



COTSWOLD

District Council

Council name	COTSWOLD DISTRICT COUNCIL
Name and date of Committee	AUDIT AND GOVERNANCE COMMITTEE – 27 JULY 2026
Subject	ANNUAL COMPLAINTS, PERFORMANCE AND SERVICE IMPROVEMENT REPORT, INCLUDING THE ANNUAL SUMMARY OF COMPLAINTS STATISTICS FORM THE LOCAL GOVERNMENT AND SOCIAL CARE OMBUDSMAN YEAR ENDING 31 MARCH 2026.
Wards affected	All
Accountable member	Cllr Helene Mansilla, Chair of the Audit & Governance Committee Email: helen.mansilla@cotswold.gov.uk
Accountable officer	Jane Portman, Chief Executive Officer (Head of Paid Services) Email: jane.portman@Cotswold.gov.uk
Report author	Cheryl Sloan, Executive Director Workforce Strategy & Transformation Email: Democratic@Cotswold.gov.uk
Summary/Purpose	This report provides a review of the organisation's complaints handling performance and service improvement over the financial year 1 April 2025 – 31 March 2026. The report is written in line with the Councils Complaints Policy and Procedure which was introduced on 1 April 2025. The policy meets the requirements of the Local Government and Social Care Ombudsman's Complaint Handling Code. The report also presents the Annual Complaints statistics as provided by the Local Government and Social Care Ombudsman letter for the year 1st April 2025 – 31st March 2026.



	The report also outlines some proposed changes to the Council Complaints Policy and Procedure for Committee Approval.
Annexes	1. Annex A - The Local Government and Social Care Ombudsman's annual letter for 25/26. 2. Annex B – Ombudsman Complaints Breakdown 3. Annex C - Example from the Ombudsman webpage 4. Annex D – The Complaints Policy and Procedure
Recommendation(s)	That the Committee note the content of the report and the Local Government and Social Care Ombudsman's annual letter for 25/26. That the Committee approve the recommended changes to the Complaints Policy and Procedure in relation to the use and response to Artificial Intelligence generated complaint.
Corporate priorities	• All
Key Decision	NO
Exempt	NO
Consultees/ Consultation	NA



1. EXECUTIVE SUMMARY

- 1.1** This report presents the annual complaints performance for 2025/26 for Cotswold District Council (CDC) as required by the Local Government Ombudsman Complaint Handling Code and the annual Ombudsman letter for 2025/26.
- 1.2** The report confirms that the council is compliant with the requirements set out in the Complaint Handling Code, with some proposed improvements for next financial year.
- 1.3** The report summarises the Annual Ombudsman Letter which confirms that a total of 11 complaints were received by the Ombudsman relating to CDC in 2025/26, of which one was investigated and upheld.
- 1.4** The report also proposes some changes to the Council's complaints policy to recognise the use of Artificial Intelligence (AI) by complainants for the Audit and Governance Committee approval.

2. BACKGROUND

- 2.1** In February 2024, the Local Government Ombudsman (LGO) introduced a new Complaint Handling Code. The purpose of the Code was to enable organisations to resolve complaints raised by individuals promptly, and to use the data and learning from complaints to drive service improvements. It also aimed to help create a positive complaint handling culture amongst staff and individuals.
- 2.2** Local councils were encouraged to adopt the Code as soon as they were able to do so, however, the Ombudsman intended to start considering the Code as part of their processes from April 2026 to give local councils the opportunity to adopt the Code successfully into working practices.
- 2.3** In response to the new Complaint Handling Code, Cotswold District Council (CDC), reviewed its complaints processes and implemented a new policy and procedure from 1 April 2025 which complied with the new Complaint Handling Code. A copy of the policy and procedure is attached in Annex B for reference. This was approved by the Audit Committee at its meeting on 21 November 2024.



2.4 A requirement of the new Code is to produce an annual Complaints Performance and Service Improvement Report, which covers the following:

- an annual self-assessment against the Code to ensure its Complaints Policy remains compliant with its requirements;
- a qualitative and quantitative analysis of the organisation's complaint handling performance, including a summary of complaints that were not accepted;
- details of any findings of non-compliance with the Code;
- the service improvements made as a result of learning from complaints;
- the Ombudsman's annual letter regarding the organisation's performance; and
- any other relevant reports or publications issued by the Ombudsman relating to the organisation.

2.5 This report is therefore our annual Complaints Performance and Service Improvement Report which covers the requirements set out in the code and our revised policy and procedure.

2.6 The report also includes a recommendation to make some changes to the Customer Complaints policy and procedure to address the use of Artificial Intelligence (AI) by complainants.

3. SELF-ASSESSMENT AGAINST THE CODE

Below is our self-assessment against the Complaints Handling Code:

Code section	Action	Do we follow the Code: Yes/No	Explanations and Commentary
1: Definition of a service	We recognise the difference between a service request and a	Yes	This is explained within our complaints policy, Point 4,



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request and complaint	complaint, and these are defined in our policies and procedures.		complaints-policy-and-procedure-cdc.pdf
2: Exclusions	Our complaints policy sets out circumstances where we would not consider a complaint. These are reasonable and do not deny individuals access to redress.	Yes	This is explained in paragraph 5.1 of the complaint policy complaints-policy-and-procedure-cdc.pdf If there is a circumstance where a complaint is received but it falls within one of the exclusion categories, the council will normally respond to the complainant and provide advice. An example would be with complaints regarding planning decisions, where we would redirect the complaint to the appeals process. If the complainant is dissatisfied with our response, they can still raise their complaint with the Ombudsman. This approach is being reviewed for this FY.
3: Accessibility and awareness	We provide different channels through which individuals can make complaints. These are accessible and we can make reasonable adjustments where necessary	Yes	This is exemplified within paragraph 5 of the complaint policy complaints-policy-and-procedure-cdc.pdf The majority of complaints are received by email to



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			customer feedback or through customer services.
4: Complaint handling resources	We have designated, sufficient resource assigned to take responsibility for complaint handling. Complaints are viewed as a core service and resourced accordingly.	Yes	The team who manage complaints is very lean and are also responsible for Freedom of Information requests. This is 1.5FTE across the partnership. We have recently increased resource by an additional 11 hours to meet increased demand across Complaints and FOIs.
5: The complaint handling process	We have a single policy for dealing with complaints covered by the Code and individuals are given the option of raising a complaint where they express dissatisfaction that meets the definition of the complaint in our policy.	Yes	We have a single corporate policy in place. This has been communicated to all service areas, and detailed guidance is available on the portal, as well as through the complaints team. Where a complaint is received, service areas either pass it on internally in line with the policy or, if the customer prefers, provide the contact details for the Customer Feedback team so the customer contact the complaints team directly.



6: Complaints stages (Stage 1)	We process stage 1 complaints in line with timescales and processes set out in the Code.	Yes	Statistics provided within the report. Performance is reviewed on a quarterly basis and reported to Leadership Teams and Executive as part of the performance report.
6: Complaints stages (Stage 2)	We process stage 2 complaints in line with timescales and processes set out in the Code.	Yes	Statistics provided below Performance is reviewed on a quarterly basis and reported to Leadership Teams and Executive as part of the performance report.
7: Putting things right	When something has gone wrong, we take action to put things right.	Yes	When a complaint is upheld, we take action to address the problem, learn from what happened, apologise and improve future practice.
8: Performance reporting and self-assessment	We produce an annual complaints performance and service improvement report for scrutiny and challenge which includes a self-assessment against the Code.	Yes	Quarterly performance reports are created and reported to Leadership Team and Executive.
9: Scrutiny & Oversight	We have appropriate senior leadership and governance oversight of the complaints process and performance.	Yes	The Chief Executive has overall responsibility for Complaint Handling and the Chair of Audit and Governance Committee.



4. QUALITATIVE AND QUANTITATIVE ANALYSIS OF THE ORGANISATION'S COMPLAINT HANDLING PERFORMANCE, INCLUDING A SUMMARY OF COMPLAINTS THAT WERE NOT ACCEPTED

4.1 A complaint is defined by the Council's Policy as an expression of dissatisfaction, however made, about the standard of service, actions or lack of action by the Council, its own staff, or those acting on its behalf, affecting an individual or group of individuals. This differs from a service request, which is a direct request for the Council to take action to resolve an issue and is not included within the complaint's statistics.

4.2 Target response times for customer complaints, as set by the Ombudsman are as follows:

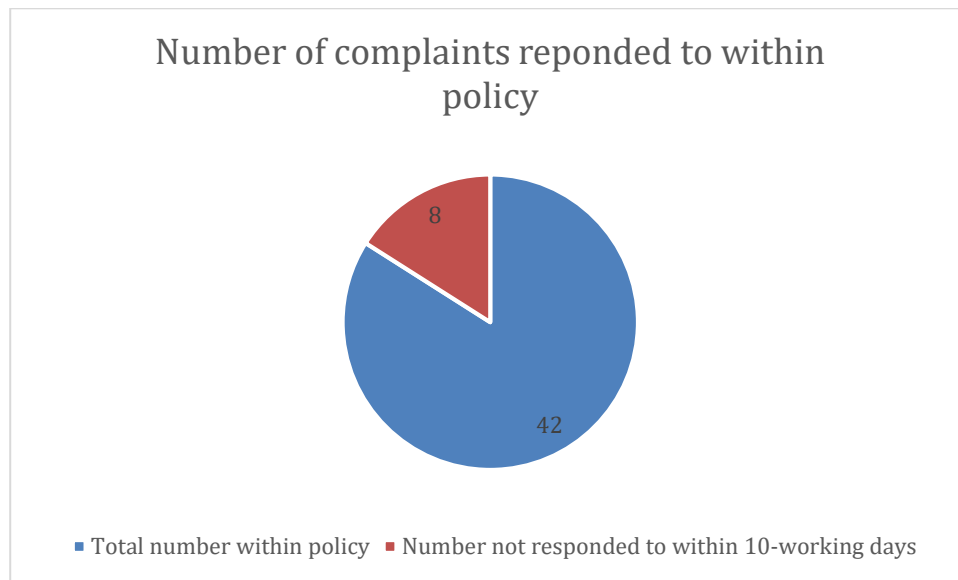
- Stage 1 – 10-working days, plus an extension of a further 10-working days for complex complaints
- Stage 2 – 20-working days, plus an extension of a further 20-working days for complex complaints.

4.3 Below is a summary of the stage 1 complaints received about services provided by CDC during the financial year 1 April 2025 – 31 March 2026 along with the percentage which were responded within target shown in a table and graph format.

Stage 1	Q1	Q2	Q3	Q4	Total	%
Number responded to within 10 working days	9	13	13	6	41	82
Number awarded an extension	0	1	0	0	1	2
Total within policy					42	84
Not responded to within 10 working days	4	1	2	1	8	16



Totals	13	15	15	7	50	
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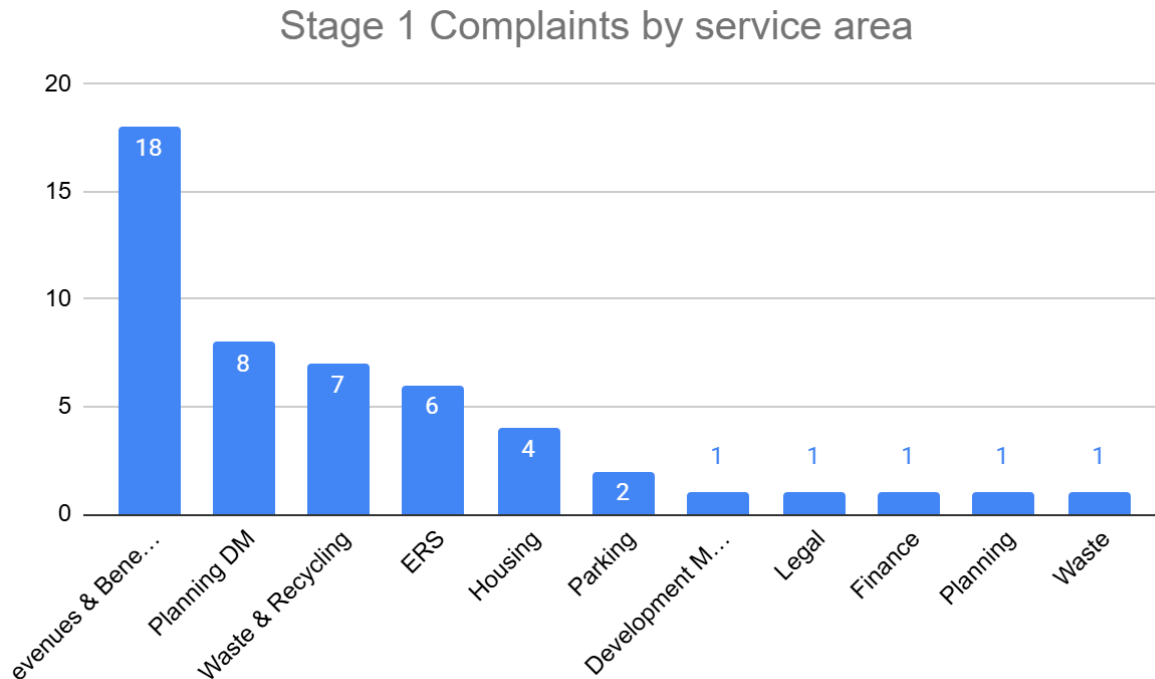


4.4 Below is a summary of the stage 2 complaints received about services provided by CDC during the financial year 1 April 2025 – 31 March 2026 along with the percentage which were responded within target shown in a table and graph format.

Stage 2	Q1 25/26	Q2 25/26	Q3 25/26	Q4 25/26	Total	%
Responded to within 20 working days	3	5	5	2	15	83%
Awarded an extension	3	0	0	0	3	17%
Not responded to within 10 working days	0	0	0	0	0	0
Total answered within policy					18	100%
Closed			1		1	-
Total	6	5	6	2	19	-



- 4.5** Under the policy, stage 1 complaints are responded to by the service area for which the complaint has been raised, and the stage 2 complaint is undertaken by an independent officer. Unless very complex, all stage 2 complaints are completed by the Complaints Team.
- 4.6** With regards to the Stage 1 complaints which did not meet the 10-working day target (16% / 8 complaints out of 41 total), performance remains high, with 84% of complaints responded to within policy timescales (either within 10 working days or with an agreed extension). A focus in 2026/27 will be to utilise the 10-day extension provision where appropriate, ensuring service areas have sufficient time to respond while maintaining compliance with policy timescales.
- 4.7** Below provides a breakdown of the complaints received by service area. Revenues & Benefits recorded the highest number of complaints (18), followed by Planning (8), A moderate number of complaints were received in Waste (7) and ERS (6) and Housing (4).
- 4.8** Whilst the Council receives a wide range of complaints, the majority relate to areas where formal decisions have been made, rather than the standard of service delivery. This is particularly evident in-service areas such as Planning, Revenues and Benefits, and Housing, which together account for the majority of complaints and where outcomes are often determined through statutory or policy-led decision-making processes.



4.9 The majority of complaints that have been assessed and deemed exempt under the complaints process fall into the following categories: -

- Service issues
- Challenges to planning decisions
- Housing appeals

4.10 Where a complaint is assessed as exempt from the complaints process, it will be passed to the relevant department to respond to and record accordingly, or the complainant will be advised about the route to appeal.

4.11 We have historically tended to respond to many complaints which could / should be exempt from the complaints policy, such as planning complaints. Planning complaints in the majority are raised as the complainant is dissatisfied with a planning decision, however reference is often also made to a dissatisfaction with the process. This financial year, a more robust approach will be taken to ensure complaints that are exempt are not taken through the formal complaints process,



this avoids further dissatisfaction as the complaints process is unable to provide remedy to such complaints.

4.12 As per the Councils Complaint Policy the list below sets out all types of complaints that are exempt from the complaints process:

- Where you have, or previously had, a right of appeal or to take legal action. This may include tribunals (such as a Housing Benefit Appeal), Housing Benefit and Council Tax Support decisions, or planning appeals.
- Where the complaint is challenging a planning judgment or a decision not to take enforcement action.
- Where the complaint is challenging a licensing or other quasi-judicial decision, and legal rights of challenge exist (for example, appeal to the Magistrates' Court).
- Where the matter is a personnel issue, such as employment or disciplinary matters.
- Complaints regarding the handling of Freedom of Information requests.
- Complaints relating to Data Protection matters.
- Complaints about the conduct of elected Members.
- Requests for a service or reports of a service failure, for example a missed bin collection.
- Complaints submitted more than 12 months after the complainant became aware of the issue.

5. DETAILS OF ANY FINDINGS OF NON-COMPLIANCE WITH THE CODE

5.1 We currently do not keep a record of complaints that have been exempted from the policy. This is something that we will record for financial year 1 April 2026 – 31 March 2027.

5.2 All other areas of the code have been compliant.



6. SERVICE IMPROVEMENTS MADE AS A RESULT OF LEARNING FROM COMPLAINTS

- 6.1** A total of 50 Stage 1 complaints were recorded over the reporting period. Of these, the majority (34; 68%) were not upheld, while 14 (28%) were upheld. A further 2 complaints (4%) remain ongoing. Complaint volumes were relatively consistent throughout the year, although a slight increase was observed in Q2 and Q3. A total of 19 Stage 2 complaints were recorded over the reporting period. Of these, the majority (16; 84%) were not upheld, while 1 (5%) was upheld. A further 2 complaints (11%) were closed. This suggests that, in most cases, the original Stage 1 decisions were appropriate upon review.
- 6.2** We consider a 'lesson learnt' to be when 'knowledge or understanding is gained by an experience'. This could be as a direct result from a positive or negative experience. When it's positive, we will look to see if it can be applied elsewhere, and when it's negative, we want to ensure that the issue is not repeated.
- 6.3** A summary of the improvements made resulting from the complaints received are as follows:
- Monitoring of systems has been enhanced, including regular checks on parking machines and transaction reviews, to identify and resolve faults more quickly
 - Service monitoring arrangements have been strengthened, particularly within waste services, to address repeat failures and ensure consistent delivery.
 - Staff training and development have been improved across services to increase accuracy, efficiency, and professionalism in handling customer interactions and casework
 - Escalation processes for technical issues have been clarified, ensuring that system faults are promptly referred to and addressed with external software providers where necessary.
 - Quality assurance in reporting and decision-making has been improved, including strengthened checks on planning reports to avoid omissions and enhance transparency.
 - Processes within Revenues and Benefits have been reviewed and refined to improve the timeliness and accuracy of claims handling, billing, and correspondence.



- Internal feedback mechanisms have been strengthened to ensure that lessons from complaints are shared with teams and used to drive service improvements.
- Communication with residents has been improved to provide clearer explanations of decisions, service standards, and any delays encountered.
- Procedures for financial corrections have been reinforced to ensure that refunds, adjustments, and write-offs are applied accurately and without unnecessary delay.

THE OMBUDSMAN'S ANNUAL LETTER

6.4 A total of 11 complaints were referred to the Ombudsman in 2025/26 of which:

- 4 was not for the District Council
- 6 were assessed and closed with no action taken.
- 1 complaint was investigated and 1 was upheld

6.5 The upheld complaint was regarding a delay and poor communication during the handling of complaints about a neighbouring business. There was no fault in the process followed by the Council in reaching its decision, and no evidence of inconsistency in how the matter was assessed. While the complainant experienced distress and an impact on their residential amenity, this was not due to fault by the Council. However, there was fault in the delayed handling of the complaint. The delay did not result in significant injustice as it did not alter the outcome; however, an apology was required to acknowledge the uncertainty caused.

6.6 Of the complaints referred to the Ombudsman, 4 related to planning, 3 for Revenues and Benefits, 2 for housing, 1 for Corporate and 1 for ERS. If we are more robust in our approach to exemptions, this should reduce the volume of complaints which are raised with the Ombudsman and closed by the Ombudsman after initial enquiries.



6.7 The number of complaints referred to the Ombudsman has increased compared to last financial year, where a total of 7 complaints were referred, with no complaints upheld.

7. ANY OTHER RELEVANT REPORTS OR PUBLICATIONS ISSUED BY THE OMBUDSMAN RELATING TO THE ORGANISATION

7.1 There is nothing further to add under this section.

8. PROPOSED CHANGES TO THE CUSTOMER COMPLAINTS POLICY AND PROCEDURE

8.1 The service is starting to see an increase in the number of complaints that have been generated using Artificial Intelligence (AI). These are often long, will quote case law, policy, and process that is on occasion inaccurate and create additional work to follow up unnecessary lines of investigation.

8.2 As such, it is proposed to make a change to the Complaints Policy. This is in-line with guidance from the Ombudsman. The following change is recommended:

Proposed change to the Complaints Policy:

The Council recognises that members of the public may choose to use Artificial Intelligence (AI) tools to assist in drafting correspondence or complaints. While we do not restrict the use of such tools, all submissions must remain:

- *Accurate*
- *Relevant to the matter being raised, and*
- *Proportionate in length.*

Where a lengthy AI generated complaint has been submitted, the Council reserves the right to:

- *Greatly summarise unnecessarily lengthy or repetitive complaints and respond only to the substantive issues raised;*



- *Issue brief position statements rather than detailed responses if the complaint includes excessive or irrelevant commentary.*
- *Where correspondence appears to have been generated using AI in a way that produces excessive volume, repetitive material, or content that does not relate meaningfully to the issue, the Council may apply its unreasonable behaviour provisions.*

8.3 It is also recommended to provide guidance to users who may choose to use AI to help produce their complaint. This would be added to the complaints page on the council website.

When you bring a complaint to us, we need to understand your personal experience and how the issues have affected you. Simple, clear language that explains what happened will always be more helpful than complicated, formal writing.

If you choose to use AI to help produce your complaint, here are some suggestions to get the best results from AI tools when writing your complaint:

- *Keep your AI prompts focused on your experience and how it impacted on you. Consider using the following prompt:*

"Rewrite the text below as a clear, polite complaint. Use only the information I have provided. Do not add or invent new facts. Be concise and professional, but not too formal. Include a closing paragraph suggesting how I would like the complaint to be resolved."

- *Do not ask AI to add legal arguments, use formal legal language or reference laws to try and make your complaint sound more 'official'. AI will often add irrelevant or incorrect legal information, making the resolution of your complaint more difficult.*
- *It is important to check any AI-generated text to make sure it reflects your own personal experience and contains accurate information. If you have*



requested AI to produce a summary on how you want the complaint resolved, ensure that this reflects the outcome you want.

- If a proposed resolution has been included, ensure this reflects your wishes on how the complaint should be resolved.

9. FINANCIAL IMPLICATIONS

9.1 There are no direct financial implications arising from this report.

10. LEGAL IMPLICATIONS

10.1 There are no direct legal implications arising from this report.

11. RISK ASSESSMENT

11.1 This report relates to the Council's management of complaints. If our complaint handling arrangements are weak then the Council is at risk of failing to continuously improve, reputational damage, financial impact through remedy and action from the Ombudsman.

12. EQUALITIES IMPACT

13.1 An equalities impact assessment is not required for this report

13. CLIMATE AND ECOLOGICAL EMERGENCIES IMPLICATIONS

13.1 There are no climate or ecological emergency implications arising directly from this report

14. ALTERNATIVE OPTIONS

14.1 This report is for noting and therefore no alternative options have been presented.



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15. BACKGROUND PAPERS

15.1 The following documents have been identified by the author of the report in accordance with section 100D.5(a) of the Local Government Act 1972 and are listed in accordance with section 100 D.1(a) for inspection by members of the public:

- Annual Complaints Statistics and Annual Letter from the LGO

16.2 These documents will be available for inspection online at Home – Cotswold District Council or by contacting democratic services at democratic.services@cotswold.gov.uk for a period of up to 4 years from the date of the meeting.

(END)