## CAIRNGORMS NATIONAL PARK AUTHORITY

## FOR DISCUSSION

Title: FOLLOW UP REPORT

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## **Purpose**

To present a follow up on previous Audit & Risk Committee consideration of the Authority's project management and complaints handling processes.

#### **Recommendations**

The Audit & Risk Committee is asked to note the updates presented.

## **Executive Summary**

1. The Audit and Risk Committee has previously discussed project management, and the requirement to ensure that the Authority's staff learn lessons from project management activity in order to improve future processes. The Audit and Risk Committee has also considered an internal audit review of the Authority's complaints handling procedures. This paper presents an update on work on both these areas of activity.

### **Project Management Arrangements**

- 2. The Corporate Services Director has led a review of the status of projects, following which the Management Team and Operational Management Group have agreed that the following projects should be subject to a project closure review:
  - a) Speyside Way Extension Aviemore to Kincraig;
  - b) Organisational Development Strategy;
  - c) Staff Survey 2015;
  - d) Scenic Routes Corgarff (or do we wait to complete current phase?);
  - e) Tomintoul and Glenlivet LPP Development Phase;
  - f) Fixed point photo monitoring pilot;
  - g) Peatland Action;
  - h) Sustrans Cycling Partnership;
  - i) Visitor Survey; and
  - i) Support to development of CNP Economic Strategy.
- 3. These project closure reviews will be presented to the Finance and Delivery Committee, as part of that Committee's terms of reference to monitor deliver of the Authority's Corporate and Operational Plans.

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4. Should any significant matters arise from those reviews in terms of the Authority's systems of internal control, then these reports will also be brought to the Audit & Risk Committee to support consideration of system changes.

## Complaints Handling

- 5. The Head of Organisational Development, Kate Christie, has taken on responsibility for the Authority's complaints handling processes following the internal audit review. The process has been reviewed and a number of changes made to improve effectiveness, efficiency and clarity of staff responsibility. These changes to the complaints policy have been made after a full consultation exercise with all staff.
- 6. As a key system improvement, a two page overview of the complaints process has been produced as an easy reference guide for all staff. This overview document is reproduced at Annex I to this paper for reference.
- 7. The Key Performance Indicators (KPIs) presented to the Board on 24 June continue to highlight that the complaints handing performance does not meet target. However, it will take some time for the historic cases to fall out of monitoring as the KPI is based on a rolling 12 month period. We will continue to closely monitor performance on complaints handling to both improve service to our correspondents and also ensure that changes we have made to policies are effective.

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