required to support a disability, or caring responsibilities.

Our internal working group 'IDEA' (Inclusion, Diversity, Equalities and Accessibility) are interested in a broad range of issues where questions of inclusion might arise including looking at diversity within the SPSO itself and how this might be encouraged.

In terms of workforce diversity and taking direct action to support people with disabilities, we were proud to work with Inclusion Scotland to recruit two interns to work with us and, since the end of their contracts, both have since been successful in gaining longer-term employment.

6. Other employee matters

6.1. Equality and diversity

The Ombudsman supports the principle of equal opportunities in carrying out operational functions and employment practices. The SPSO is committed to pursuing positive action through the organisation's policies and practices to ensure that no individual is discriminated against, either directly or indirectly, unlawfully or unjustifiably because of their personal status in relation to race, ethnic or national origin, religion, age, gender, disability, and sexual or marital status.

6.2. Employee participation

The SPSO achieved gold accreditation in Investors in People (IIP), valid from 2017 to 2023. IIP carried out its annual review in March 2020, the outcome being the SPSO maintaining their accreditation.

This level of accreditation recognises organisations which strive for the best possible standards in people and management, the nurturing of talent, and which encourage personal development. IIP is an internationally recognised accreditation held by 14,000 organisations across the world, and gold accreditation is only awarded to the top 2% of organisations assessed.

We survey our staff regularly to measure job satisfaction, engagement and dedication. The results inform our annual learning and development programme, alongside the outcomes from the IIP assessment. Our survey reports are published annually on our website and our most recent survey in 2021

indicates a strong sense of commitment to the organisation, a culture that supports people in their health and wellbeing with strong management and leadership practices and communications, despite the challenges of demanding workloads and working through the pandemic¹².

6.3. Learning and development

The SPSO runs a comprehensive annual performance review process, where individuals are encouraged and supported to plan for their own development needs and career plans. In addition, we review our organisation-wide learning and development requirements and deliver training programmes and development opportunities on a rolling basis. A mix of internal and external experts deliver group training sessions.

In 2020-21, we developed a programme of virtual induction sessions to help introduce colleagues new to the organisation to our teams and functions, processes, policies and communities of practice. We also delivered a range of well-being and management training, and resources.

6.4. Health, safety and wellbeing

The SPSO is committed to promoting the health, safety and wellbeing of all staff, and to ensuring that our working environment supports this. Our systematic approach to health and safety ensures we comply with all legislative obligations. It also ensures we all know what is expected of us and what we can expect of colleagues, by setting out the correct way of carrying out our duties. Perhaps most importantly, it provides

¹² <https://www.spsos.org.uk/staff-views>

a foundation for continually improving health and safety management within the SPSO. Health and safety continues to be an integral part of the overall management culture and we seek to develop a positive attitude to health and safety amongst staff.

Further detail on our approach to health and safety is published on our website.¹³ In addition to our qualified first aiders and mental health first aiders, in 2017 the SPSO established a Staff Wellbeing Group, consisting of staff members with an interest and training in mental health first aid.

6.5. Trade union relations

We recognise the value and importance of good industrial relations, and effective communication with our staff. In addition to the activities related to staff consultation and participation described above, the management team meet regularly with staff representatives of the Public and Commercial Services Union (PCS) about pay and other related matters. We have published our facility time statement of support on our website.

Relevant Union Officials

Number of employees who were relevant union officials during the period 1 April 2020 to 31 March 2021	Full-time equivalent employee number
4	3.75

Percentage of time spent on facility time	Number of representatives
1 – 50%	4

Percentage of pay bill spent on facility time ('000)	
Total cost of facility time	21
Total pay bill	4,760
Percentage of the total pay bill spent on facility time	0.44%

Paid trade union activities	
Time spent on paid trade union activities as a percentage of total paid facility time hours	20%



Rosemary Agnew
Scottish Public Services Ombudsman
23 September 2021

¹³ <https://www.spsso.org.uk/spso-policies>

Independent auditor's report to the members of Scottish Public Services Ombudsman, the Auditor General for Scotland and the Scottish Parliament

Reporting on the audit of the financial statements

Opinion on financial statements

We have audited the financial statements in the annual report and accounts of Scottish Public Services Ombudsman for the year ended 31 March 2021 under the Scottish Public Services Ombudsman Act 2002. The financial statements comprise the Statement of Comprehensive Net Expenditure, the Statement of Financial Position, the Statement of Cash Flow, the Statement of Changes in Taxpayers' Equity and notes to the financial statements, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and International Financial Reporting Standards (IFRSs) as adopted by the European Union, and as interpreted and adapted by the 2020/21 Government Financial Reporting Manual (the 2020/21 FReM).

In our opinion the accompanying financial statements:

- give a true and fair view in accordance with the Scottish Public Services Ombudsman Act 2002 and directions made thereunder by the Scottish Ministers of the state of the body's affairs as at 31 March 2021 and of its net expenditure for the year then ended;
- have been properly prepared in accordance with IFRSs as adopted by the European Union, as interpreted and adapted by the 2020/21 FReM; and
- have been prepared in accordance with the requirements of the Scottish Public Services Ombudsman Act 2002 and directions made thereunder by the Scottish Ministers.

Basis of opinion

We conducted our audit in accordance with applicable law and International Standards on Auditing (UK) (ISAs (UK)), as required by the **Code of Audit Practice** approved by the Auditor General for Scotland. Our responsibilities under those standards are further described in the auditor's responsibilities for the audit of the financial statements section of our report. We were appointed by the Auditor General on 31 May 2016. The period of total uninterrupted appointment is 5 years. We are independent of the body in accordance with the ethical requirements that are relevant to our audit of the financial statements in the UK including the Financial Reporting Council's Ethical Standard, and we have fulfilled our other ethical responsibilities in accordance with these requirements. Non-audit services prohibited by the Ethical Standard were not provided to the body. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Conclusions relating to going concern basis of accounting

We have concluded that the use of the going concern basis of accounting in the preparation of the financial statements is appropriate.

Based on the work we have performed, we have not identified any material uncertainties relating to events or conditions that, individually or collectively, may cast significant doubt on the body's ability to continue to adopt the going concern basis of accounting for a period of at least twelve months from when the financial statements are authorised for issue.

Risks of material misstatement

We report in a separate Annual Audit Report, available from the **Audit Scotland website**, the most significant assessed risks of material misstatement that we identified and our judgements thereon.

Responsibilities of the Accountable Officer for the financial statements

As explained more fully in the Statement of Accountable Officer's Responsibilities, the Accountable Officer is responsible for the preparation of financial statements that give a true and fair view in accordance with the financial reporting framework, and for such internal control as the Accountable Officer determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the Accountable Officer is responsible for assessing the body's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless deemed inappropriate.

Auditor's responsibilities for the audit of the financial statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs (UK) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

A further description of the auditor's responsibilities for the audit of the financial statements is located on the Financial Reporting Council's website www.frc.org.uk/auditorsresponsibilities. This description forms part of our auditor's report.

Extent to which the audit was considered capable of detecting irregularities, including fraud

Irregularities, including fraud, are instances of non-compliance with laws and regulations. We design procedures in line with our responsibilities outlined above to detect material misstatements in respect of irregularities, including fraud. Procedures include:

- considering the nature of the body's control environment and reviewing the body's documentation of their policies and procedures relating to fraud and compliance with laws and regulations. We also enquired with management, internal

audit and those charged with governance about their own identification and assessment of the risks of irregularities;

- obtaining an understanding of the applicable legal and regulatory framework and how the body is complying with that framework;
- identifying which laws and regulations are significant in the context of the body;
- assessing the susceptibility of the financial statements to material misstatement, including how fraud might occur; and
- considering whether the audit team collectively has the appropriate competence and capabilities to identify or recognise non-compliance with laws and regulations.

We obtained an understanding of the legal and regulatory framework that the body operates in, and identified the key laws and regulations that:

- had a direct effect on the determination of material amounts and disclosures in the financial statements. This included the Scottish Public Services Ombudsman Act 2002.
- do not have a direct effect on the financial statements but compliance with which may be fundamental to the body's ability to operate or to avoid a material penalty. These included the Data Protection Act 2018 and relevant employment legislation.

We discussed among the audit engagement team regarding the opportunities and incentives that may exist within the organisation for fraud and how and where fraud might occur in the financial statements.

As a result of the performing the above, we identified the greatest potential for fraud was in relation to the requirement to operate within the expenditure resource limits set by the Scottish Parliamentary Corporate Body. The risk is that the expenditure in relation to year-end transactions may be subject to potential manipulation in an attempt to align with its tolerance target or achieve a breakeven position. In response to this risk, we obtained independent confirmation of the resource limits allocated by the Scottish Parliamentary Corporate Body and, tested a sample of accruals, prepayments and invoices received around the year-end to assess whether they have been recorded in the correct period.

In common with all audits under ISAs (UK), we are also required to perform specific procedures to respond to the risk of management override. In addressing the risk of fraud through management override of controls, we tested the appropriateness of journal entries and other adjustments; assessed whether the judgements made in making accounting estimates are indicative of a potential bias; and evaluated the business rationale of any significant transactions that are unusual or outside the normal course of business.

In addition to the above, our procedures to respond to the risks identified included the following:

- reviewing financial statement disclosures by testing to supporting documentation to assess compliance with provisions of relevant laws and regulations described as having a direct effect on the financial statements;
- performing analytical procedures to identify any unusual or unexpected relationships that may indicate risks of material misstatement due to fraud;
- enquiring of management, internal audit and external legal counsel concerning actual and potential litigation and claims, and instances of non-compliance with laws and regulations; and
- reading minutes of meetings of those charged with governance and reviewing internal audit reports.

The extent to which our procedures are capable of detecting irregularities, including fraud, is affected by the inherent difficulty in detecting irregularities, the effectiveness of the body's controls, and the nature, timing and extent of the audit procedures performed.

Irregularities that result from fraud are inherently more difficult to detect than irregularities that result from error as fraud may involve collusion, intentional omissions, misrepresentations, or the override of internal control. The capability of the audit to detect fraud and other irregularities depends on factors such as the skilfulness of the perpetrator, the frequency and extent of manipulation, the degree of collusion involved, the relative size of individual amounts manipulated, and the seniority of those individuals involved.

Reporting on regularity of expenditure and income

Opinion on regularity

In our opinion in all material respects the expenditure and income in the financial statements were incurred or applied in accordance with any applicable enactments and guidance issued by the Scottish Ministers.

Responsibilities for regularity

The Accountable Officer is responsible for ensuring the regularity of expenditure and income. In addition to our responsibilities to detect material misstatements in the financial statements in respect of irregularities, we are responsible for expressing an opinion on the regularity of expenditure and income in accordance with the Public Finance and Accountability (Scotland) Act 2000.

Reporting on other requirements

Opinion prescribed by the Auditor General for Scotland on audited part of the Remuneration and Staff Report

We have audited the parts of the Remuneration and Staff Report described as audited. In our opinion, the audited part of the Remuneration and Staff Report has been properly prepared in accordance with the Scottish Public Services Ombudsman Act 2002 and directions made thereunder by the Scottish Ministers.

Statutory other information

The Accountable Officer is responsible for the statutory other information in the annual report and accounts. The statutory other information comprises the Performance Report and the Accountability Report excluding the audited part of the Remuneration and Staff Report.

Our responsibility is to read all the statutory other information and, in doing so, consider whether the statutory other information is materially inconsistent with the financial statements or our knowledge obtained in the audit or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether this gives rise to a material misstatement in the financial statements themselves. If, based on the work we have performed, we conclude that there is a material misstatement of this statutory other information, we are required to report that fact. We have nothing to report in this regard.

Our opinion on the financial statements does not cover the statutory other information and we do not express any form of assurance conclusion thereon except on the Performance Report and Governance Statement to the extent explicitly stated in the following opinions prescribed by the Auditor General for Scotland.

Opinions prescribed by the Auditor General for Scotland on Performance Report and Governance Statement

In our opinion, based on the work undertaken in the course of the audit:

- the information given in the Performance Report for the financial year for which the financial statements are prepared is consistent with the financial statements and that report has been prepared in accordance with the Scottish Public Services Ombudsman Act 2002 and directions made thereunder by the Scottish Ministers; and
- the information given in the Governance Statement for the financial year for which the financial statements are prepared is consistent with the financial statements and that report has been prepared in accordance with the Scottish Public Services Ombudsman Act 2002 and directions made thereunder by the Scottish Ministers.

Matters on which we are required to report by exception

We are required by the Auditor General for Scotland to report to you if, in our opinion:

- adequate accounting records have not been kept; or
- the financial statements and the audited part of the Remuneration and Staff Report are not in agreement with the accounting records; or
- we have not received all the information and explanations we require for our audit.

We have nothing to report in respect of these matters.

Conclusions on wider scope responsibilities

In addition to our responsibilities for the annual report and accounts, our conclusions on the wider scope responsibilities specified in the Code of Audit Practice are set out in our Annual Audit Report.

Use of our report

This report is made solely to the parties to whom it is addressed in accordance with the Public Finance and Accountability (Scotland) Act 2000 and for no other purpose. In accordance with paragraph 120 of the Code of Audit Practice, we do not undertake to have responsibilities to members or officers, in their individual capacities, or to third parties.



Pat Kenny, CPFA

(for and on behalf of Deloitte LLP)

110 Queen Street, Glasgow G1 3BX United Kingdom

23 September 2021

Financial statements

Statement of comprehensive net expenditure for the year ended 31 March 2021

		2020-21	2019-20
	Notes	£'000	£'000
Administrative costs			
Staff and pension costs	4,5	4,760	4,162
Other administrative costs	6	1,122	1,238
Depreciation	7	199	193
Income from all sources	3	(6)	(93)
Net administration costs		6,075	5,500
Net operating costs and total comprehensive net expenditure for the year		6,075	5,500

All amounts relate to continuing activities. There have been no gains or losses.

The accompanying notes on pages 117 to 128 form an integral part of these financial statements.

Statement of financial position as at 31 March 2021

		2020-21	2019-20
	Notes	£'000	£'000
Non-current assets			
Property, plant and equipment	7	1,140	1,282
Total non-current assets		1,140	1,282
Current assets			
Trade receivables and other current assets	9	142	145
Cash and cash equivalents	10	127	8
Total current assets		269	153
Total assets		1,409	1,435
Current liabilities			
Trade payables and other current liabilities	11	(606)	(541)
Provisions	12	(13)	-
Total current liabilities		(619)	(541)
Total assets less current liabilities		790	894
Non-current liabilities		-	-
Assets less liabilities		790	894
Taxpayers' equity			
General fund		790	894
Total taxpayers' equity		790	894

The accompanying notes on pages 117 to 128 form an integral part of these financial statements.

As Accountable Officer, I authorised these financial statements for issue on 23 September 2021.



Rosemary Agnew, Scottish Public Services Ombudsman
23 September 2021

Statement of cash flows for year ended 31 March 2021

	Notes	2020-21	2019-20
		£'000	£'000
Cash flows used in operating activities			
Net operating cost		(6,075)	(5,500)
Adjustment for non-cash transactions			
Depreciation		199	193
Movements in working capital			
Increase in trade and other receivables		3	(8)
Increase in trade and other payables		65	202
Increase in provisions		13	-
Net cash outflow used in operating activities		(5,795)	(5,113)
Cash flows used in investing activities			
Purchase of property, plant and equipment		(57)	(9)
Net cash outflow used in investing activities		(57)	(9)
Cash flows generated from financing activities			
Financing from the Scottish Parliamentary Corporate Body (SPCB)	2	5,971	5,001
Net cash inflow generated from financing activities		5,971	5,001
Net decrease in cash and cash equivalents			
Cash and cash equivalents at the beginning of the year		8	129
Cash flow in year		119	(121)
Cash and cash equivalents at the end of the year		127	8

Statement of changes in taxpayers' equity for year ended 31 March 2021

	Notes	2020-21	2019-20
		£'000	£'000
Balance at 31 March 2020		894	1,393
Net operating costs and total comprehensive net expenditure for the year		(6,075)	(5,500)
General funding from SPCB	2	5,971	5,001
Non-recurring funding from SPCB		-	-
Balance at 31 March 2021		790	894

Notes to the financial statements

1. Accounting policies

These financial statements have been prepared in accordance with the Government Financial Reporting Manual (FReM) in compliance with the direction issued by Scottish Ministers. The accounting policies contained in the FReM apply International Financial Reporting Standards (IFRS) as adapted or interpreted for the public sector context. Where the FReM permits a choice of accounting policy, the accounting policy which is judged to be most appropriate to the particular circumstances of the Ombudsman for the purpose of giving a true and fair view has been selected. The particular policies adopted by the Ombudsman are described below. They have been applied consistently in dealing with items that are considered material to the financial statements.

1.1 Accounting convention

These financial statements have been prepared under the historical cost convention.

1.2 Property, plant and equipment

1.2.1 Capitalisation

All Property, plant, and equipment assets are accounted for as non-current assets unless they are deemed to be held for sale. Enhancements to occupied space relating to a property interest held under an operating lease, such as interior fit out

costs, and including related professional fees, are capitalised. The minimum level of capitalisation of a property asset is £10,000 and for individual items of equipment is £500. Costs relating to information technology hardware and systems are capitalised where the grouped value exceeds £500. All values include irrecoverable VAT.

1.2.2 Valuation

As appropriate, non-current assets are valued at their value to the organisation by reference to current costs.

1.2.3 Depreciation

Depreciation is provided on all non-current assets at rates calculated to write off the cost or valuation in equal instalments over the remaining estimated useful life of the asset. These are as follows:

Leasehold improvements	10 years over the period of the lease
Equipment	5 years
Furniture, fixtures and fittings	5 years
IT hardware and systems	2 or 3 years

There are no assets held for resale.

1.3 Funding receivable

Funding received through the Scottish Parliamentary Corporate Body (SPCB) is credited directly to the General Fund in the period to which it relates.

1.4 Operating income

Operating income relates directly to the activities of the office of the Ombudsman. It comprises fees for training events charged on a cost recovery basis, and leasing surplus office car park spaces. Income is credited to the statement of comprehensive net expenditure for the year to which they relate.

1.5 Leases

The Ombudsman holds no finance leases. Costs in respect of operating leases are charged to the income and expenditure account as they fall due.

1.6 Pension costs

The Ombudsman and office staff are members of the Principal Civil Service Pension Scheme (PCSPS). The PCSPS is an unfunded multi-employer defined benefit scheme with benefits underwritten by the government. As a result, the office of the Ombudsman is unable to identify its share of the underlying assets and liabilities and, therefore, it is accounted for as a defined contribution scheme and no liability is shown in the statement of financial position. The PCSPS is financed by payments from the employer and from those current employees

who are members of the PCSPS, who pay contributions at different rates which depend on their salaries and the section of the pension scheme of which they are a member. The rate of employer contributions is typically set following an actuarial valuation. Government Actuary's Department has been appointed as the PCSPS actuary.

The scheme underwent a valuation designed to set employer contribution rates from 1 April 2019. HM Treasury have directed that part of the valuation process ("the cost control mechanism") should be paused but have confirmed that the valuation will be used to set employer contribution rates. To provide certainty, PCSPS set employer contributions for 2019-20 on the basis of the draft valuation results. Once the valuation has been completed it will be used to set employer rates from 1 April 2020 for the remaining three years of the valuation period. In line with this, the 2019-20 employer contribution rate of 26.6-30.3% of pensionable pay was applied, according to the relevant pay band.

Further details can be found in the separate scheme statement of the PCSPS.¹⁴

1.7 Value added tax (VAT)

The office of the Ombudsman is not registered for VAT, as such all amounts are recorded inclusive of VAT.

¹⁴ <https://www.civilservicepensionscheme.org.uk/employers/employer-pension-notice/epn567-employer-contribution-rates-and-administration-charges/>

1.8 Financial instruments

Financial instruments are classified and accounted for, according to the substance of the contractual agreement, as either financial assets or financial liabilities.

The office of the Ombudsman has classified its financial instruments as follows:

Financial assets

Cash and cash equivalents, trade debtors, accrued income and amounts receivable are reported in the 'current assets' category.

Financial liabilities

Trade payables, accruals, and creditors are classified as 'current liabilities'.

1.9 Critical judgements in applying accounting policies

In applying the accounting policies set out in these Notes, the Ombudsman has had to make judgements about financial transactions or those involving uncertainty about future events. The critical judgement made in the financial statements is that the organisation will continue as a going concern. This is based on the assumption of continuation of service and appropriate funding from the SPCB.

1.10 Critical accounting estimates

The financial statements contain estimated figures that are based on assumptions about the future or that are otherwise uncertain. These estimates relate to the value of tangible and intangible assets. Estimates of useful life are made taking account of historical experience, current trends, and other relevant factors but cannot be determined with certainty. Actual results could be different from the assumptions and estimates, but are unlikely to be material. See note 1.2 for details.

Pension benefits are provided through the civil service pension arrangements. The civil service pension arrangements are unfunded multi-employer defined benefit schemes in which the Ombudsman's office is unable to identify its share of the underlying assets and liabilities. See note 1.6 for details.

Legal costs: Provision has been made based on the estimated likely outcome of claims not yet resolved brought against the SPSO. See note 12 for details.

1.11 Standards issued

1.11.1 Standards, amendments and interpretations effective in the current year

In the current year, the Ombudsman has applied a number of amendments to IFRS Standards and Interpretations that are effective for an annual period that begins on or after 1 January 2020. Their adoption has not had any material impact on the disclosures or on the amounts reported in these financial statements:

- Amendments to References to the Conceptual Framework in IFRS Standards.
- Amendment to IFRS 9: Applying IFRS 9 with IFRS 4.
- Amendment to IFRS 3: Definition of a Business.
- Amendments to IAS 1 and IAS 8: Definition of Material.
- Amendments to IAS 39, IFRS 4, IFRS 7 and IFRS 9: Interest Rate Benchmark Reform (Phase 1).
- Annual Improvements to IFRS Standards 2015-2017 Cycle.

1.11.2 Standards, amendments and interpretations early adopted this year

There are no new standards, amendments or interpretations early adopted this year.

1.11.3 Standards, amendments and interpretations issued not adopted this year

At the date of authorisation of these financial statements, the Ombudsman has not applied the following new and revised IFRS Standards that have been issued but are not yet effective:

- IFRS 16: Leases. HM Treasury have agreed to defer implementation until 1 April 2022.
 - IFRS 17: Insurance Contracts. Applicable for periods beginning on or after 1 January 2023.
 - Amendment to IAS 1: Classification of Liabilities as Current or Non-Current. Applicable for periods beginning on or after 1 January 2023.
 - Amendment to IAS 1: Disclosure of Accounting Policies. Applicable for periods beginning on or after 1 January 2023.
 - Amendment to IAS 8: Definition of Accounting Estimates. Applicable for periods beginning on or after 1 January 2023.
 - Amendments to IAS 16: Property, Plant and Equipment proceeds before intended use. Applicable for periods beginning on or after 1 January 2022.
 - Amendments to IAS 37: Onerous Contracts, cost of fulfilling a contract. Applicable for periods beginning on or after 1 January 2022.
 - Amendments to IAS 39, IFRS 4, IFRS 7 and IFRS 9: Interest Rate Benchmark Reform (Phase 2). Applicable for periods beginning on or after 1 January 2021.
 - Annual Improvements to IFRS Standards 2018-2020 Cycle. Applicable for periods beginning on or after 1 January 2022.

The Ombudsman does not expect that the adoption of the Standards listed above will have a material impact on the financial statements in future periods, except as noted below.

IFRS 16 Leases supersedes IAS 17 Leases and is being applied by HM Treasury in the Government Financial Reporting Manual (FReM) from 1 April 2022. IFRS 16 introduces a single lessee accounting model that results in a more faithful representation of a lessee's assets and liabilities, and provides enhanced disclosures to improve transparency of reporting on capital employed.

Under IFRS 16, lessees are required to recognise assets and liabilities for leases with a term of more than 12 months, unless the underlying asset is of low value. While no standard definition of 'low value' has been mandated, the Ombudsman has elected to utilise the capitalisation threshold of £10,000 to determine the assets to be disclosed. The Ombudsman expects that its existing finance leases will continue to be classified as leases. All existing operating leases will fall within the scope of IFRS 16 under the 'grandfathering' rules mandated in the FReM for the initial transition to IFRS 16. In future years new contracts and contract renegotiations will be reviewed for consideration under IFRS 16 as implicitly identified right-of-use assets. Assets recognised under IFRS 16 will be held on the statement of financial position as (i) right of-use assets which represent the Ombudsman's right to use the underlying leased assets; and (ii) lease liabilities which represent the obligation to make lease payments.

The bringing of leased assets onto the statement of financial position will require depreciation and interest to be charged on the right-of-use asset and lease liability, respectively. Cash repayments will also be recognised in the statement of cash flows, as required by IAS 7.

The Ombudsman has assessed the likely impact to i) comprehensive net expenditure and ii) the statement of financial position of applying IFRS 16 and does not expect the implementation of this standard to have a material impact on the financial statements.

2. Financing from the Scottish Parliamentary Corporate Body (SPCB)

	2020-21	2019-20
	£'000	£'000
General funding from SPCB	5,971	5,001
Total funding from SPCB	5,971	5,001

An increase in general funding in 2020-21 was mainly due the increase in staff costs as was the increase in general funding in 2019-20.

3. Income from all sources

	2020-21	2019-20
	£'000	£'000
Gross income from training	6	88
Other operating income	-	5
Total	6	93

4. Staff costs (including the Ombudsman)

4.1 Average staff employed (full-time equivalent)

The average number of full-time equivalent (FTE) persons employed in the office of the Ombudsman during the period was as follows:

	2020-21	2019-20
	FTE	FTE
Ombudsman	1	1
Staff	71	64
Total	72	65

4.2 Breakdown of staff costs

	Ombudsman	Staff	Total
	£'000	£'000	£'000
Salaries / wages	87	3,422	3,509
Social security costs	11	348	359
Pension costs	26	866	892
	124	4,636	4,760

Comparative for year ended 31 March 2020

Salaries / wages	87	2,981	3,068
Social security costs	11	297	308
Pension costs	26	760	786
	124	4,038	4,162

Staff costs rose in 2020-21 due to recruitment of staff in preparation for Independent National Whistleblowing Officer functions, annual cost of living increases and increments in pay progression.

5. Pension costs

For 2020-21, employer's contributions of £829,743 were payable to the PCSPS at one of four rates in the range 26.6-30.3% of pensionable pay, based on salary bands. The contribution rates reflect benefits as they are accrued, not when the costs are actually incurred, and reflect past experience of the scheme. There were no outstanding scheme contributions at 31 March 2021 (2020 £0). The expected employer contributions rates for 2021-22 are 26.6% to 30.3% of pensionable pay, based on salary bands.

On death, pensions are payable to the surviving spouse at the rate of half of the member's pension. On death in service, the scheme pays a lump sum benefit of at least twice pensionable pay, depending on the scheme joined within PCSPS, and also provides a service enhancement on computing the spouse's pension. The enhancement depends on the length of service and cannot exceed ten years. Medical retirement is possible in the event of serious ill health. In this case, pensions are brought into payment immediately without actuarial reduction and with service enhanced as for widow(er) pensions.

Six employees opted for a partnership pension account with a private sector pension scheme into which the office of the Ombudsman made an employer contribution to the value of £36,287 in 2020-21. Employer contributions include a matching contribution up to 3% and are age-related and ranging from 8% to 14.75% of pensionable pay.

6. Other administrative costs

	2020-21	2019-20
	£'000	£'000
Property costs	569	550
Professional advisors	155	216
Professional services	75	72
General office running costs	246	288
Staff training	28	15
Travel and expenses	-	16
Printing and publications	17	40
Telephones and postage	24	22
External communications and training unit costs	8	19
	1,122	1,238

The above total includes £18,546 (2019-20 £18,110) for external auditor's remuneration. The external auditor received no fees in relation to non-audit work.

The increase in property costs were mainly due to service charge adjustment and lighting system repairs. These costs were partially offset by a refund in council tax following revaluation. The general office running costs include the costs for franked postage and telephone system maintenance for the three organisations (SPSO, SHRC and CYPSCS), which in turn, contributed to the decrease in spending on operation costs from postage and telephone. Running costs include £nil (2019-20 £nil) of equipment rental costs in association with operating leases.

7. Property, plant and equipment

	Leasehold improvements	Equipment	Furniture fixtures & fittings	IT hardware & systems	Total
	£'000	£'000	£'000	£'000	£'000
Cost					
At 1 April 2020	1,286	3	360	72	1,721
Disposals	-	-	(1)	-	(1)
Additions	-	-	6	51	57
At 31 March 2021	1,286	3	365	123	1,777
Depreciation					
At 1 April 2020	209	2	182	46	439
Disposals	-	-	(1)	-	(1)
Charge for year	129	-	49	21	199
At 31 March 2021	338	2	230	67	637
Net book value at					
31 March 2021	948	1	135	56	1,140
31 March 2020	1,077	1	178	26	1,282

8. Intangible assets

There are no intangible assets, as licences are now all annual, therefore, not capitalised.

9. Trade receivables and other current assets

	2020-21	2019-20
	£'000	£'000
Prepayments	139	119
Other debtors	3	26
	142	145

10. Cash and cash equivalents

	2020-21	2019-20
	£'000	£'000
Balance at 1 April	8	129
Net change in cash and cash equivalents	119	(121)
Balance at 31 March	127	8
Cash held at commercial banks	127	8

11. Trade payables and other current liabilities (amounts falling due within one year)

	2020-21	2019-20
	£'000	£'000
Trade payables	24	48
Accruals – HMRC	93	90
Accruals – non-government bodies	489	403
	606	541

12. Provisions

	2020-21	2019-20
	£'000	£'000
Balance at 1 April	-	-
Provided in year	13	-
Balance at 31 March	13	-

This provision relates to legal costs for claims brought against the SPSO in 2020 and expected to settle in 2021. This estimate is based on the maximum claimant valuation as provided by our lawyers. We will seek to settle at a lower level. For the purposes of the accounts we have included the maximum figure.

13. Operating leases

	Buildings	Totals
The total of future minimum lease payments under non-cancellable operating leases for each of the following periods:	£'000	£'000
Within one year of the balance sheet date	278	278
Within two to five years of the balance sheet date	1,113	1,113
Over five years of the balance sheet date	661	661
	2,052	2,052

Comparative for year ended 31 March 2020

Within one year of the balance sheet date	226	226
Within two to five years of the balance sheet date	1,113	1,113
Over five years of the balance sheet date	939	939
	2,278	2,278

14. Related party transactions

The Scottish Public Services Ombudsman was constituted by the Scottish Parliament, which provides funding for the Ombudsman. The SPCB is regarded as a related body. Neither the Ombudsman nor the Ombudsman's staff have undertaken material transactions with the SPCB nor with the Ombudsman's office during the year.

15. Post-balance sheet events

No event has occurred since the date of the balance sheet that materially affects the financial statements.

16. Financial instruments

Financial assets are carried in the balance sheet at amortised cost. Their fair value can be assessed by calculating the present value of the cash flows that will take place over the remaining period of the instrument, using the assumption that the fair value of trade and other receivables is taken to be the invoiced or billed amount.

Credit risk – The Ombudsman receives funding on a monthly basis and restricts cash holdings to a minimum.

Liquidity risk – The Ombudsman does not have any external borrowings.

Market risk – Changes in market interest rates influence the interest on borrowings and on interest receivable on surplus funds invested. The Ombudsman does not rely on interest receivable as its key source of income.

Direction by the Scottish Ministers



SCOTTISH PUBLIC SERVICES OMBUDSMAN DIRECTION BY THE SCOTTISH MINISTERS

The Scottish Ministers, in pursuance of paragraph 15 (1) of Schedule 1 of the Scottish Public Services Ombudsman Act 2002, hereby give the following direction.

The statement of accounts for the financial year ended 31 March 2006, and subsequent years, shall comply with the accounting principles and disclosure requirements of the edition of the Government Financial Reporting Manual (FReM) which is in force for the year for which the statement of accounts are prepared.

The accounts shall be prepared so as to give a true and fair view of the income and expenditure and cash flows for the financial year, and of the state of affairs as at the end of the financial year.

This direction shall be reproduced as an appendix to the statement of accounts. The direction given on 1 December 2004 is hereby revoked.

A handwritten signature in black ink, appearing to read 'Alison Sturgeon'.

Signed by the authority of the Scottish Ministers
Dated 6 November 2006



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Tel 0800 377 7330
Web www.spso.org.uk

Laid before the Scottish Parliament by the Scottish Public Services Ombudsman in October 2020
in pursuance of section 17(1) and (3) of the Scottish Public Services Ombudsman Act 2002.