Royal Conservatoire of Scotland: Annual Complaints Report 2024-25

Background
The Conservatoire's Complaints Handling Procedure (CHP) is operated in line with the statutory requirements of the Scottish Public Services Ombudsman (SPSO) and is available at https://www.rcs.ac.uk/complaints/

Stage 1 Frontline Resolution seeks to resolve straightforward complaints swiftly and effectively at the point at which the complaint is made, or as close to that point as possible.

Stage 2 Investigation is appropriate where a complainant is dissatisfied with the outcome of a frontline resolution, or where this is not an appropriate route due to the complexity or seriousness of the individual case.

Recording and Reporting

The Conservatoire records all complaints and reports quarterly to senior management and annually to the Academic Board and Board of Governors on key performance information, in accordance with SPSO requirements.

To protect personal information and individual identification, this data is presented using rounding methodology, including:

1. All numbers are rounded to the nearest multiple of 5
2. Any number lower than 2.5 is rounded to 0
3. Halves are always rounded up (e.g. 2.5 is rounded to 5)
4. Percentages based on fewer than 5 individuals are suppressed
5. Averages based on 5 or fewer individuals are suppressed

Analysis

Number of complaints:
A total of 10 complaints were recorded across RCS during the period 1 September 2023 to 31 August 2024. Of this number, 32% were resolved (where the institution and complainant agree what action (if any) will be taken to provide full and final resolution without making a decision about whether the complaint is upheld or not upheld), 0% were fully upheld, 23% were partially upheld, 0% were not upheld, 9% were withdrawn, and 18% are still under investigation.

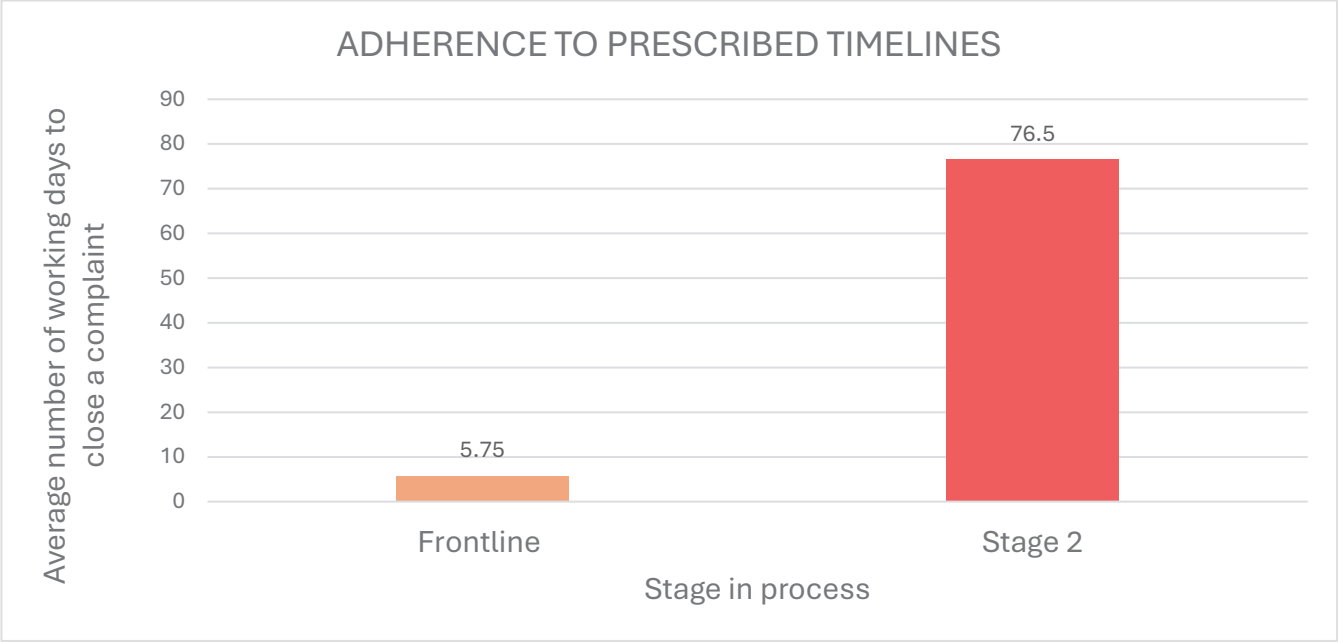
Total number of complaints received	**10**
Stage 1: Frontline	**5**
Number of complaints closed at Stage 1	5
Number of complaints closed within the 5 working days timeline	5
Number of complaints where an extension to the timeline has been authorised	0
Number of complaints escalated to Stage 2 Investigation	0
Number of complaints resolved	5
Number of complaints upheld	0
Number of complaints not upheld	0
Number of complaints partially upheld	0
Number of complaints withdrawn	0
Stage 2: Investigation	**5**
Number of complaints closed at Stage 2	0
Number of complaints closed within the 20 working days timeline	0
Number of complaints where an extension to the timeline has been authorised	5
Number of complaints resolved	0
Number of complaints upheld	0
Number of complaints not upheld	0
Number of complaints partially upheld	0
Number of complaints withdrawn	0

Note: The data above includes 2 Stage 2 complaints where Complainants did not give consent to progress under the CHP (18%). These complaints have not been withdrawn but have been paused pending further consideration and advice from the Complainants. They are recorded here for transparency on prevalence and trends in line with the SPSOs guidance.

Adherence to prescribed timelines:

The CHP allows 5 working days to respond to a Frontline Response (or up to a total of 10 working days where a timeline extension is granted). 20 working days are allowed to address a Stage 2 Investigation, although extensions may be granted in exceptional circumstances.

75% of Frontline Responses were closed within the prescribed timeline, and 14% of Stage 2 investigations were closed within this time.

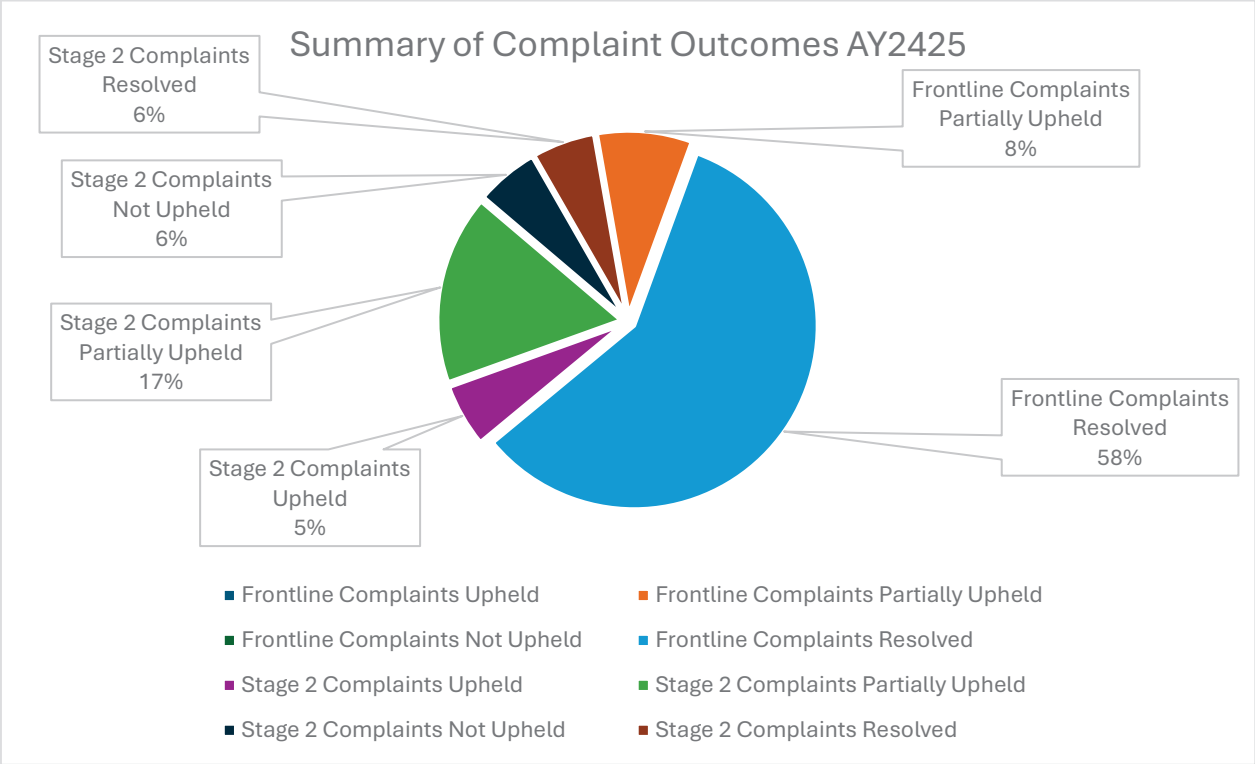


Note: This data only includes complaints which were closed and does not reflect timelines for complaints which remain open.

The CHP allows for extension, in consultation with the complainant, where it is deemed necessary to increase the possibility of resolving the matter. Extensions were applied partly due to the scale and complexity of the complaints raised; the expected timelines of staff disciplinary and dismissal procedures which run in parallel to our complaints procedures where staff misconduct is alleged; and partly due to staff availability and leave entitlement over the summer period. This afforded the additional time necessary to give due attention to the concerns raised and in the interest of reaching a satisfactory resolution for all parties involved.

Summary of complaint outcomes:

5 complaints were resolved at Stage 1. Of the 5 complaints raised for Stage 2 investigation, outcomes ranged between upheld, partially upheld, not upheld, and resolved. A small number of complaints were withdrawn before an investigation was complete. A small number of complaints were paused before an investigation was initiated and remain open pending further consideration by the Complainants. A small number of complaints are still under investigation, and an outcome is not yet available.



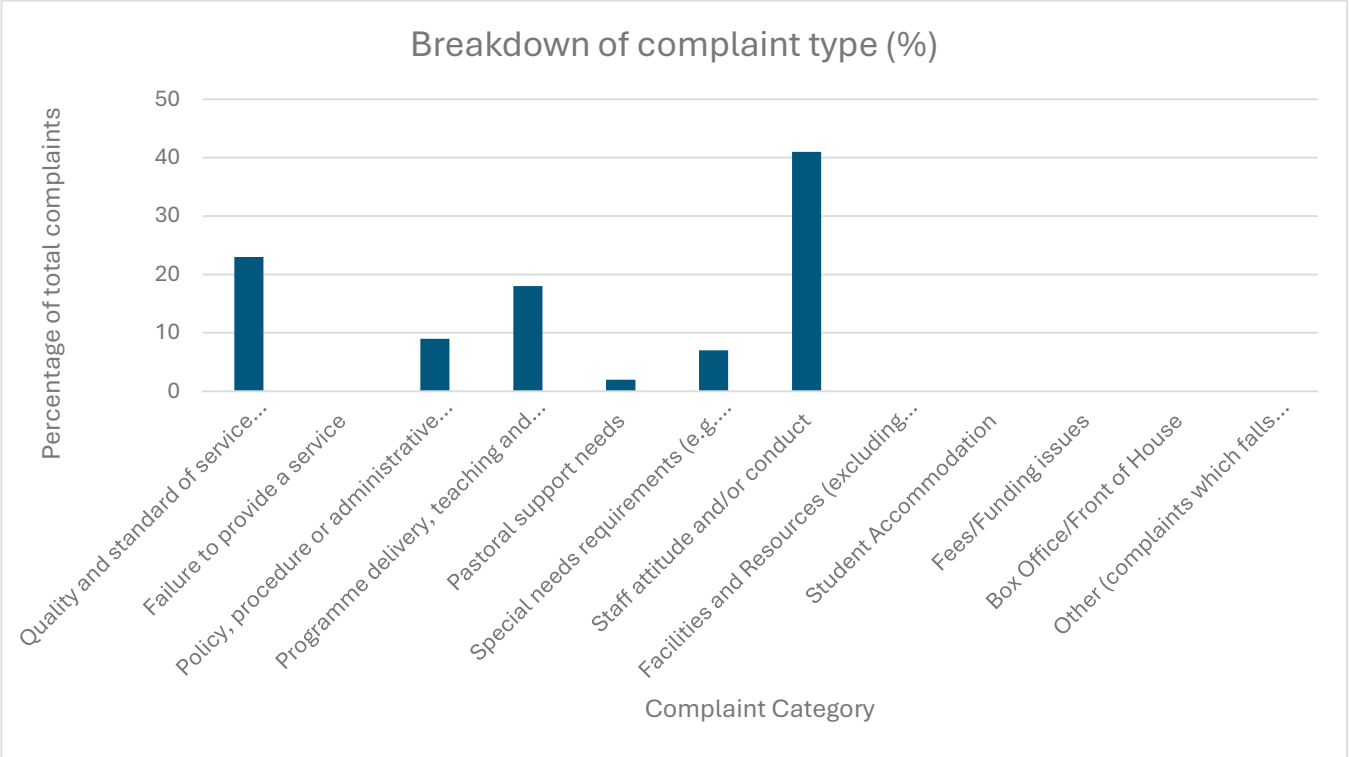
We continue to promote the view that all complaint investigations provide an opportunity for valuable reflection. Service improvements are introduced when identified and communicated to all relevant parties including the Complainants. The actions taken in response to complaint handling this year and learning points and recommendations for improvement are listed at the end of this report.

Trend Analysis:

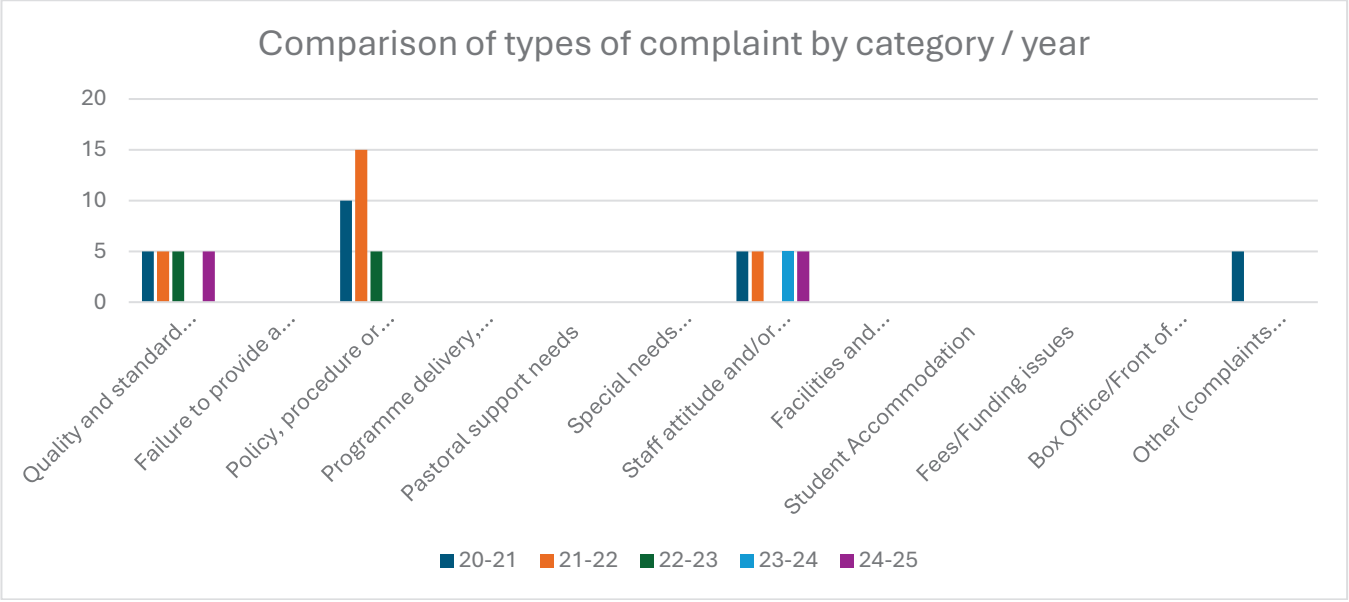
The total number of complaints received during the 24-25 academic year remains low compared to previous years. Similarly to the previous year, a large proportion of complaints were handled as Stage 2 investigations. The low number of complaints, coupled with the high number of Stage 2 investigations, may indicate missed opportunities to resolve emerging concerns and dissatisfaction.

	Total	Frontline (Stage 1)	Investigation (Stage 2)
2020-21	25	25	0
2021-22	25	20	5
2022-23	15	15	0
2023-24	10	0	5
2024-25	10	5	5

Complaints concerned six main categories: staff attitude and conduct (41%), policy, procedure, or administrative process (9%), programme delivery, teaching and assessment (18%), the quality and standard of service provision (23%), pastoral support needs (2%), and special needs requirements (7%).



The proportion of complaints in each category is similar to that of previous years, with quality and standard of service provision, programme delivery, teaching and assessment, and staff attitude and/or conduct receiving the most overall complaints.



This year, where concerns were raised about quality and standard of service provision, issues related mainly to poor communication. An explanation and apology resolved these issues.

Where complaints related to policy, procedure or administrative processes, concerns related to timeframes for concluding complaints procedures, and wider issues relating to equalities and the impact of policies relating to student visas and funding. These points remain under investigation.

Where concerns were raised about programme delivery, teaching and assessment, this related mostly to non-delivery of tuition and opportunities as specified in the programme handbook. Additionally, complaints related to a gap between student expectations and interpretation of programme handbooks compared to work in

practice, both during auditions and during the academic year. Some of these points remain under investigation.

Where concerns related to special needs, concerns related to signposting to disability services at the application stage, and adjustments for students with disabilities in complaints and misconduct procedures. In some cases, staff were able to respond quickly with corrective action to resolve the concern. In other cases, Complainants requested no action under CHP at the point of complaint – these cases are still recorded as complaints and are included in trend analysis in line with the SPSOs guidance.

Where complaints related to pastoral support and staff attitude and/or conduct, concerns related to equalities, the tone of email communications, inappropriate feedback and comments, and behaviours which caused harm or distress. Complaints were diverted to Human Resources for investigation via their own procedures. In some cases, concerns were resolved by an apology and clarification over miscommunications. In a small number of cases, an alternative resolution was put in place following an HR process. In a small number of cases, the complaint did not proceed at the request of the reporting party.

Actions taken/Lessons learned:

Actions taken this year as a result of the learnings identified in the 23-24 annual complaint report are included in the table below.

Actions or Learnings Identified	**Department or Area**	**Staff Responsible**	**Update**
Update the website and department handbook to accurately reflect the frequency of taught classes on MMus programmes	MMus	MMus Head of Programme	Now actioned.
Adapt application process for MMus courses to better match candidate experience and preferences with course demands	MMus	MMus Head of Programme	Now actioned.
Raise awareness of correct complaint reporting procedures and ensure staff know when and how to signpost students	AAS	Student Community Conduct Officer	Now actioned – SCCO spoke on complaints procedures during staff development week at start of AY24-25 and will cover this again at start of AY2526. Areas of focus include early interventions and informal resolutions.
Review methods of frontline resolutions for staff-student conflict to support student and	AAS	Student Community Conduct Officer	Actioned – Guidance document on informal resolutions produced for beginning of AY2526 to be

staff wellbeing			distributed to academic staff.
Students to receive clear communications detailing departmental updates, availability of key staff, and expectations for student-led activities throughout year	Opera	Head of Opera	Feedback and learnings from complaint have been taken on board by relevant staff within the Department.
A written document detailing the RCS auditions process, as it relates to NBS (Northern Ballet School) and any other similar organisations, to be produced and used with NBS students and staff	Ballet	Head of Ballet	Actions and learnings from complaint have been taken forward within the Department. Document clarifies: reason for the presence of RCS staff at the CAT class; clarification on assessment for direct entry to final auditions; explanation for outcome communication method.

Service improvements made and action to be taken as a result of dealing with issues raised through the CHP during AY2024-25 include:

- Project planning for future proposals or restructures – Time and people to be managed in a way that considers the availability of key decision makers and ensures meetings can be held in a timely manner
- Ensure Junior Music auto-replies and out of offices reflect the working days of staff
- Deputy Registrar to discuss additional level of authorisation during a student's learning agreement process that allows students to authorise supporting staff to be aware of any associated adjustments if they wish to do so
- Further discussions around staff roles and responsibilities, specifically in relation to support and signposting have taken place and will continue to do so via one-to-one line management support
- Audition invitation letter templates for School of Dance revised and updated to include signposting to disability support information
- Relevant staff to reflect and engage with recommendations as set out following a staff disciplinary process