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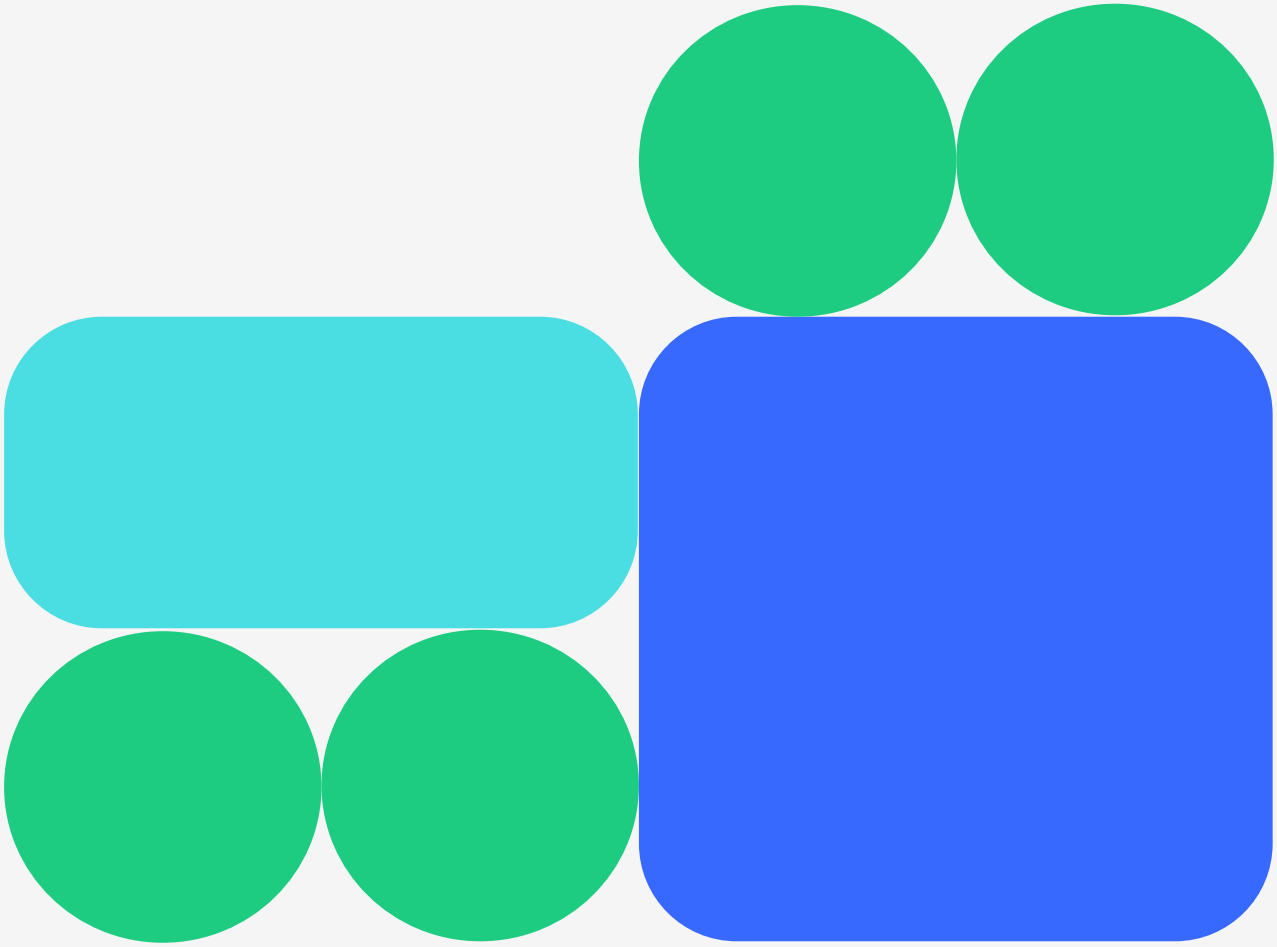
Ugain Mlynedd
Twenty Years

Our KPIs and Business Plan Actions for 2026-27

September 2026



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Mae'r ddogfen hon hefyd ar gael yn y Gymraeg.

This document is also available in Welsh.

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Our KPIs and Business Plan Actions for 2026-27

Our role

We have three main roles.

We investigate complaints about public services.

We consider complaints about councillors breaching the Code of Conduct.

We drive systemic improvement of public services and standards of conduct in local government in Wales.

Our vision

To have a positive impact on people and public services in Wales.

Our ambitions

People of Wales feel that public services treat them fairly and respond when things go wrong.

Welsh public services listen to individuals and use their complaints to learn and improve.

Welsh local government is trusted to deliver the highest standards of conduct.

We continue to be an influential and respected voice in public service improvement.

Our principles

We are **independent**. We are funded by and accountable to Senedd Cymru.

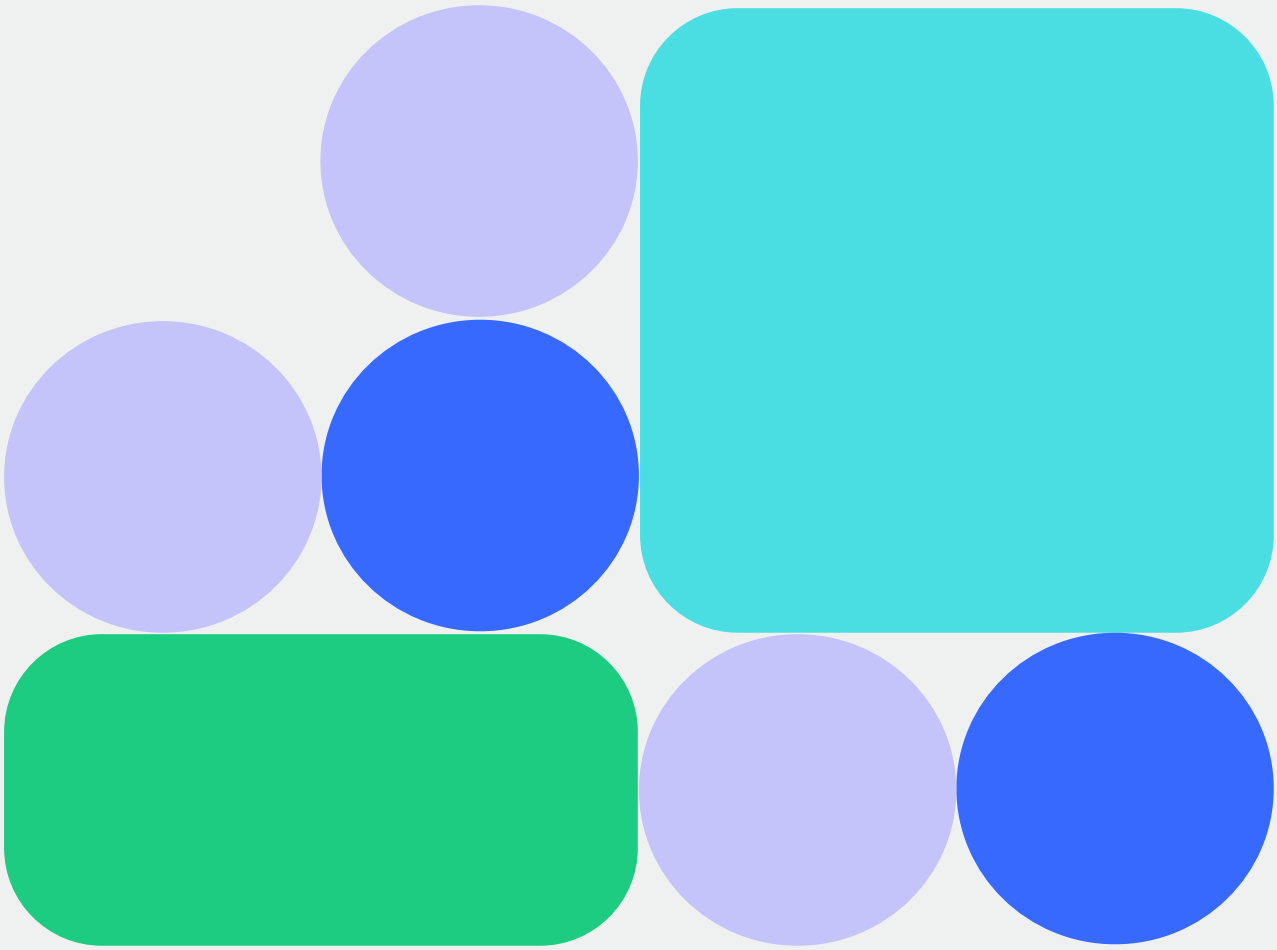
We are **impartial and fair**. We do not take sides. We examine the facts before us and reach our own, unbiased conclusions.

We are **open to all who need us**. Our service is free to use, and we are committed to ensuring seamless access..

We are **people centred**. We understand that people come to us at difficult times, and that complaints processes can feel daunting. Whatever the outcome, everyone who interacts with us should feel respected, heard and understood.

Strategic Aim 1

Deliver justice with positive impact for people of Wales.



We deliver an empathetic, proportionate and efficient service that leaves people feeling heard and understood. Our recommendations are reasonable, consistent and effective.

Key Performance Indicator	Target 2025-26	Actual 2025-26	Target 2026-27
1. Timeliness			
a) No intervention – proportion of complaints closed within 6 weeks	n/a	80%	≥85%
b) Intervention* – proportion of complaints closed within 3 months	n/a	54%	≥70%
c) Intervention –proportion of complaints closed within 12 months	n/a	91%	100%
2. Proportion of complaint reviews in which we find that our original decision was appropriate	≥95%	95%	≥95%
3. Proportion of decisions made by Investigation Officers and the Code Team Manager undergoing additional checks	5%	5%	5%
4. Proportion of sample checks where decision of Investigation Officers and the Code Team Manager are confirmed as appropriate	100%	100%	100%
5. Proportion of recommendations due during the year complied with in line with set target	≥75%	69%	≥80%

***** Intervention means that we investigated a complaint or resolved it using Early Resolution.

Business Plan actions 2026-27

1.1. Embed new ways of working following organisational reset to strengthen our capacity to promptly intervene in complaints when it is appropriate and proportionate.

Achieved when

- we intervene (resolve early or investigate) in a higher number of complaints
- it is taking us less time to intervene in complaints.

1.2. Establish an accessible and secure online platform to help service users access information about their complaint.

Achieved when we have

- completed the project pilot
- evaluated opportunities for further rollout.

1.3. Review the complaint form to improve complainant journey and ensure that we receive all the relevant information at the earliest opportunity.

Achieved when

- the form has been updated to address any accessibility issues and strengthen clarity of our communication
- we see a reduction in the proportion of cases that we have to close because we did not receive enough information.

1.4. Continue to work with organisations to improve how they comply with our recommendations.

Achieved when

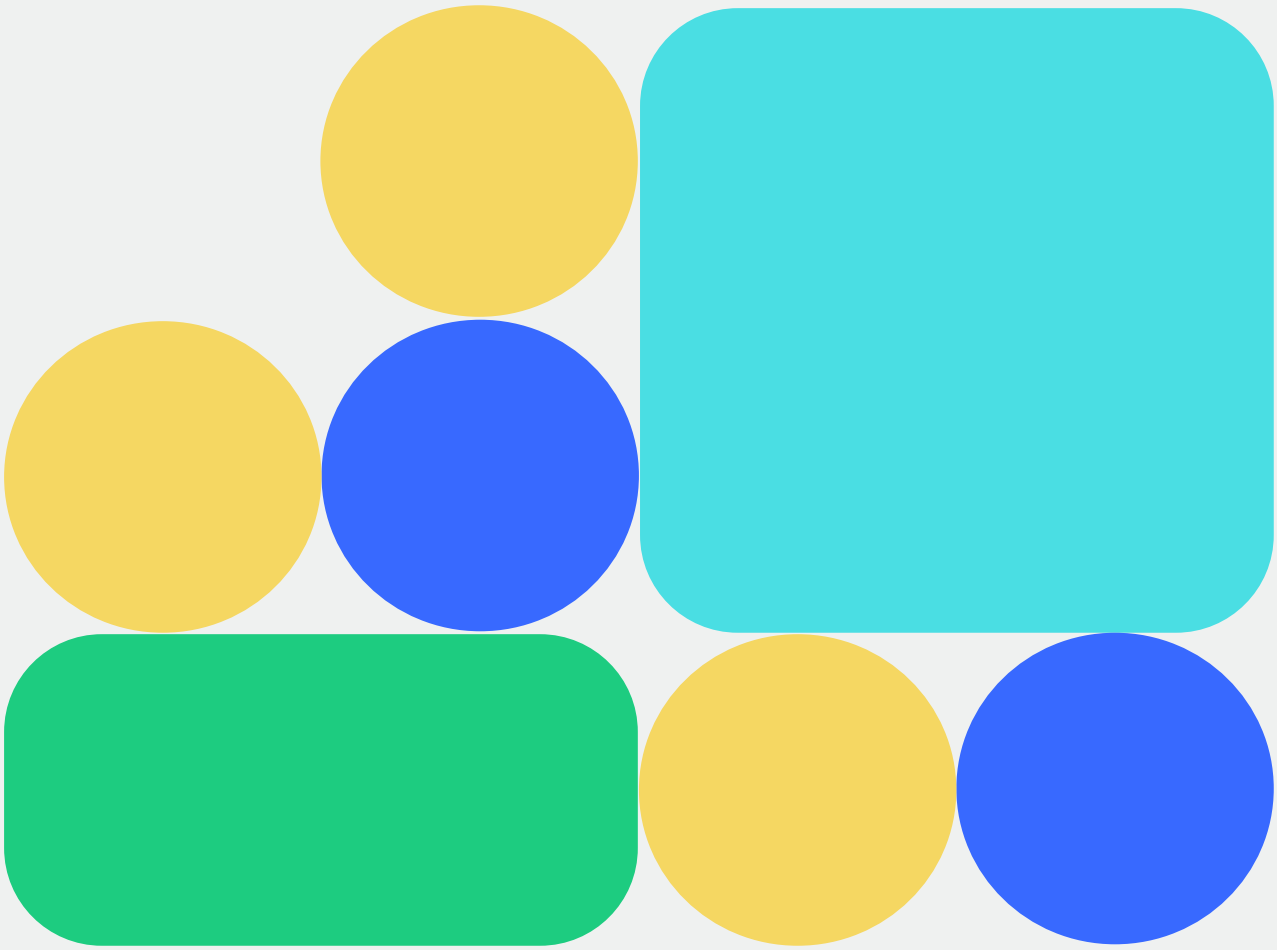
- we have adjusted our process
- a higher proportion of service providers agree that our deadlines are reasonable
- a higher proportion of recommendations is complied with within the target set.

1.5. Explore how we can strengthen our communication with complainants on the outcomes that they seek and the recommendations that we propose at an early stage.

Achieved when a higher proportion of people in whose complaints we intervened early tells us that they are satisfied with our service.

Strategic Aim 2

Influence positive change in public services and high standards of conduct in local government.



We systematically improve public services through our Complaints Standards work, own initiative (OI) investigations and public interest and thematic reports.

We identify good practice and lessons learnt, communicating these effectively to contribute to improvement of public services.

We support high standards of conduct amongst councillors.

Key Performance Indicator	Target 2025-26	Actual 2025-26	Target 2026-27
6. Proportion of Code of Conduct breaches that we referred upheld by Standards Committees or Adjudication Panel for Wales	≥85%	81%	≥85%
7. Proportion of Primary Care providers under Complaints Standards	n/a	n/a	10%
8. Use of own initiative powers	n/a	4 new uses	20% uplift (5 new uses)
9. Positive or neutral media coverage of our cases to promote shared learning	n/a	n/a	≥90%

Business Plan actions 2026-27

2.1. Continue to expand our complaints standards work.

Achieved when

- all housing associations operate under complaints standards
- we have developed and launched a pilot project to begin to bring general practices in Wales under the complaints standards
- at least 10% of general practices adopt our Model Complaints Policy in Year 1.

2.2. Implement child friendly complaints guidance for local authorities, developed in collaboration with the Children's Commissioner for Wales.

Achieved when the guidance is launched.

2.3. Increase and streamline the use of our Own Initiative (OI) powers.

Achieved when

- we have seen 20% uplift in use of our OI powers
- we have strengthened our OI process in line with recommendations of the Finance Committee.

2.4. Review and prepare Code of Conduct information resources ahead of the upcoming local government elections in Wales.

Achieved when

- the communications campaign has been planned
- resources have been prepared
- guidance has been reviewed and published.

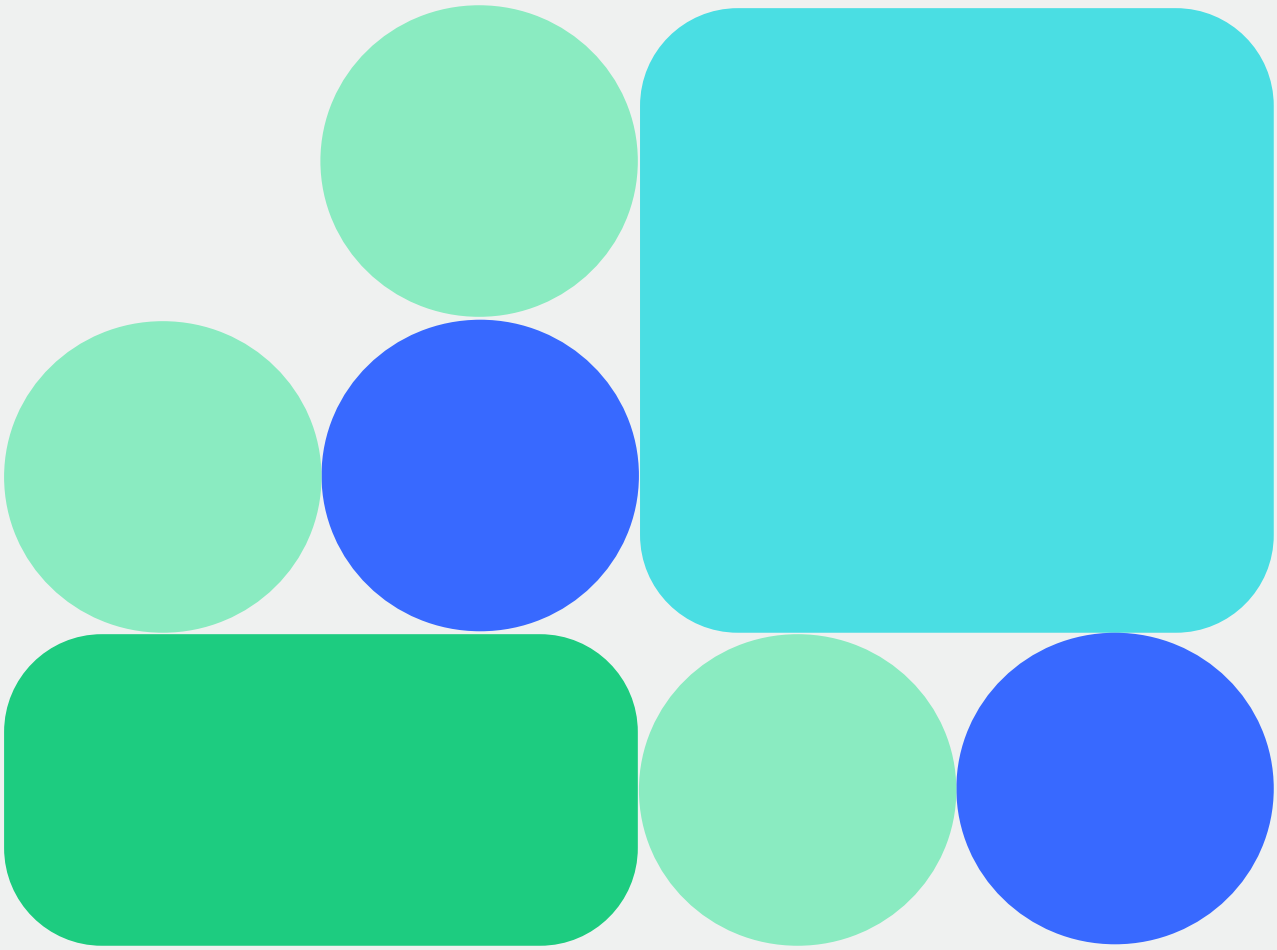
2.5. Strengthen how we communicate our decisions and impact of our investigations and systemic improvement work.

Achieved when we have

- evaluated opportunities to strengthen the monitoring of our press coverage
- improved our external newsletter reach and engagement with the newsletter content
- begun to publicise outcomes of our Code of Conduct referrals (where there was no appeal and if the hearing was not in private).

Strategic Aim 3

Strengthen access and impact for those who need our service the most.



We continue to improve access to our service. We promote our service to those who may need it the most, including through key organisations and stakeholders that advise, support and represent complainants. We ensure that we focus our efforts on issues affecting most vulnerable groups.

Key Performance Indicator	Target 2025-26	Actual 2025-26	Target 2026-27
10. Level of awareness of our service	≥50%	52%	≥55%
11. Complainant assessment of our accessibility ('easy to get in touch')			
All respondents	≥90%	83%	≥85%
Respondents satisfied with the outcome	≥95%	91%	≥95%
12. Use of oral complaints service	n/a	236	283 (20% uplift)

Business Plan actions 2026-27

3.1. Develop our capacity to accept oral complaints.

Achieved when

- we have adjusted our process to increase our flexibility to take oral complaint without prior appointment
- we have explored digital tools to streamline and facilitate access to this service and improve equality monitoring of users of this survey.

3.2. Deliver a programme of engagement with Members of the Senedd and their staff to raise awareness of our work and oral complaints service.

Achieved when we have

- welcomed all new Members and shared with them accessible resources about our work
- hosted or participated in 3 events in the Senedd
- offered at least 3 training sessions for constituency offices.

3.3. Deliver a programme of engagement with third sector organisations in Wales to raise awareness of our work and oral complaints service and encourage insights to inform OI work.

Achieved when we have

- attended gofod3
- launched third sector survey
- strengthened our relationship with Regional Advice Networks and Councils for Voluntary Action and established opportunities to work together.

3.4. Plan and deliver a communications campaign to promote our oral complaints service.

Achieved when we have delivered

- a social media campaign, piloting the use of social media ads to more effectively reach our target groups
- a resource for organisations that support complainants on the targeted oral complaints service.

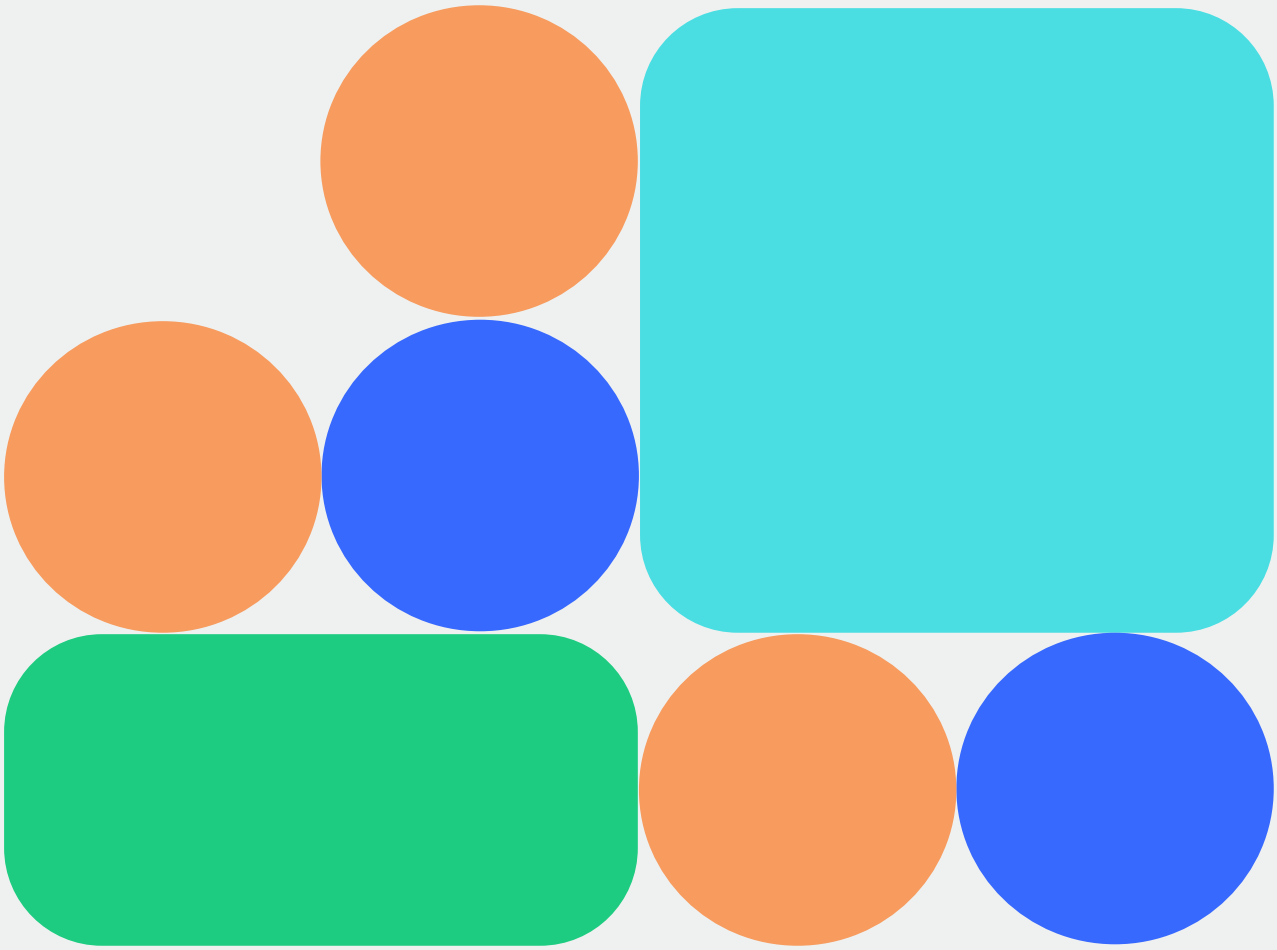
3.5. Identify and begin to implement actions to encourage more interactions with our service in Welsh.

Achieved when we have

- ensured presence at the National Eisteddfod
- as part of the oral complaints campaign, promoted and encouraged the use of service in Welsh
- taken steps to improve discoverability and use of our website in Welsh.

Strategic Aim 4

Ensure that we are a resilient, agile and accountable organisation.



We maintain and improve efficient and effective staff, finance, and IT resources, and ensure good governance, accountability and transparency.

Key Performance Indicator	Target 2025-26	Actual 2025-26	Target 2026-27
13. Sickness absence levels (average number of days)	≤6.0	1.96	≤6.0
14. Proportion of staff who agree that PSOW is a good place to work	≥80%	88%	≥90%
15. Level of variance on expenditure from that set out in our Estimate for the current year (less than)	≤3%	0.3%	≤2%
16. Proper management of our budget	Unqualified accounts and substantial assurance	Unqualified accounts and reasonable assurance	Unqualified accounts and substantial assurance
17. Core IT Systems availability	n/a	n/a	≥99%
18. Our carbon footprint (kg CO_2e produced)	≤60,000	56,212.49	≤60,000

Business Plan actions 2026-27

4.1. Deliver the intentions outlined in our People Strategy.

Achieved when we have

- delivered the actions outlined in our Future working at PSOW workplan
- further embedded our Leadership Charter.

4.2. Maintain robust and resilient digital infrastructure.

Achieved when we have

- maintained core IT Systems availability
- maintained Cyber Essentials / Cyber Essentials + accreditation
- achieved IASME certification.

4.3. Embed Co-pilot into the work of our staff to work more efficiently while continuing to deliver a responsive and proportionate service, with human oversight at every step.

Achieved when our staff agree that Co-pilot is helping them to work more efficiently.

4.4. Continue to be financially accountable and demonstrate high standards of transparency.

Achieved when we have produced unqualified accounts together with positive internal and external audit opinions.

4.5. Revise our approach to casework forecasting and use our Medium-Term Financial Plan to inform our Estimates Submission for 2027-28.

Achieved when our work on capacity modelling is used to inform our Estimate submission for 2027-28.

4.6. Maintain energy use.

Achieved when our energy usage does not exceed the target we set for the year.

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