

KCC Interim Customer Feedback Report

By: Ben Watts – Deputy Chief Executive
To: Governance and Audit Committee
Date: 19 May 2026
Subject: KCC Interim Customer Feedback Report
Classification: Unrestricted

Summary: This report provides update following the presentation of the Annual Customer Feedback Report to Members.

Recommendation: The Committee is asked to note the contents of this report for assurance.

Purpose of the report

- 1) When considering the Annual Customer Feedback Report in November 2025, Members requested that a further paper be brought back within six months to:
 - a) Provide assurance on progress
 - b) Provide further detail in relation to the issues raised by Members
- 2) This report is intended to be a snapshot and does not repeat the full annual data set, which will be reported again as part of the next Annual Customer Feedback Report.
- 3) Further to the previous conversation, key services have been invited to Governance and Audit Committee so that Members can ask direct questions to them.
- 4) The paper provides further information to support oversight and allows the Committee to determine next steps, including any reference to Cabinet Committees for further review.

Introduction and Context

Because this paper picks up on a wide range of issues raised by the Committee at the November meeting and seeks to provide the information and data requested in a number of ways, it is drafted around those headings which are marked in bold and underlined rather than in the usual numbered format.

Overall customer feedback volumes remain high, reflecting ongoing pressures across a number of services. Demand continues to be sustained in areas that are nationally and statutorily complex, which in turn affects response times and the likelihood of complaints escalating.

In addition to the general increase, there is also a greater complexity in those cases, including a rise in requests generated or expanded through AI tools.

While many services continue to manage volumes effectively, the nature and complexity of some cases means they take longer to investigate and resolve, this is

particularly true where AI has generated responses, making them longer and more complicated to unpick.

Despite this, learning from complaints remains a key focus. Themes around communication, timeliness and managing expectations are being used to inform service improvements, with actions underway to strengthen responses, support earlier resolution and improve consistency where pressures are greatest.

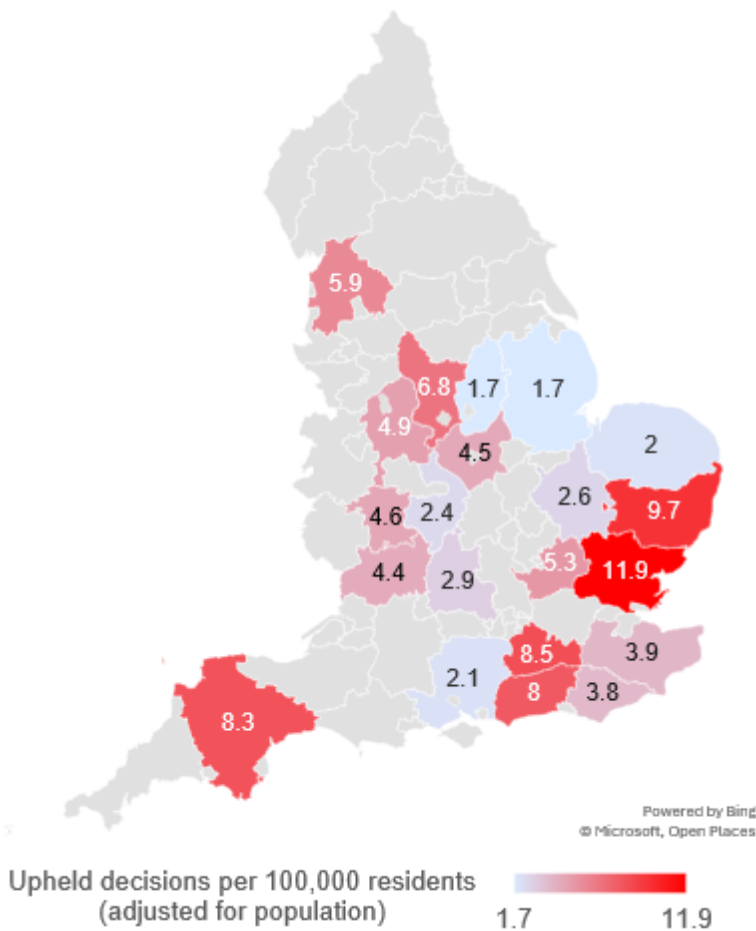
Benchmarking (for 2024/2025 financial year)

In November, Members asked for greater information regarding benchmarking, to help understand the relative performance of the Council in relation to complaints.

The below stats are currently only available for the financial year of 2024/2025. Updated figures will be available later on this year, when the LGSCO releases its figures.

Comparisons with our nearest statistical neighbours is challenging, as the makeup of each County Council is vastly different in terms of population and services provided.

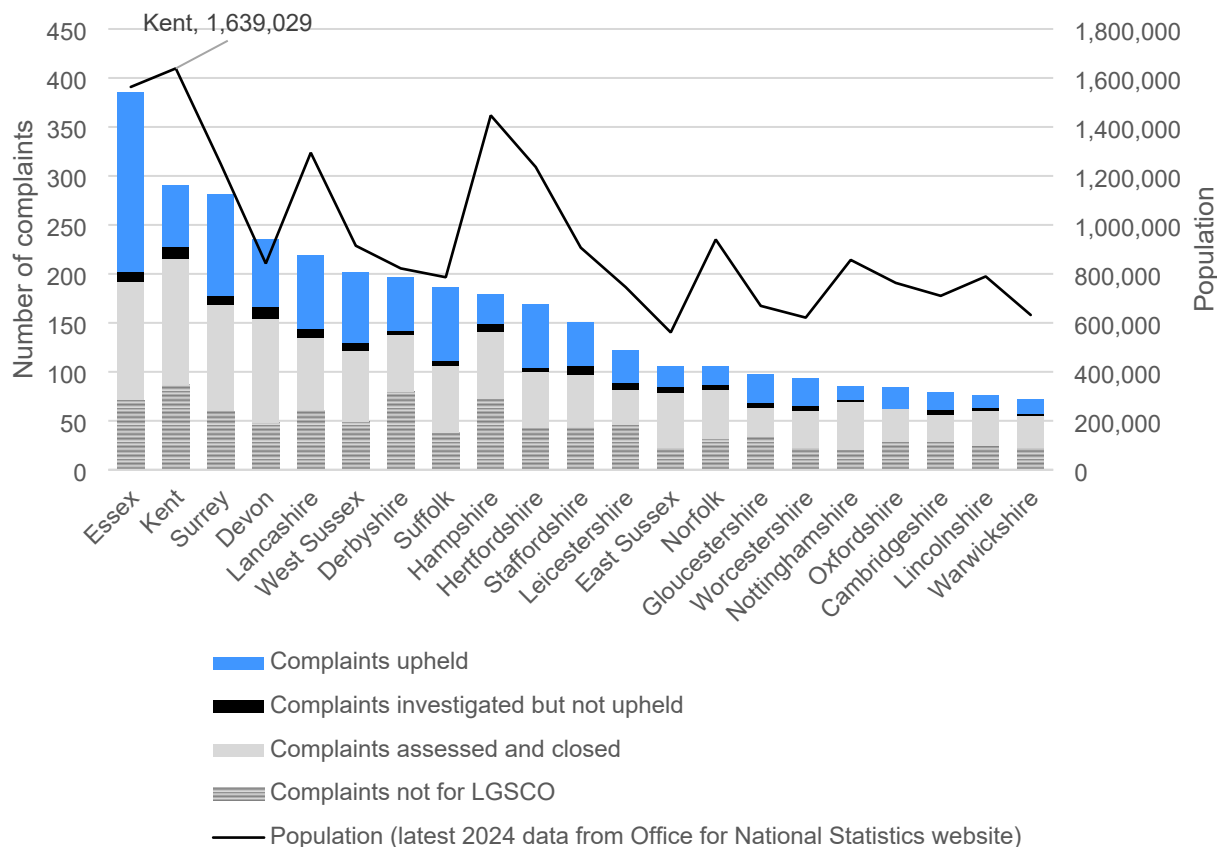
In numeric terms, Kent has one of the highest overall LGSCO complaints in comparison to other county councils across the country, second only to Essex. However, when adjusted for population, Kent's upheld decisions rate is just 3.9 per 100,000 residents. This indicates that, despite scale, our upheld LGSCO outcomes compare favourably on a population-adjusted basis. In contrast, Essex shows a markedly higher upheld rate of 11.9 per 100,000, alongside a much higher proportion of cases progressing to investigation.



The map above shows that we continue to perform comparatively well when looking at upheld LGSCO decisions per 100,000 residents, adjusted for population. While there is some variation across the country, Kent sits at the lower end of the scale compared with many other county councils, indicating fewer upheld decisions relative to population size.

Despite ongoing service pressures and high volumes of customer feedback, our complaint handling and decision-making processes are generally effective, with a lower proportion of cases resulting in upheld LGSCO findings.

Comparison of county council complaint data published on LGSCO website for 2024/2025 financial year



The above chart shows that, when set against population size, our overall LGSCO complaint volumes remain proportionate and compare relatively well with other county councils. Although Kent has one of the largest populations, the number of complaints investigated and upheld sits in the mid-range nationally rather than at the higher end.

A significant proportion of cases are either assessed and closed or not upheld, indicating that many concerns are being resolved appropriately without adverse findings. Overall, this reinforces that our approach to complaint handling is effective and that decision-making is generally robust when viewed in the context of scale and demand.

KCC Interim Customer Feedback Report

Comparison of county councils complaint data published on LGSCO website (Population over 1 million) for 2024/2025 financial year

County Council	Complaints dealt with	Complaints not for LGSCO	Complaints assessed and closed	Complaints investigated	Complaints upheld	% of investigated complaints upheld	Upheld decisions per 100,000 residents	Population
Essex	385	71	121	193	183	95%	11.9	1.56m
Kent	291	87	128	76	63	83%	3.9	1.64m
Surrey	281	60	108	113	104	92%	8.5	1.25m
Lancashire	219	61	74	84	75	89%	5.9	1.3m
Hampshire	179	72	69	38	30	79%	2.1	1.45m
Hertfordshire	169	43	57	69	65	94%	5.3	1.24m

* Complaint data from LGSCO website and population data from Office for National Statistics website.

* Upheld decisions per 100,000 residents (adjusted for population).

* Population Rounded to nearest 10,000.

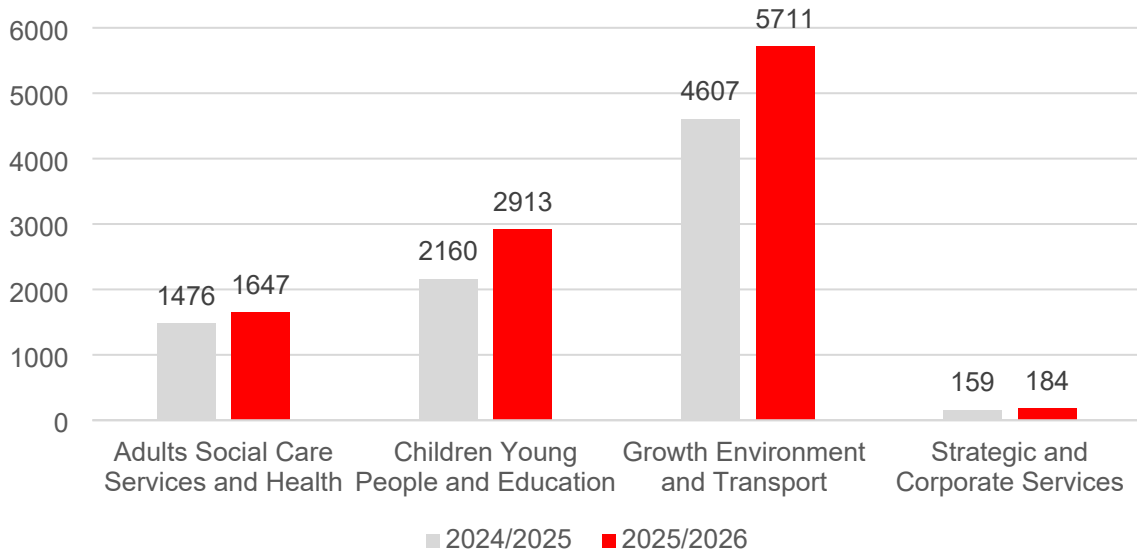
Volume of all feedback received

Type of feedback	2024/2025	2025/2026	% difference from previous year
Comment	565	292	-48%
Compliment	1,610	1,675	4%
Coroners Enquiry	35	43	23%
Enquiry	1,505	2,662	77%
Informal Concern	174	75	-57%
Member enquiry	2,301	3,515	53%
Stage one complaint	5,386	5,985	11%
Stage two complaint	680	912	34%
LGSCO complaint	291	309	6%
Total	12,547	15,468	23%

The total volume of feedback increased by 23% from 2024/2025 to 2025/2026. Complaints (stage one and stage two combined) increased by 14% and Member enquiries by 53%. There has been a significant increase in the amount of feedback that requires a formal response from the Council.

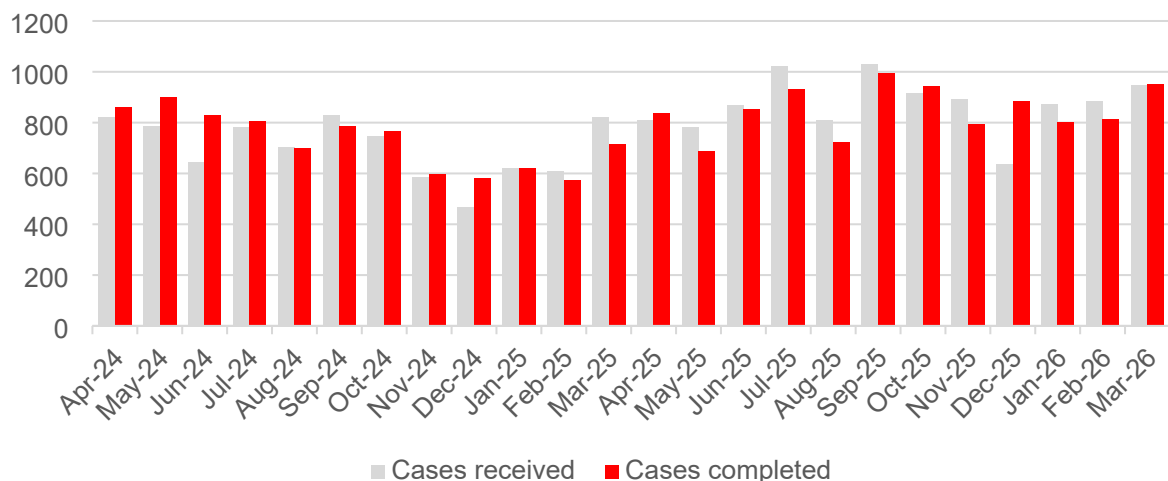
The above figures do not include Library comments, this is due to the Ask a Kent Librarian service which falls outside the normal scope of 'comments'. In addition, Waste comments have also been removed from both years as there has been a change in process which does not allow for like for like reporting. We will be reviewing the figures for the annual report.

Volume of stage one and stage two complaints and Member enquiries received by Directorate



The increase in feedback is significant particularly within GET and CYPE, the recent realignment in the feedback team has directed resource in the appropriate teams to ensure that these services are supported in responding to complaints.

Monthly trend of stage one and stage two complaints and Member enquiries received and closed



Overall, the volume of closed cases broadly tracks the volumes received over time despite sustained and fluctuating demand, this provides assurance that customer feedback continues to be actively managed. While there are periods of increased pressure, particularly during 2025, these tend to be short-lived and are followed by

recovery in closure activity, indicating effective prioritisation and workload management rather than the build-up of long-term backlogs.

Stage two complaints remain low in volume and controlled, suggesting that escalation is being limited through a continued focus on earlier resolution. Member enquiries are more volatile but are responded to promptly, with closures rising shortly after peaks in demand.

Volume of complaints in comparison to service delivery

0.4%

The total number of complaints we received for Adults Social Care Services and Health in the last year represent less than 1% of the amount of people that we provide essential services for during that time...

...for example, we completed **19,891** occupational therapy assessments and received just **36** complaints...

and we received only **193** complaints about blue badges, despite having **39,755** active blue badge parking permits.



137,000



Our Children, Young People and Education Directorate supported over **137,000** people during the 2024/2025 period...

and the complaints we received for that period represent less than **1%** of that number.

2,268,522

2,268,522 bookings were made at Household Waste Recycling Centres across the county, but we received just **323** complaints for the service.



Reasons for closed stage one complaints

	2024/2025		2025/2026	
	Total	%	Total	%
Policy and Procedure	884	15%	1,990	30%
Quality of service	2,848	49%	1,821	27%
Communications	828	14%	1,021	15%
Service not provided	634	11%	944	14%
Equalities and Regulatory	207	4%	394	6%
Staff Conduct	313	5%	366	5%
Issues with service	0	0%	43	1%
Not for KCC	41	1%	42	1%
Blank	4	0%	28	0%
Comment/Enquiry use only	16	0%	25	0%
Value for money	13	0%	14	0%
Total	5,788		6,688	

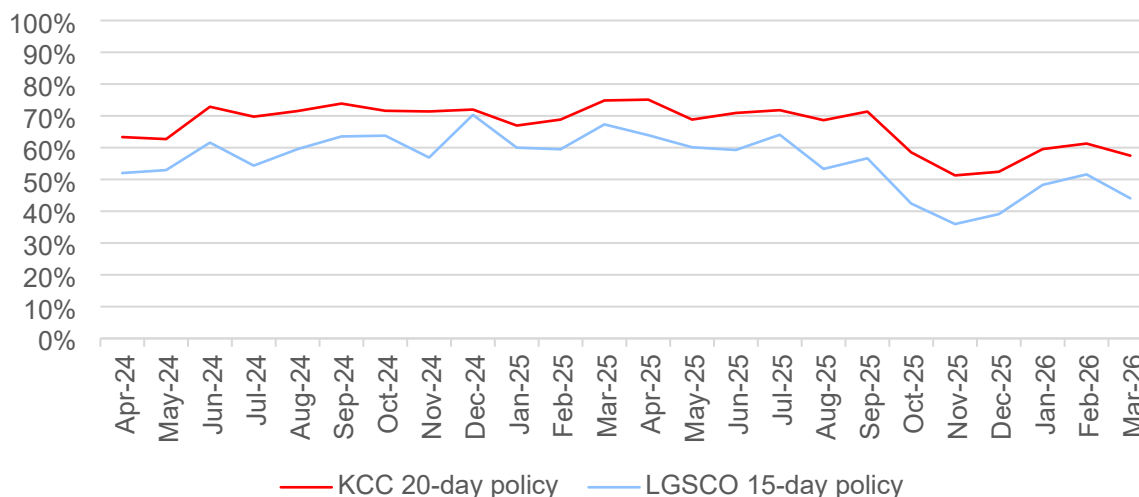
* The total reasons will not match the number of complaints as some cases will have more than one reason recorded for the complaint.

There has been a shift in the reasons for complaints over the past year. Complaints recorded under the Policy and Procedure category include those concerning disagreements with decision making, policy, or with charges received (for example for care).

Timeliness of responses

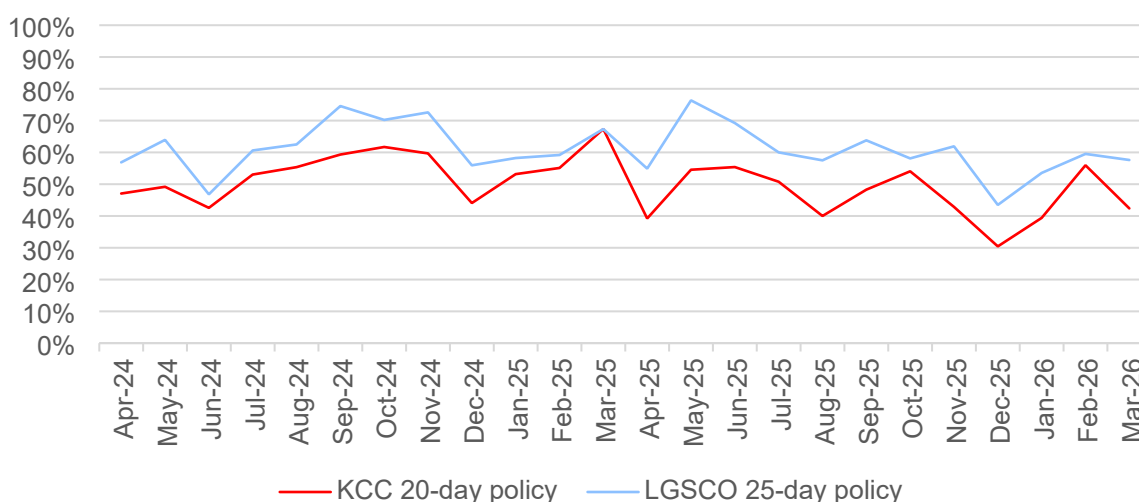
Members expressed concern about delays in responding to complaints and the impact this has on customer confidence. The following information tracks the volume of complaints and performance against the 20 day timescale.

Timeliness of stage one complaints



Percentage of stage one complaints responded to within timescale	2024/2025	2025/2026
Stage one complaint within KCC policy of 20 days	70%	64%
Stage one complaint within KCC policy of 20 days (excluding SEN Services)	78%	72%
Stage one complaint within LGSCO timescale of 15 days (this figure excludes ASCH and Children Act complaints as the LGSCO policy does not apply)	60%	52%
Stage one complaint within LGSCO timescale of 15 days (this figure excludes ASCH and Children Act complaints as the LGSCO policy does not apply) (excluding SEN Services)	70%	60%

Timeliness of stage two complaints



Percentage of stage two complaints responded to within timescale	2024/2025	2025/2026
Stage two complaint within KCC policy of 20 days	54%	46%
Stage two complaint within KCC policy of 20 days (excluding SEN Services)	68%	57%
Stage two complaint within LGSCO timescale of 25 days (this figure excludes ASCH and Children Act complaints as the LGSCO policy does not apply)	62%	59%
Stage two complaint within LGSCO timescale of 25 days (this figure excludes ASCH and Children Act complaints as the LGSCO policy does not apply) (excluding SEN Services)	77%	71%

Percentage of complaints responded to within 20-day timescale by Directorate

	Stage one complaint		Stage two complaint	
	2024/2025	2025/2026	2024/2025	2025/2026
Adults Social Care Services and Health	61%	49%	33%	35%
Children Young People and Education	37%	28%	29%	26%
Children Young People and Education (excluding SEN Services)	64%	47%	51%	42%
Growth Environment and Transport	88%	85%	81%	68%
Strategic and Corporate Services	78%	85%	92%	70%

Performance dipped in quarter 3 which was particularly impacted by resourcing pressures, vacancies were filled but training and embedding into the service takes time. This exacerbated backlogs already present within CYPE.

Within Adults Social Care Services and Health, the dip in performance reflects pressures in a small number of services where complaint backlogs had developed. In response, additional support was put in place to help services work through outstanding cases and strengthen responses. While this action was necessary to address the backlog and improve the quality of handling, it had a short-term impact on timeliness, which is reflected in the performance figures for this period.

Children, Young People and Education also saw a reduction in timeliness compared to the previous year. During this period there was a concerted effort to reduce existing backlogs, particularly from late summer into the autumn. This focus on clearing older cases affected the ability to respond within timescales for newer complaints, resulting in a temporary dip in performance. Work is ongoing to stabilise performance, reduce the time taken to respond, and minimise delays caused by waiting for information, with the aim of improving timeliness while continuing to address underlying pressures.

Average response time for complaints (in days)

	2024/2025	2025/2026
Stage one complaint (all services)	29.6	27.8
Stage one (excluding SEN Services)	16.9	19.3
Average response time in days for complaints responded to in 20 days or less	8.6	10.1
Average response time in days for complaints responded to in 20 days or less (excluding SEN Services)	8.6	10.0
Average response time in days for complaints responded	78.1	59.3

	2024/2025	2025/2026
to after 20 days		
Average response time in days for complaints responded to after 20 days (excluding SEN Services)	46.9	42.8
Stage two complaint (all services)	40.2	35.7
Stage two (excluding SEN Services)	24.1	26.5
Average response time in days for complaints responded to in 20 days or less	10.4	10.4
Average response time in days for complaints responded to in 20 days or less (excluding SEN Services)	10.3	10.2
Average response time in days for complaints responded to after 20 days	75.0	57.5
Average response time in days for complaints responded to after 20 days (excluding SEN Services)	53.5	47.8

Whilst more needs be to done to improve timeliness, the above table demonstrates that the time to respond in those overdue cases at stage one is reducing and for those answered in timescale the average is around 10 days.

High-volume and high-risk services

Members highlighted concerns about sustained complaint volumes in specific services, particularly those under wider national and statutory pressures. Targeted support has continued in these areas, including management oversight, revised processes and additional guidance for officers. Progress has been made in some services, as demonstrated in the reduction of response times, although others continue to face ongoing pressures that limit the pace of improvement.

Compliance with complaint timescales in the LGSCO Code

The Local Government and Social Care Ombudsman (LGSCO) has issued a Complaint Handling Code (“the Code”) as advice and guidance for all local councils in England under section 23(12A) of the Local Government Act 1974. The Code is not mandatory and applies only where no statutory complaints process is in place.

As a result, some complaints relating to children’s services, adult social care and public health fall outside the scope of the Code. This has been taken into account in the data and analysis presented within this report.

The Code recommends that:

- **Stage one complaints** are acknowledged within five working days and responded to within ten working days of acknowledgement, resulting in a total response timeframe of 15 working days.
- **Stage two complaints** are acknowledged within five working days and responded to within 20 working days of acknowledgement, resulting in a total response timeframe of 25 working days.

As part of its self-assessment against the Code, the Council has confirmed compliance with all aspects of the Code except for the recommended response timescales.

Rather than adopting the Code's timescales, the Council continues to operate its existing policy of a **20 working day response timeframe for both stage one and stage two complaints**.

For **stage one complaints**, the 20-day timeframe is intended to support a more thorough investigation and a more robust, well-evidenced response at the earliest stage. This approach is designed to maximise the likelihood that complaints are resolved satisfactorily first time, reducing the need for escalation.

At present, the Council is not consistently meeting its own 20-day service standard. In this context, adopting the shorter 15-day response timeframe recommended by the Code would risk setting expectations that cannot be reliably met and could undermine transparency and customer confidence.

For **stage two complaints**, the Council's 20-day response timeframe remains five working days shorter than that recommended by the Code. Maintaining a consistent response timeframe across both stages also supports clarity for customers by providing a single, easily understood expectation for when a response will be issued.

Training and Continuous Improvement within Directorates

At the previous meeting, Members sought assurance that complaints are used to drive service improvement rather than treated as isolated issues. Across the organisation, all directorates use learning from complaints, alongside wider quality assurance activity, to support continuous improvement.

Directorate-level learning and training

Training is delivered through a mix of regular programmes and targeted learning activities. Many services use short, focused sessions to address emerging issues and reinforce good practice. Each Directorate organises training specific to its own services, aimed at enhancing service delivery.

- Children, Young People and Education (CYPE) runs a weekly *Workshop Wednesday*, providing mandatory and topic-focused sessions. Recent Special Educational Needs (SEN) sessions have included the Annual Review process and updates on social care procedures.
- Growth, Environment and Transport (GET) supports staff development through directorate-wide learning sessions, specialist and technical training, and shared resources that promote consistent practice and professional development.
- Adult Social Care and Health (ASCH) uses learning from audits, complaints, safeguarding reviews and lived experience to drive improvement. The directorate runs regular reflective learning sessions where staff explore real case themes, share good practice and learn collectively, including sessions

co-designed or co-hosted with people with lived experience of adult social care. Where patterns or concerns are identified, action is taken through targeted training, staff briefings, updates to practice guidance or policy changes.

In addition, all directorates provide ad-hoc training where specific issues or risks are identified, supporting continuous improvement as needs arise.

Training on complaints handling

Complaints handling training is delivered in-house by experienced complaint professionals. This has been less frequent during the past year due to the need to prioritise backlog clearance and service pressures. However, training has already recommenced in some areas, and during 2026/27 a refreshed programme will be reviewed and delivered across the organisation.

Targeted training and guidance will be provided to services with higher complaint volumes, focusing on:

- clear and well-explained responses;
- evidence-based investigations; and
- learning from complaint outcomes.

Quality and consistency of responses

The Customer Feedback function was established to bring together ASCH and the Corporate Complaints Team at a time when ASCH was experiencing a significant complaints backlog and difficulty meeting statutory timescales. Over a two-year period, the combined team worked with the service to improve processes, clarify roles and strengthen oversight. This resulted in improved timeliness, more consistent handling and greater capacity to manage demand.

As confidence and capability increased, the team was able to provide more proactive support to services, including earlier intervention and clearer advice on complaint responses.

The learning from this integration has informed subsequent transfers of resources from GET and CYPE into the Customer Feedback Team.

In GET, existing backlogs were reduced within around six months and performance has remained broadly stable since, demonstrating the effectiveness of the approach in a relatively stable service context.

In CYPE, the position is more complex. Integration coincided with major transformation in SEN services. As a result, the focus has been on supporting wider service improvement to reduce the root causes and severity of complaints over time, rather than solely reducing backlog volumes. Progress is therefore expected to take longer.

Quality assurance activity has identified improvements in the structure and tone of complaint responses, while also highlighting areas where greater consistency is still

required. This work has initially focused on services without active backlogs, allowing good practice to be embedded and then applied more widely.

Within SEN, an officer is embedded in the service to support investigations and the drafting of clear, well-evidenced responses. A dedicated role within the Customer Feedback Team also continues to provide specialist advice and short-term drafting support to improve timeliness, while longer-term capability is developed within the service.

Organisational Learning Panel

The Organisational Learning Panel is a cross-organisation forum established to share learning from complaints and wider customer feedback, including cases investigated by the Local Government and Social Care Ombudsman.

The Panel identifies common themes, lessons learned and opportunities for improvement, promoting consistency and improving customer experience across services. It reviews case studies and agrees actions to support service improvement and organisational learning.

The next meeting is scheduled for 3 June 2026.

Ombudsman activity: update

Closed figures as per KCC records. The LGSCO will be providing updated figures later this year.

Outcome	2025/2026
Closed after initial enquiries	161
Not upheld	9
Referred back for local resolution	85
Upheld	54
	309

The above are our current figures, however these will not exactly tally with the LGSCO's numbers, these will be released shortly for 2025/2026. The below table outlines last year's LGSCO figures as reported by the LGSCO.

Outcome	2024/2025
Closed after initial enquiries	128
Not upheld	13
Referred back for local resolution	75
Upheld	63
Incomplete/Invalid	9
Advice given	3
	291

Encouragingly 4 cases were reported upheld – remedy already provided. This is where the Council has already identified fault and provided a remedy in line with LGSCO guidance. Services are encouraged to identify fault as early as possible and offer appropriate remedies. In addition, there were fewer cases escalating to full investigations, with more cases closed after initial enquiries.

Risks, Issues and Mitigations

Key risks during the period relate to sustained demand in high-volume services, increasing case complexity, and ongoing capacity pressures that continue to affect response times. These risks are inter-related and reflect wider pressures across services, particularly those delivering statutory functions and dealing with complex individual circumstances.

While the Customer Feedback Team is currently fully staffed, resourcing remains a challenge. The time required to manage complex complaints, provide effective support to services and maintain the quality of responses continues to place pressure on capacity, particularly during periods of increased demand and the use of AI tools by the public to submit complaints.

These risks are being mitigated through routine performance monitoring and targeted support to services experiencing the greatest pressures. There remains a strong focus on:

- early resolution where appropriate;
- improving the quality, clarity and consistency of responses; and
- embedding learning from complaints to reduce repeat issues.

Collectively, these actions are intended to improve timeliness, manage demand more effectively and strengthen the overall customer experience.

Next Steps

Over the coming year, activity will focus on consolidating the improvements already achieved and strengthening the overall resilience of the complaints process. Key priorities include:

- reducing avoidable escalation by improving consistency and quality at the earliest stage;
- embedding learning more systematically so that issues are addressed before they progress; and
- continuing to streamline processes to reduce delays, including those caused by waiting for information from services.

This work will support earlier resolution, improved compliance with timescales and a more sustainable approach to managing demand.

Recommendations

Members are asked to:

- 1) Note the progress made since the Annual Customer Feedback Report.**
- 2) Note the ongoing challenges and planned actions set out in this report.**