



For discussion

Title: Internal audit review – Complaints procedure
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Purpose

This paper presents the results of the Internal Auditor's review on the Park Authority's complaints procedure. The purpose of the review was to consider the complaints handling arrangements within the Park Authority, to assess whether these are sufficient, follow good practice, and adhere to current legislation and guidance. This review formed part of the 2026/27 Internal Audit Annual Plan.

Recommendations

The Audit and Risk Committee is asked to

- a) Consider the internal auditors report and findings.
- b) Endorse the management responses to recommendations for future action and improvements.

Executive Summary

1. The aim of the assignment was to assess whether:
 - a) The Organisation has adequate policies and procedures in place in relation to complaints handling.
 - b) There are strong controls in place for the handling of complaints, ensuring processes are transparent and clear.
 - c) The Organisation's processes are adaptable to accommodate unique issues of governance and transparency that can arise in handling complaints.
 - d) The Organisation's complaint management policies, procedures and practice are aligned to and comply with National Bodies expectations (Ombudsman).
 - e) There is an appropriate and consistent approach to the escalation of complaints.



- f) The Organisation uses past experiences to support organisational learning and improvements.
- g) Complaint handling processes effectively manage cases that overlap with statutory or legally advised proceedings, balancing the need to respond with the protection of the organisation's legal and strategic interests.
- h) Robust procedures are in place to identify and manage vexatious complaints, ensuring appropriate safeguards to protect the efficient use of public funds.
- i) The processes for handling complaints submitted directly to the Board are managed consistently and in line with formal complaint procedures.

2. The Auditor's overall conclusion is that there is a substantial level of assurance that appropriate complaints handling arrangements are in place.

3. Examples of good practice identified are shown in the table below.

The following is a list of areas where the Organisation is operating effectively and following good practice.	
1.	The Information Manager provides all staff with complaints handling training as part of their induction. Following this, staff are made aware to contact the Information Manager on an ad hoc basis for any additional support needs specific to complaints handling. Additionally, the Organisation has internal support resources on their intranet that all staff can access as required.
2.	The Organisation has a robust Complaints Handling Policy in place, split into five parts, that outline the arrangements in place for responding to complaints. Our review of the key documents found that these are aligned to SPSO guidance, outline the roles and responsibilities of staff, as well as other key information we would expect to see in line with good practice. Supporting guidance is available to all staff via the Organisation's intranet.
3.	The Organisation considers lessons learned and continuous improvement for any complaints received, even if the outcome is that there <u>is</u> no grounds for the complaint to have been made. A recent example was the introduction of a new Board complaints procedure based on the resolution of a Stage One complaint.
4.	The Complaints Handling Policy outlines the roles and responsibilities of staff for dealing with complaints within the Organisation. This includes responding to Stage One, Stage Two and SPSO related complaints for staff, Senior Management and the Board.
5.	The Organisation's public facing website contains the Complaints Handling Policy as well as information on how to submit a complaint.

4. The Auditor made three recommendations - one graded as medium priority and two at low priority:
- a) Staff should ensure that Stage Two complaints are formally acknowledged within three working days and that Stage Two complaints are monitored to ensure all deadlines are met (Medium)



- b) Documented procedures should be enhanced to outline the definition and process to be followed for suspected vexatious complaints (Low)
- c) Controls over the recording and maintenance of the Complaints Log should be strengthened to ensure accuracy and completeness and should be subject to periodic quality assurance checks. (Low)

Conclusion

- 5. The recommendations made were accepted by management.

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