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For all enquiries relating to this agenda please contact Julie Lloyd  
(Tel: 01443 864246 Email: [lloydj4@caerphilly.gov.uk](mailto:lloydj4@caerphilly.gov.uk))

**Date: 18th January 2023**

To Whom it May Concern,

A multi-locational meeting of the **Governance and Audit Committee** will be held in Penallta House, and via Microsoft Teams on **Tuesday, 24th January, 2023 at 2.00 pm** to consider the matters contained in the following agenda. You are welcome to use Welsh at the meeting, a minimum notice period of 3 working days is required should you wish to do so. A simultaneous translation will be provided on request.

Members of the public or Press may attend in person at Penallta House or may view the meeting live via the following link: <http://civico.net/caerphilly>

This meeting will be live-streamed and a recording made available to view via the Council's website, except for discussions involving confidential or exempt items. Therefore the images/audio of those individuals speaking will be publicly available to all via the Council's website at [www.caerphilly.gov.uk](http://www.caerphilly.gov.uk)

Yours faithfully,

A handwritten signature in black ink, appearing to read 'Chrissy'.

**Christina Harrhy**  
CHIEF EXECUTIVE

## A G E N D A

	Pages
1 To receive apologies for absence.	

A greener place Man gwyrdach



Correspondence may be in any language or format | Gallwch ohebu mewn unrhyw iaith neu fformat

2 Declarations of Interest.

Councillors and Officers are reminded of their personal responsibility to declare any personal and/or prejudicial interest(s) in respect of any item of business on this agenda in accordance with the Local Government Act 2000, the Council's Constitution and the Code of Conduct for both Councillors and Officers.

To approve and sign the following minutes: -

- |   |   |        |
|---|---|--------|
| 3 | Governance and Audit Committee held on 11th October 2022.         | 1 - 8  |
| 4 | Special Governance and Audit Committee held on 10th January 2023. | 9 - 12 |

To receive and consider the following reports: -

- |    |   |           |
|----|---|-----------|
| 5  | Governance and Audit Committee Forward Work Programme.  | 13 - 18   |
| 6  | Update from Audit Wales - Verbal Update.  |           |
| 7  | Internal Audit Services - Update on Progress.   | 19 - 46   |
| 8  | Corporate Risk Register (December 2022) Update.   | 47 - 54   |
| 9  | Regulator Recommendation for Improvement Progress Update.   | 55 - 64   |
| 10 | Six Month Update on Corporate Complaints Received for the period 1st April 2022 to 30th September 2022. | 65 - 102  |
| 11 | Audit Wales Report - Homelessness - Caerphilly County Borough Council.                                  | 103 - 112 |

To receive and note the following information items: -

- |    |  |           |
|----|--|-----------|
| 12 | Regulation of Investigatory Powers Act 2000.                           | 113 - 114 |
| 13 | Officers Declarations of Gifts and Hospitality April to June 2022.     | 115 - 120 |
| 14 | Officers Declarations of Gifts and Hospitality July to September 2022. | 121 - 126 |

*\*If a member of the Governance and Audit Committee wishes for any of the above information reports to be brought forward for discussion at the meeting please contact Julie Lloyd, 01443 864246, by 10.00 a.m. on Tuesday 24<sup>th</sup> January 2023.*

**Circulation:**

Councillors M.A. Adams, Mrs E.M. Aldworth, A. Broughton-Pettit, M. Chacon-Dawson, Mrs P. Cook, T. Parry, J. Taylor and C. Wright (Vice Chair)

Lay Members: V. Pearson, L. M. Rees, J. Williams and Mr N.D. Yates (Chair)

And Appropriate Officers

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## GOVERNANCE AND AUDIT COMMITTEE

### MINUTES OF THE MEETING HELD IN PENALLTA HOUSE AND VIA MICROSOFT TEAMS ON TUESDAY 11<sup>TH</sup> OCTOBER 2022 AT 2.00 P.M.

PRESENT:

Councillors:

M. A. Adams, A. Broughton-Pettit, M. Chacon-Dawson, P. Cook, Mrs T. Parry, J. Taylor and C. Wright (Vice Chair).

Lay Members:

N. Yates (Chair), M. Rees, V. Pearson and J. Williams.

Together with:

Officers: R. Edmunds (Corporate Director for Education and Corporate Services), D. Gronow (Acting Internal Audit Manager), L. Lane (Head of Democratic Services and Deputy Monitoring Officer), S. Richards (Head of Education Planning and Strategy), R. Roberts (Business Improvement Manager), J. Pearce (Business Improvement Officer), J. Lloyd (Committee Services Officer), S. Hughes (Committee Services Officer) and R. Barrett (Committee Services Officer).

M. Jones (Audit Wales), and B. Roberts (Audit Wales).

Also in attendance: Councillor C. Morgan and Councillor E. Stenner.

### RECORDING AND VOTING ARRANGEMENTS

The Chair reminded those present that the meeting would be live-streamed and a recording made available to view via the Council's website, except for discussions involving confidential or exempt items - [Click Here to View](#). Members were advised that voting on decisions would take place via Microsoft Forms.

#### 1. APOLOGIES FOR ABSENCE

Apologies for absence were received from Councillor Mrs. E.M. Aldworth, and S. Harris (Head of Financial Services and S151 Officer).

#### 2. DECLARATIONS OF INTEREST

There were no declarations of interest received at the commencement or during the course of the meeting.

### **3. MINUTES – 14<sup>TH</sup> JUNE 2022**

It was moved and seconded that the minutes of the Governance and Audit Committee held on 14<sup>th</sup> June 2022 be approved as a correct record, and by way of Microsoft Forms and verbal confirmation (and in noting there were 10 votes for, 0 against, and 1 abstention) this was agreed by majority present.

RESOLVED that the minutes of the meeting held on 14<sup>th</sup> June 2022 (minute nos. 1-19) be approved as a correct record.

### **4. GOVERNANCE AND AUDIT COMMITTEE FORWARD WORK PROGRAMME**

The Acting Internal Audit Manager presented the Governance and Audit Forward Work Programme for the period October 2022 to May 2023.

Members noted the details of reports scheduled for the forthcoming meetings.

M. Jones (Audit Wales) advised Members that the special meeting of the Governance and Audit Committee shown as 26<sup>th</sup> October 2022 was now scheduled for 15<sup>th</sup> November 2022.

It was moved and seconded that the Forward Work Programme be approved. By way of Microsoft Forms and verbal confirmation this was unanimously agreed.

RESOLVED that the Forward Work Programme as appended to the meeting papers be approved.

### **REPORTS OF OFFICERS**

Consideration was given to the following reports.

### **5. UPDATE ON INTERNAL AUDIT REPORT RECOMMENDATIONS**

The Acting Internal Audit Manager introduced the report which provided Members of the Governance and Audit Committee with an update on Internal Audit report findings, the numbers and risk ratings and progress on the related recommendations.

As requested by the Governance and Audit Committee, regular reports to be provided to inform Members on Internal Audit findings and associated recommendations.

Members were advised that the report provides an update on the number of Internal Audit findings created, their risk ratings, their completion/agreement status, the number of recommendations arising from those findings and the status of the recommended actions required to mitigate those risk findings.

Members were informed of the progress made in implementing recommendations by service areas/ locations in receipt of Internal Audit reports, to ensure that reported risks are being addressed appropriately and within adequate timeframes.

Members were advised that work has been continuing and as of 29<sup>th</sup> September 2022 there were 968 findings that had been raised within the MK system since the date of implementation. The system enables the individual auditor to risk rate findings, in line with internal guidance procedures. As the auditor creates each finding they also detail the

actions that are recommended that would mitigate or remove the risk identified. Members were also advised that all Internal Auditors work is subject to review by more senior staff for quality control and consistency before agreeing risk ratings and issuing findings to managers. At the time of extracting the data there were 19 findings that had been created in relation to audit work in progress and were in draft in the report as they had not yet been reviewed. No risk rating status had been attributed to these at this point.

A Member sought clarification on high and medium risk ratings and requested examples of these, together with relevant recommendations. Members were advised of a document that had previously been circulated, that had included this information. High risk would be actual loss of cash, assets or information, which would require immediate action. Medium risk could be the risk of loss of cash, assets or information, for example, monies not kept in a safe overnight. Members agreed for the document referred to, to be circulated to them after the meeting.

A Member queried information in the report relating to risk findings that were 'not accepted'. Members were advised that these risks just merit attention from the risks identified. Risks remain the 'ownership' of the section where they occurred, and Managers may accept that they carry these risks but believe that they have other processes that cover the risks.

A Member requested more information on the high risk items that are in progress and suggested information on their dispersal across the directorate, and of those that are in progress, if they are out of time limits. Members were advised that a lot of different information can be accessed through the audit data system and going forward, will look at providing information from specific requests from Members. Members were also advised that schools would be re-visited, following their initial audit during the pandemic, with 6 on-site school visits already planned before March 2023.

A Member queried whether there were time limits and whether these were being attained. Members were advised that the higher the risk, the more immediate the action needed to be to rectify the issue. Members were also advised that if a change to a policy was required, in order to reduce the risk, then there would be a longer allowance of time to reach a satisfactory outcome. Members were informed that if they were unhappy with information provided by Service Managers, following an audit, they could be invited to future Governance and Audit Committees to address any concerns of the Members.

Following consideration of the report, the Governance and Audit Committee noted its contents.

## **6. INTERNAL AUDIT SERVICES: ANTI-FRAUD STRATEGY ACTION PLAN**

The Acting Internal Audit Manager presented the report which informed Members of the action plan that has been drawn up following the approval of the draft Anti-Fraud strategy in June 2022.

Members were advised that the Governance and Audit Committee are responsible for ensuring that strategies and policies relating to risk and control are adequately managed and monitored in order to gain assurance regarding the adequacy of risk management and internal control frameworks within the Council. The anti-fraud strategy is one such document and the draft strategy was approved at the meeting of the committee in June 2022. Following approval of the draft strategy an action plan is now required to set in place the actions required to develop arrangements to embed the strategy.

A Member sought clarification on the action plan, in particular the target dates, and queried whether they were all future dates or historic dates due to completion of the actions, and if so, requested more information on the completed items. Members were advised that the historic dates did not confirm completion, and that the strategy was to be reviewed by CMT. With regards to schools, Members were advised that anti-fraud strategies needed to be looked at and that schools are awaiting the strategy to be published.

Members also highlighted that the target dates in the report were 2022 and should be 2023, and this correction was noted by Members and Officers.

A Member sought clarification on the recipients of the advice and training, referred to in the report. Members were advised that Officers would receive training by way of awareness sessions, however, Officers who deal with cash transactions and accounts would require a higher level of specific training.

A Member confirmed that 'NFI' referred to National Fraud Initiative. Members were advised that this was a 2-yearly cycle that 'data matches' information, and that the results are published.

A Member queried the 'ongoing' items in the action plan, and whether the plan is a 'live' document under review. If so, the Member suggested some reference to dates when 'live' actions would be reviewed. Members were advised that this information could be included in a 'review cycle'.

It was moved and seconded that the Anti-Fraud Strategy Action Plan be endorsed. By way of Microsoft Forms and verbal confirmation this was unanimously agreed.

RESOLVED that the Anti-Fraud Strategy Action Plan be endorsed.

## **7. DRAFT ANNUAL SELF-ASSESSMENT REPORT 2021/22**

The Business Improvement Manager presented the report and gave Members a presentation on the self-assessment report. Members were provided with information regarding the duties for Councils under the relevant legislation and, in particular the role of the Governance and Audit Committee in the self-assessment. Members were recommended to review the draft self-assessment report and if necessary, make recommendations for changes to the conclusions or action the council intends to take.

A Member requested the information provided in the presentation and asked for copies to be circulated to Members. This request was noted.

A Member sought clarification on the Welsh Government guidelines that had been given to all Welsh Local Authorities to produce the self-assessments but noted that not much detail had been given to LA's so the self-assessments could all be different. The Member also noted that when published by LA's, these could then be compared to others. Members were advised that each Local Authority can decide on the information to be included, and this would vary from different Local Authorities. Reference would be made to others when producing the self-assessment for Caerphilly. Members were also informed that the WLGA have organised workshops for LA's in producing the self-assessments.

A Member sought clarification on the Corporate Planning included in the appendix to the report, showing the progress reported against the Council's current six Well-being



Objectives over the last twelve months, and noted they were all progressing well. In particular, in relation to public transport, the Member wished to note that 'progressing well' was not an accurate account for the current situation in some parts of Caerphilly Borough. Members were advised that every year an annual report is produced on the Well-being objectives, and a detailed annual report will accompany the self-assessment. Members were informed that full details will be provided in the annual report, with regards to those objectives that were 'progressing well'. In relation to the transport issue, raised by the Member, it was noted that the outcomes for transport were progressing well, even though there may still be some outstanding issues.

The Corporate Director for Education and Corporate Services advised Members in relation to the comparison with other LA's, discussed earlier in the meeting, and noted that these will become more comparative over time. Members were advised that following the elections every five years, an external peer assessment is done on each Local Authority, based on their self-assessments. It was also noted that the development of the corporate plan, would identify priorities and specific outcomes within the 5 year period.

The Business Improvement Manager wished to note an error within the report in section 5 of the appendix, 2018-2013 should be 2018-2023.

A Member sought clarification on whether the reference to staff who worked for the Council included volunteers. Members were advised of the employee volunteering scheme, the creation of Caerphilly Cares, and working with GAVO. The Head of Education Planning and Strategy also advised Members of the successful volunteering workshop.

A Member commented on the report and sought clarification on the conclusions, objectives and desired outcomes. It was noted that the report only appeared to include what had gone well. Members were advised that this was helpful feedback, and that a lot of the evidence-based information had not been included in the report, which gave the outcomes and objectives. Members were also advised that the information is condensed to the objectives and outcomes, but the extensive background information could be included in future reports, if required. It was also suggested to Members that the background information could be made available for a separate meeting, if Members wished to do this.

A Member sought clarification on those employees that are given their 'time back' and whether this was not in the spirit of volunteering. Members were advised that only 2 days per year are given back to employees, who volunteer for much longer than 2 days, and is meant as more of a 'thank you' than a 'payment'.

A Member referred to some typing/grammatical errors in the report, which were clarified to Members by Officers.

A Member queried when the document is approved and becomes a public document, could it also explain how the Council produces the document. Members were referred to information within the report which includes the various stakeholders and departments involved in producing the document, and also the Governance and Audit Committee. The Member suggested that more information on this committee, and the scrutiny committees, could be included such as what they do, their roles and possibly include links to further information available. Members were advised that this would be taken on board and the roles of scrutiny and Council could be included in the final version.

It was moved and seconded that the Draft Annual Self-Assessment Report 2021/22, as attached as appendix 1, be reviewed and no recommendations were made for the changes

to the conclusions or actions the council intends to take. By way of Microsoft Forms and verbal confirmation this was unanimously agreed.

RESOLVED that the Draft Annual Self-Assessment report 2021/22, as attached as appendix 1, be reviewed and made no recommendations for the changes to the conclusions or actions the council intends to take.

**8. ANNUAL REPORT ON CORPORATE COMPLAINTS RECEIVED FOR THE PERIOD 1<sup>ST</sup> APRIL 2021 TO 31<sup>ST</sup> MARCH 2022**

The Head of Democratic Services and Deputy Monitoring Officer presented the report which provided the Governance and Audit Committee with an overview of the complaints dealt with under the Corporate Complaints policy for the period 1<sup>st</sup> April 2021 to 31<sup>st</sup> March 2022 together with the outcomes and lessons learned. Members were informed that the report would also be presented to Cabinet on 19<sup>th</sup> October.

Members were also advised that The Local Government and Elections Wales Act 2021 sets out provisions for the Governance and Audit Committee to 'review and assess the authority's ability to handle complaints effectively and to make reports and recommendations in relation to the authority's ability to handle complaints effectively'.

Members were advised that the policy dealt with corporate complaints only and that there are separate complaints policies for social services complaints and school-based complaints. Members were informed that a new policy was adopted in April 2021, and staff training had been undertaken with the Public Services Ombudsman for Wales. Members were also informed of a new computerised complaints system which was due to be trialled, which would streamline the process of dealing with complaints and learning from the outcomes.

Members were advised that quarterly statistics on complaints are provided to the Ombudsman, which are then published on the Ombudsman's website.

A Member noted the Officers responses within the report showing how complaints had been dealt with. The Member sought clarification on the reference to specific training and requested more information, going forward, on how specific complaints were dealt with and suggested that Members could have some training/briefing on how complaints are dealt with, in order to have a better understanding of the process. Members were advised that this could be arranged.

A Member sought clarification on the number of different stages of complaints, what constitutes stage 1 and stage 2, and those that have escalated from stage 1 to stage 2, where the complainant is not satisfied with the outcome at stage 1. Members were advised that a stage 1 complaint has a 10 working day response, and a stage 2 complaint has a 20 working day response. Members were advised that extensions to these timescales could occur, with the agreement of the complainant, in order to fully investigate the complaint. Members were also advised that the Ombudsman's policy and guidance on complaints could be re-circulated to Members for their information.

A Member noted the detail of the report and requested more analysis across the directorates and an overview of the information provided within the body of the covering report. The Member also sought clarification on the Social Services complaints policy, and whether this covered the whole of Social Services Directorate. Members were advised that

there are different 'routes' for social services complaints, depending on the nature of the complaint, which can involve an independent investigation.

Following consideration of the report, the Governance and Audit Committee noted its contents.

## **9-12. INFORMATION ITEMS**

It was confirmed that none of the following items had been called forward for discussion at the meeting, and the Committee noted the contents of the reports: -

- (i) Regulation of Investigatory Powers Act 2000;
- (ii) Officer's Declaration of Gifts and Hospitality January to March 2022;
- (iii) Register of Employees' Interests Forms 2021/22;
- (iv) Corporate Governance Panel Minutes (19<sup>th</sup> May 2022).

The Chair thanked Members and Officers for their attendance and contributions and the meeting closed at 3.48 p.m.

Approved as a correct record and subject to any amendments or corrections agreed and recorded in the minutes of the meeting held on 24<sup>th</sup> January 2023.

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CHAIR

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## SPECIAL GOVERNANCE AND AUDIT COMMITTEE

### MINUTES OF THE MEETING HELD IN PENALLTA HOUSE AND VIA MICROSOFT TEAMS ON TUESDAY 10<sup>TH</sup> JANUARY 2023 AT 2.00 P.M.

PRESENT:

Councillors:

M. A. Adams, Mrs E.M. Aldworth, A. Broughton-Pettit, M. Chacon-Dawson, P. Cook, Mrs T. Parry, J. Taylor and C. Wright (Vice Chair).

Lay Members:

N. Yates (Chair), M. Rees, V. Pearson and J. Williams.

Together with:

Officers: S. Harris (Head of Financial Services and S151 Officer), D. Gronow (Acting Internal Audit Manager), A. Southcombe (Finance Manager – Corporate Finance), N. Roberts (Principal Group Accountant), and J. Lloyd (Committee Services Officer).

M. Jones (Audit Wales), R. Davies (Audit Wales), and B. Roberts (Audit Wales).

Also in attendance: Councillors. S. Cook, P. Leonard, J. Pritchard, and E. Stenner.

### RECORDING AND VOTING ARRANGEMENTS

The Chair reminded those present that the meeting would be live-streamed and a recording made available to view via the Council's website, except for discussions involving confidential or exempt items - [Click Here to View](#). Members were advised that voting on decisions would take place via Microsoft Forms.

#### 1. APOLOGIES FOR ABSENCE

Apologies for absence were received from R. Edmunds (Corporate Director for Education and Corporate Services), L. Donovan (Head of People Services), L. Lane (Head of Democratic Services and Deputy Monitoring Officer), S. Richards (Head of Education Planning and Strategy), R. Roberts (Business Improvement Manager), and J. Pearce (Business Improvement Officer).

#### 2. DECLARATIONS OF INTEREST

There were no declarations of interest received at the commencement or during the course of the meeting.

## REPORTS OF OFFICERS

Consideration was given to the following report.

### 3. FINANCIAL STATEMENTS FOR 2021/22.

Consideration was given to the Financial Statements report which was introduced to Members by the Head of Financial Services and S151 Officer, and Audit Wales.

Members were advised that the purpose of the report was to present the Governance and Audit Committee with the Audit Wales 'Audit of Accounts Report' for the 2021/22 financial year, and to seek a recommendation from the Governance and Audit Committee that Council approves the 2021/22 Audited Financial Accounts at the Council meeting on 17<sup>th</sup> January 2023.

Members sought clarification on a number of issues including the accounting treatment of infrastructure assets, the unadjusted misstatement of £997,409, the restated 2020/21 figures in relation to the City Deal and the adjusted misstatement in relation to retirement benefits.

In response, Officers and colleagues from Audit Wales referred Members to paragraphs 12 to 15 of the Audit Wales report which provided an explanation of the accounting treatment for infrastructure assets. Officers also explained that the unadjusted misstatement of £997,409 is not material and that the relevant adjustments would be made in the 2022/23 financial year. In relation to the restated figures, it was explained that this arises from the City Deal being incorporated into the 2021/22 Financial Accounts due to this now being material, and as a result of this the figures for the previous year need to be restated. Officers also explained that the adjusted misstatement for retirement benefits related to a pension liability for Capita Gwent Consultancy that no longer exists.

A query was also raised by a member of the Committee in relation to the Financial Liabilities Note on page 62 of the 2021/22 Financial Accounts. The query focussed on the figure for short-term liabilities and the figure for liabilities maturing within 1 year as these did not match. Officers confirmed that there appeared to be an error and that this would be adjusted.

Having considered the report, it was moved and seconded that the recommendations be approved. By way of Microsoft Forms this was unanimously agreed.

RESOLVED that the following recommendations be approved:

- 3.1.1 Receive and comment upon the Audit Wales 'Audit of Accounts Report'.
- 3.1.2 Recommend to Council that the 2021/22 Audited Financial Accounts are approved at its meeting on 17 January 2023.
- 3.1.3 Note that an 'Audit of Accounts Addendum Report' will be presented to the Governance and Audit Committee at its meeting on 18 April 2023, setting out details of Audit Wales' recommendations arising from the audit of the Council's 2021/22 Financial Accounts and the associated management responses.

The Chair thanked Members and Officers for their attendance and contributions, and the meeting closed at 2.44 p.m.

Approved as a correct record and subject to any amendments or corrections agreed and recorded in the minutes of the meeting held on 24<sup>th</sup> January 2023.

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CHAIR

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**GOVERNANCE AND AUDIT COMMITTEE FWP**

<b>GOVERNANCE AND AUDIT COMMITTEE – 24<sup>th</sup> JANUARY 2023</b>
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<b>TITLE</b>	<b>PURPOSE</b>	<b>KEY ISSUES</b>	<b>PRESENTING OFFICER</b>
Update from Audit Wales (Standing Item)			Audit Wales
Internal Audit Services – Update on Progress			D. Gronow
Corporate Risk Register Update			R. Roberts
Regulator Proposals for Improvement Progress Update			R. Roberts
Six month update on Complaints 22/23			Lisa Lane
Homelessness Audit by Wales Audit Office			Kerry Denman
<b>INFORMATION ITEMS</b>			
Regulation of Investigatory Powers Act 2000			L. Lane

Officers Declarations of Gifts and Hospitality	To provide the Governance and Audit Committee with the information regarding the Register of Employees' Interests Forms completed by officers of the Council (excluding Schools) regarding Gifts and Hospitality for the last quarter and a comparison with the previous three quarters.		L. Donovan
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**GOVERNANCE AND AUDIT COMMITTEE –18<sup>th</sup> APRIL 2023**

TITLE	PURPOSE	KEY ISSUES	PRESENTING OFFICER
Update from Audit Wales (Standing Item)			Audit Wales
Internal Audit Annual Plan 2023/24			D Gronow
Update on Tracking of Agreed Audit Report Recommendations			D. Gronow
Public Sector Internal Audit Standards Self Evaluation update			D. Gronow
Annual Audit Plan			Audit Wales
Certification of Grants and Returns			Audit Wales
Audit of Accounts Addendum Report			Audit Wales/S Harris
Review and Refresh of Financial Regulations			S Harris / D Gronow

<b>INFORMATION ITEMS</b>			
Regulation of Investigatory Powers Act 2000			L. Lane
Officers Declarations of Gifts and Hospitality	To provide the Governance and Audit Committee with the information regarding the Register of Employees' Interests Forms completed by officers of the Council (excluding Schools) regarding Gifts and Hospitality for the last quarter and a comparison with the previous three quarters.		L. Donovan
Corporate Governance Panel Minutes			D. Gronow

**GOVERNANCE AND AUDIT COMMITTEE –30<sup>th</sup> MAY 2023**

<b>TITLE</b>	<b>PURPOSE</b>	<b>KEY ISSUES</b>	<b>PRESENTING OFFICER</b>
Update from Audit Wales (Standing Item)			Audit Wales

Internal Audit Year end report and Annual Opinion			D Gronow
Draft Annual Governance Statement			S Harris
Corporate Risk Register Monitoring and update			R Roberts
Regulator proposals for improvements progress update			R Roberts
<b>INFORMATION ITEMS</b>			
Regulation of Investigatory Powers Act 2000			L. Lane
Officers Declarations of Gifts and Hospitality	To provide the Governance and Audit Committee with the information regarding the Register of Employees' Interests Forms completed by officers of the Council (excluding Schools) regarding Gifts and Hospitality for the last quarter and a comparison with the previous three quarters.		L. Donovan
Corporate Governance Panel Minutes			D. Gronow

**GOVERNANCE AND AUDIT COMMITTEE –**

<b>TITLE</b>	<b>PURPOSE</b>	<b>KEY ISSUES</b>	<b>PRESENTING OFFICER</b>
Update from Audit Wales (Standing Item)			Audit Wales
Annual review of Complaints 2022/23			L Lane
<b>INFORMATION ITEMS</b>			
Regulation of Investigatory Powers Act 2000			L. Lane
Officers Declarations of Gifts and Hospitality	To provide the Governance and Audit Committee with the information regarding the Register of Employees' Interests Forms completed by officers of the Council (excluding Schools) regarding Gifts and Hospitality for the last quarter and a comparison with the previous three quarters.		L. Donovan
Corporate Governance Panel Minutes			D. Gronow

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## GOVERNANCE AND AUDIT COMMITTEE – 24<sup>TH</sup> JANUARY 2023

**SUBJECT: INTERNAL AUDIT SERVICES – UPDATE ON PROGRESS**

**REPORT BY: ACTING INTERNAL AUDIT MANAGER**

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### 1. PURPOSE OF REPORT

- 1.1 To provide Members of the Governance and Audit Committee information on progress being made against the audit plan and other unplanned work between the period 1<sup>st</sup> April 2022 and 31<sup>st</sup> December 2022, and to inform the Committee of the opinions derived from the work undertaken.

### 2. SUMMARY

- 2.1 The report provides details of the progress made against the Internal Audit Annual plan 2022/23 which was presented to the Governance and Audit Committee in June 2023.
- 2.2 The Public Sector Internal Audit Standards (PSIAS) require that an annual plan is prepared to ensure that there is an effective and efficient use of audit resources which are directed to address areas of risk. This also provides assurance for management as part of the Annual Governance Statement (AGS).
- 2.3 As in previous years the plan may be flexed and audits reprioritised or additional unplanned audits undertaken as Directors and Service Managers become aware of new operational risks or other service priorities. Also priority will be given to any new or emerging risk areas.
- 2.4 The Internal Audit Service has been successful in recruiting to the vacant posts (with the exception of the deputy IA manager) which is a very positive step, however in the short term there is naturally some impact on output as a result of any external training and support and mentoring that has been required. So as a result, progress on some individual audit assignments has been slower than would be expected.
- 2.5 The status of all current audits as at 31<sup>st</sup> December is shown in the attached appendices. (**APPENDICIES 1 AND 2**). Appendix 1 shows all completed and closed audits and so includes audit opinions.

### 3. RECOMMENDATIONS

- 3.1 The Governance and Audit Committee is asked to note the content of the report and the details of **APPENDIX 1** and **APPENDIX 2** showing progress and status of audit work undertaken in the period from 1<sup>st</sup> April to 31<sup>st</sup> December, together with the opinions generated from any completed and finalised audits.

### 4. REASONS FOR THE RECOMMENDATIONS

- 4.1 To ensure that :-
- The Governance and Audit Committee is aware of progress against the plan.
  - The Governance and Audit Committee is aware of audit work being undertaken by the Internal Audit team and the status of each individual audit.
  - By reporting the individual opinions generated from each completed audit, the Governance and Audit Committee is informed of the internal control framework operating in Caerphilly County Borough Council.

### 5. THE REPORT

- 5.1 In accordance with the Public Sector Internal Audit Standards, the Acting Internal Audit Manager is responsible for developing a risk-based annual audit plan. Within the Standards there is also a requirement to review and adjust the plan, as necessary, in response to changes in the Council's business, risks, operations, programs, systems, controls and resources.
- 5.2 The Acting Internal Audit manager must also ensure that Internal Audit resources are appropriate, sufficient and effectively deployed to achieve the approved plan.
- 5.3 The 2022/23 Internal Audit plan was submitted to the Governance and Audit Committee for approval in June 2022. The plan outlined estimated staffing resources and a summary of audits that had been identified by a combination of known audit commitments, Head or Service and Director requests and other risk assessments.
- 5.4 Since the plan was created most of the vacant posts have been filled which has provided more certainty over resources and this is a very positive step although these new members of staff have naturally required training, support and mentoring so progress on some audits has been impacted.
- 5.5 As in prior years there will be a number of incomplete audits brought forward which will required to be progressed to completion and in addition the plan may be flexed and audits reprioritised or additional unplanned audits undertaken as Directors and Service Managers become aware of new operational risks or other service priorities and priority will be given to any new or emerging risk areas. As a result there has been a number of changes to the original plan.
- 5.6 **APPENDIX 1** shows closed and completed audits. The table reports the Directorate in which the establishment or system sits, the type of audit and the opinion that was issued. Members are reminded that any system or establishment audit that generates at least one High Risk finding /recommendation will generate an "In need of improvement" opinion, and any contracts or grant with significant issues on non compliance to T&C or Financial Regs will generate a non compliant opinion.



5.7 **APPENDIX 2** reports audits that have been started but are incomplete and audits that have been planned and not started.

5.8 The appendices illustrate that there are 316 individual pieces of work completed or in progress in the period between 1/4/2022 and 31/12/2022. 73 audits have been closed (final agreed report issued), 8 audits have been completed (draft report issued), 11 audits are planned but not started and the rest 224, are in progress.

5.9 Each Audit completed and closed will generate An N opinion in line with the type of Audit. Further detail is given in **APPENDIX 3 (AUDIT REPORT OPINIONS AND CRITERIA)** 81 Audit opinions have been issued in the period to date.

- Systems and establishment audits are as follows :- 18 Effective, 21 Effective with opportunity to improve, 12 in need of improvement.
- Contract and grants audits :- Compliant 24, Substantially compliant 4, Partially compliant 1, Non compliant 1.

5.10 Where recommendations have been issued and agreed with Management in respect of individual audit reports the progress towards implementation is reported separately to the Governance and Audit Committee.

## 5.11 **Conclusion**

The report informs the Governance and Audit Committee on the status of audit work performed to date and audit opinions generated. This information supports the Committee in their determination of assurance which forms an essential part of the governance framework, and the Committee is asked to note this report.

## 6. **ASSUMPTIONS**

6.1 There are no assumptions in this report.

## 7. **SUMMARY OF INTEGRATED IMPACT ASSESSMENT**

7.1 The Council will be unable to deliver its Well-being objectives in the absence of effective corporate governance arrangements. Internal audit work provides information to the Governance and Audit Committee in order to for members to evaluate the internal control framework in operation in Caerphilly County Borough Council.

7.2 Strong corporate governance arrangements are a key element in ensuring that the Well-being Goals within the Well-being of Future Generations Act (Wales) 2015 are met.

7.3 There are no other equalities implications arising from this report in relation to other equalities issues.

## 8. **FINANCIAL IMPLICATIONS**

8.1 There are no direct financial implications arising from this report.

## **9. PERSONNEL IMPLICATIONS**

9.1 There are no direct personnel implications arising from this report

## **10. CONSULTATIONS**

10.1 All comments have been reflected in this report.

## **11. STATUTORY POWER**

11.1 Local Government and Elections Act (Wales) 2021

Author: D. Gronow, Audit Group Manager

Consultees: C Harrhy, Chief Executive  
R Edmunds, Corporate Director for Education and Corporate Services  
S Harris, Head of Financial Services and S151 Officer

Appendices:

**Appendix 1 Closed and Completed Audits as at 31/12/2022**

**Appendix 2 Audits Started and Planned Audits as at 31/12/2022**

**Appendix 3 Audit Report Opinions and Criteria**

**APPENDIX 1**

**CLOSED AND COMPLETED AUDITS AS AT 31/12/2022**

**Table A Closed Audits (ie Final agreed report issued and all recommendations agreed)**

<b>Title</b>	<b>Audit Type</b>	<b>Audit status</b>	<b>Audit Opinion</b>	<b>Directorate</b>
TH1321 - GUH Traffic Sign Review	Contract Audit	Audit Closed	Compliant	Communities
4708 - Caerphilly Leisure Centre Replacement of Water Tanks	Contract Audit	Audit Closed	Compliant	Communities
5028 Cefn Hengoed Community Centre	Contract Audit	Audit Closed	Compliant	Communities
4915 - Cefn Forest Juniors Boiler Replacement	Contract Audit	Audit Closed	Compliant	Communities
4742 - Blackwood Primary School, Boiler Replacement	Contract Audit	Audit Closed	Compliant	Communities
4939 - Panside Primary School Toilet Refurb Final Account	Contract Audit	Audit Closed	Compliant	Communities
4746 - Trinity Fields Boiler Replacement	Contract Audit	Audit Closed	Compliant	Communities
5003 - Newbridge School, External Works	Contract Audit	Audit Closed	Compliant	Communities
4727 - Ty Isaf Children's Home Refurbishment	Contract Audit	Audit Closed	Compliant	Communities
5177 Rhiw Syr Dafydd WC refurbishment	Contract Audit	Audit Closed	Compliant	Communities
4912 - Ty Sign Primary Curtain Walling Works (Phase 2)	Contract Audit	Audit Closed	Compliant	Communities
5019 Coed-y-Brain Primary Roofing Works	Contract Audit	Audit Closed	Compliant	Communities

5029 - Bedwas Comp. - Ph 2 Fire Precaution Works	Contract Audit	Audit Closed	Compliant	Communities
4841 Cefn Fforest Primary - Roof Replacement Works	Contract Audit	Audit Closed	Compliant	Communities
4962 Rhiw Syr Dafydd Primary - Replacement Boilers	Contract Audit	Audit Closed	Compliant	Communities
5038 St Martin's School Boiler Plant	Contract Audit	Audit Closed	Compliant	Communities
4863 Trinity Fields School - Building Contract	Contract Audit	Audit Closed	Compliant	Communities
4921 Ysgol Ifor Bach - Damp Proofing Classroom Floors	Contract Audit	Audit Closed	Compliant	Communities
COVID-19 Business Support Grants (Not NDR)	System Audit	Audit Closed	Effective	Communities
5095 Twyn Primary - Window Refurbishment Works	Contract Audit	Audit Closed	Effective	Communities
CCTV Control Room (Public Open Spaces)	System Audit	Audit Closed	Effective with opportunity to improve	Communities
4964 St Martins Comp Boiler Replacement Final Account	Contract Audit	Audit Closed	Substantially compliant	Communities
5030 Demolition of Specsavers Final account	Contract Audit	Audit Closed	Substantially compliant	Communities
4874 Ystrad Mynach Primary Boiler Replacement Final Account	Contract Audit	Audit Closed	Substantially compliant	Communities
5014 St Martin's School	Contract Audit	Audit Closed	Partially compliant	Communities
Ysgol Gymraeg Cwm Gwyddon	SAQ Control Risk Self-Assessment	Audit Closed	Effective	Education and Corporate Services
Tynewydd Primary	SAQ Control Risk Self-Assessment	Audit Closed	Effective	Education and Corporate Services

St Gwladys Primary	SAQ Control Risk Self-Assessment	Audit Closed	Effective	Education and Corporate Services
Hendre Infants	SAQ Control Risk Self-Assessment	Audit Closed	Effective	Education and Corporate Services
Libanus Primary School	SAQ Control Risk Self-Assessment	Audit Closed	Effective	Education and Corporate Services
NFI match 002 HB to Student loans	Regularity	Audit Closed	Effective	Education and Corporate Services
Payroll related NFI data matches 66, 67.1, 67.2, 68, 68.1, and 78	Regularity	Audit Closed	Effective	Education and Corporate Services
Blue badge NFI matches 170, 170.1, 172.1, 172.3, 172.7, 172.8, 172.9	Regularity	Audit Closed	Effective	Education and Corporate Services
NFI match report 67.1	Regularity	Audit Closed	Effective	Education and Corporate Services
NFI Data match 68.1	Regularity	Audit Closed	Effective	Education and Corporate Services
NFI Data match report 120	Regularity	Audit Closed	Effective	Education and Corporate Services
NFI data match 156	Regularity	Audit Closed	Effective	Education and Corporate Services
NFI Data match 133	Regularity	Audit Closed	Effective	Education and Corporate Services
Petty Cash SAQ Newbridge Library	SAQ Control Risk Self-Assessment	Audit Closed	Effective	Education and Corporate Services
Waunfawr Primary	SAQ Control Risk Self-Assessment	Audit Closed	Effective with opportunity to Improve	Education and Corporate Services
The Twyn Primary	SAQ Control Risk Self-Assessment	Audit Closed	Effective with opportunity to Improve	Education and Corporate Services
Ysgol Y Castell	SAQ Control Risk Self-Assessment	Audit Closed	Effective with opportunity to Improve	Education and Corporate Services
Coed Y Brain Primary	SAQ Control Risk Self-Assessment	Audit Closed	Effective with opportunity to Improve	Education and Corporate Services
Ysgol Gymraeg Gilfach Fargoed	SAQ Control Risk Self-Assessment	Audit Closed	Effective with opportunity to Improve	Education and Corporate Services
Ysgol Gymraeg Trelyn	SAQ Control Risk Self-Assessment	Audit Closed	Effective with opportunity to Improve	Education and Corporate Services

Ysgol Bro Sannan	SAQ Control Risk Self-Assessment	Audit Closed	Effective with opportunity to Improve	Education and Corporate Services
Aberbargoed Primary School	SAQ Control Risk Self-Assessment	Audit Closed	Effective with opportunity to improve	Education and Corporate Services
Hendredenny Park Primary School	SAQ Control Risk Self-Assessment	Audit Closed	Effective with opportunity to improve	Education and Corporate Services
Ysgol Y Lawnt	SAQ Control Risk Self-Assessment	Audit Closed	Effective with opportunity to improve	Education and Corporate Services
Pontllanfraith Primary School	SAQ Control Risk Self-Assessment	Audit Closed	Effective with opportunity to improve	Education and Corporate Services
Bedwas High School	SAQ Control Risk Self-Assessment	Audit Closed	Effective with opportunity to improve	Education and Corporate Services
NFI Data match 131	Regularity	Audit Closed	Effective with opportunity to improve	Education and Corporate Services
Risca Primary	SAQ Control Risk Self-Assessment	Audit Closed	Effective with opportunity to improve	Education and Corporate Services
Phillipstown Primary Consultation	Advisory Review	Audit Closed	Effective with opportunity to improve	Education and Corporate Services
Ysgol Gymraeg Bro Allta Advisory Review	Advisory Review	Audit Closed	Effective with opportunity to improve	Education and Corporate Services
Upper Rhymney Primary	SAQ Control Risk Self-Assessment	Audit Closed	In need of Improvement	Education and Corporate Services
Graig Y Rhacca Primary	SAQ Control Risk Self-Assessment	Audit Closed	In need of Improvement	Education and Corporate Services
Ysgol Gymraeg Bro Allta	SAQ Control Risk Self-Assessment	Audit Closed	In need of Improvement	Education and Corporate Services
NFI Council Tenants to HMRC data match 485 (property)	Regularity	Audit Closed	In need of improvement	Education and Corporate Services
NFI CTRS to HMRC data matches 483 (property) and 484 (earnings)	Regularity	Audit Closed	In need of improvement	Education and Corporate Services
Cwrt Rawlin Primary School	SAQ Control Risk Self-Assessment	Audit Closed	In need of improvement	Education and Corporate Services

Islwyn High School	SAQ Control Risk Self-Assessment	Audit Closed	In need of improvement	Education and Corporate Services
Glan-Y-Nant	SAQ Control Risk Self-Assessment	Audit Closed	In need of improvement	Education and Corporate Services
EXT17C - U37C Retaining Walls Scheme Wattsville and Pontlottyn	Contract Audit	Audit Closed	Compliant	Social Services and Housing
TO2109 WHQS External Works, The Crescent, Machen	Contract Audit	Audit Closed	Compliant	Social Services and Housing
Martinsfield - Heat Pumps and Central Heating	Contract Audit	Audit Closed	Compliant	Social Services and Housing
EXT18C-UC33PS Pantycelyn	Contract Audit	Audit Closed	Compliant	Social Services and Housing
Castle Court, Pontywaun Roofing	Contract Audit	Audit Closed	Compliant	Social Services and Housing
Supporting People HSG 2021-2022	Grant certification	Audit Closed	Compliant	Social Services and Housing
Petty Cash SAQ Social Services	SAQ Control Risk Self-Assessment	Audit Closed	Effective	Social Services and Housing
TO1812 - Blocks 3 & 4 Third Avenue, Treceenydd	Contract Audit	Audit Closed	Substantially compliant	Social Services and Housing
TO2322 Rudry Trapwell Caerphilly	Contract Audit	Audit Closed	Non compliant	Social Services and Housing
Lewis Drive Hedlyn EXT17C LC33PS	Contract Audit	Audit Closed	Non compliant	Social Services and Housing

**Table B completed Audits (Draft reports issued awaiting agreement of recommendations and final report)**

<b>Title</b>	<b>Audit Type</b>	<b>Audit status</b>	<b>Audit Opinion</b>	<b>Directorate</b>
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Petty Cash SAQ Llanciach Fawr	SAQ Control Risk Self- Assessment	Audit Completed	Effective	Communities
NFI 709 - VAT Overpayment	Regularity	Audit Completed	Effective with opportunity to Improve	Education and Corporate Services
NFI purchase ledger creditor detail matches 701, 702, 703 and 707	Regularity	Audit Completed	Effective with opportunity to improve	Education and Corporate Services
Pupil Deprivation Grant	Grant certification	Audit Completed	Effective with opportunity to improve	Education and Corporate Services
Education Improvement Grant	Grant certification	Audit Completed	Effective with opportunity to improve	Education and Corporate Services
Baseline Personnel Security Standards (BPSS)	Regularity	Audit Completed	In need of improvement	Education and Corporate Services
Progress review on GT Finance IT audit	Follow Up Audit	Audit Completed	In need of improvement	Education and Corporate Services
Data Protection Training Records	System Audit	Audit Completed	In need of improvement	Education and Corporate Services



Table A:- Audits started

<b>Title</b>	<b>Audit Type</b>	<b>Audit status</b>	<b>Directorate</b>
4906 Crosskeys YC - Flood Damage	Contract Audit	Audit Started	Communities
Public Protection, Community & Leisure Services Self Safeguarding Evaluation Audit	Crosscutting Review	Audit Started	Communities
Planning and Regeneration Corporate Safeguarding Self Evaluation Audit	Crosscutting Review	Audit Started	Communities
Petty Cash SAQ Blackwood Miners	SAQ Control Risk Self-Assessment	Audit Started	Communities
Petty Cash SAQ Planning	SAQ Control Risk Self-Assessment	Audit Started	Communities
Petty Cash SAQ Positive Futures	SAQ Control Risk Self-Assessment	Audit Started	Communities
Petty Cash SAQ Economic Development	SAQ Control Risk Self-Assessment	Audit Started	Communities
Petty Cash SAQ Environmental Health	SAQ Control Risk Self-Assessment	Audit Started	Communities
Petty Cash SAQ Superintendent Registrar	SAQ Control Risk Self-Assessment	Audit Started	Communities
Petty Cash SAQ Cwmcarn Forest Drive Visitor Centre	SAQ Control Risk Self-Assessment	Audit Started	Communities
Petty Cash SAQ The Education Centre Parc Penallta	SAQ Control Risk Self-Assessment	Audit Started	Communities
4538 Blackwood Comprehensive Boiler Plant Replacement	Contract Audit	Audit Started	Communities

Petty Cash SAQ Building Cleaning Services	SAQ Control Risk Self- Assessment	Audit Started	Communities
Management of Temporary ID cards	Regularity	Audit Started	Communities
Petty Cash SAQ Buildings Maintenance	SAQ Control Risk Self- Assessment	Audit Started	Communities
Petty Cash SAQ Public Services	SAQ Control Risk Self- Assessment	Audit Started	Communities
Purchase Card - Communities	System Audit	Audit Started	Communities
Property Services Corporate Safeguarding Self Evaluation Audit	Crosscutting Review	Audit Started	Communities
Communities Infrastructure Corporate Safeguarding Self Evaluation Audit	Crosscutting Review	Audit Started	Communities
Purchase Card - Economic Development	System Audit	Audit Started	Communities
Purchase Card - Communities	System Audit	Audit Started	Communities
Purchase Card - Tourism	System Audit	Audit Started	Communities
Corporate Services and Education Safeguarding self evaluation	Crosscutting Review	Audit Started	Education and Corporate Services
Payment Card Industry Data Security Standard	System Audit	Audit Started	Education and Corporate Services
Petty Cash SAQ Blackwood Library	SAQ Control Risk Self- Assessment	Audit Started	Education and Corporate Services
Petty Cash SAQ Communications Unit	SAQ Control Risk Self- Assessment	Audit Started	Education and Corporate Services
Petty Cash SAQ Risca Library	SAQ Control Risk Self- Assessment	Audit Started	Education and Corporate Services
Petty Cash SAQ Risca Library	SAQ Control Risk Self- Assessment	Audit Started	Education and Corporate Services

Petty Cash SAQ Ystrad Mynach Library	SAQ Control Risk Self-Assessment	Audit Started	Education and Corporate Services
Petty Cash SAQ Civic Office	SAQ Control Risk Self-Assessment	Audit Started	Education and Corporate Services
Petty Cash SAQ Caerphilly Library	SAQ Control Risk Self-Assessment	Audit Started	Education and Corporate Services
Petty Cash SAQ Abertridwr Library	SAQ Control Risk Self-Assessment	Audit Started	Education and Corporate Services
Petty Cash SAQ Bargoed Library	SAQ Control Risk Self-Assessment	Audit Started	Education and Corporate Services
Petty Cash SAQ White Rose information centre (New Tredegar library)	SAQ Control Risk Self-Assessment	Audit Started	Education and Corporate Services
Petty Cash SAQ ESF Project	SAQ Control Risk Self-Assessment	Audit Started	Education and Corporate Services
Petty Cash SAQ Caerphilly Adventures	SAQ Control Risk Self-Assessment	Audit Started	Education and Corporate Services
Petty Cash SAQ Legal Services	SAQ Control Risk Self-Assessment	Audit Started	Education and Corporate Services
Petty Cash SAQ Sundry Debtors Court Fees	SAQ Control Risk Self-Assessment	Audit Started	Education and Corporate Services
Petty Cash SAQ Community Education	SAQ Control Risk Self-Assessment	Audit Started	Education and Corporate Services
Petty Cash SAQ Community Education	SAQ Control Risk Self-Assessment	Audit Started	Education and Corporate Services
Starters and Recruitment	System Audit	Audit Started	Education and Corporate Services
Purchase Card User Administration	System Audit	Audit Started	Education and Corporate Services
Petty Cash SAQ Aberbargoed Primary School	SAQ Control Risk Self-Assessment	Audit Started	Education and Corporate Services
Petty Cash SAQ Graig Y Rhacca Primary	SAQ Control Risk Self-Assessment	Audit Started	Education and Corporate Services
Petty Cash SAQ Derwendeg Primary School	SAQ Control Risk Self-Assessment	Audit Started	Education and Corporate Services

Petty Cash SAQ Hendre Junior School	SAQ Control Risk Self- Assessment	Audit Started	Education and Corporate Services
Petty Cash SAQ Heolddu Comprehensive	SAQ Control Risk Self- Assessment	Audit Started	Education and Corporate Services
Petty Cash SAQ Plas Y Felin Primary School	SAQ Control Risk Self- Assessment	Audit Started	Education and Corporate Services
Petty Cash SAQ Pantside Primary	SAQ Control Risk Self- Assessment	Audit Started	Education and Corporate Services
Petty Cash SAQ Trinity Fields School	SAQ Control Risk Self- Assessment	Audit Started	Education and Corporate Services
Petty Cash SAQ Glyngaer Primary School	SAQ Control Risk Self- Assessment	Audit Started	Education and Corporate Services
Petty Cash SAQ Fleur De Lys Primary	SAQ Control Risk Self- Assessment	Audit Started	Education and Corporate Services
Purchase Card Authoriser Administration	System Audit	Audit Started	Education and Corporate Services
Petty Cash SAQ Cwmcarn Primary School	SAQ Control Risk Self- Assessment	Audit Started	Education and Corporate Services
Petty Cash SAQ Ysgol Y Castell	SAQ Control Risk Self- Assessment	Audit Started	Education and Corporate Services
Petty Cash SAQ Bryn Awel Primary School	SAQ Control Risk Self- Assessment	Audit Started	Education and Corporate Services
Petty Cash SAQ Pengam Primary	SAQ Control Risk Self- Assessment	Audit Started	Education and Corporate Services
Petty Cash SAQ Llancaeath Junior School	SAQ Control Risk Self- Assessment	Audit Started	Education and Corporate Services
Petty Cash SAQ St Gwladys Primary School	SAQ Control Risk Self- Assessment	Audit Started	Education and Corporate Services
Petty Cash SAQ The Learning Centre Glan Y Nant	SAQ Control Risk Self- Assessment	Audit Started	Education and Corporate Services
Petty Cash SAQ Trinity Fields Play Scheme	SAQ Control Risk Self- Assessment	Audit Started	Education and Corporate Services
HR Payroll Employee Existence	System Audit	Audit Started	Education and Corporate Services

Purchase Card - Housing	System Audit	Audit Started	Education and Corporate Services
Purchase Card - Corporate Finance	System Audit	Audit Started	Education and Corporate Services
Purchase Card - Corporate Finance	System Audit	Audit Started	Education and Corporate Services
Purchase Card - Communities	System Audit	Audit Started	Education and Corporate Services
Purchase Card - Education & Corporate Services	System Audit	Audit Started	Education and Corporate Services
Purchase Card - Education & Corporate Services	System Audit	Audit Started	Education and Corporate Services
Purchase Card - Education	System Audit	Audit Started	Education and Corporate Services
Purchase Card - Education	System Audit	Audit Started	Education and Corporate Services
Purchase Card - Social Services	System Audit	Audit Started	Education and Corporate Services
Purchase Card - Education & Corporate Services	System Audit	Audit Started	Education and Corporate Services
Purchase Card - Catering	System Audit	Audit Started	Education and Corporate Services
Purchase Card - Corporate Finance	System Audit	Audit Started	Education and Corporate Services
Purchase Card - Legal Services	System Audit	Audit Started	Education and Corporate Services
Purchase Card - Education & Corporate Services	System Audit	Audit Started	Education and Corporate Services
Purchase Card - Legal Services	System Audit	Audit Started	Education and Corporate Services
Purchase Card - Libraries	System Audit	Audit Started	Education and Corporate Services
Bryn Primary School	Establishment Audit	Audit Started	Education and Corporate Services
Ystrad Primary School Establishment Audit	Establishment Audit	Audit Started	Education and Corporate Services
Payroll Leavers	System Audit	Audit Started	Education and Corporate Services
Petty Cash SAQ Comps Bedwas High	SAQ Control Risk Self-Assessment	Audit Started	Education and Corporate Services
Petty Cash SAQ Comps Blackwood Comprehensive	SAQ Control Risk Self-Assessment	Audit Started	Education and Corporate Services

Petty Cash SAQ Comps Idris Davies	SAQ Control Risk Self- Assessment	Audit Started	Education and Corporate Services
Petty Cash SAQ Comps Islwyn High	SAQ Control Risk Self- Assessment	Audit Started	Education and Corporate Services
Petty Cash SAQ Comps Lewis School Pengam	SAQ Control Risk Self- Assessment	Audit Started	Education and Corporate Services
Petty Cash SAQ Comps Lewis Girls	SAQ Control Risk Self- Assessment	Audit Started	Education and Corporate Services
Petty Cash SAQ Comps Newbridge School	SAQ Control Risk Self- Assessment	Audit Started	Education and Corporate Services
Petty Cash SAQ Comps Risca Community Comprehensive	SAQ Control Risk Self- Assessment	Audit Started	Education and Corporate Services
Petty Cash SAQ Comps St Cenydd Comprehensive	SAQ Control Risk Self- Assessment	Audit Started	Education and Corporate Services
Bryn Awel Primary School Financial admin	Special Investigation	Audit Started	Education and Corporate Services
Fochriw Primary School under banking	Special Investigation	Audit Started	Education and Corporate Services
Housing Benefits DWP Suspected breach	Special Investigation	Audit Started	Education and Corporate Services
Heolddu Comprehensive School	Establishment Audit	Audit Started	Education and Corporate Services
Lewis School Pengam	Establishment Audit	Audit Started	Education and Corporate Services
Bryn Awel Primary SAQ plus 2022/23	SAQ plus	Audit Started	Education and Corporate Services
Fochriw Primary SAQ plus 2023/23	SAQ plus	Audit Started	Education and Corporate Services
Graig y Rhacca Infants and Junior School SAQ plus 2022/23	SAQ plus	Audit Started	Education and Corporate Services
Hendre Infants school SAQ plus 2022/23	SAQ plus	Audit Started	Education and Corporate Services

Rhydri Primary Schools SAQ plus 2022/23	SAQ plus	Audit Started	Education and Corporate Services
St James Primary School SAQ plus 2023	SAQ plus	Audit Started	Education and Corporate Services
Upper Rhymney Primary School SAQ plus 2022/23	SAQ plus	Audit Started	Education and Corporate Services
White Rose Primary School SAQ plus 2022/23	SAQ plus	Audit Started	Education and Corporate Services
YG Bro Allta SAQ plus 2022/23	SAQ plus	Audit Started	Education and Corporate Services
YG Cwm Derwen SAQ plus 2022.23	SAQ plus	Audit Started	Education and Corporate Services
YG Gilfach Fargoed SAQ plus 2022/23	SAQ plus	Audit Started	Education and Corporate Services
Glan y Nant PRU SAQ 2022/23	SAQ Control Risk Self-Assessment	Audit Started	Education and Corporate Services
St Helens RC school SAQ 2022/23	SAQ Control Risk Self-Assessment	Audit Started	Education and Corporate Services
YG Cwm Rymni SAQ plus 2022/23	SAQ plus	Audit Started	Education and Corporate Services
Risca Comprehensive School SAQ plus 2022/23	SAQ plus	Audit Started	Education and Corporate Services
St Martins SAQ plus 2022/23	SAQ plus	Audit Started	Education and Corporate Services
Abercarn Primary SAQ 2022/23	SAQ Control Risk Self-Assessment	Audit Started	Education and Corporate Services
Blackwood Primary School SAQ 2022/23	SAQ Control Risk Self-Assessment	Audit Started	Education and Corporate Services
Cefn Fforest primary school SAQ 2022/23	SAQ Control Risk Self-Assessment	Audit Started	Education and Corporate Services
Coed y Brain SAQ 2022/23	SAQ Control Risk Self-Assessment	Audit Started	Education and Corporate Services
Crumlin High Level School SAQ 2022/23	SAQ Control Risk Self-Assessment	Audit Started	Education and Corporate Services
Cwm Glas infants school SAQ 2022/23	SAQ Control Risk Self-Assessment	Audit Started	Education and Corporate Services
Cwm lfor School 2022/23	SAQ Control Risk Self-Assessment	Audit Started	Education and Corporate Services

Cwmaber Infants School 2022/23	SAQ Control Risk Self-Assessment	Audit Started	Education and Corporate Services
Cwmaber Junior School SAQ 2022/23	SAQ Control Risk Self-Assessment	Audit Started	Education and Corporate Services
Cwmcarn Primary SAQ 2022/23	SAQ Control Risk Self-Assessment	Audit Started	Education and Corporate Services
Cwmfelin Primary SAQ 2022/23	SAQ Control Risk Self-Assessment	Audit Started	Education and Corporate Services
Gilfach Fargoed SAQ 2022/23	SAQ Control Risk Self-Assessment	Audit Started	Education and Corporate Services
Glyngaer Primary School SAQ 2022/23	SAQ Control Risk Self-Assessment	Audit Started	Education and Corporate Services
Hendre Junior School SAQ 2022/23	SAQ Control Risk Self-Assessment	Audit Started	Education and Corporate Services
Hendredenny Park Primary School SAQ 2022/23	SAQ Control Risk Self-Assessment	Audit Started	Education and Corporate Services
Machen Primary SAQ 2022/23	SAQ Control Risk Self-Assessment	Audit Started	Education and Corporate Services
Maesycwmmwr Primary SAQ 2022/23	SAQ Control Risk Self-Assessment	Audit Started	Education and Corporate Services
Pantside Primary School SAQ 2022/23	SAQ Control Risk Self-Assessment	Audit Started	Education and Corporate Services
Park Primary School SAQ 2022/23	SAQ Control Risk Self-Assessment	Audit Started	Education and Corporate Services
Penllwyn Primary School SAQ 2022/23	SAQ Control Risk Self-Assessment	Audit Started	Education and Corporate Services
Pentwynmawr Primary School SAQ 2022/23	SAQ Control Risk Self-Assessment	Audit Started	Education and Corporate Services
Pontllanfraith Primary School SAQ 2022/23	SAQ Control Risk Self-Assessment	Audit Started	Education and Corporate Services
Rhiw Syr Daffydd Primary SAQ 2022/23	SAQ Control Risk Self-Assessment	Audit Started	Education and Corporate Services
Risca Primary School SAQ 2022/23	SAQ Control Risk Self-Assessment	Audit Started	Education and Corporate Services



Trinity Fields School SAQ 2022/23	SAQ Control Risk Self- Assessment	Audit Started	Education and Corporate Services
Ty Isaf Primary School SAQ 2022/23	SAQ Control Risk Self- Assessment	Audit Started	Education and Corporate Services
YG Castell SAQ 2022/23	SAQ Control Risk Self- Assessment	Audit Started	Education and Corporate Services
Ynysddu Primary School SAQ 2022/23	SAQ Control Risk Self- Assessment	Audit Started	Education and Corporate Services
YG Bro Sannan SAQ 2022/23	SAQ Control Risk Self- Assessment	Audit Started	Education and Corporate Services
Armed Forced Advice and Guidance	Consultancy Review	Audit Started	Education and Corporate Services
Aberbargoed Primary School SAQ 2022/23	SAQ Control Risk Self- Assessment	Audit Started	Education and Corporate Services
Bedwas Infants School SAQ 2022/23	SAQ Control Risk Self- Assessment	Audit Started	Education and Corporate Services
Bedwas Junior School SAQ 2022/23	SAQ Control Risk Self- Assessment	Audit Started	Education and Corporate Services
Cwrt Rawlin Primary School SAQ 2022/23	SAQ Control Risk Self- Assessment	Audit Started	Education and Corporate Services
Deri Primary SAQ 2022/23	SAQ Control Risk Self- Assessment	Audit Started	Education and Corporate Services
Derwendeg Primary School SAQ 2022/23	SAQ Control Risk Self- Assessment	Audit Started	Education and Corporate Services
Fleur de Lys Primary School SAQ 2022/23	SAQ Control Risk Self- Assessment	Audit Started	Education and Corporate Services
Greenhill Primary School SAQ 2022/23	SAQ Control Risk Self- Assessment	Audit Started	Education and Corporate Services
Libanus Primary School SAQ 2022/23	SAQ Control Risk Self- Assessment	Audit Started	Education and Corporate Services
Llancaeath Primary School SAQ 2022/23	SAQ Control Risk Self- Assessment	Audit Started	Education and Corporate Services
Llanfabon Infants School SAQ 2022/23	SAQ Control Risk Self- Assessment	Audit Started	Education and Corporate Services
Markham Primary School SAQ 2022/23	SAQ Control Risk Self- Assessment	Audit Started	Education and Corporate Services

Nant y Parc Primary SAQ 2022/23	SAQ Control Risk Self-Assessment	Audit Started	Education and Corporate Services
YG Penalltau SAQ 2022/23	SAQ Control Risk Self-Assessment	Audit Started	Education and Corporate Services
Pengam Primary SAQ 2022/23	SAQ Control Risk Self-Assessment	Audit Started	Education and Corporate Services
Phillipstown Primary School SAQ 2022/23	SAQ Control Risk Self-Assessment	Audit Started	Education and Corporate Services
Plas y felin Primary School SAQ 2022/23	SAQ Control Risk Self-Assessment	Audit Started	Education and Corporate Services
Tir y Berth Primary School SAQ 2022/23	SAQ Control Risk Self-Assessment	Audit Started	Education and Corporate Services
Trinant Primary SAQ 2022/23	SAQ Control Risk Self-Assessment	Audit Started	Education and Corporate Services
Twyn Primary School SAQ 2022/23	SAQ Control Risk Self-Assessment	Audit Started	Education and Corporate Services
Ty Sign Primary SAQ 2022/23	SAQ Control Risk Self-Assessment	Audit Started	Education and Corporate Services
Ty Newydd Primary School SAQ 2022/23	SAQ Control Risk Self-Assessment	Audit Started	Education and Corporate Services
Tyn y Wern Primary School SAQ 2022/23	SAQ Control Risk Self-Assessment	Audit Started	Education and Corporate Services
Waunfawr Primary School SAQ 2022/23	SAQ Control Risk Self-Assessment	Audit Started	Education and Corporate Services
YG Cwm Gwyddon SAQ 2022/23	SAQ Control Risk Self-Assessment	Audit Started	Education and Corporate Services
YG Trelyn SAQ 2022/23	SAQ Control Risk Self-Assessment	Audit Started	Education and Corporate Services
Ysgol Ifor Bach SAQ 2022/23	SAQ Control Risk Self-Assessment	Audit Started	Education and Corporate Services
Ysgol y Lawnt SAQ 2022/23	SAQ Control Risk Self-Assessment	Audit Started	Education and Corporate Services
YG Caerffili SAQ 2022/23	SAQ Control Risk Self-Assessment	Audit Started	Education and Corporate Services
Bedwas High School SAQ 2022/23	SAQ Control Risk Self-Assessment	Audit Started	Education and Corporate Services

Idris Davies School SAQ 2022/23	SAQ Control Risk Self- Assessment	Audit Started	Education and Corporate Services
St Cenydd Comprehensive School SAQ 2022/23	SAQ Control Risk Self- Assessment	Audit Started	Education and Corporate Services
Blackwood Comprehensive School SAQ 2022/23	SAQ Control Risk Self- Assessment	Audit Started	Education and Corporate Services
Lewis Girls School SAQ 2022/23	SAQ Control Risk Self- Assessment	Audit Started	Education and Corporate Services
Islwyn High School SAQ 2022/23	SAQ Control Risk Self- Assessment	Audit Started	Education and Corporate Services
Newbridge Comprehensive School SAQ 2022/23	SAQ Control Risk Self- Assessment	Audit Started	Education and Corporate Services
Petty Cash SAQ Ty Clyd	SAQ Control Risk Self- Assessment	Audit Started	Social Services and Housing
Petty Cash SAQ Ty Iscoed	SAQ Control Risk Self- Assessment	Audit Started	Social Services and Housing
Petty Cash SAQ Montclair	SAQ Control Risk Self- Assessment	Audit Started	Social Services and Housing
Petty Cash SAQ Rhydney Children's Services	SAQ Control Risk Self- Assessment	Audit Started	Social Services and Housing
Petty Cash SAQ Rhydney Children's Services	SAQ Control Risk Self- Assessment	Audit Started	Social Services and Housing
Petty Cash SAQ Bargoed Locality Office	SAQ Control Risk Self- Assessment	Audit Started	Social Services and Housing
Petty Cash SAQ Caerphilly Locality Office	SAQ Control Risk Self- Assessment	Audit Started	Social Services and Housing
Petty Cash SAQ East Children's Services	SAQ Control Risk Self- Assessment	Audit Started	Social Services and Housing
Petty Cash SAQ Sixteen Plus Team	SAQ Control Risk Self- Assessment	Audit Started	Social Services and Housing
Petty Cash SAQ Homeless Prevention	SAQ Control Risk Self- Assessment	Audit Started	Social Services and Housing
Petty Cash SAQ Community Resource Team	SAQ Control Risk Self- Assessment	Audit Started	Social Services and Housing

Petty Cash SAQ Community Support Services	SAQ Control Risk Self-Assessment	Audit Started	Social Services and Housing
Petty Cash SAQ Graig Y Rhacca Housing Office	SAQ Control Risk Self-Assessment	Audit Started	Social Services and Housing
Petty Cash SAQ South East Wales Emergency Duty Team	SAQ Control Risk Self-Assessment	Audit Started	Social Services and Housing
Petty Cash SAQ Youth Offending Service	SAQ Control Risk Self-Assessment	Audit Started	Social Services and Housing
Petty Cash SAQ Ty Isaf Residential Home	SAQ Control Risk Self-Assessment	Audit Started	Social Services and Housing
Petty Cash SAQ Gardenscape	SAQ Control Risk Self-Assessment	Audit Started	Social Services and Housing
Petty Cash SAQ 14 Graig Road	SAQ Control Risk Self-Assessment	Audit Started	Social Services and Housing
Petty Cash SAQ Beatrice Webb HFE	SAQ Control Risk Self-Assessment	Audit Started	Social Services and Housing
Petty Cash SAQ Blackwood Resource Centre	SAQ Control Risk Self-Assessment	Audit Started	Social Services and Housing
Petty Cash SAQ Deputyship	SAQ Control Risk Self-Assessment	Audit Started	Social Services and Housing
Petty Cash SAQ Links Resource Base	SAQ Control Risk Self-Assessment	Audit Started	Social Services and Housing
Petty Cash SAQ Tenant Expenses	SAQ Control Risk Self-Assessment	Audit Started	Social Services and Housing
Petty Cash SAQ Oaklands Day Centre	SAQ Control Risk Self-Assessment	Audit Started	Social Services and Housing
Petty Cash SAQ Ty Gwilym Respite Care Home	SAQ Control Risk Self-Assessment	Audit Started	Social Services and Housing
Petty Cash SAQ Ystrad Mynach Resource Base	SAQ Control Risk Self-Assessment	Audit Started	Social Services and Housing
Petty Cash SAQ Ty Coed	SAQ Control Risk Self-Assessment	Audit Started	Social Services and Housing

Petty Cash SAQ Brooklands Resource Base	SAQ Control Risk Self- Assessment	Audit Started	Social Services and Housing
Petty Cash SAQ Beatrice Webb HFE	SAQ Control Risk Self- Assessment	Audit Started	Social Services and Housing
Petty Cash SAQ Castle View HFE	SAQ Control Risk Self- Assessment	Audit Started	Social Services and Housing
Petty Cash SAQ Brodawel RC	SAQ Control Risk Self- Assessment	Audit Started	Social Services and Housing
Petty Cash SAQ Min- Y-Mynydd	SAQ Control Risk Self- Assessment	Audit Started	Social Services and Housing
Petty Cash SAQ Lansbury Park NHO	SAQ Control Risk Self- Assessment	Audit Started	Social Services and Housing
Housing Corporate Safeguarding Self Evaluation Audit	Crosscutting Review	Audit Started	Social Services and Housing
Social Services Corporate Safeguarding Self Evaluation Audit	Crosscutting Review	Audit Started	Social Services and Housing
Petty Cash SAQ Caerphilly Basin Office	SAQ Control Risk Self- Assessment	Audit Started	Social Services and Housing
Purchase Card - Social Services	System Audit	Audit Started	Social Services and Housing
Purchase Card - Adult Services	System Audit	Audit Started	Social Services and Housing
Purchase Card - Housing	System Audit	Audit Started	Social Services and Housing
Purchase Card - Housing	System Audit	Audit Started	Social Services and Housing
Purchase Card - Housing	System Audit	Audit Started	Social Services and Housing
Purchase Card - Social Services	System Audit	Audit Started	Social Services and Housing
Purchase Card - Adult Services	System Audit	Audit Started	Social Services and Housing
Purchase Card - Adult Services	System Audit	Audit Started	Social Services and Housing
EC19C-EC40 Woodward Avenue/Waunfawr Road	Contract Audit	Audit Started	Social Services and Housing

EXT19C-UC40PS Rhymney South - Hedlyn Builders	Contract Audit	Audit Started	Social Services and Housing
Homelessness	VFM	Audit Started	Social Services and Housing

**Table B: Audit planned but not started**

<b>Title</b>	<b>Audit Type</b>	<b>Audit status</b>	<b>Directorate</b>
Blackwood Miners Institute	Establishment Audit	Planned not started	Communities
Corporate Facilities and Buildings Management	Crosscutting Review	Planned not started	Communities
St James Primary School SI	Special Investigation	Planned not started	Education and Corporate Services
NNDR COVID grants High level review	System Audit	Planned not started	Education and Corporate Services
Central Admin Petty cash	System Audit	Planned not started	Education and Corporate Services
Council Tax	System Audit	Planned not started	Education and Corporate Services
Primary cashless system controls	System Audit	Planned not started	Education and Corporate Services
St Gwladys Primary School Establishment	Establishment Audit	Planned not started	Education and Corporate Services

Hengoed Primary School Establishment	Establishment Audit	Planned not started	Education and Corporate Services
Petty Cash SAQ Ty Ni	SAQ Control Risk Self-Assessment	Planned not started	Social Services and Housing
Purchase Card - Housing	System Audit	Planned not started	Social Services and Housing

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## APPENDIX 3

### Audit report opinions and criteria A) Systems and Establishment Audits

Opinion	Rationale or criteria
Effective	<p>All internal high risk controls are in place and are operating effectively</p> <p>No high or medium findings noted</p> <p>Very small number of “merits attention” findings</p> <p>All high level risks are controlled</p> <p>No safeguarding risks identified</p>
Effective with opportunity for improvement	<p>Controls considered adequate but some exceptions exist</p> <p>Small number of medium or low risk / medium or low impact weaknesses noted e.g. minor administrative breaches, which should be relatively straightforward to resolve.</p> <p>Some areas for improvements noted which should be relatively straightforward to implement.</p> <p>All high level risks adequately controlled</p> <p>No immediate risk to assets property, cash, or revenue or risk of breach of Code of Practice, regulations or legislation.</p> <p>No safeguarding risks identified</p>
In need of Improvement	<p>At least one high level risk noted</p> <p>A relatively high number of medium risk weaknesses noted</p> <p>A large number of areas for improvements noted</p> <p>Risk of fraud, theft, loss or misappropriation of assets, cash or data or other regulatory/ legislation or code or practice breach if improvements are not implemented within relative short term. In general these will be reported to Service Managers or Head of Service before finalising report.</p> <p>Potential for illegal or unlawful activity</p> <p>No immediate safeguarding risks</p> <p>System improvements are not immediately required, but there is a need for improvement identified by the findings noted</p> <p>Processes are considered inefficient, ineffective or poor value for money</p> <p>Non-financial risks identified as a result of poor practice e.g. reputational or impact on other stakeholders.</p> <p>Performance or practices identified does not conform to corporate plan or conflict with improvement plans.</p> <p>Some non-compliance with policy and procedures</p>
Inadequate and needs immediate improvements	<p>At least one or more high risk noted together with a number of medium risk findings over a number of separate areas.</p> <p>Safeguarding risk issues noted</p> <p>Actual fraud, theft, losses of assets or cash, overpayments or loss of revenue reported. In general these will be reported to Service Managers or Head of Service before finalising report, and may lead to additional reviews or investigations.</p> <p>Actual illegal or unlawful activity identified</p> <p>Actual breach of regulatory processes, codes of practice or legislation noted</p> <p>Control systems considered not fit for purpose, inadequate/ non-existent and below standard with significant exceptions or unfit for purpose</p> <p>Large scale noncompliance with policies and procedures.</p> <p>Immediate improvements are required to systems and controls</p> <p>High non-financial risks identified or risk of impact on stakeholders</p>

## B) Grants and Contract Audits

Compliant	No issues of non compliance noted with regard to either T&Cs ( grant) or Financial Regulations /Standing Orders for Contacts ( Contract)
Substantially compliant	A small number of minor non compliance issues noted (eg in relation to issues such as admin and records on file)
Partially compliant	A number of non compliance issues noted but no major non compliance issues
Non compliant	At least one major non compliance issue noted

## C) Points noted and risk ratings

High Risk Issues (HR)	<p>These are defined as issues where key / fundamental controls are absent, inadequate or ineffective. The risks have not been managed properly. Impact of control failure is/will be high e.g. financial loss, theft or loss of property or reputational risk or safeguarding issues have been noted.</p> <p>Recommendations in this category must be implemented as the risk is identified as unacceptably high. HR recommendations that cannot be agreed are referred up to the Section 151 officer for final determination.</p>
Medium Risk Issues (MR)	<p>These are defined as issues where some controls are absent or existing controls need to be improved or enhanced. Impact of control failure is/will be relatively lower, and will not be immediate.</p> <p>Recommendations in this category should be implemented to address system risks and weaknesses. MR recommendations that cannot be agreed will be referred to the appropriate level of management for consideration or the S151 if agreement cannot be reached.</p>
Merits Attention (MA)	<p>These are issues which have been identified which are one off minor administrative issues or relate to best practice improvements in procedures, which managers may wish to consider.</p> <p>Recommendations in this category are included for management to consider and deal with as appropriate</p>



## **GOVERNANCE AND AUDIT COMMITTEE – 24<sup>TH</sup> JANUARY 2023**

**SUBJECT: CORPORATE RISK REGISTER (DECEMBER 2022) UPDATE**

**REPORT BY: CORPORATE DIRECTOR OF EDUCATION & CORPORATE SERVICES**

### **1. PURPOSE OF REPORT**

- 1.1 To provide an update of the Corporate Risk Register in accordance with the Council's Risk Management Strategy.
- 1.2 The updated Corporate Risk Register (CRR) (Appendix A) is presented to Governance and Audit Committee so there is opportunity for the Committee to satisfy itself that appropriate arrangements are in place for the Council's risk management processes to be regularly and robustly monitored and scrutinised.

### **2. SUMMARY**

- 2.1 Under the Council's Risk Management Strategy, the Corporate Management Team (CMT) own, manage, monitor, and review the Council's Corporate Risks on a quarterly basis, with six monthly progress reports submitted to Cabinet. Updates are also provided to Governance and Audit Committee, which has the role of reviewing and challenging the Risk Register and where relevant, and any resultant action plans for the Council's key strategic or corporate risks.
- 2.2 In order to present the most recent information, this report focuses on the Corporate Management update as of December 2022.
- 2.3 There are currently 18 risks on the Corporate Risk Register.

### **3. RECOMMENDATIONS**

It is recommended that the Governance and Audit Committee considers the content of the Corporate Risk Register and associated mitigating actions.

### **4. REASONS FOR THE RECOMMENDATIONS**

For the Governance and Audit Committee to satisfy itself that robust processes and procedures exist and are applied for the management of top-level risks. Members have a

critical role to play in evaluating the Council's risk management arrangements and in particular understanding how the council identifies, manages and, where possible, mitigates/removes risk.

## **5. THE REPORT**

5.1 The Authority identifies and manages risks at different levels. Service priorities identify risks to delivering business whilst directorate risks can be more significant risks that may have cause and effect across a Directorate. The Corporate Risk Register is the highest level of risks to the whole authority, the strategic risks often referred to as the Corporate Risk Register (CRR).

5.2 This report, updates on the risks within the CRR only. The directorate risks are updated on a quarterly basis within the 'Directorate Performance Assessment' (DPA)

5.3 The Corporate Risk Register is a 'living document' and will change when reviewed and assessed on a quarterly basis. New risks will emerge, and some existing risks will be closed. Risk ratings will change (red/amber/green) and mitigating actions and progress comments will be updated.

5.4 Risks were last updated to Governance and Audit Committee on 16 March 2022.

The Risk Register was refreshed and revised in November 2022 to streamline the look and feel and to simplify the narrative to be more accessible in understanding the risk. New Risks were added taking on board a couple of suggestions from Joint Scrutiny in November 22 on potential new risks.

In summary there are **18** Risks on the Risk Register (Appendix A) of which **8** are rated as a high risk, **9** as medium and **1** as low. There are **8** new risks that have been added to the register since March 2022.

There was 1 risk that moved from medium to high, regarding the medium term financial and 1 risk that decreased from a medium risk to a low risk, in the development of the Local Development Plan.

There are no risks that are suggested to be removed or deleted in this reporting period.

5.5 The initial Covid-19 recovery risk had a separate risk register as it was a dynamic document and needed to be updated frequently, this has now been revised as a new risk to focus on recovery measures and to be aware of any 'new future waves'.

## **Conclusion**

5.6 In line with the approved Risk Management Strategy the Corporate Risk Register is periodically reviewed and updated and is presented to the Governance and Audit Committee to provide an opportunity for the Committee to satisfy itself that appropriate arrangements are in place for the Council's risk management processes to be regularly and robustly monitored and scrutinised.

## **6. ASSUMPTIONS**

6.1 It is a reasonable assumption that the significant financial and demand challenges facing the authority will continue, however it is assumed that resource will be reviewed for those significant risks where required.

## **7. SUMMARY OF INTEGRATED IMPACT ASSESSMENT**

- 7.1 This report does not relate to the development of a policy, strategy, practice or project so no specific Integrated Impact Assessment has been undertaken on this report, however Risk Management is part of the 7 organisational activities within the Well-being of Future Generations (Wales) Act 2015 and as such also needs to recognise risk to the citizen over the long term and look at ways to prevent further impact occurring.

## **8. FINANCIAL IMPLICATIONS**

- 8.1 There are no direct financial implications to this report, although Appendix A identifies risks regarding the Medium-Term Financial Plan (MTFP).

## **9. PERSONNEL IMPLICATIONS**

- 9.1 There are no personnel implications arising from this report although there is a new risk around the Resilience and Well-being of Staff.

## **10. CONSULTATIONS**

This report has been sent to the consultees listed below and all comments received are reflected in this report.

## **11. STATUTORY POWER**

- 11.1 Well-being of Future Generations (Wales) Act 2015.  
11.2 Local Government and Elections (Wales) Act 2021.

Author: Ros Roberts, Business Improvement Manager, [roberr@caerphilly.gov.uk](mailto:roberr@caerphilly.gov.uk)

Consultees: Christina Harray, Chief Executive  
Richard (Ed) Edmunds, Corporate Director Education and Corporate Services  
Cllr. Eluned Stenner, Cabinet Member for Performance, Economy and Enterprise  
Mark S Williams, Corporate Director for Economy and Environment  
Dave Street, Corporate Director Social Services and Housing  
Steve Harris, Head of Financial Services and S151 Officer  
Rob Tranter, Head of Legal Services and Monitoring Officer  
Sue Richards, Head of Education Planning and Strategy  
Kathryn Peters, Corporate Policy Manager  
Deborah Gronow, Internal Audit Manager

Background Papers:

Appendices:

**Appendix A – Corporate Risk Register update 2022 (as at Quarter 3)**

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# Caerphilly CBC Corporate Risk Register

Risk ID	Risk Name	Risk Description	CMT Lead Officer	Last Quarter Risk Level	Current Risk Level	Planned Mitigations and Progress	Does the risk affect the Well-being of our Communities?	Well-being Risk Level
				Q2 2022/23	Q3 2022/23			
CRR-17 NEW 2022/23	Impact on cost of living (inflationary) increases on our communities	The recent price increases in household energy bills combined with higher costs for food shopping and the price of fuel have created significant challenges for many residents, especially those already in need. The cost of living increase is likely to lead to additional demand being placed on council services as families affected seek our help. Difficulties in this area will continue throughout the winter and in to 2023.	DS	High	High	<ul style="list-style-type: none"> <li>A cross cutting Cost of Living Working group has been formed under DS leadership which is seeking to address challenges across the community and staff populations</li> <li>Group is mapping all existing cost of living activity underway across the organisation</li> <li>Group is considering options to introduce new support to those most in need</li> <li>Web resources are being developed to provide a single source of assistance to our residents and staff that are most in need</li> <li>Cost of Living Co-ordinator now appointed</li> <li>CoL Newline now printed and distributed</li> <li>CoL staff present at winter fayres and other council events</li> <li>Funding starting to be distributed for warm hubs across the council</li> <li>Warm hubs mapping taking place</li> <li>Scheme of delegation in place to spend budget allocation of £3m set aside for pressures in this area.</li> </ul>	Yes - cost of living increases have the potential to affect those in our communities who are already most in need.	High
CRR-08	Pressures on social care	Social Care capacity is an ongoing problem for the authority. The ability to recruit and retain care staff, in the face of significant competition from the retail and hospitality sectors is becoming more and more of an issue. As a consequence independent providers are handing back packages of care and the future of some care homes is in the balance.	DS	High	High	<ul style="list-style-type: none"> <li>Significant uplift in fees for 2022/23 for independent sector providers</li> <li>Commitment to external review of fee structures</li> <li>Participation in work re standard fee methodologies at Regional Partnership Board level</li> <li>Continue to open new in-house residential homes for children</li> <li>Fee levels for 23/24 to be determined as part of the budget setting process</li> <li>Capacity/fragility issues flagged up at a regional level via RPB and associated strategic groups</li> <li>Recent dom care provider failure resolved by bringing carers onto in-house payroll.</li> </ul>	Yes - reducing help that can be provided for the most vulnerable in our society will affect our ability to contribute to a 'Healthier Wales' which requires peoples mental and physical well-being to be maximised. There is also a direct consequence on recipients of care and support packages if hospital discharges are delayed.	High
CRR-16 Added 2021/22	Recruitment and Staffing Capacity	The Council needs to be able to employ sufficient numbers of staff across its services in order to ensure service delivery can be maintained. At present, there are challenges in recruiting replacement staff within certain Council professions that could, if not overcome, create difficulties over the medium to long term. There is also a shortage of Senior Leadership Capacity at present.	ED	High	High	<ul style="list-style-type: none"> <li>Reforming Recruitment Project Initiated and showing promising signs</li> <li>External Recruitment Agency used to recruit senior roles and generate learning</li> <li>Annual recruitment and selection of Apprentices 2022/23 intake complete</li> <li>Succession Planning and Workforce Development Strategy implementation</li> <li>Recruitment webpages to be updated and refreshed with further video content</li> <li>Specialist campaigns and resources designed to support specific recruitment</li> <li>Procurement of specialist social media recruitment solutions</li> <li>Assessment of additional leave provision under consideration</li> <li>Appointment of a new internal Recruitment Team to approach challenges in new and more innovative ways approved by Cabinet</li> <li>Approval to appoint a Deputy Chief Executive and a Deputy Section 151 Officer</li> </ul>	No - this risk relates to organisational capacity	
CRR 11 - Added 2020/21	Fleet	Providing a fully operational, compliant fleet of vehicles is essential for the Council to deliver all of its front line services. In this regard the Council holds a goods vehicle operators licence ("O licence") and must continue to demonstrate compliance with the conditions of the "O licence" and the legislative framework in which it exists. There is a current risk relating to the ability of the Council to staff its fleet management and maintenance service with suitably qualified and/or experienced staff and deliver the required level of management and maintenance standards.	MSW	High	High	<ul style="list-style-type: none"> <li>Alternative recruitment &amp; retention strategies such as the use of market supplements.</li> <li>Externalisation of some maintenance work to sub-contractors where the market is able to respond.</li> <li>Consideration of other options for delivering the service in accordance with the current review in progress under the auspices of the Team Caerphilly Programme Board. This includes restructuring the service and use of the National framework set up by the WG commercial services division for the acquisition of vehicles.</li> </ul>	No - this risk relates to organisational capacity	
CRR-18 NEW 2022/23	Ukraine War	The Ukraine War has displaced a significant number of Ukrainian Nationals and UK Government, Welsh Government and Local Government is attempting to provide opportunities for resettlement. This will place significant additional pressures on Housing, Social Care, Education and wider support services at a time when resources are already stretched. Amendments to long standing allocation, admission and access policies may also be a requirement which could cause unintended consequences. The war has also impacted on certain supply chains increasing the lead times and delivery timeframes of certain goods.	CH	High	High	<ul style="list-style-type: none"> <li>Regular meetings are held at a strategic and operational level with Welsh Government and WLGA to understand current impacts</li> <li>Dialogue with Private Sector Landlords to identify possible vacant properties.</li> <li>Grant applications submitted to WG to enable repairs/improvements to private sector stock</li> <li>A temporary 12-month resettlement team has been created to help absorb the additional workload and a fortnightly MDT runs with key partners</li> <li>Support sessions held for Ukrainian refugees.</li> <li>Welsh Government super-sponsor scheme continues to drive capacity and planning challenges for Local Authorities</li> <li>Some easing of numbers/pressures at the current time but position remains very volatile.</li> </ul>	Yes - pressure around housing and possible education and social care needs of Ukrainian refugees adds to challenges already being seen by over-stretched services.	High

CRR-19 NEW 2022/23	Waste Strategy and Recycling Performance	Compliance with Welsh Government Statutory Recycling Targets. Failure to achieve future statutory recycling targets may lead to WG fines which are not insignificant	MSW	High	High	<ul style="list-style-type: none"> <li>Work with WG consultants on modelling to "sense check" future strategic decisions</li> <li>Presentation of a number of "quick win" service changes to CMT/Cabinet in Autumn 2022 for potential implementation in early 2023</li> <li>Submission of a draft recycling strategy to WG by 9/1/23 followed by political decisions and implementation of service revisions to commence in 2023 and evaluation of success after 12 months.</li> <li>Evaluation of collection modelling options presented by WG consultants in March / April 2023 for implementation thereafter.</li> </ul>	Yes - Achieving higher levels of re-use and recycling has a positive impact on reducing carbon emissions and consumption of finite resources contributing to 'Resilient and Globally Responsible Wales'.	Medium
CRR 14	Cyber Security Breach	Government organisations are currently facing an increase in the level of cyber security threats. Should a cyber security breach occur, it is possible that service delivery could be affected. The loss of critical systems over an extended period holds the potential to cause significant disruption.	ED	High	High	<ul style="list-style-type: none"> <li>Cyber Security Strategy and associated Action Plan adopted by Cabinet</li> <li>Implementation of the Council's Cloud Strategy for Priority Systems</li> <li>Leadership Team has undergone Cyber Security training</li> <li>Cabinet have undergone Cyber Security training</li> <li>Exploring the potential to roll out mandatory Cyber Security Training to all Members</li> <li>Strengthening of the Cyber Security Team</li> <li>Regular Penetration Testing undertaken</li> <li>Cyber Security Accreditation acquired</li> <li>Continued modernisation of Council's IT Estate</li> </ul>	Yes, should a cyber attack remove access to the Council's critical systems for an extended period of time then the impact on community well-being could be significant.	High
CRR-02	Medium Term Finances	The Council's Medium Term Financial Plan needs to be refreshed in the Autumn of 2022 in order to address the significant impact of rising inflation, higher than expected pay awards, the increased costs of energy and materials / supplies and the wider impact of cost of living on our residents. Any changes in the level of grants made to the Council and the impact on service delivery will also need to be factored in and carefully monitored.	SH	Medium	High	<ul style="list-style-type: none"> <li>Details of the 2023/24 Provisional Local Government Financial Settlement were announced by WG on 14 December 2022. Caerphilly CBC will receive an uplift in funding of 6.9% (£22.152m). The 2023/24 Draft Budget Proposals considered by Cabinet on 18 January 2023 include a range of temporary and permanent savings proposals totalling £12.421m and the proposed use of reserves totalling £15.051m. Along with a proposed increase in Council Tax of 7.9%, a balanced budget can be achieved for 2023/24.</li> <li>The Cabinet Report also contains details of an updated Medium Term Financial Plan which shows a potential savings requirement of £48.047m for the two year period 2024/25 to 2025/26. The report also sets out the Council's approach to address the financial challenges moving forward and this will be subject to further detailed reports as service change proposals are firmed up.</li> <li>Following approval of the 2023/24 budget, further work will be required to align the MTFP to the Well-being Objectives and to ensure the Transformation Programme can support delivery of significant savings that will be required to address the challenges the Council will face in the coming years.</li> </ul>	Yes, with the cost of providing Council Services increasing at a time when residents are experiencing a cost of living crisis any impacts on service levels will be more keenly felt. Residents may find it increasingly difficult to make payments such as Council Tax	High
CRR-04	Impact of Climate Change	Climate change and the trend for increased risk & frequency of adverse weather presents a risk to the natural & built environment.	MSW	Medium	Medium	<ul style="list-style-type: none"> <li>Decarbonisation Strategy and associated action plan in place and a new team created.</li> <li>Report on progress against the action plan to be presented to Cabinet in early 2023.</li> <li>Effective Emergency Planning Strategies, processes and operational responses.</li> <li>Robust Local Flood Risk Management Strategies underpinned by a progressive suite of flood alleviation infrastructure projects.</li> <li>Implementation of Sustainable Urban Drainage (SUDS) practices across new developments.</li> <li>On-going management of the 250,000 trees on Council Land.</li> <li>Effective management of the natural environment across the countryside/green open space portfolio.</li> <li>Specific actions across the Council's asset portfolio to reduce its own level of carbon emissions.</li> </ul>	Yes - there is an impact to a 'Resilient Wales' by not proactively addressing the operational response to climate change. The contribution to global issues and a 'Globally Responsible Wales' is met through low carbon planning and sustainable development. There is a direct impact to Health also.	Medium
CRR-20 NEW 2022/23	Housing Supply	The authority currently has around 4000 people on its Housing waiting lists and significant challenges in ensuring that people are in the right accommodation for them and their families particular needs. The influx of Ukrainian refugees, refugee resettlement programmes, increases in asylum dispersal and local homelessness challenges are increasing the need an appropriate supply of housing.	DS	Medium	Medium	<ul style="list-style-type: none"> <li>Cabinet agreement for Housing Support Programme Strategy</li> <li>Caerphilly Keys service now in place</li> <li>New HMO open in Pontllanfraith</li> <li>New build programme agreed and progressing</li> <li>18 new one bedroom apartments at Trecenydd and Trethomas</li> <li>Political approval given for development of site at Ty Darren, Risca</li> </ul>	Yes- suitable accommodation is a fundamental need impacting directly on personal health and well-being.	Medium



CRR 13	Increased Homelessness	Increased numbers of homelessness could result in increased incidents of rough sleeping and increased use of B&B/hotel type accommodation to address emergency needs. This in turn could result in poor outcomes for the households concerned and a repeat of the homelessness cycle. As national Covid policy delaying evictions by private landlords has come to the an end, evictions could rise significantly.	DS	Medium	Medium	<ul style="list-style-type: none"> <li>Implementation of the Rapid Rehousing Strategy</li> <li>Use of support providers and specialists to assist those that are homeless and to sustain tenancies to avoid homelessness occurring</li> <li>Implement Homelessness strategy which has been developed in collaboration with neighbouring authorities</li> <li>Review the availability of temporary accommodation to reduce/avoid use of Bed &amp; Breakfasts.</li> <li>Look at opportunities to further increase the availability of properties in the private sector as an alternative means of accommodating homeless persons</li> <li>Work closely with the police and probation service to plan accommodation for prison leavers</li> <li>Review the type of accommodation that is required to meet the needs of those presenting so that this can be considered in longer term future planning</li> </ul>	Yes- suitable accommodation is a fundamental need impacting directly on personal health and well-being.	Medium
CRR-07	Impact of Covid-19 on learner achievement	The impact of covid on learner achievement remains unknown and requires further evidence and appropriate intervention, particularly with the inconsistent nature of assessment since 2020 along with reduced levels of pupil attendance and higher than average levels of exclusions.	ED	Medium	Medium	<ul style="list-style-type: none"> <li>Development of a new Education Strategy that focuses on Reignite, Recover, Reform Agenda</li> <li>Develop the information, intelligence and data to ensure it operates as an effective commissioner of improvement services</li> <li>Further enhance self evaluation and improvement planning processes</li> <li>Greater focus on inclusion and improved wellbeing with enhanced tracking</li> <li>Establish a system of active peer learning that provides opportunities to consider problems, share good practice and innovation</li> <li>Increased support for pupils at risk of becoming NEET (Not in Education, Employment or Training)</li> <li>Improving Pupil Attendance</li> <li>Support More Able and Talented pupils</li> <li>Improve Pupils' Acquisition of Digital Skills</li> <li>Deliver Welsh in Education Strategic Plan 2022-2032</li> <li>Build new schools through Sustainable Communities for Learning</li> <li>Ensure Medium Term Financial Planning arrangements for Schools</li> </ul>	Yes, this limits contribution to 'Prosperous and More Equal Wales'. Standards of attainment and gaps in inequality can result in a low skilled, low paid workforce, and higher levels of unemployment leading to poverty. Over the long-term (25 years) in the life of a young child to adult the potential outcome of the attainment gap makes this a medium risk. This is a long term risk	Medium
CRR-21 NEW 2022/23	Impact on cost of living (inflationary) increases on the Council	The impact of rising energy and fuel costs, cost increases and shortages across major supply chains and increases in the cost of construction schemes are increasing the operational costs of delivering services, placing Council budgets under significant strain and creating challenges for the workforce.	DS	Medium	Medium	<ul style="list-style-type: none"> <li>A cross cutting Cost of Living Working group has been formed under DS leadership which is seeking to address challenges across the community and staff populations</li> <li>Group is mapping all existing cost of living activity underway across the organisation</li> <li>Group is considering options to introduce new support to those most in need</li> <li>Web resources are being developed to provide a single source of assistance to our residents and staff that are most in need</li> </ul>	No - this risk relates to organisational capacity	
CRR 12	Covid-19 Recovery and Future Wave Response	As the local economy seeks to recover from the impact of the COVID-19 pandemic, the Council will need to focus on a series of recovery measures to stimulate local growth. The Council will also need to remain prepared to manage its critical services and workforce pressures through potential future waves that limit social mobility and reduce the availability of resource	CH	Medium	Medium	<ul style="list-style-type: none"> <li>Cabinet have adopted an Economic Recovery Framework to stimulate growth and a progress report is scheduled for cabinet consideration in early 2023.</li> <li>Cabinet have adopted a Social Value Policy to drive community benefit and the foundational economy across the locality</li> <li>The Council is overseeing the Regional TTP function supporting Gwent to better manage a range of communicable disease responses</li> <li>The Council maintains a critical service list and business continuity plans</li> <li>The Council continues to formalise and embed its Agile Working approaches to ensure services can be provided from any location</li> </ul>	Yes, this will have a direct impact on the Prosperous Wales Wellbeing Goal	Medium
CRR-22 NEW 2022/23	COVID Enquiry (Capacity to service)	Inquiry has now commenced. CCBC now receiving requests to submit evidence with extremely short timeframes of 2-3 weeks. WLGA hosting regular meetings to support LA's in conjunction with the LGA. No be-spoke resources identified, therefore completion of evidence falling to a small number of officers, all of whom have other duties. Requests/submissions likely to go on for many months/years.	DS	Medium	Medium	<ul style="list-style-type: none"> <li>Covid 19-Inquiry Group established.</li> <li>Submissions agreed and signed off by CEO</li> <li>Consideration to be given to a creation of a be-spoke role to complete evidence requests.</li> </ul>	No - this risk relates to organisational capacity	
CRR-23 NEW 2022/23	Resilience and Wellbeing of Staff	Since early 2020, Council staff have been dealing with unprecedented challenges over an extended period of time. Staff have supported communities through the pandemic. More recently staff have had to respond to the impacts of the Programme for Government, the war in Ukraine and, more recently the Cost of Living crisis. Expectations continue to rise and the Council's resources are extremely stretched at present. There are high levels of staff sickness currently. The 2023/24 budget is also adding further workload pressures as alternative mechanisms for service delivery will need to be worked up.	CH	Medium	Medium	<ul style="list-style-type: none"> <li>Embedding the Workforce Development Strategy</li> <li>Embedding the Employee Wellbeing Strategy</li> <li>Further promotion of the Employee Benefits Scheme</li> <li>Recommendation to provide staff with an additional 5 days annual leave</li> <li>Embedding the Employee Wellbeing Framework</li> <li>Work commenced with external support to understand the underlying reasons for sickness absence levels and to pilot some new approaches to reduce impact</li> <li>Creation of a coaching network across the organisation to help unlock issues</li> <li>Exploration of facilitated staff resilience sessions</li> </ul>	Yes - this risk largely relates to organisational capacity but is a result of the direct impacts on staff with the probability that personal health and well-being is being, or maybe, affected.	Medium

CRR-24 NEW 2022/23	Impact of Strike Action on Public Services	There is a significant likelihood of extensive industrial action being taken across multiple public services, largely in relation to levels of pay and working conditions. While there are no immediate signs of this taking place across Local Government, with the exception of the Teaching Unions, action across the wider public sector may have an indirect affect on the Council.	CX	New - Not Categorised	Medium	<ul style="list-style-type: none"> <li>All Wales Resilience Forum called 14/12 to consider mutual support</li> </ul>	Yes, but the risk may be attached to Council resources being required to provide mutual aid or support to other sectors experiencing industrial action. This would divert Council resources elsewhere at a time when capacity is already diminished.	Medium
CRR-06	Local Development Plan (LDP)	It is essential that the Council has a Local Development Plan in place which sets the policy context for future development control decisions as well as ensuring that sufficient land is earmarked to support the range of needs across the County Borough such as Housing, the Economy, Green space, etc.	MSW	Medium	Low	<ul style="list-style-type: none"> <li>Progressing the current Local Development Plan Process in accordance with the delivery agreement between the Council &amp; Welsh Government although it is likely that further regional work is required on CCR growth assumptions which are feeding into all LDP's across the region.</li> <li>Effective stakeholder &amp; member engagement.</li> <li>Timely consideration of reports by Corporate Management Team, Cabinet &amp; Council and resultant timely decision making.</li> </ul>	Yes- the absence of an approved LDP does provide the potential for the Community to be impacted as the Council would not have a policy footing from which to oppose unsuitable development.	Low

Q2 2022/23	Q3 2022/23	Count Number and Category of Risks
0	1	Low
10	9	Medium
7	8	High
1	0	New - Not Categorised
0	0	Unknown
0	0	To Be Updated
<b>18</b>	<b>18</b>	<b>TOTAL</b>

Well-being Risk Level
1
8
5
0
0
0
<b>14</b>



## **GOVERNANCE AND AUDIT COMMITTEE - 24<sup>TH</sup> JANUARY 2023**

**SUBJECT:       REGULATOR RECOMMENDATION FOR IMPROVEMENT  
                  PROGRESS UPDATE**

**REPORT BY:   CORPORATE DIRECTOR FOR EDUCATION & CORPORATE  
                  SERVICES**

### **1.       PURPOSE OF REPORT**

- 1.1     The purpose of this report is to update members on progress of recommendations that have been made by all regulators since the last Governance and Audit Committee update, and to advise on any new proposals that have been added since that time.

### **2.       SUMMARY**

- 2.1     The register was last updated and presented to the Governance and Audit Committee March 2022. Since that time 6 new proposals have been added onto the register and no areas for consideration as part of the Well-being of Future Generations examination.
- 2.2     We have 12 recommendations on the register and 6 new recommendations have been added. There is now 3 considered to be actioned and completed. If agreed by the Governance & Audit Committee, that would leave 9 outstanding.
- 2.3     We have 3 reports received since the last time an update was provided (16 March 2022).
- 2.4     The above does not include the improvement 'certificates' that come before Governance and Audit committee, as these confirm compliance to our statutory duty so do not make proposals or recommendations. Nor does it include External Financial Audit outputs at this point as the Governance & Audit Committee receive updates on progress against recommendations in the next Audit Wales Audit of Accounts Report.

### **3.       RECOMMENDATIONS**

- 3.1     We recommend 3 recommendations be closed down as completed and encourage members to view the specific proposals attached within Appendix A and judge if they agree that these are now complete. It is recommended that Governance and Audit Committee give their agreement (if appropriate) to close the proposals that are noted

as 'completed' within Appendix A.

#### 4. REASONS FOR THE RECOMMENDATIONS

- 4.1 To ensure members are aware of progress against the Council's actions for progressing regulator recommendations and proposals and have assurance that progress is being made through an opportunity to monitor and challenge content.

#### 5. THE REPORT

- 5.1 The table below provides a summary of proposals or recommendations and the numbers outstanding from each piece of work. Whilst the numbers give some scope the focus is on the quality of the output as some recommendations can take a long time to complete whilst others are shorter actions, however the important factor is the value of the recommendations, quality of output, and the difference they make. Paragraphs 5.2 to 5.8 and appendix A expand on the pieces of work as noted below.

Name of Report	How many original proposals or recommendation outstanding	How many recommendations completed in this reporting period	How many are left to complete?
Welsh Housing Quality Standard Follow up Review	1	0	1
Delivering Good Corporate Governance	2	2	0
Financial Sustainability Assessment 2021	3	1	2
Springing Forward Workforce (new)	1	0	1
Springing Forward Asset Management (new)	3	0	3
Homelessness Report (new)	2	0	2
<b>Total</b>	<b>12</b>	<b>3</b>	<b>9</b>

#### 5.2 Welsh Housing Quality Standard Follow up Review

The action was to develop an up to date overarching Local Housing Strategy to set out the long-term vision for housing within Caerphilly. The strategy will be underpinned by a Delivery Plan which will breathe life into the strategy through a portfolio of actions and ensure its deliverability. An investment plan will also be developed and will set out clearly how the actions contained within the Delivery Plan will be resourced and funded. Arc4 Ltd have been commissioned to formulate the delivery plan and a series of workshops (linked to the 5 priorities in the strategy) are currently underway. Arc 4 Ltd consultancy have facilitated various workshops which have helped to inform a draft Delivery Strategy which includes a series of actions that CCBC aims to deliver in collaboration with its housing strategy partners. The actions link to the 5 priorities in the strategy and is likely to be presented to Scrutiny in Spring 2023. A completed draft of the Delivery Plan was finalised in the Autumn 2021 however, some of the actions have been reviewed again in partnership with key

organisations to ensure their continued relevance and has been further reviewed to ensure minimal duplication and a more coherent set of actions are included.

### **5.3 Financial Sustainability Assessment**

The Audit Wales 2020/21 assessment of councils' financial sustainability was in two phases. Phase 1 was a baseline assessment of the initial impact of COVID-19 on local councils' financial positions. This phase drew on the year-end position for 2019/20, the position at the end of quarter 1 for 2020/21, and projections for quarter 2 for 2020/21. This report was presented to the Audit Committee on 21 October 2020. Audit Wales completed Phase 2 of its financial sustainability assessment work in 2020/21 and individual reports went to each of the 22 principal councils in Wales. Caerphilly report was presented to the Governance and Audit Committee at its meeting on the 20 July 2021. One proposal is now completed and part of day to day work leaving 2 outstanding. An update to this work is provided in Appendix A.

### **5.4 Springing Forward – Workforce**

This review sought to answer the question: Is the Council's strategic approach strengthening its ability to transform adapt and maintain the delivery of its services in the short and longer term? Audit Wales concluded that Overall, they 'found that the Council's Transformation Strategy prioritises Workforce Development, and the Council maintains a good overview of its current workforce challenges, but recognises it needs to apply the sustainable development principle to strengthen its workforce planning and made one recommendation (noted in Appendix A). The Audit Wales report and response is being presented to Policy & Resources Scrutiny Committee on 23<sup>rd</sup> January 2023.

### **5.5 Springing Forward – Asset Management**

Audit Wales looked at the way the Council manages its assets with a primary focus on office accommodation and buildings from which the Council delivers services to its residents. The review covered how the Council strategically plans the use of its assets, monitors the use of assets and how we review and evaluate the effectiveness of our arrangements, particularly in relation to experiences following the Covid-19 pandemic. They made 3 recommendations which are shown in Appendix A. A new Head of Property was appointed in November 2022 and will be taking actions forward to meet the recommendations. This will include the review of the current Asset Management Strategy and the development of an Asset Management Plan taking account of the new Agile working policy and current financial pressures.

### **5.6 Delivering Good Governance**

An action plan was agreed by Cabinet on the 23 June 2021 to address the five proposals that the review raised. This work is now completed, though some legacy actions as described in Appendix A will continue as part of the corporate review work, therefore, it is recommended this proposal be deleted from the register.

### **Other Regulator work**

5.7 We have no regulator proposals to report on from ESTYN in this period. In terms of school inspections, although they were suspended during the pandemic, settings in a formal follow-up category did continue to be monitored and evaluated.

Following an initial pilot phase in spring 2022, Estyn formally restarted their school inspections. A number of schools in Caerphilly have been inspected in recent months across secondary and primary settings. Although some the inspections have resulted in positive outcomes, three schools inspected are now in follow-up categories. One secondary is in significant improvement, one primary is in 'special measures' whilst a third school is in 'Estyn Review'. Two of the three schools were subject to enhanced support, monitoring and challenge prior to the inspections. Recommendations from all Estyn inspections have been considered to identify themes for improvement. The main commonalities across the published reports include recommendations relating to the teaching of skills, the development of the Welsh language, and improving the attendance of pupils in receipt of free school meals.

- 5.8 Care Inspectorate Wales (CIW) held their Annual Review Meeting with the Director of Social Services on 19th December 2022, and progress was noted in all Regulatory areas. The written confirmation of this meeting is awaited. There has been a transfer of Link Inspector for the Local Authority and periodic meetings with the two Heads of Service have taken place. No concerns have been raised. Thematic Assurance Checks and inspections for regulated services are continuing. Whole service inspections are due to resume during 2023.
- 5.9 The Assurance and Risk Assessment Letter (Audit year 2021-2022) Final was received beginning of January 2023 and any recommendations will be reported on the next Governance and Audit Forward work programme. This work report covered
- Financial Position
  - Implications of the Local Government and Elections (Wales) Act 2021
  - Self-assessment arrangements
  - Carbon reduction plan
- 5.10 For clarity, Audit Wales used to issue Proposals and Recommendations. A proposal was a 'suggestion for improvement' and a 'recommendation' meant an Authority had a 'statutory duty' to act. Therefore, Appendix A has a mixture of 'P' for proposals and R for recommendations. However, since the 2009 Local Government Measure, Performance duty was revoked in 2021, there are no longer proposals and all Audit Wales references from now on is referenced as a 'Recommendation'.

#### **Future Audit Work Programme includes:**

- 5.11 The draft ARA for 2022-23 notes that the Audit Assurance Work is likely to focus on :
- Financial position
  - Capital programme management
  - Use of performance information – with a focus on service user feedback and outcomes
  - Setting of well-being objectives
- 5.12 The Waste Strategy Review Output is due around April 2022.
- 5.13 **Conclusion**  
When monitoring progress against the recommendations, members are advised to consider what value the proposals are making and what difference the activity makes

for our citizens. The view of Audit Wales is that the decision on whether a recommendation is completed is an internal matter for the organisation to decide, (although it is within their remit to make more proposals if they do not believe it has been addressed). Audit Wales receive this update as part of their attendance at Governance and Audit Committee.

## **6. ASSUMPTIONS**

- 6.1 It is a reasonable assumption that the financial and demand challenges facing the authority will continue. Alongside this, demand levels for key services will continue to increase with changing demographics and increased expectations placed on the local authority.

## **7. SUMMARY OF INTEGRATED IMPACT ASSESSMENT**

- 7.1 This report does not relate to the development of a policy, strategy, practice or project so no specific Integrated Impact Assessment has been undertaken on this report, however the Sustainable Development principle would be considered as part of any action planning to address proposals.

## **8. FINANCIAL IMPLICATIONS**

- 8.1 There are no direct financial implications arising from this report, although Financial Sustainability is noted as one of the reviews and has proposals attached.

## **9. PERSONNEL IMPLICATIONS**

- 9.1 There are no specific personnel implications directly resulting from this report although one of the proposals is in relation to workforce development.

## **10. CONSULTATIONS**

- 10.1 All consultation responses received have been included in the body of this report.

## **11. STATUTORY POWER**

- 11.1 The Local Government and Elections Act  
11.2 The Well-being of Future Generations (2015) Act

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Consultees: Christina Harry, Chief Executive  
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Steve Harris, Head of Financial Services and S151 Officer  
Cllr. Eluned Stenner, Cabinet Member for Performance, Economy & Enterprise  
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Lynne Donovan, Head of People Services

Ben Winstanley, Head of Land and Property Services  
Rob Tranter, Head of Legal Services and Monitoring Officer  
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Kerry Denman, Housing Solutions Manager  
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Jo Williams, Assistant Director, Adult Services  
Jane Roberts-Waite, Strategic Coordination Manager  
Doctor Paul Warren, Strategic Lead for School Improvement  
Cath Forbes-Thompson, Scrutiny Manager  
Sue Richards, Interim Head of Transformation, Head of Education  
Planning and Finance  
Deborah Gronow, Internal Audit Manager

Appendices:

Appendix A      Action Plan and Response to Regulator Proposals



Action Plan & Response to Regulator Proposals

Number and reference of action	Name of Report	Regulator Proposal	Action	PREVIOUS UPDATE March 2022	Service Officer Responsible	When will be completed by	CURRENT UPDATE January 2023	Status	Percentage completed
	<b>WHQS Follow Up</b> Issued Jan 2019. Reported to Cabinet 30 Jan 19	<b>P2</b> The Council should agree a Local Housing Strategy to set out its long-term vision for the future priorities for homes in Caerphilly.	1. Develop an up to date over arching Local Housing Strategy to set out the long term vision for housing within Caerphilly.	The new Local Housing Strategy entitled 'An Agenda for Change' was approved by Cabinet on the 27th October 2021. The strategy sets out the vision and priorities for the management and delivery of affordable homes in the county borough over the next 5 years. The strategy will be underpinned by a Delivery Plan which will breathe life into the strategy through a portfolio of actions and ensure its deliverability. An investment plan will also be developed and will set out clearly how the actions contained within the Delivery Plan will be resourced and funded. Arc4 Ltd have been commissioned to formulate the delivery plan and a series of workshops (linked to the 5 priorities in the strategy) are currently underway.	Nick Taylor-Williams/ Jane Roberts-Waite	27th October 21  Revised to Spring 2023	Arc 4 Ltd have facilitated a number of workshops which have helped to inform a draft Delivery Strategy which includes a series of actions that CCBC aims to deliver in collaboration with its housing strategy partners. The actions link to the 5 priorities in the strategy and is likely to be presented to Scrutiny in Spring 2023. A completed draft of the Delivery Plan was finalised in the Autumn 2021 however, some of the actions have been reviewed again in partnership with key organisations to ensure their continued relevance and has been further reviewed to ensure minimal duplication and a more coherent set of actions are included.	<b>In progress</b>	<b>Local Housing Strategy - 100%</b> <b>Delivery Plan - 98%</b> <b>Investment Plan - 0%</b>
<b>AW Ref: 2272A2021-22</b> <b>Issued April 2021</b>	<b>Delivering Good Governance</b>	<b>P3</b> Improve the quality of evaluation and greater use of outcome data to evaluate impact of delivery of priorities	Complete the Decision-Making Corporate Review. Project work to identify measurable outcomes of the Corporate Review (monitored by Transformation board). Embed Council Method of self-assessment (called Directorate Performance Assessment and Corporate Performance Assessment) in the delivery of priorities	Research for the Decision making review, on the decision making route by other local authorities has been almost been completed. A survey has been carried out by a consultant with WLGA to establish what other authorities do and what the benefits and challenges arising from different decision making models. We are expecting a finalised paper on this in January 2022, and then will be able to bring a paper to corporate management team and Cabinet with proposals.  The project work to identify measures that measure the corporate review has started, there is a local action plan to workshop each review and this work will complete the end of March 22.  The Directorate Performance Assessment and Corporate Performance are now embedded and have been since the end of 2019. Using evaluative measures to 'self-assessment' is part of the daily business of running the 'self-assessment' process.	Ros Roberts	Mar-22	The Decision Making Review has concluded and the research showed that our formal decision making process is effective and other authority models were no more or less advantageous or quicker, however this also showed that there is more to do in training, promoting and creating greater access to the policies. This was a theme from another review so it is proposed to set up a separate and bespoke project to bring greater awareness of corporate governance policies at induction and more generally.  The DPA and the CPA are now embedded and refinements are part of day to day work. The CPA informed the first self-assessment which was reviewed by Governance and Audit in Oct 22, went to Joint Scrutiny Nov 22 and endorsed by Cabinet 30 Nov 22. Improvements to his process and the evidence we use to evaluate is now day to day business.  Project work did identify measures to use for each corporate review however the corporate reviews are being reviewed with a few to streamlining the workstreams and this work needs to be completed before 'evidence' can be assigned.	<b>Completed</b>	<b>100%</b>
<b>AW Ref: 2272A2021-22</b> <b>Issued April 2021</b>	<b>Delivering Good Governance</b>	<b>P4</b> ensure both executive and non-executive members maintain a focus on its agreed priorities, the Council should schedule key decisions well in advance in the Cabinet forward work programme; and consider how best to engage its scrutiny function in challenging constructively the Council's progress in delivering its objectives and in setting its direction of travel.	Starting to Scope work to enhance scrutiny function connections to Cabinet Scrutiny evaluation via self-evaluation survey, to inform improvement needs.	Scrutiny committees receive a copy of the cabinet work programme at every meeting, which now show reports scheduled up to 3 months ahead. In addition scrutiny committees are advised of significant key reports in advance at the time when the Cabinet date is being considered, to give scrutiny members the opportunity to add it to the scrutiny committee work programme and scrutinise before a decision is taken.  Microsoft Forms training has been provided to staff as it be used to carry out the members survey.	Cath Forbes-Thomson	Oct-22	The survey was completed in March 2022 and the results of the survey were discussed with Chairs and Vice Chairs on 8th December 2022. There was a delay in discussing the results due to the pre-election period, the Elections and Members Induction programme, but we also needed to allow the new members on the scrutiny committees to be bedded in before taking the results to the Chairs and Vice Chairs, as the support and training needs of the scrutiny committees would need to be taken into account after a few months of meetings to agree actions.  Following the discussions an action plan will be developed around training and reiterating some of the advice that has already been given in Members Induction.	<b>Completed</b>	<b>100%</b>
<b>AW Ref 2451A2021-22</b> <b>Issued June 2021</b>	<b>Financial Sustainability Assessment</b>	<b>P1</b> The Council should develop and implement a more comprehensive MTFP.	This will be progressed through the 'Sustainable Financial Planning' Corporate Review and updates will be provided in future reports	The 2022/23 Budget Proposals were approved by Council at its meeting on the 24th February 2022. Council also received details of an updated MTFP that shows a potential savings requirement of £9.759m for the 2-year period 2023/24 to 2024/25. A further report will be presented to Cabinet in early autumn providing an update on the MTFP alongside detailed proposals in terms of addressing the savings requirement moving forward.	Stephen Harris	Mar-22	Details of the 2023/24 Provisional Local Government Financial Settlement were announced by WG on 14 December 2022. Caerphilly CBC will receive an uplift in funding of 6.9% (£22.152m). The 2023/24 Draft Budget Proposals considered by Cabinet on 18 January 2023 include a range of temporary and permanent savings proposals totalling £12.421m and the proposed use of reserves totalling £15.051m. Along with a proposed increase in Council Tax of 7.9%, a balanced budget can be achieved for 2023/24. The Cabinet Report also contains details of an updated Medium Term Financial Plan which shows a potential savings requirement of £48.047m for the two year period 2024/25 to 2025/26. The report also sets out the Council's approach to address the financial challenges moving forward and this will be subject to further detailed reports as service change proposals are firmed up.	<b>In progress</b>	<b>40%</b>
<b>AW Ref 2451A2021-22</b> <b>Issued June 2021</b>	<b>Financial Sustainability Assessment</b>	<b>P2</b> The Council should examine the processes in place for its annual budget setting, and for its in-year budget revisions and outturn reporting. As part of review, given significant underspends the Council has in recent years, it should assess whether the process needs strengthening. Should then identify and implement any actions for improvement	This will be progressed through the 'Sustainable Financial Planning' Corporate Review and budget cycles and updates will be provided in future reports	The process to develop the 2022/23 Draft Budget Proposals included Finance Managers having a series of meetings with Heads of Service to identify service pressures and potential savings, which were subsequently discussed with Directors. A number of meetings were also held with CMT and Cabinet to agree priorities in terms of growth bids and investments. A longer-term view was also included as part of the budget setting progress with a focus on a three-year timeline. This has resulted in the early identification of a range of cost pressures that will require consideration moving forward. A further report is scheduled for Cabinet in the autumn which will provide an updated MTFP alongside proposals to address the anticipated financial gap. A review of capital budget monitoring arrangements is also currently underway with a focus on future reporting also being based on a three-year timeline.	Stephen Harris	TBA as part of the review timelines	Building on the approach adopted for developing the 2022/23 budget, a number of meetings have been held in recent months to identify service pressures and potential savings to inform the 2023/24 draft budget proposals, in addition to this, meetings were held for each Directorate where Directors and Heads of Service presented details of service pressures and potential savings to the Leader, relevant Cabinet Members and the Chief Executive. This ensured that there was an opportunity for appropriate challenge as part of the budget setting process and the approach will be adopted in future years. This has moved into day to day business as usual.	<b>Completed</b>	<b>100%</b>

Action Plan & Response to Regulator Proposals

Number and reference of action	Name of Report	Regulator Proposal	Action	PREVIOUS UPDATE March 2022	Service Officer Responsible	When will be completed by	CURRENT UPDATE January 2023	Status	Percentage completed
AW Ref 2451A2021-22 Issued June 2021	Financial Sustainability Assessment	P3 Help address funding gap identified in the MTFP, by developing programme of financial benefits from the Transformation Programme activities. Financial benefits arising are clearly defined and communicated and reported to members.	This will be progressed through the 'Sustainable Financial Planning' Corporate Review and updates will be provided in future reports	The 2022/23 Budget Proposals report presented to Cabinet and Council in February 2022 identified a potential savings requirement of £9.759m for the 2-year period 2023/24 to 2024/25. Further work is now required to identify what financial savings will be delivered through the Transformation Programme to help offset the projected financial gap. It will also be important to capture details of productivity gains and cost avoidance achieved through transformation. The Transformation Team is in the process of developing an approach to ensure that all of this information can be evidenced and recorded. A further report will be presented to Cabinet in early autumn providing an update on the MTFP alongside detailed proposals in terms of addressing the savings requirement moving forward.	Stephen Harris	TBA as part of the review timelines	Details of the 2023/24 Provisional Local Government Financial Settlement were announced by WG on 14 December 2022. Caerphilly CBC will receive an uplift in funding of 6.9% (£22.152m). The 2023/24 Draft Budget Proposals considered by Cabinet on 18 January 2023 include a range of temporary and permanent savings proposals totalling £12.421m and the proposed use of reserves totalling £15.051m. Along with a proposed increase in Council Tax of 7.9%, a balanced budget can be achieved for 2023/24. The Cabinet Report also contains details of an updated Medium Term Financial Plan which shows a potential savings requirement of £48.047m for the two year period 2024/25 to 2025/26. The report also sets out the Council's approach to address the financial challenges moving forward and this will be subject to further detailed reports as service change proposals are firmed up. These reports will articulate the financial benefits arising from the proposed service changes.	In progress	40%
AW Ref 3005A2022 issued July 2022	Springing Forward - Workforce and workforce succession plans.	R1 In developing its service-level workforce plans, the Council should place the sustainable development principle at the heart of its considerations, and specifically ensure it: <ul style="list-style-type: none"> <li>• builds on its experience of the COVID-19 pandemic;</li> <li>• takes account of longer-term trends that may affect service provision and the efficient use of workforce;</li> <li>• aligns with other strategic plans and outcomes;</li> <li>• takes account of the needs of staff, service users and partners, and</li> <li>• sets out SMART performance measures and appropriate monitoring and reporting arrangements.</li> </ul>		New	Lynne Donovan	Spring 2023	Draft workforce planning toolkit has been developed which is being piloted by three Heads of Service. Feedback to be reviewed and any necessary amendments reflected in the toolkit which will then be rolled out across the Authority.	In progress	50%
AW Ref 3086A2022 issued July 2022 Page 62	Springing Forward - Assets	Develop a longer-term asset strategy R1 In developing its asset management strategy, the Council should ensure it: <ul style="list-style-type: none"> <li>• takes account of longer-term trends that may affect service provision and the efficient use of assets;</li> <li>• ensures alignment with the outcomes of other relevant strategic documents, including decarbonisation and digital strategies;</li> <li>• sets out the Council's intended outcomes over the short, medium and longer term;</li> <li>• sets out SMART performance measures that provide insight to decision makers; and</li> <li>• revises the Service Area Management Plan criteria to include active consideration of residents' needs over the medium to longer term.</li> </ul>	The Council is appointing a new Head of Land and Property who will have responsibility, among other things, for redeveloping and integrating the Council's Asset Management Plans and ensuring they integrate with the wider suite of strategic documents. The post holder will have the role of refreshing our approach to Asset Management as a key priority.  As part of the redevelopment of the approaches to Asset Management, we will ensure appropriate outputs and outcomes are set with targets and timescales introduced where appropriate.  We will look to include some specific recurrent questions within its next Caerphilly Conversation that will provide insight into residents' views on community assets and their use.	New - Report received in July 2022	Mark S Williams Corporate Director Economy and Environment  Ben Winstanley Head of Land and Property  Caerphilly Conversation - Sue Richards Head of Transformation	01/04/2023   Jan 2023	A new head of Land and Property was appointed November 2022 and is developing and action plan to develop a longer term strategy and integrating this with other strategies. This work commenced in January 2023. The consultation on the Caerphilly Conversation concluded at the end of December and the results are being collated and analysed with a draft outcome due the end of January 2023.	In progress	10%
AW Ref 3086A2022 issued July 2022	Springing Forward - Assets	Secure Resources R2 Secure sufficient and skilled resources to deliver the strategic vision effectively, including to: <ul style="list-style-type: none"> <li>• manage the disposal or transfer of surplus assets;</li> <li>• implement digital solutions; and</li> <li>• engage with and involve communities around their needs</li> </ul>	The Council is developing a new approach to Recruitment and Selection designed to enhance its chances of securing and retaining critical resources We are exploring opportunities to provide additional support for critical resources through an enhanced relationship with its supply chains. The Council is implementing a cloud strategy to future proof its approach to the delivery of digital solutions through the use of Software as a Service. As well as adapting its Caerphilly Conversation to seek views on assets, this will strengthen further the involvement aspects of any disposals or changes to existing services. Strategic community involvement work is already programmed to ensure assets, particularly those linked to the Walk In Services corporate review, are developed around community need. This approach is in line with the council's Consultation and Engagement Framework, adopted in February 2020. Ongoing process of highlighting opportunities within the Community Asset Transfer scheme with community members during engagement process.	New - Report received in July 2022	Mark S Williams Corporate Director Economy and Environment  Ben Winstanley Head of Land and Property  Caerphilly Conversation - Sue Richards Head of Transformation	Autumn 22		In progress	
AW Ref 3086A2022 issued July 2022	Springing Forward - Assets	Evaluate the benefits of partnership working R3 Collaborate with public sector partners across Gwent to evaluate the potential benefits of developing a strategic long-term approach to a single public estate.	There are clear and obvious benefits from collaborating with other public sector bodies, previous attempts to do so across the Gwent PSB have proved challenging and are reliant on partners wanting to pursue opportunities. This recommendation, therefore, is not entirely in the Council's gift to resolve. That said, the advent of Agile working practices do clearly provide new opportunities for redundant building capacity to be used by either private or public partners, maximising the use of assets while reducing the costs.	New - Report received in July 2022	Mark S Williams Corporate Director Economy and Environment  Ben Winstanley Head of Land and Property	Dec-22		New	

Action Plan & Response to Regulator Proposals

Number and reference of action	Name of Report	Regulator Proposal	Action	PREVIOUS UPDATE March 2022	Service Officer Responsible	When will be completed by	CURRENT UPDATE January 2023	Status	Percentage completed
AW Ref 3219A2022 Nov 22	Homelessness Report	R1 Strengthen its planning and monitoring for homelessness by: <ul style="list-style-type: none"> <li>• better use of forecasting and benchmarking data;</li> <li>• setting a clear longer-term vision to meet changing needs;</li> <li>• developing clear milestones and targets to assess its progress;</li> <li>• identifying measures to evaluate the impact of its preventative activity;</li> <li>• ensuring the required medium to longer-term resources are reflected in its Medium Term Financial Plan</li> </ul>	Strengthening planning and monitoring approach with clear milestones and use of better forecasting is something that we will explore recognising that in this current economic climate the trends are only going one way. Investigating different evaluation measures of our preventative activity will be important as we move through the years of the Rapid Rehousing strategy. The Financial situation is concerning and we will be making a strong case as we are required to identify saving and essential growth will need to be fought for in the medium Term Financial Plan		Nick Taylor-Williams/ Kerry Denman		Specific Actions will be developed and included in the future registers with completion dates once the report is presented to Committee	New	
AW Ref 3219A2022 Nov 22	Homelessness Report	R2 Continue to work with its partners (internal and external) to address some key areas for improvement, <ul style="list-style-type: none"> <li>• engaging partners earlier in the development of key plans, strategies and developments;</li> <li>• identifying opportunities to improve the completeness and timeliness of shared information;</li> <li>• assessing the opportunities to improve the offender pathway;</li> <li>• improving the dialogue with partners around what constitutes a 'reasonable offer of accommodation'.</li> </ul>	We commit to continue work with partners to address key areas of improvement and work in partnership through the homeless service and without that approach we wouldn't deliver and make improvements. The RTTP embodies this approach and cannot be delivered without early engagement and collaboration in developing our plans going forward. We will review ways to improving offender pathways ensuring info is agreed in a timely fashion is critical to this pathway improvement and all of our work in this area.		Nick Taylor-Williams/ Kerry Denman		Specific Actions will be developed and included in the future registers with completion dates once the report is presented to Committee	New	

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## **GOVERNANCE AND AUDIT COMMITTEE – 24<sup>TH</sup> JANUARY 2023**

**SUBJECT: SIX MONTH UPDATE ON CORPORATE COMPLAINTS  
RECEIVED FOR THE PERIOD 1<sup>ST</sup> APRIL 2022 TO 30<sup>TH</sup>  
SEPTEMBER 2022**

**REPORT BY: HEAD OF DEMOCRATIC SERVICES AND DEPUTY  
MONITORING OFFICER**

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### **1. PURPOSE OF REPORT**

1.1 The purpose of this report is to provide the Governance and Audit Committee with an overview of the complaints dealt with under the Corporate Complaints policy for the six month period 1<sup>st</sup> April 2022 to 30<sup>th</sup> September 2022 together with the outcomes and lessons learned. This report will also be presented to a meeting of the Cabinet.

### **2. SUMMARY**

2.1 This report provides a summary of the complaints dealt with under the Corporate Complaints Policy during the six month period 1<sup>st</sup> April 2022 to 30<sup>th</sup> September 2022, the outcomes and lessons learned.

### **3. RECOMMENDATIONS**

3.1 Committee is asked to note the complaints data contained in this report and to review and assess the effectiveness of complaints handling for the six month period 1<sup>st</sup> April 2022 to 30<sup>th</sup> September 2022.

### **4. REASONS FOR THE RECOMMENDATIONS**

4.1 The Local Government and Elections Wales Act 2021 sets out provisions for the Governance and Audit Committee to "review and assess the authority's ability to handle complaints effectively and to make reports and recommendations in relation to the authority's ability to handle complaints effectively".

4.2 The guidance from the Public Services Ombudsman for Wales also requires the data to be reviewed by Cabinet, hence the report will also be presented to Cabinet.

## **5. THE REPORT**

- 5.1 By way of background, Cabinet at its meeting on 24<sup>th</sup> March 2021 adopted a new Corporate Complaints Policy (the Policy) along with an updated policy dealing with unacceptable and unreasonable actions by complainants under the complaints policy. The Policy became effective on 1<sup>st</sup> April 2021 and a copy is included at Appendix 1 of this report for members information. The report considered by Cabinet is also included as a background paper.
- 5.2 This Committee received the first Annual Report on the complaints dealt with under the new Policy for the period April 2021/2022 at its meeting in October last year which was also considered by Cabinet. This report sets out details of the complaints dealt with for the six month period from 1<sup>st</sup> April 2022 to 30<sup>th</sup> September 2022 and will also be considered by Cabinet at a forthcoming meeting.
- 5.3 Members will recall that the Policy deals with corporate complaints only. There are separate complaints processes for dealing with social services complaints and school-based complaints. The Social Services Complaints Procedure Wales Regulations 2014 outlines the procedure for handling complaints from persons receiving a service from social services and school-based complaints are dealt with by the School and Governing Body. In addition, Freedom of Information complaints and complaints about Data Protection matters are within the remit of the Information Commissioner.
- 5.4 The Policy consists of an internal two stage process with the right for a complainant to refer their complaint to the Public Services Ombudsman for Wales should they be dissatisfied with the response.
- 5.5 Since the adoption of the new Policy, complaints officers across the various directorates continue to raise awareness amongst their respective staff of the importance of recognising complaints and dealing with them in accordance with the Policy. One of the benefits of recording complaints more effectively is that we can recognise trends more readily and take steps to put things right and learn from any issues identified within the relevant directorate and beyond where appropriate.
- 5.6 The Ombudsman providing training to over 80 staff in 2021 on complaints handling generally and further training is being rolled out across the Directorates in February and April this year on complaint investigation skills and managing difficult behaviours and expectations. The Complaints Officers within each Directorate will continue to provide advice, guidance and support to their respective service areas on how to deal with complaints efficiently and effectively and are supported by the Corporate Complaints Officer based within Legal Services who maintains the overall database. The Corporate Complaints Officer is also the contact officer for the Ombudsman's office.
- 5.7 Members will recall from the Annual Complaints report received at the last meeting that complaints officers are trialling a new digital complaints system with assistance from colleagues in Digital and Customer Services the aim of which is to streamline controls and improve data records within the complaints process. Officers are currently providing feedback on the trials which has been taken onboard and adjustments are being made prior to the system going live. However until that time officers are continuing to utilise existing data systems which still require much

administration and manual interrogation in order to produce meaningful intelligence and learning.

5.8 To support the work of complaints officers and each directorate, officers have a long established Learning from Complaints Group (“the Group”) comprising Complaints Officers from each directorate, the Corporate Complaints Officer, the Council’s Senior Policy Officer (Equalities Welsh Language and Consultation), representatives from the Council’s Corporate Policy Unit and a representative from the Council’s Internal Audit Section. The meetings are chaired by the deputy Monitoring Officer and meet at least quarterly to discuss the complaints data and reporting procedures.

5.9 These meetings have resulted in the establishment of the formal template included at Appendices 2 to 6 which provides a more in depth information and analysis on all aspects of the complaints data and its relevancy to the service areas within the directorates.

### 5.10 General Overview

The total number of complaints dealt with during the period 1<sup>st</sup> April 2022 to 30<sup>th</sup> September 2022 under the Corporate Complaints policy is **203** and is broken down as follows

Directorate	Stage 1	Stage 2	Escalated	Total
Social Services	22	0	2	24
Education	2	0	1	3
Economy & Environment	72	9	12	93
Housing	58	2	13	73
Corporate	7	2	1	10
<b>TOTAL</b>	<b>161</b>	<b>13</b>	<b>29</b>	<b>203</b>

The Outcomes are as follows

Directorate	Upheld	Not Upheld	Withdrawn	Ongoing	Total
Social Services	3	21	0	0	24
Education	0	3	0	0	3
Economy & Environment	53	38	2	0	93
Housing	22	47	3	1	73
Corporate	5	5	0	0	10
<b>TOTAL</b>	<b>83</b>	<b>114</b>	<b>5</b>	<b>1</b>	<b>203</b>

### Ombudsman Referrals

Directorate	Number	Outcome
Social Services	1	Not Investigating
Education	1	Not Investigating
Economy & Environment	10	9 Not Investigating 1 Early Resolution offer to waive drafting fee
Housing	3	Not Investigating

Corporate	1	Early Resolution to Monitor Junk Email inbox & Apologise
<b>TOTAL</b>	<b>16</b>	

#### 5.11 Detailed Data broken down by Directorate

The data is broken down in more detail per Directorate in the following Appendices which are attached to this report.

Economy and Environment	Appendix 2
Housing	Appendix 3
Education and Libraries	Appendix 4
Corporate Services	Appendix 5
Social Services (Corporate only)	Appendix 6

5.12 Members will note from the data set out in the Appendices, that officers are continuing to respond to complaints under the Policy. Work is ongoing to make the digital system fit for purpose which will provide officers with the tools needed to analyse the data and improve performance. The ongoing training outlined in paragraph 5.5 above will also equip officers with the necessary knowledge to deal with complaints efficiently and effectively with the forthcoming training focussing on investigation skills and managing difficult behaviours. The Learning from Complaints group will continue to meet to discuss the process as a whole and the lessons learned and Directorate complaints officers will actively continue to educate their respective service areas and provide support as and when required.

#### 5.13 Conclusion

Members are asked to consider and note the information contained in this report and Appendices.

### 6. ASSUMPTIONS

6.1 No assumptions are necessary as the content of the report is based on data collected and analysed.

### 7. SUMMARY OF INTEGRATED IMPACT ASSESSMENT

As the report is for information only an Integrated Impact Assessment is not required.

### 8. FINANCIAL IMPLICATIONS

8.1 There are no financial implications arising from this report

### 9. PERSONNEL IMPLICATIONS

9.1 There are no personnel implications arising from this report.



## 10. CONSULTATIONS

- 10.1 The report has been circulated to the consultees listed below and any comments have been incorporated into this report.

## 11. STATUTORY POWER

- 11.1 Public Services Ombudsman (Wales) Act 2019

Author: Lisa Lane Head of Democratic Services and Deputy Monitoring Officer

Consultees: Corporate Management Team  
Robert Tranter, Head of Legal Services and Monitoring officer  
Gemma Hoare, Senior Housing Officer (Customer Services)  
Gareth Jones Housing Officer (Customer Services)  
Karen Williams, Customer Services Digital Hub Manager  
Liam Miles, Customer Services/Complaints Officer  
Nicola Broom, Complaints and Information Manager Social Services  
Michelle Moore, Social Services Complaints and Information Officer  
Ros Roberts, Business Improvement Manager  
Andrea Jones, Corporate Complaints Officer  
Anwen Cullinane, Senior Policy Officer (Equalities, Welsh Language and Consultation)  
Deborah Gronow, Audit Group Manager  
Karen L Williams, PA to Chief Executive  
Leigh Brook, PA to the Director of Social Services and Housing  
Lianne Fry, PA to Corporate Director Education and Corporate Services  
Sian Wilkes, PA to the Interim Corporate Director of Communities  
James Penfold, Transformation Manager  
Ian Raymond, Business Improvement Officer

### Appendices

- Appendix 1 [Link to Corporate Complaints Policy](#)  
Appendix 2 Economy & Environment  
Appendix 3 Housing  
Appendix 4 Education and Libraries  
Appendix 5 Corporate Services  
Appendix 6 Social Services (Corporate complaints only)

## BACKGROUND PAPERS

### Report to Cabinet 24<sup>th</sup> March 2021

- Link to Cabinet Report  
Link to Appendix 1  
Link to Appendix 2  
Link to Appendix 3  
Link to Appendix 4

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## Economy & Environment Directorate - Appendix 2

### Number of complaints by Stage Type, Service, and Targets Met

Table showing summary of complaints by stage type reference

Stage Type	Count	Count Completed in Target Times	Percentage Completed in Target Times
Stage 1	72	64	88.9
Stage 2	9	8	88.9
Escalated Stage 1 to 2	12	12	100
<b>Totals</b>	<b>93</b>	<b>84</b>	<b>90.3</b>

Table showing how the complaints were received

By source	Count Stage 1	Count Stage 2	Count Escalated Stage 1 to Stage 2
Contact Centre	4	1	0
Email	44	8	11
Letter	1	0	1
On-line	21	0	0
Other	2	0	0
Telephone	0	0	0
<b>Totals</b>	<b>72</b>	<b>9</b>	<b>12</b>

Tables showing summary of complaints by service, for each stage type

Service	Count Stage 1	Count Completed in Target Times	Percentage Completed in Target Times
Community & Leisure	51	45	88.2
Infrastructure	13	12	92.3
Property	0	0	-
Public Protection	4	4	100
Regeneration & Planning	2	1	50.0
Other - Combined	2	2	100
<b>Totals</b>	<b>72</b>	<b>64</b>	<b>88.9</b>
Service	Count Stage 2	Count Completed in Target Times	Percentage Completed in Target Times
Community & Leisure	1	0	0
Infrastructure	4	4	100
Property	0	0	-
Public Protection	1	1	100
Regeneration & Planning	3	3	100
Other - Combined	0	0	-
<b>Totals</b>	<b>9</b>	<b>8</b>	<b>88.9</b>

Service	Count Escalated Stage 1 to Stage 2	Count Completed in Target Times	Percentage Completed in Target Times
Community & Leisure	7	7	100
Infrastructure	4	4	100
Property	0	0	-
Public Protection	0	0	-
Regeneration & Planning	1	1	100
Other - Combined	0	0	-
<b>Totals</b>	<b>12</b>	<b>12</b>	<b>100</b>

More detailed information on the above corporate complaints data, is currently maintained, by the Directors' Secretary on a dedicated database.

There were various reasons identified with regards to response times not being met. Some examples are listed below:

- Insufficient staff to undertake necessary inspections.
- Complexities with regards to landownership.
- Health and Safety issues taking precedence which were beyond the staffs' control.

The Director's PA continues to provide training to all staff where required, which covers a wide range of topics, focusing particularly on compliance procedures and ways to avoid missing the deadline dates. For example, staff are advised that an extension of time letter can be sent to the complainant advising them that more time is required to deal with the matter in question. This keeps the complainant informed of any progress made and an update on any amended deadlines which then avoids missing the compliance date. This training has been very successful as we are managing to sustain reasonable response times.

## 1. Key complaints - identified by type or theme

### List of key specific types, or themes, of repetitive, or pertinent complaints received during this reporting period.

Between April 2022 and Sept 2022 - The main themes or topics (most to least - complaints) were identified as:

Other matters (not included as below)  
 Refuse-Recycling-Green Waste - Missed Collections  
 Refuse-Recycling-Green Waste-Other  
 CA Sites  
 Parking  
 Poor communications  
 General Weed Control-Grounds Maintenance  
 Delays in service delivery  
 Grass Cutting  
 Planning-General  
 Trees  
 Delays in responses  
 Highway maintenance works  
 Illicit Tipping  
 Cemeteries  
 Cleansing  
 Drains-Flooding  
 Footpath Quality

The type or themes identified above, have been extracted from the following table which shows the incoming number of complaints by specific service sectors or teams during this reporting period.

Service Group or Team	Count Stage 1, Stage 2 & Escalated 1 to 2
Green Spaces and Transport Services	10
Sport & Leisure Services	1
Waste Strategy & Operations	47
Engineering Projects Group	1
Highways Operations Group	10
Transportation Engineering	11
Building Consultancy	2
Corporate Property	0
Facilities Management	0
Divisional Support Unit	0
Environmental Health	5
Trading Standards & Licensing	0
Building Control	1
Business Support and Funding	0
Community Regeneration	0
Destination and Events	0
Development Control	0
Planning Administration	3
Strategic Planning	0
Urban Renewal	0
Combined	2
<b>Totals</b>	<b>93</b>

#### IDENTIFICATION OF TRENDS – Particular to services

TRENDS
<p>During this period the complaints received seem to be quite varied. A number of complaints were received regarding missed collections but given the fact that we collect from 75,000 households of which each will receive a weekly recycling collection so 3.9 million collections per annum, a weekly food and green collection so 3.9 million collections per annum, a fortnightly residual collection so 1.95 million collections per annum a total number of collections per annum across all 3 waste streams = 9.75 million per annum therefore the amount received didn't cause any major issues. A number of complaints were received with reference to challenging the policies around HWRC entry and permit systems. Some examples are detailed below for information.</p>
<p><b>Examples</b></p>
<p>Bins not emptied again, regular occurrence. Registered for Assisted Waste Collection – This complaint escalated due to the fact that cars were blocking access.</p>
<p>Tried to apply for permit to take trailer to RC Aberbargoed, Only options are Van, Van with trailer or trailer under 1.8 metres, as the complainants' trailer was over 1.8 metres they were told they were unable to use it to move the items. The complainant begrudged paying £15 per item.</p>
<p>Additional large cardboard boxes out for collection - crew didn't collect as this is Council policy therefore resident complained. The resident was informed however, that there are alternative methods to dispose of additional cardboard i.e.: use of HWRC.</p>

Continuous non collection of waste - Reasons identified and accounted for with both the resident and collection crews to ensure all efforts undertaken in successfully collecting moving forward.

To ensure continuity in collection services the supervisors investigate each complaint to establish why there are recurring instances with regards to missed collections. The teams are addressed and reminded of expectations going forward. Training will be provided if this is identified.

## 2. Number of complaints by Category

Table showing complaints by category.

Category	Count Stage 1, Stage 2 & Escalated 1 to 2
1 Collaborative Working	1
2 Decision Making	6
3 Delay in Service Provision	39
4 Officer/Contractors Conduct with public (including sensitivity/empathy of staff/politeness)	1
5a Following Council Policies	24
5b Following relevant Legislation	-
6 Accessibility of Services	1
7 Clarity/Accuracy/Timeliness of information	3
8 Quality of Work	17
9 Openness/ Fairness and Honesty	-
10 Compliance with Complaints procedure	-
11. Combination of Categories (Non-specific)	1
<b>Totals</b>	<b>93</b>

## 3. Number of complaints by outcome and lessons learned

Table showing complaints by outcome.

Outcome Data	Count Stage 1, Stage 2 & Escalated 1 to 2
Upheld	53
Not upheld	38
<b>Totals</b>	<b>91</b>

Two complaints were withdrawn

The following tables shows more information regarding the complaints counts above, that were, Upheld, Not Upheld, by Service Area.

Services – Stage 1	Upheld	Not Upheld
Community & Leisure	32	19
Infrastructure	3	10
Property	-	-
Public Protection	1	2
Regeneration & Planning	-	2
Other - Combined	-	2
<b>Totals</b>	<b>36</b>	<b>35</b>

Services – Stage 2	Upheld	Not Upheld
Community & Leisure	-	1

Infrastructure	-	4
Property	-	-
Public Protection	-	1
Regeneration & Planning	-	3
Other - Combined	-	-
<b>Totals</b>	<b>0</b>	<b>9</b>

<b>Services – Stage 1 escalated to Stage 2</b>	<b>Upheld</b>	<b>Not Upheld</b>
Community & Leisure	2	4
Infrastructure	-	4
Property	-	-
Public Protection	-	-
Regeneration & Planning	-	1
Other - Combined	-	-
<b>Totals</b>	<b>2</b>	<b>9</b>

**List of lessons learned. The table below comments on key findings resulting from the complaints in this reporting period, that may help curtail, prevent, or impede future repeats.**

<b>Nature of complaint</b>	<b>Lessons learned</b>	<b>Category</b>
Green Waste sacks not returned - objecting to paying for new sacks	<p>Whilst we cannot determine the exact reasoning for the loss of the original provision it can only be assumed that the sacks had blown away or been taken. It is recognised that there is a potential that the original provision was not secured in a fashion that would have prevented this scenario from occurring.</p> <p>The supervisor has advised the team to take every care in securing the provision as best as is practicable going forward.</p>	5 Following Council Policies/relevant Legislation
Inconsistent food collections	Operative addressed and additional control measures put in place to ensure no further failing of this collection. For example crews are required to be more vigilant and take time while providing the service.	3 Delay in Service Provision
Graffiti not being cleaned off garage	Unfortunately the Waste Management team were not in a position to clean the graffiti due to the services being suspended and only recently being reinstated. Whilst this was seemingly communicated to the resident they did not accept as a valid reason. Graffiti is now being removed at the earliest opportunity following the reintroduction of the service.	3 Delay in Service Provision
Roadworks at Birchgrove, Risca	Highway Engineer to check TM prior to work being carried out to ensure every TM measure in place prior to commencement of any roadworks being scheduled	7 Clarity/Accuracy/Timeliness of information

Length of time waiting for her daughter to have swimming lessons and customer service provided by receptionist	Errors were made when Risca Leisure Centre moved to an electronic database (waiting list). Names were moved across from the paper waiting list, however, when a name on the waiting list did not have a smartcard, the electronic system would not allow them to be entered. This system has now been rectified.	3 Delay in Service Provision
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Some of the key learnings identified include

- Continuity of service needed, to reduce and prevent reoccurrence's (system failures)
- Need to ensure accuracy of data pre and post communications
- Cross service communications and prioritisation needs enhancing - complaint responses
- Improve citizen engagement and listening first-time
- Staff changes and turnover, could improve with better induction and suitable plant and equipment

#### 4. Identified relationships to Equalities or Welsh Language

Table showing a count and list of findings resulting from the complaints in this reporting period, that specifically relate to the Equalities or Welsh Language protected characteristics.

Characteristic Strand	Count Stage 1, Stage 2 & Escalated 1 to 2
Age	1
Disability	5
Gender Reassignment	-
Marriage and Civil Partnership	-
Pregnancy and Maternity	-
Race	-
Religion/Belief or Non-belief	-
Sex	-
Sexual Orientation	-
Welsh Language	-
<b>Totals</b>	<b>6</b>

Examples of Age and Disability Complaints are

Details of Complaint	Service Area	Lessons Learned	Does the Complaint relate to Equalities or the Welsh Language?
Complaining on behalf of her parents regarding non collection of assisted waste	Waste Strategy & Operations	Failing from team addressed by supervisor. Crew reminded to ensure assisted collections are undertaken.	Age
Bins not emptied again, regular occurrence. Registered for Assisted Waste Collection	Waste Strategy & Operations	Lesson learned is to make every effort to progress the requirement of collection as soon as notified of the difficulty/failed collection to close the	Disability



		loop. Unfortunately, it seems that this particular location, is subject to indiscriminate parking on a regular basis which has exacerbated the situation.	
Non collection of assisted waste	Waste Strategy & Operations	Lesson learned is to ensure continuity in collection service and supervisor to investigate why recurring instances have happened and eliminate. For example, if alternative crews are provided relevant paperwork is required to alert them of residents receiving this service.	Disability
Roadworks at Birchgrove, Risca	Highways Operations Group	Highway Engineer to check TM prior to work being carried out to ensure every TM measure in place prior to commencement of work	Disability
Problems with non-collection of assisted collection	Waste Strategy & Operations	Improvement with communications at this most challenging of times for the Authority when new collection staff have deployed to unfamiliar rounds.	Disability

**5. Annex – Referrals to Ombudsman, complaints resulting from appeals and examples of relevant items (points to note) specific to this reporting period**

Service Area	Date received	Decision
Planning	05/04/22	Not investigating
Planning	19/05/22	Not Investigating
Planning	21/06/22	Not Investigating
Waste	05/09/22	Not Investigating
Environment	28/04/22	Not Investigating
Highways	11/05/22	Not Investigating
Property Services	23/06/22	Early Resolution – Waive drafting fee
Traffic Management	22/08/22	Not Investigating - Premature
Rights of Way	07/09/22	Not Investigating
Parks	20/09/22	Not Investigating

## **6. Directors Summary – Overall Assessment and Evaluation**

Overall, the Directorate is sustaining service delivery and performance levels, with some specific areas posing more challenges than others at present.

Our front-line and back-office services continue to sustain reasonable levels of service delivery in this post covid recovery period, despite many changes experienced in working practices and public expectations, which has posed some challenges to ongoing services and succession planning. In particular, staff retention and replacement in some services, and plant and equipment in others.

By nature of our front-facing and diversity of services delivered, we rely heavily on public feedback. Public consultation has been limited these past two years, however, intelligence gathered through the Public Services Board wider region public engagements, our compliments and complaints including trends and feedback, direct service contacts, and recent 'what matters to you' programme, all provide us with sufficient knowledge to understand any areas for improvement. In addition, a training programme has been rolled out across the Directorate to improve the timeliness and quality of responses to complaints. The benefits of this training programme are now starting to be experienced. The training programme will be cyclically delivered and kept under continuous review.

### **For further information, please contact**

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**Brief description of Directorate and Service Framework**

Caerphilly Homes is the brand name for the council's housing division. Some of the services delivered by Caerphilly Homes include: Welsh Housing Quality Standard (WHQS), Estate Management, Tenancy Enforcement, Rents and Tenancy Support, Tenant and Community Involvement, Older Persons' Housing, Housing Repair Operations, Housing Advice, Homeless Prevention and Common Housing Register, Private Sector Housing, Grants and Loans, Housing Strategy, Affordable Housing and Adaptations

**1. Number of complaints by stage type, service, and targets met****Table showing summary of complaints by stage type reference**

Stage Type	Count	Count Completed in Target Times	Percentage Completed in Target Times
Stage 1	58	41	70.7%
Stage 2	2	2	100.0%
Escalated from Stage 1 to 2	13	8	61.5%
<b>Totals</b>	<b>73</b>	<b>51</b>	<b>69.9%</b>

**Tables showing summary of complaints by service, for each stage type**

Service	Count Stage 1	Count Completed in Target Times	Percentage Completed in Target Times
Adaptations	1	0	0.0%
Allocations	8	5	62.5%
Antisocial Behaviour	3	2	66.7%
Grants	2	2	100.0%
Homelessness	1	0	0.0%
Housing Management	16	10	62.5%
Leaseholder	1	1	100.0%
Heating	3	3	100.0%
Private Landlord	1	1	100.0%
Response Repairs	20	16	80.0%
WHQS External	1	0	0.0%
WHQS Internal	1	1	100.0%
<b>Totals</b>	<b>58</b>	<b>41</b>	<b>70.7%</b>

Service	Count Stage 2	Count Completed in Target Times	Percentage Completed in Target Times
Allocations	1	0	0.0%
Grants	1	1	100.0%
Housing Management	7	5	71.4%
Heating	2	1	50.0%
Response Repairs	4	3	75.0%
<b>Totals</b>	<b>15</b>	<b>10</b>	<b>66.7%</b>

Where target response times were not met, it has been identified that generally it was due to awaiting further information from other officers, other departments, or the complainants themselves. The Head of Housing – Nick Taylor Williams previously undertook a review of all Stage 1 and Stage 2 responses to ensure consistency and customer focus. Due to the number of responses requiring review and redrafting, this has impacted negatively on the target rates however it is anticipated undertaking this exercise will have a positive impact on customer service, quality of complaint investigations and ultimately reducing escalation of complaints. Going forward, data will be provided monthly to managers and directors who attend Senior Managers Briefing (SMB) and Higher Management Team (HMT) to discuss cases which fall short of meeting the target deadlines and to establish if trends can be identified in this area. Key members of the Housing Management team have also been involved in the planning and implementation of the changes required for Caerphilly Homes to successfully introduce the Renting Homes Act 2016. This was initially due to be completed by the 15th of July 2022 however this had been postponed until the 1st December 2022 and has now been successfully implemented. The introduction of this legislation is paramount and therefore has taken priority over some other duties. The Housing Department has also commissioned a new computer system called CX. Managers and officers have been involved with the building and testing of the system via workshops and group meetings, this new system was introduced in October 2022 and ongoing testing, adjustments and implementation continue to ensure Caerphilly Homes has an efficient housing recording system. These changes have been managed whilst operating on a reduced staffing capacity due to recruitment challenges which are being experienced nationwide. Managers/Officers will be provided with a list of open cases for their section on a fortnightly bases which will include brief details of the case when it was received and the target date for closure. This approach will be monitored to see if this has a positive impact on our target time percentages.

**Table showing how the complaints were received.**

<b>By source</b>	<b>Count Stage 1</b>	<b>Count Stage 2</b>	<b>Count Escalated Stage 1 to Stage 2</b>
Telephone	23	2	2
Email	26	0	11
Letter	3	0	0
On-line	6	0	0
Contact Centre	0	0	0
Other	0	0	0
<b>Totals</b>	<b>58</b>	<b>2</b>	<b>13</b>

**2. Key complaints - identified by type or theme**

Resident unhappy with the quality of works completed in back garden following WHQS upgrade.

Delay in payment for decoration allowance.

Missing information on completed housing application, possibly jeopardising opportunity to be allocated a property.

Residents concerned with delays in visible action following reports of a neighbour’s garden being overgrown and time it takes to implement the garden procedure.

Incorrect information provided by Housing Advice Officer.

Resident unhappy with the service they have received from the Housing Repairs Operations team.

Resident concerned with delay in considering succession application and the impact it has claiming housing benefit payments.

### 3. Number by Category (Commissioner Case Type)

Table showing complaints by Commissioner Case Type, for prescribed Categories

Category	Count Stage 1, Stage 2 & Escalated 1 to 2
1 Collaborative Working	0
2 Decision Making	9
3 Delay in Service Provision	9
4 Officer/Contractors Conduct with public (including sensitivity/empathy of staff/politeness)	6
5a Following Council Policies	1
5b Following relevant Legislation	0
6 Accessibility of Services	0
7 Clarity/Accuracy/Timeliness of information	5
8 Quality of Work	42
9 Openness/ Fairness and Honesty	1
10 Compliance with Complaints procedure	0
11 Combination	0
<b>Totals</b>	<b>73</b>

### 4. Number by Outcome and lessons learned comments

Table showing complaints by Outcome Data sets as categorised by the Complaints Standards Authority.

Outcome Data	Count Stage 1, Stage 2 & Escalated 1 to 2
Upheld	22
Not upheld	47
<b>Totals</b>	<b>69</b>

\*Please note, of the 73 complaints received, 3 were withdrawn and 1 is still ongoing

The following table shows more information regarding the complaints counts above, that were, Upheld, Not Upheld, Non-specific, Investigation Not Merited and Investigation Discontinued, by Service Area.

#### Stage 1 Complaints

Service	Upheld	Not Upheld
Adaptations	0	1
Allocations	3	5
Energy Works	0	0

Grants	0	2
Housing Management	9	4
Leaseholder	0	1
Private Landlord	0	1
Rents	0	0
Response Repairs	7	13
Sheltered Housing	0	0
WHQS External	0	1
WHQS Internal	1	0
Heating	0	3
Antisocial Behaviour	0	3
Homeless Prevention	0	1
<b>Totals</b>	<b>20</b>	<b>35</b>

### Stage 2 Complaints

Service	Upheld	Not Upheld
Allocations	0	1
Grants	0	1
Housing Management	2	5
Response Repairs	0	4
Heating	0	1
<b>Totals</b>	<b>2</b>	<b>12</b>

**List of lessons learned. Comment on key findings resulting from the complaints in this reporting period, which may help curtail, prevent, or impede future repeats.**

Details of Case	Lessons Learned	Category
Resident unhappy with the quality of the works carried out under WHQS in his back garden.	Unfortunately, the poor service and quality of works received by the resident was due to the contractor ceasing trading.	8 Quality of work
Resident has raised a number of issues including delay in decoration payment - discretionary housing payment confusion - unfinished repairs - query over tenant's handbook and the meaning of it	<ul style="list-style-type: none"> <li>•Gas central heating system was not operational for the first 6 weeks of the tenancy - Internal systems have now been changed by the Principal Contracts Officer and these will be reviewed by Housing Operations Manager to ensure that they are robust and will prevent this happening in future.</li> <li>•Standard of the new home – discuss potential training needs and to agree the focus of awareness raising sessions with team members who are responsible for ensuring that our Lettings Standard is met and that there is a clear understanding of Tenant Maintenance responsibilities (Tenants Handbook).</li> </ul>	8 Quality of work

	<ul style="list-style-type: none"> <li>•Delay in redecoration BACS Payment – The current procedure for making payments to tenants will be reviewed to ensure that any payments are processed as quickly as possible.</li> <li>•Tenant Handbook change to wording – This has already been amended for the new supply that are currently on order.</li> </ul>	
Resident completed housing application, but we had missing information on our system and the information communicated was incorrect. Resident concerned they may have missed out on an offer of a property.	Discussions held with Clerical Officers to ensure they check applications before replying.	7 Clarity/Accuracy/Timeliness of information
Resident unhappy with the service received whilst having the wall between the kitchen and lounge injected with damp course and replastered - also still waiting for decoration allowance payment	Improved communication requirements identified between us CCBC, the Contractor and the Contract Holders. Housing Repair Operations (HRO) operatives will be reminded of the importance of this. The Contract Holder should have been advised of the duration of works and access restrictions to parts of her property prior to and while the works were being undertaken.	8 Quality of work
Reported neighbouring garden being overgrown and damaging his property on a number of occasions but issue is still not resolved	Covid limited any actions or investigations at that time, however Officers were reminded that photos should have been requested from the customer to see the issue and to bear this in mind to provide a more efficient service. The resident had been complaining for some time and we didn't act promptly enough to resolve it.	3 Delay in Service Provision
Incorrect information provided by Housing Advice Officer	A meeting was held with the case officer, and we talked through the information that was shared regarding Common Allocations Policy (CAP) and former tenancy debt and to ensure that they double checked facts / figures and CAP before engaging in the conversation to avoid the scenario happening again. A workshop is being held with staff to review and reinforce pathways for service delivery and as part of this a session on the CAP and a	7 Clarity/Accuracy/Timeliness of information

	refresher for all the team is being arranged	
Resident unhappy with the mess in the area and feels the garden procedure takes too long and the emo is not acting quick enough	We acknowledge the length of time to deal with this request and note Estate Management Officer (EMO's) have been less active in the community due to Covid restrictions, but meetings are being held to rectify this as restrictions are now lifted.	3 Delay in Service Provision
Contract holder contacted to advise they are unhappy with the repairs service they have received.	On this occasion we should have renewed the door earlier due to the number of repairs that were undertaken on the door. We do have a Lesson learnt procedure in place at the moment, that is if the same repair is reported on three occasions, then the Foreman would go out to check and advise if the repair has been carried out correctly. I know this did happen at least once at this property, but the number of repairs recorded against the front door should have acted as a warning for the door to be renewed.	8 Quality of work
Contract holder gained succession and it was backdated leaving them with an arrears balance and backdated Housing Benefit cannot be claimed due to receiving Universal Credit	Arrange to meet with the relevant EMO and talk about sending of the correct letters in a timely manner. This matter will be raised with EMO Teams meeting, as the introduction of Renting Home Wales Act 2016 (RHW) 1st December 2022 there will be stringent timescales	8 Quality of work
Contract holder told she could partition bedroom, but now informed consent is required so has to wait whilst her and the children are sleeping downstairs. Not happy by the way I have just been forgotten about as a contract holder and I'm not happy the way that I've been spoken to.	We receive calls from frustrated customers regularly and dealing with us as a council can be a bureaucratic process. We can't expect customers to know every one of our procedures and we need to be understanding of that, and respond supportively rather than assuming customers are trying to circumvent our procedures We need to do more training on providing excellent customer service and improving the experience of our customers who contact us. We have started this with the restorative training and I'm hoping to continue by looking at customer journeys. When we	7 Clarity/Accuracy/Timeliness of information



	get call recording, we can use this for training purposes.	
Housing register application being closed down again	Manager has raised the inaccuracies of the tenancy rent reference with the relevant department and further training will be offered to the team to hopefully alleviate any future mistakes. We will also look to update the Tenancy Reference Form which rents are sent so the information required is easy to process.	7 Clarity/Accuracy/Timeliness of information
Following chimney being removed 2 months ago bags of rubble still left on garden. Tenant has called 5 times to request removal but has still not been removed	There was a definite breakdown in communication between us and the contractor, and the tenant should have been informed that there was a possibility that the waste would not be collected within a reasonable timescale. Moving forward we will ensure tenants are kept updated with any potential delays in service.	3 Delay in Service Provision
Contractors working on property and left cans and food in house.	The Engineers that carried out the work on our behalf have failed to meet our standards within the agreed Tenant's Charter of Trust by respecting yourself and your home. To avoid any instances of this nature reoccurring the Contractor has held Toolbox talks with their Engineers and have assured us that this will not happen again going forward. We will also request that in house Surveyors carry out more spot checks and visits on future installations, this would ensure that Engineers are acting in a professional manner whilst undertaking the work	4 Officer/Contractors contact with public.
Contract holder requesting review of decision not to renew kitchen - disagrees with signing the form to opt out of new kitchen	Although the customer did refuse works previously and had signed an opt out form, this should not have stopped the surveyor as the customers' needs had changed, hence moving forward we need to focus on why the customer is now asking for the work to be done. In this instance the customer had asked for the tumble dryer to be relocated into the kitchen from a shed in the garden as a member of their family has health issues this was achievable by removing an old pantry, The surveying team	9 Openness/fairness and Honesty

	needs to understand that at any given time the customer has the right to reverse their decision. The surveyors line manager has been informed that on this occasion we failed the needs of the customer we have asked the line manager to hold a toolbox talk with all the surveyors highlighting that if an opt out form has been signed the customer is still entitled to reverse their decision, this will also be communicated throughout the Housing Technical department.	
Private owner of unhappy that the garden of a contract holder is overgrowing with grass and brambles and coming into his garden causing damage to plastic around shed this has been ongoing for many years	The need to identify whether service requests for garden conditions when received for this location, are seasonally recurring and, if so, consider previous responses/cumulative impact when determining a reasonable response to requests, whilst we identify a longer-term solution to a recognised issue. Officers reminded of the need to consider file histories when determining our responses to concerns raised about garden conditions in this location	8 Quality of work

## 5. Identified relationships to Equalities or Welsh Language

Table showing a count and list of findings resulting from the complaints in this reporting period, that specifically relate to the Equalities or Welsh Language protected characteristics.

Characteristic Strand	Count Stage 1, Stage 2 & Escalated 1 to 2
Age	0
Disability	2
Gender Reassignment	0
Marriage and Civil Partnership	0
Pregnancy and Maternity	0
Race	0
Religion/Belief or Non-belief	0
Sex	0
Sexual Orientation	0
Welsh Language	0
<b>Totals</b>	<b>2</b>

Extracts from cases linked to the Disability characteristic:

- Following shower being fitted the boiler was adjusted to ensure hot water was coming from shower. This has caused water from the hot water tap to be deemed too hot for her daughter

concerned daughter will scald herself. This issue was considered at both stage 1 and Stage 2 and was not upheld.

**6. Annex – Referrals to Ombudsman, complaints resulting from appeals and examples of relevant items (points to note) specific to this reporting period**

**Identify how many referrals to the Ombudsman and list and append any relevant supplementary information here, namely, points to note, or an example data set.**

Three cases were referred to the Ombudsman for Housing in this reporting period. The Ombudsman decided not to investigate and subsequently closed their records. The first Ombudsman case related to a delay in providing a Stage 2 response however even though the response was provided out of timescale, the Ombudsman felt it was justified to provide an in-depth response. The second Ombudsman case was regarding the banding for a housing application. The Ombudsman confirmed that the procedure was followed, and they will not investigate a properly made decision. The third contact was from a family member on behalf on their parents. They were disputing the 50% contribution for costs to replace the fencing. The Ombudsman confirmed they cannot investigate a complaint for which there is a remedy by way of proceedings in a court of law.

**For further information, please contact**

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## Number of complaints by stage type, service, and targets met

## Summary of complaints by stage type reference

Stage Type	Count	Count Completed in Target Times	Percentage Completed in Target Times
Stage 1	2	2	100
Stage 2	0	0	0
Escalated Stage 1 to 2	1	1	100
<b>Totals</b>	<b>3</b>	<b>3</b>	<b>100</b>

## Summary of complaints by service, for each stage type

Service	Count Stage 1	Count Completed in Target Times	Percentage Completed in Target Times
ALN and Inclusions Services (ALN)	2	2	100
<b>Totals</b>	<b>2</b>	<b>2</b>	<b>100</b>

Service	Count Escalated Stage 1 to Stage 2	Count Completed in Target Times	Percentage Completed in Target Times
ALN and Inclusions Services (ALN)	1	1	100
<b>Totals</b>	<b>1</b>	<b>1</b>	<b>100</b>

## How the complaints were received

By source	Count Stage 1	Count Stage 2	Count Escalated Stage 1 to Stage 2
Telephone	0	0	0
Email	2	0	1
Letter	0	0	0
On-line	0	0	0
Contact Centre	0	0	0
Other	0	0	0
<b>Totals</b>	<b>2</b>	<b>0</b>	<b>1</b>

More detailed information on the above corporate complaints data, is currently maintained, by the Education Customer Service and Complaints officer on a dedicated database.

## Key complaints - identified by type or theme

Schools have their own complaints policy/process that must be dealt with by the school. However, the L.A may provide advice and guidance on the School based policy but direct complainants back to the school for response.

All governing bodies are required by law to have a procedure in place for dealing with complaints from parents, pupils, members of staff, governors, members of the local community and others in relation to matters for which the governing body has statutory responsibility.

- ALN and Inclusion Service – Lack of education and ALN Involvement/Communication
- ALN and Inclusion Service – Lack of support

## 1. Number by Category (Commissioner Case Type)

### Complaints by Commissioner Case Type, for prescribed Categories

Category	Count Stage 1, Stage 2 & Escalated 1 to 2
1 Collaborative Working	0
2 Decision Making	0
3 Delay in Service Provision	0
4 Officer/Contractors Conduct with public (including sensitivity/empathy of staff/politeness)	0
5a Following Council Policies	0
5b Following relevant Legislation	1
6 Accessibility of Services	1
7 Clarity/Accuracy/Timeliness of information	0
8 Quality of Work	0
9 Openness/ Fairness and Honesty	0
10 Compliance with Complaints procedure	0
11 Combination of categories	1
<b>Totals</b>	<b>3</b>

## 2. Number by Outcome and lessons learned comments

### Complaints by Outcome Data sets as categorised by the Complaints Standards Authority.

Service	Upheld	Not Upheld
ALN and Inclusions Services (ALN)	0	3
<b>Totals</b>	<b>0</b>	<b>3</b>

#### **Stage 1 Complaint – (Category 5b). Lack of Support**

The complainant raised a number of concerns in relation to LA and school setting. The investigation was conducted into the LA provided services only. The complainant was advised to raise school-based concerns with the school directly. In terms of the issues relevant to the local authority they were thoroughly investigated and not upheld:

- Incorrect information provided by LEA staff
- LEA staff's failure to provide a response to email correspondence
- Safeguarding concern

- After 15 consecutive days of non-attendance, it is the LEA's legal responsibility to provide alternative provision

### **Stage 1 – Category (6), Escalated to Stage 2 – Category 11 (1, 2, 3, 5b, 6, 7). Lack of education and ALN Involvement/Communication**

Stage 1 – Allegation that correspondence received from complainant in June 2020 was filed away and no action taken. Complainant had been liaising with the Lead Officer for Additional Learning Needs (ALN) & Inclusion and her local Assembly Member but was unhappy with the lack of education received by complainant's two children. Delay in finding a suitable education setting for the two children.

The correspondence referred to by the complainant was received on the 2<sup>nd</sup> of June 2020 and logged within the complaint database on the 3<sup>rd</sup> of June 2020. Exchange of emails between LA and complainant shows communication from 2<sup>nd</sup> of June 2020 to 2<sup>nd</sup> of July 2020.

(The Lead officer for ALN) and colleagues had been working to explore the best way forward to find solutions to the difficulties the family faced. As part of this process, meetings had taken place with the lead officer, the family and/or the Assembly Member. Any questions raised in the meetings/communication by the family and/or Assembly Member have been investigated by the Local Education Authority (LEA) officers and/or lead officer and a response provided. Where discussions have taken place without the Assembly Member present. The lead officer ensured the Assembly Member was always kept up to date.

The timescale to find a suitable education setting for the children had taken longer than the complainant expected, but the LEA must follow the relevant policies/processes. An essential part of this process is to ensure all information has been received from all parties involved as this enables the LEA to gain a true understanding of how best we can support and identify the appropriate education setting that best suits the needs of both children. A setting for both children was identified.

The correspondence received in June 2020 was recorded by education and communication between the complainant and LA was maintained between June and July 2020. The LA worked with the complainant and/or Assembly Member to ensure the appropriate education setting was identified for both children.

Escalation to Stage 2 – A total of 45 points were raised within the Stage 2 complaint (23 for Child A, 21 for Child B and 1 relating to both children). In terms of the issues raised, all points were thoroughly investigated, and the complaint was not upheld:

#### **Lessons learnt:**

While the decision was made not to uphold the complaint in its entirety, there were areas where lessons will be learnt based on the following grounds:

Communication between school(s) and LA and parents can be improved. Expectations need to be clear and agreed between all parties to avoid doubt. Where expectations are not aligned or cannot be met this needs to be communicated clearly and the way forward agreed. Communication can be initiated by all parties, that is, the school, LA or parents.

The rationale for decision making needs to be clear. Where parents are unclear this must be raised in a timely way and clarified for the avoidance of doubt. Where decisions are made that are unclear there must be an agreed mechanism to raise any concerns and for these to be resolved before reaching a point of dispute or formal complaint.

Where requests are made for support or referrals made to other agencies parents should be aware of the outcome of such referrals through the relevant agencies process. If parents make any requests for support / involvement of other agencies through referrals and this is not deemed appropriate this should be clearly communicated. Where parents are able to make referrals this should be considered if the rationale provided is not agreed.

Statutory processes should be followed and where there is any change to timescales this should be clearly communicated with parents.

### 3. Identified relationships to Equalities or Welsh Language

#### Complaints that relate to the Equalities or Welsh Language protected characteristics

Characteristic Strand	Count Stage 1, Stage 2 & Escalated 1 to 2	Count Completed in Target Times	Percentage Completed in Target Times
Age	0	0	0
Disability	0	0	0
Gender Reassignment	0	0	0
Marriage and Civil Partnership	0	0	0
Pregnancy and Maternity	0	0	0
Race	0	0	0
Religion/Belief or Non-belief	0	0	0
Sex	0	0	0
Sexual Orientation	0	0	0
Welsh Language	0	0	0
<b>Totals</b>	<b>0</b>	<b>0</b>	<b>0</b>

No specific characteristics links have been identified for this reporting period

### 4. Annex – Referrals to Ombudsman, complaints resulting from appeals and examples of relevant items (points to note) specific to this reporting period

Complainant contacted the Ombudsman in relation to the LEA failing to provide a response under Stage 2 of the Corporate Complaint’s Policy. Copy of the response sent to the complainant was provided to the Ombudsman and as a result, no investigation was required.

#### For further information, please contact

Liam Miles  
01443 864833  
milesl@caerphilly.gov.uk



## Number of complaints by Stage Type, Service, and Targets Met

Table showing summary of complaints by stage type reference

Stage Type	Count	Count Completed in Target Times	Percentage Completed in Target Times
Stage 1	7	6	85%
Stage 2	2	2	100%
Escalated Stage 1 to 2	1	1	100%
<b>Totals</b>	<b>10</b>	<b>9</b>	<b>90%</b>

## Table showing how the complaints were received

By source	Count Stage 1	Count Stage 2	Count Escalated Stage 1 to Stage 2
Telephone	1	0	
Email	6	2	1
<b>Totals</b>	<b>7</b>	<b>2</b>	<b>1</b>

## Tables showing summary of complaints by service, for each stage type

Service	Count Stage 1	Count Completed in Target Times	Percentage Completed in Target Times
Customer Services	2	2	100%
Corporate Finance	4	3	75%
Other – Combined	1	1	100%
<b>Totals</b>	<b>7</b>	<b>6</b>	<b>85%</b>

Service	Count Stage 2	Count Completed in Target Times	Percentage Completed in Target Times
Legal Services	1	1	100%
Corporate Finance	1	1	100%
<b>Totals</b>	<b>2</b>	<b>2</b>	<b>100%</b>

Service	Count Escalated Stage 1 to Stage 2	Count Completed in Target Times	Percentage Completed in Target Times
Corporate Finance	1	1	100%
<b>Totals</b>	<b>1</b>	<b>1</b>	<b>100%</b>

Corporate Services complaints which are not Corporate Finance comprises of 1 complaint dealt with by Legal Services relating to a disability discrimination issue which was a stage 2, and 2 complaints for Customer Services which were both stage 1.

In relation to Corporate Finance one target date was not met for a stage 1 due to a combination of Cost of Living payments taking priority, other urgent service delivery pressures and staff taking annual leave.

## 1. Key complaints - Identified by Type or Theme

List of key specific types, or themes, of repetitive, or pertinent complaints received during this reporting period.

There have been no trends identified within corporate services and the complaints cover a range of issues including the following:-

Customer services dealt with two complaints which were concerning the following : - Delays in telephone calls being answered on main switchboard and Reception not able to call an officer to the reception from council tax as staff were not in the office

Legal services dealt with a complaint in relation to a Disability Discrimination issue.

There were no particular themes, of repetitive or pertinent complaints received in relation to Corporate Finance. For this period the Council Tax Section received the most complaints x 5, Housing Benefits x 1 and Accountancy x 1.

## 2. Number by of Complaints by Category

Table showing complaints by Commissioner Case Type, for prescribed Categories

Category	Count Stage 1, Stage 2 & Escalated 1 to 2
1 Collaborative Working	0
2 Decision Making	1
3 Delay in Service Provision	2
4 Officer/Contractors Conduct with public (including sensitivity/empathy of staff/politeness)	0
5a Following Council Policies	0
5b Following relevant Legislation	1
6 Accessibility of Services	2
7 Clarity/Accuracy/Timeliness of information	2
8 Quality of Work	1
9 Openness/ Fairness and Honesty	0
10 Compliance with Complaints procedure	0
11 Combination of categories	1
<b>Totals</b>	<b>10</b>

## 3. Number of Complaints by Outcome and Lessons Learned

Table showing number of complaints Upheld and Not Upheld

Service	Upheld	Not Upheld
Customer Services	1	1
Corporate Finance	3	4
Legal services	1	
<b>Totals</b>	<b>5</b>	<b>5</b>

The following table shows examples of lessons learned, with comments on key findings, resulting from the complaints in this reporting period, that may help curtail, prevent, or impede future repeats.

Nature of Complaint	Lessons Learned	Category
<p>Stage 1: Council Tax – Complaint re communications received from CCBC resulting in a Court Summons being issued against the complainant, causing distress, impacting their credit rating and reputational damage. In addition experienced poor service in trying to contact the council due to phone line issues and calls being dropped.</p>	<p>Despite staff being given written instructions by a Team Leader about the recovery action being taken during September which included court summonses being issued on 26/09/22, this council tax payer was wrongly advised they had until the end of September to pay their overdue monthly instalments to avoid further action and have their account reset to bill stage and their future monthly instalment plan reinstated. The Team Leader has reminded staff of the importance of digesting and understanding all instructions issued about work deadlines that may impact our customers. In mitigation, the Team has been dealing with Cost-of-Living Support payments to over 66,000 households alongside their full-time roles this year.</p>	<p>7 Clarity/ Accuracy/ Timeliness of information</p>
<p>Stage 1: Accountancy - Complainant being issued with a cheque on 2 separate occasions with the surname excluded. Was not able to pay cheque into her bank account because of this and had previously advised the Authority of this exclusion.</p>	<ol style="list-style-type: none"> <li>1. Review of software updates to ensure that they have been applied correctly.</li> <li>2. Ensure staff review the cheques produced to ensure they are correct prior to issue.</li> </ol>	<p>8 Quality of work</p>
<p>Stage 1: Combined (Customer Services/CT) – Complainant sent cheque for April's Council Tax payment and there was a delay in processing this. This happened before and 2 months cheques went through together. No one appears to be answering his calls when querying these issues and all he gets is a text messages saying he hasn't paid. Complainant angry with the whole service and sick of excuses why his calls are not answered.</p>	<p>There were no lessons to be learned on the Council Tax issues raised:</p> <ul style="list-style-type: none"> <li>• Phone lines were very busy at the time. We apologised and to avoid holding the line, we suggested he call back later in the day when we tend to receive fewer calls.</li> <li>• If he was to continue to post us cheque payments, we asked him to send future payments on or before the due date which is the 15<sup>th</sup> of each month to allow more time for his cheques to be processed before our reminder letters are issued just over 2 weeks later. As an alternative to overcome the problem of him receiving his pension towards the end of each month we suggested a Direct Debit on the 25<sup>th</sup> of each month which was subsequently set up and is ongoing at this time.</li> </ul>	<p>7 Clarity/ Accuracy/ Timeliness of information</p>
<p>Stage1: Customer services – Complaint was about the delay in the main switchboard answering telephone calls</p>	<p>A thorough investigation and testing was undertaken both internally and with telephony supplier but were not able to identify what happened, it appears this was an isolated incident caused by a glitch on the system. Our queues are also constantly monitored</p>	<p>3 Delay in Service provision</p>

	by managers to ensure calls are being dealt with efficiently'  If this was to happen again we would again undertake the above	
Stage 2: Legal Services – A Disability Discrimination complaint and claim was received as a service area had not issued correspondence in the requested format and this error was made on more than one occasion.	The complaint was upheld in that the responses were provided on the incorrect format on more than one occasion; an apology was given and a single point of contact was identified to prevent these errors from happening in future. Where possible changes to our automated systems would be introduced to identify the way we receive and respond to contacts. Based on the facts of the case the claim was rejected but a nominal offer was made as a time and trouble payment for having to raise the issue with us.	6 Accessibility of Services

#### 4. Identified relationships to Equalities or Welsh Language

Table showing a count and list of findings resulting from the complaints in this reporting period, that specifically relate to the Equalities or Welsh Language protected characteristics.

Characteristic Strand	Count Stage 1, Stage 2 & Escalated 1 to 2
Age	0
Disability	1
Gender Reassignment	0
Marriage and Civil Partnership	0
Pregnancy and Maternity	0
Race	0
Religion/Belief or Non-belief	0
Sex	0
Sexual Orientation	0
Welsh Language	0
<b>Totals</b>	<b>1</b>

#### 5. Annex – Referrals to Ombudsman, complaints resulting from appeals and examples of relevant items (points to note) specific to this reporting period

Service Area	Date received	Decision
Benefits	An email in April raising a complaint went into junk emails which was again received in May	Early Resolution – Apologise and confirm junk emails will be monitored in future.

#### For further information, please contact

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**Brief description of Directorate and Service Framework**

There are 2 key services, these being Adult Services and Children’s Services.

Adult Services provide a wide range of specialist services to members of the community over eighteen years of age, who experience difficulties on a day to day basis due to problems ranging from mental health, physical or sensory disability to drug and alcohol misuse.

Children’s Services provide a range of services to children, young people, and their families, in partnership with many other agencies and voluntary organisations. The overall aim is to support children and young people to remain living with their own families wherever this is safe to do so.

**1. Number of Complaints by Stage Type, Service, and Targets Met**

Stage Type	Count	Count Completed in Target Times	Percentage Completed in Target Times
Stage 1	22	21	95%
Stage 2	0	0	0%
Escalated Stage 1 to 2	2	0	0%
<b>Totals</b>	<b>24</b>	<b>21</b>	<b>87.5%</b>

Of the 2 that escalated from Stage 1 to 2, 1 was completed 3 days over timescale and the other 6 days over timescale. The Reason for the one being 6 days over timescale was to staff leave and their views were required in order to provide a full response to the complainant.

**Table showing how the complaints were received.**

By source	Count Stage 1	Count Stage 2	Count Escalated Stage 1 to Stage 2
Telephone	5	0	1
Email	11	0	0
Letter	5	0	1
On-line	1	0	0
Contact Centre	0	0	0
Other	0	0	0
<b>Totals</b>	<b>22</b>	<b>0</b>	<b>2</b>

**Tables showing summary of complaints by service, for each stage type**

Service	Count Stage 1	Count Completed in Target Times	Percentage Completed in Target Times
Adult Services	13	12	92%
Children’s Services	9	9	100%
<b>Totals</b>	<b>22</b>	<b>21</b>	<b>95%</b>

Service	Count Stage 2	Count Completed in Target Times	Percentage Completed in Target Times
Adult Services	0	0	0%
Children’s Services	0	0	0%
<b>Totals</b>	<b>0</b>	<b>0</b>	<b>0%</b>

The table above totals 0 as no complaints progressed straight to Stage 2.

Service	Count Escalated Stage 1 to Stage 2	Count Completed in Target Times	Percentage Completed in Target Times
Adult Services	2	0	0%
Children's Services	0	0	0%
<b>Totals</b>	<b>2</b>	<b>0</b>	<b>0%</b>

## 2. Key Complaints - Identified by Type or Theme

**List of key specific types, or themes, of repetitive, or pertinent complaints received during this reporting period.**

Allegations made despite being cleared by the Police

Refused a Disabled Persons Parking Place

How case is being dealt with and conflict of interest

Child's name taken off Child Protection Register

Care call for medication missed

Making too many phone calls

Parking outside resident's property

Length of time waiting for a care package

Assistance not provided without consent

Requested a change of arrangements as paying for services that are not being received

Delay in completing financial assessment

Care called missed

Care Homes fees

Assessment only focusses on negative issues

Refusal to provide support

Care not starting following hospital discharge

Withdrawal of care not communicated to family.

Connected/kinship carer issues

Care provided

Unhealthy obsession with case

Incorrect recording in Court paperwork

Incorrect information in report

Judgement made

Lack of support for family carers.

The type or themes identified above, have been extracted from the following table which shows the incoming number of complaints by specific service sectors or teams during this reporting period.

Service Group or Team	Count Stage 1, Stage 2 & Escalated 1 to 2
Adult Services	15
Children's Services	9
<b>Totals</b>	<b>24</b>

### 3. Number of Complaints by Category

Category	Count Stage 1, Stage 2 & Escalated 1 to 2
1 Collaborative Working	0
2 Decision Making	8
3 Delay in Service Provision	2
4 Officer/Contractors Conduct with public (including sensitivity/empathy of staff/politeness)	4
5a Following Council Policies	0
5b Following relevant Legislation	0
6 Accessibility of Services	0
7 Clarity/Accuracy/Timeliness of information	3
8 Quality of Work	4
9 Openness/ Fairness and Honesty	3
10 Compliance with Complaints procedure	0
11. Combination of Categories (Non-specific)	0
<b>Totals</b>	<b>24</b>

### 4. Number of Complaints by Outcome and Lessons Learned

Service	Upheld	Not Upheld
Adult Services	3	12
Children's Services	0	9
<b>Totals</b>	<b>3</b>	<b>21</b>

List of lessons learned. Comments on key findings resulting from the complaints in this reporting period, that may help curtail, prevent, or impede future repeats.

The lessons learnt below relate to the 3 complaints referred to in table 5 above that were upheld.

Nature of Complaint	Lessons Learnt	Category
Staff from the day centre opposite complainant's home are parking outside complainant's home when she needs access 24/7 to her home as she is disabled.	Apology provided to complainant for any disruption caused. Staff reminded to be considerate towards residents in the street and park in the day centre car park and not outside residents' homes.	4. Officer/Contractors Conduct with public (including sensitivity/empathy of staff/politeness)
Complainant unhappy with the amount of time it has taken for her grandmother to have carers put in place.	Delayed due to demand on service and staff vacancies.	3. Delay in Service Provision
Complainant unhappy with the level of care provided to grandfather by private provider. Has made many complaints to the provider but nothing has been done.	Matters had not been previously raised with provider or Social Services. In respect of current matter regarding bed sheets not being changed. Apology provided to service user and family for this oversight and that service user did not receive the standard of service that we would have expected him to receive from a commissioned service. Carers reminded to change bed sheets.	8. Quality of Work

The Directorate is committed to learning from complaints received in order to influence positive change. Information from complaints is an invaluable source of user feedback. The Directorate makes the best use of this information about complaints and uses the results to inform policy and ensure that practice is changed in response to highlighted areas of concern, this is done in discussion with Senior Management to agree an action plan to address the issues.

## 6. Identified relationships to Equalities or Welsh Language

Table showing a count and list of findings resulting from the complaints in this reporting period, that specifically relate to the Equalities or Welsh Language protected characteristics.

Characteristic Strand	Count Stage 1, Stage 2 & Escalated 1 to 2
Age	0
Disability	0
Gender Reassignment	0
Marriage and Civil Partnership	0
Pregnancy and Maternity	0
Race	0
Religion/Belief or Non-belief	0
Sex	0
Sexual Orientation	0
Welsh Language	0
<b>Totals</b>	<b>0</b>



**5. Annex – Referrals to Ombudsman, complaints resulting from appeals and examples of relevant items (points to note) specific to this reporting period**  
**Identify how many referrals to the Ombudsman and list and append any relevant supplementary information here, namely, points to note, or an example data set.**

1 referral was made to the Ombudsman relating to Corporate/Social Services complaints. Of the Corporate/Social Services complaints in the table below the decision was made not to investigate matters in this case.

<b>Reference</b>	<b>Outcome</b>	<b>Details of Early Resolution/recommendations</b>
OMB04	Not Investigating	No Further Action

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## **GOVERNANCE AND AUDIT COMMITTEE – 24<sup>TH</sup> JANUARY 2023**

**SUBJECT:           AUDIT WALES REPORT – HOMELESSNESS –  
CAERPHILLY COUNTY BOROUGH COUNCIL**

**REPORT BY:       CORPORATE DIRECTOR SOCIAL SERVICES AND  
HOUSING**

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### **1.     PURPOSE OF REPORT**

1.1     The purpose of this report is to inform members of the information held / findings and recommendations within the Audit Wales Report into Homelessness with the CCBC which was published in November 2022.

### **2.     SUMMARY - WHAT WAS REVIEWED AND WHY**

2.1     In January 2018 , the Auditor General’s Report on How Local Government Manages Demand – Homelessness , identified that Local Authorities are reacting to the problems caused by homelessness with varying degrees of success and that there is limited focus on preventing homelessness.

2.2     The above report highlighted that current legislative frameworks focussed on preventing homelessness but that not all authorities have effectively organised themselves to implement the new duties and that local authorities and partners needed to focus on this and within their strategic priorities.

2.3     Since March 2020 , the Covid 19 pandemic and more recently the Ukraine Crisis and Cost Of living Crisis has placed increased pressures on the Councils Homelessness services. This has resulted in an increase in presentations of homelessness with the number being accepted as Homeless and in priority need and unintentionally homeless having doubled in the last year.

2.4     The increase in presentations and the increase in statutory duties to provide accommodation has led to the need to increase temporary accommodation provision and as such requires more support and resourcing to deliver.

2.5     It has been noted that during the latter part of 2021 to current day the Council has been facing several external factors that are negatively impacting the numbers of households who are seeking support from the Housing Solutions Service of which include:

- The ending of the UK Governments Furlough Scheme
- The ending of the Universal Credit top up
- Escalating utility costs , rising inflation
- New/ changing legislation such as Renting Homes (Wales) Act 2016 and the addendum to the Priority Need Order for an 11<sup>th</sup> Category to Include those who are determined as Rough Sleeping/ Sleepers
- Increasing numbers of Ukraine refugees and other asylum seekers

2.6 These factors and pressures have impacted the Councils ability to prevent homelessness, with a fall in the percentage of households who have successfully had their application prevented falling from 73.1% in 2019-2020 to 62.18% in 2021-2022.

2.7 The Auditor General's Report 2018 identified that homelessness was more than a housing problem with much of what causes it being outside the control and influence of Local authority homeless services. However, the statutory duty to prevent homelessness and address Homelessness under the Housing Wales Act 2014 lies with the local authority and its Homelessness team and a multi-agency approach is required to deliver this.

2.8 Over the last year Welsh Government have requested that Councils document their plans for addressing homelessness via Rapid Rehousing Transitional Planning and Housing Support Programme Strategies.

2.9 Therefore the audit review has sought to answer the question: "In seeking to address homelessness, is the council effectively adapting its strategic intent to deliver a long term sustainable preventative approach?" A key focus of the audit was on how the Council is working with its partners to deliver its homelessness ambitions.

2.10 In undertaking the review from May 2022- August 2022 Officers had access to documents, interviews with staff, Councillors and partners and a workshop was facilitated with key homelessness partners .

### **3. RECOMMENDATIONS**

3.1 Members are requested to note the content and findings and recommendations of the Audit Wales Report and any update in response to this provided by the Housing Solutions Manager.

### **4. REASONS FOR THE RECOMMENDATIONS**

4.1 The report is for information and scrutiny at this time and will be reviewed in accordance with the Local Authorities Governance and audit procedures for monitoring purposes.

## **5. THE REPORT: FINDINGS AND RECOMMENDATIONS**

- 5.1 The Report found that whilst tackling homelessness is an important priority for the council, it is yet to fully develop a sustainable and preventative approach to achieve this and the following factors have been drawn upon in the report to reach this conclusion.
- 5.2 Homelessness is a strategic priority for the Council and this is outlined in several strategic plans which it intends to develop with key partners.
- 5.2.1 Preventing Homelessness is highlighted in the Councils Corporate Plan 2018-2023. A cabinet member has a specific housing portfolio that includes homelessness which supports its long term strategic priorities.
- 5.2.2 The Council has made a commitment to building and acquiring more affordable accommodation by 2025.
- 5.2.3 The Council has several strategies and plans in place to comply with WG requirements which include Rapid Rehousing Transitional Plan (RRTP), Local Housing Strategy and Housing Support Programme (HSP) Strategy.
- 5.2.4 Engagement with partners and stakeholders has been undertaken in developing these plans and for the Rapid Rehousing Transitional Plan a Strategic Board will be set up to monitor the plan and its delivery and to support an effective multi agency approach to preventing and reducing homelessness.
- 5.2.5 Several supporting plans are in the process of being drawn up to further outline aspects of the Council's strategic intent around homelessness.
- 5.3 There are many complex and difficult issues facing the homeless in Caerphilly, and while the Council is aware of them, its plans to address these issues are yet to be fully implemented.
- 5.3.1 The report found the council has an improved retrospective and current understanding of its homelessness position from its own internal information and the needs analysis and data drawn for RRTP and HSP .
- 5.3.2 Some of the key factors recognised in the report that are impacting the current homeless provision within the borough include:
- The increasing number and complexity of cases which the housing solutions team have to deal with and how this can negatively impact staff wellbeing. Our RRTP sets out how we may look to review current process and resource to support and address this.
  - Lack of single person accommodation in the borough. The council is looking to maximise through its own new build plans and through the private rental sector to improve stock availability .
  - Existing accommodation is often unsuitable this can impact the councils

preventive ambitions. Actions to remedy this are being considered across all housing sectors of which some are highlighted in the RRTP and other Strategies.

- There is recognition that the current Common Allocation Policy may not focus appropriately on those in most need. Action – this is currently being reviewed with plans to undertake a Common Allocation Policy review in 2023 to ensure that it is reflective of need and demand going forward.
- There is a legacy of an increase in the use of temporary accommodation due to the mandate from WG to adopt the everyone in ethos during the pandemic.
- Current factors highlighted earlier in the report will have an impact and increase on pressures on the service.
- The work undertaken by Crisis in 2021 has provided the Council with a more comprehensive understanding of the homelessness environment. The Council is in the process of implementing some of the findings of this commissioned work by Crisis and are adopting some quick wins and looking at some longer term strategies.
- However, the council still needs to develop an understanding of the future of homelessness outlook to be able to plan effectively.

5.4 More needs to be done, building on the way the Council is using integrated preventative work with partners to address future demand from homeless individuals.

5.4.1 The Housing Support Grant funding has supported the council to deliver and develop many initiatives with internal and external partners. This helps to support the preventative approach to reducing homelessness and supporting people as the HSG is heavily relied upon to fund the staffing resource within the team.

5.4.2 Recognition was noted that due to the WG directive during the pandemic of the “no one left out approach” the council has focused on a crisis led service rather than on prevention, therefore a greater focus on preventative approaches now needs to be undertaken. The Housing Solutions Rapid Rehousing Plan sets out the need to refocus on early intervention and prevention and the previous Homeless Project Plan in October 2021 also set out prevention as its key priority .

5.4.3 There is commitment to ensure that there is a greater focus on identifying and meeting the needs of specific client groups and this is highlighted in the RRTP.

5.5 The Council has positive relationships with many of its partners. Some have identified areas that could be improved further to help prevent and reduce homelessness but the council is yet to take action.

5.5.1 The Council has key internal partnerships set up to deliver its homeless ambitions and the despite the Supporting People / Housing Support Grant team and Homelessness / Housing Solutions Team being in two different service areas they are well integrated.

5.5.2 The partners who were consulted as part of the review were very positive about their relationship with the council. Several examples of shared homelessness projects were provided and it reflected on the ability to engage with Council officers on a day to day basis.

- 5.5.3 Several examples of this were noted during the Audit review :
- The recent collaboration with Willmott Dixon to build energy efficient homes
  - Caerphilly Keys the Private Rented Scheme run by the Council.
  - Joint funded initiatives like the Nurse Practitioner based at a GP surgery focusing on Homeless people.
  - Psychology staff based in a homeless unit where they look at the root cause of why a person becomes homeless.
  - Proactive relationships between the health boards mental health and learning disabilities team and the Councils Homelessness And supporting people service.
  - The development of a Debt relief order process in conjunction with Citizens Advice and the homelessness team.
- 5.6 The council is proactive in seeking to increase its resources and is developing its understanding of its future resource requirements .
- 5.6.1 Success can be seen in the Council's ability to draw down WG grants to support some of their homelessness initiatives. Examples of this are the current bids being submitted to WG under the transitional capital funding to support the accommodation needs of both Ukraine and homeless households and the £3.1 million WG Innovation Housing Programme to deliver 18 new single bed units within the borough.
- 5.6.2 The cost of temporary accommodation to the council as a result of the pandemic is at an all-time high, whilst previously WG have provided a hardship fund to support these costs this ended in March 2022 and whilst smaller awards are offered this will remain a financial pressure on the Council's resources. The RRTP highlights how it plans to reduce the dependency on temporary accommodation and how this may be more regulated but there is recognition that due to back logs within the system with placements and lack of move on this will take time to deliver and achieve .
- 5.6.3 There is Member support for the strategic plans of the Council such as developing more single person accommodation but costs are yet to be fully defined and approved by Members.
- 5.6.4 The Council has indicated that the new Corporate Plan will include a focus on Homelessness. It will be important that any proposals for homelessness contained with the corporate plan and other homeless plans are fully reflected with its revised MTFP to ensure appropriate resourcing matches ambition.
- 5.6.5 Key senior officers within the housing team are fairly new in post and are currently taking stock on the structure and service design of the Caerphilly Homes to support the delivery of a number of the strategies already referenced in the report. This will require approval of a business case which will be prioritised against competing council resources.
- 5.7 The Council has a framework for monitoring and evaluating its progress on its homelessness ambition . However, the effectiveness of this is impeded by the absence of key milestones and targets.
- 5.7.1 Whilst the current suite of plans and strategies have short- medium focus, many of

the initiatives are focused on addressing need over the longer term.

- 5.7.2 As part of the Council's Directorate Performance, Homelessness is monitored , however this framework does not include medium – longer term milestones which means the Council is not able to fully assess the progress that is being made on addressing homelessness.
- 5.7.3 The Rapid Rehousing Transitional Plan has recently been taken to Cabinet on the 7<sup>th</sup> September 2022. This will replace the previous Homeless Project Plan that was presented to Cabinet in November 2021 which outlines the key priorities and objectives for the Housing Solution Team in tackling prevention of Homelessness.
- 5.7.4 The Housing Directorate is investing in a new IT solution which its hoped will provide more granular data around housing and homelessness to support its decision making. A new post has also recently been created to look at improving housing data, focusing on its fitness for purpose and any data gaps to help support better understanding of performance.
- 5.8 Two key recommendations to improve the Councils ability to understand its performance and drive improvement have been made by Audit Wales following completing the review and compiling the report .
- 5.8.1 Recommendation 1 – Strengthen its planning and monitoring for homelessness:
- Better use of forecasting and benchmarking data
  - Setting a clear longer term vision to meet challenging need
  - Developing clear milestones and targets to assess its progress
  - Identify measures to evaluate the impact on its prevention activity
  - Ensure the required medium- long term resources are reflected in its medium term financial plan.
- 5.8.2 Recommendation 2 – Continue to work with its partners ( internal and external) to address some key areas for improvements
- Engaging partners early in the development of key plans, strategies and developments.
  - Improving the dialogue with partners with what constitutes a “reasonable offer of accommodation”
- 5.9 Conclusions**
- 5.9.1 The Council accept the finding and recommendations in the report and have already started to look at how these recommendations may be adopted some of these include the following:-
- Specialist officers within the Housing Solution Team to target service delivery for those with more complex needs to prevent homelessness more successfully.



- Improved IT and data collection to be able to utilise this in longer term planning when considering service delivery and need.
- The RRTP sets out the services fundamental objectives in how it will tackle homelessness and a strategic board is being set up to monitor and support this. In addition a RRTP co -Ordinator is being recruited to support the Housing Solutions Manager in its delivery.
- Milestones for monitoring its delivery and success will be set against the RRTP objectives.
- A new officer appointed to look at data and performance.
- Affordable Homes Partnership quarterly meetings are in place to look at future development and need within the borough.
- Homelessness quarterly board meetings are being reintroduced with key partners .

## **6. ASSUMPTIONS**

- 6.1 No assumptions have been made in producing this report as it is based on the findings of the Audit Wales Report.

## **7. SUMMARY OF INTEGRATED IMPACT ASSESSMENT**

- 7.1 An IIA is not required at this time as the report is for information only.

## **8. FINANCIAL IMPLICATIONS**

- 8.1 As highlighted in the report there is an immediate financial planning concern as well as the potential impact of mid to longer term finances in meeting certain provisions such as temporary accommodation. This is compounded by the withdrawal of the WG hardship fund in the last financial year which was replaced with a much smaller grant. This year we are projecting a £1.6m overspend and £1.9m the following year.
- 8.2 It is also worth noting that on average , funding from Housing Benefit only funds about 20% of the cost of a B&B placement (which is part of the reason the overspend is so high together with the increased placements).
- 8.3 Given the current Budget restraints on the Council as whole at this time then in order to achieve effective prevention of homelessness the Council will need to ensure that the service is adequately resourced and financed going forward to achieve this.

## **9. PERSONNEL**

- 9.1 There is a need to consider additional personnel to achieve the ambitions set out to prevent homelessness.

- 9.2 Funding for these posts is currently being explored via the Housing Support Grant or where eligible WG .
- 9.3 Staff wellbeing and morale has been highlighted within the report as a concern and with presentations remaining static and with an increase in complex cases there is concern that staff may decide to seek alternative employment as a result of these pressures.
- 9.4 Ongoing measures are being considered to ensure that staff are supported to manage both case volumes and complexities and the introduction of some specialist roles will assist with this.
- 9.5 Regular 1:1s are held with staff to review wellbeing and cases and monthly team meetings occur to update staff and reflect best and poor practice.

## **10. CONSULTATIONS**

- 10.1 Responses from the consultees named below have been included in this report.

## **11. STATUTORY POWER**

- 11.1 N/A

Author: Kerry Denman, Housing Solutions Manager  
(Email: denmak@caerphilly.gov.uk , Tel: 01443 873544)

Consultees: Lay Member Nigel Yates, Chair Governance and Audit Committee  
 Cllr Ceri Wright, Vice Chair Governance and Audit Committee  
 Cllr Shayne Cook, Cabinet Member for Housing  
 Cllr Andrew Whitcombe, Chair of Housing and Regeneration Scrutiny Committee  
 Cllr Mrs Patricia Cook, Vice Chair of Housing and Regeneration Scrutiny Committee  
 Christina Harrhy, Chief Executive  
 Dave Street, Corporate Director Social Services and Housing  
 Richard (Ed) Edmunds, Corporate Director of Education and Corporate Services  
 Nick Taylor-Williams, Head of Housing  
 Sadie O'Connor, Senior Housing Advice Officer  
 David Francis, Senior Allocations Officer  
 Lee Clapham, Emergency Housing Officer  
 Shelly Jones, Supporting People Manager  
 Fiona Wilkins, Housing Services Manager  
 Jane Roberts-Waite, Co-ordination and Strategy Manager  
 Claire Davies, Private Sector Housing Manager  
 Robert Tranter, Head of Legal Services and Monitoring Officer  
 Stephen R Harris, Head of Finance and Section 151 Officer  
 Lesley Allen, Principal Accountant (Housing)  
 Jason Fellows, Housing Repairs Operations Manager  
 Alan Edmunds, Planned Asset Management/WHQS Manager

Background Papers:

Rapid Rehousing Transitional Plan  
Homeless Project Plan  
Local Housing Strategy  
Housing Support Program Strategy  
Renting Homes (Wales) Act 2016

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## **GOVERNANCE AND AUDIT COMMITTEE – 24<sup>TH</sup> JANUARY 2023**

**SUBJECT: REGULATION OF INVESTIGATORY POWERS ACT 2000**

**REPORT BY: HEAD OF DEMOCRATIC SERVICES AND DEPUTY MONITORING  
OFFICER**



### **1. PURPOSE OF REPORT**

- 1.1 To advise Members of the numbers of covert surveillance operations undertaken by the Council in accordance with the provisions of the Regulation of Investigatory Powers Act 2000 (RIPA) for the period 1<sup>st</sup> October 2022 to 31<sup>st</sup> December 2022.

### **2. SUMMARY**

- 2.1 To provide an update on the number of operations undertaken in accordance with RIPA for the period 1<sup>st</sup> October 2022 to 31<sup>st</sup> December 2022.

### **3. RECOMMENDATIONS**

- 3.1 None. This report is for information only.

### **4. REASONS FOR THE RECOMMENDATIONS**

- 4.1 To ensure compliance with statutory requirements.

### **5. THE REPORT**

- 5.1 The Regulation of Investigatory Powers Act 2000 (RIPA) sets out strict controls for public authorities wishing to carry out covert surveillance of individual members of the public as part of their exercise of their statutory functions. In addition to this Act, advice and guidance is found within the Codes of Practice issued by the Investigatory Powers Commissioner's Office.
- 5.2 The Authority has a corporate policy, which provides guidance on how surveillance should be used by the relevant officers.
- 5.3 Public Authorities undertaking covert surveillance of individual members of the public

are subject to inspection by the Investigatory Powers Commissioner's Office.

5.4 Members are advised that for the period 1<sup>st</sup> October 2022 to 31<sup>st</sup> December 2022 there has been one RIPA operation undertaken which related to the sale of alcohol to children under the age of 18.

#### 5.5 **Conclusion**

The report advises members that there has been one RIPA application made in relation to the sale of alcohol to children under the age of 18 for the period 1<sup>st</sup> October 2022 to 31<sup>st</sup> December 2022.

### 6. **ASSUMPTIONS**

6.1 There are no assumptions contained in this report.

### 7. **SUMMARY OF INTEGRATED IMPACT ASSESSMENT**

7.1 As this report is for information there is no requirement for an Integrated Impact Assessment to be completed.

### 8. **FINANCIAL IMPLICATIONS**

8.1 There are no financial implications arising from this report.

### 9. **PERSONNEL IMPLICATIONS**

9.1 There are no personnel implications arising from this report.

### 10. **CONSULTATIONS**

10.1 There has been no consultation undertaken on this report as it is for information only.

### 11. **STATUTORY POWER**

11.1 Regulation of Investigatory Powers Act 2000.

Author: Lisa Lane Head of Democratic Services and Deputy Monitoring Officer

Consultees: Robert Tranter Head of Legal Services and Monitoring Officer



## **GOVERNANCE AND AUDIT COMMITTEE – 24<sup>TH</sup> JANUARY 2023**

**SUBJECT: OFFICERS DECLARATIONS OF GIFTS AND HOSPITALITY  
APRIL TO JUNE 2022**

**REPORT BY: HEAD OF PEOPLE SERVICES**

### **1. PURPOSE OF REPORT**

- 1.1 The purpose of the report is to provide the Governance and Audit Committee with information regarding the Register of Employees' Interests Forms completed by officers of the Council (excluding Schools) regarding Gifts and Hospitality for the period 1 April to 30 June 2022 ie the first quarter of the financial year 2022/2023 and a comparison with the previous three quarters.

### **2. SUMMARY**

- 2.1 Enclosed as Appendix 1 is a list of Register of Employees' Interests Forms in respect of Gifts and Hospitality completed by officers of the Council (excluding Schools) for the period 1 April to 30 June 2022.

### **3. RECOMMENDATIONS**

- 3.1 The Governance and Audit Committee are asked to note the contents of this report.

### **4. REASONS FOR THE RECOMMENDATIONS**

- 4.1 The recommendation is designed to ensure members of the Governance and Audit Committee have an oversight of the position in relation to officers' Gifts and Hospitality.

### **5. THE REPORT**

- 5.1 The Council's Code of Conduct for Employees sets out guidance for employees on a range of issues, including the completion of a Register of Employee Interests form, which help maintain and improve the high standards of conduct within Local Government and protect employees from misunderstandings and confusion.

- 5.2 Completed Register of Employees' Interests forms are submitted to Heads of Service, Directors or the Chief Executive who countersign the forms to show they are aware of the declaration. The form also records details of any controls / action taken to protect the Council's interests in the circumstances outlined on the form. A copy of the countersigned form is given to the employee and a copy sent to Human Resources for filing on the employee's personal file.
- 5.3 The Head of Service, Director or Chief Executive retains the original form and maintains a summary spreadsheet to record the forms. On a monthly basis the summary spreadsheet or a nil return is submitted to Human Resources for collation and monitoring for consistency and compliance.
- 5.4 In accordance with the Council's Code of Conduct for Employees, Gifts / Hospitality of less than £25 may be accepted by the employee but any Gift / Hospitality which could be seen by a third party as placing the employee under an improper obligation such as more than one Gift / Hospitality from the same party must be refused, irrespective of its value.
- 5.5 Employees may accept small offers of Hospitality only where the activity is of a nature where there is a genuine need to impart information or to represent the Council in the community. Offers to attend purely social or sporting functions should be accepted only when these are part of the life of the community or where the Council should be seen to be represented.
- 5.6 The table below details the number of declarations regarding Gifts submitted by Directorate for the period 1 April to 30 June 2022 and the previous three quarters for comparison.

<b>Directorate</b>	<b>April – June 2022</b>	<b>Jan – March 2022</b>	<b>Oct – Dec 2021</b>	<b>July - Sept 2021</b>
<b>Economy and Environment</b>	1	0	2	1
<b>Education and Corporate Services</b>	0	0	0	0
<b>Social Services and Housing</b>	2	0	0	1
<b>Total</b>	<b>3</b>	<b>0</b>	<b>2</b>	<b>2</b>



5.7 The table below details the number of declarations regarding Hospitality submitted by Directorate for the period 1 April to 30 June 2022 and the previous three quarters for comparison.

Directorate	April – June 2022	Jan – March 2022	Oct – Dec 2021	July – Sept 2021
Economy and Environment	0	0	1	0
Education and Corporate Services	0	0	0	0
Social Services and Housing	0	0	0	0
<b>Total</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>0</b>

## 5.8 Conclusion

The Head of People Services will continue to monitor the declarations submitted and work with Heads of Service to improve their understanding, promote best practice and corporate compliance of the Code of Conduct where appropriate.

## 6. ASSUMPTIONS

6.1 There are no assumptions made within this report.

## 7. SUMMARY OF INTEGRATED IMPACT ASSESSMENT

7.1 As this report is for information only an Integrated Impact Assessment is not required.

## 8. FINANCIAL IMPLICATIONS

8.1 None.

## 9. PERSONNEL IMPLICATIONS

9.1 The personnel implications are included in this report.

## 10. CONSULTATIONS

10.1 There are no consultation responses that have not been included in the report.

## 11. STATUTORY POWER

11.1 Local Government Act 2000.

Author: Lynne Donovan, Head of People Services  
(donovl@caerphilly.gov.uk)

Consultees: Richard Edmunds, Corporate Director – Education and Corporate Services  
(edmunre@caerphilly.gov.uk)  
Robert Tranter, Head of Legal Services and Monitoring Officer  
(trantrj@caerphilly.gov.uk)  
Stephen Harris, Head of Financial Services and Section 151 Officer  
(harrisr@caerphilly.gov.uk)  
Cllr Nigel George, Cabinet Member for Corporate Services and Property  
(nigelgeorge@caerphilly.gov.uk)

Appendices:  
Appendix 1 Declarations of Gifts and Hospitality 1 April to 30 June 2022

**Appendix 1**  
**Declarations of Gifts and Hospitality 1 April to 30 June 2022**

<b>Directorate</b>	<b>Service Area</b>	<b>Post Title of Employee Making the Declaration</b>	<b>Type of Declaration</b>	<b>Details of Declaration</b>	<b>Post Title of Head of Service, Director or Chief Executive who authorised the declaration</b>	<b>Outcome</b>
Economy and Environment	Public Protection	Trading Standards Officer	Gift	Cheque £500.00 from Chartered Trading Standards Institute. Award for highest scoring candidate in final Trading Standards Officer exams 2021.	Head of Public Protection Community and Leisure Services	Accepted
Social Services and Housing	Caerphilly Homes	Estate Management Officer	Gift	Dior Savage toiletries from a tenant. Approximate value £20-£25.	Head of Housing	Accepted Donated to the Mayors Charity
Social Services and Housing	Caerphilly Homes	Estate Management Officer	Gift	Bottle of Jamesons Whiskey from a tenant. Approximate value £25.	Head of Housing	Accepted Donated to the Mayors Charity

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## **GOVERNANCE AND AUDIT COMMITTEE – 24<sup>TH</sup> JANUARY 2023**

**SUBJECT: OFFICERS DECLARATIONS OF GIFTS AND HOSPITALITY  
JULY TO SEPTEMBER 2022**

**REPORT BY: HEAD OF PEOPLE SERVICES**

### **1. PURPOSE OF REPORT**

- 1.1 The purpose of the report is to provide the Governance and Audit Committee with information regarding the Register of Employees' Interests Forms completed by officers of the Council (excluding Schools) regarding Gifts and Hospitality for the period 1 July to 30 September 2022 ie the second quarter of the financial year 2022/2023 and a comparison with the previous three quarters.

### **2. SUMMARY**

- 2.1 Enclosed as Appendix 1 is a list of Register of Employees' Interests Forms in respect of Gifts and Hospitality completed by officers of the Council (excluding Schools) for the period 1 July to 30 September 2022.

### **3. RECOMMENDATIONS**

- 3.1 The Governance and Audit Committee are asked to note the contents of this report.

### **4. REASONS FOR THE RECOMMENDATIONS**

- 4.1 The recommendation is designed to ensure members of the Governance and Audit Committee have an oversight of the position in relation to officers' Gifts and Hospitality.

### **5. THE REPORT**

- 5.1 The Council's Code of Conduct for Employees sets out guidance for employees on a range of issues, including the completion of a Register of Employee Interests form, which help maintain and improve the high standards of conduct within Local Government and protect employees from misunderstandings and confusion.

- 5.2 Completed Register of Employees' Interests forms are submitted to Heads of Service, Directors or the Chief Executive who countersign the forms to show they are aware of the declaration. The form also records details of any controls / action taken to protect the Council's interests in the circumstances outlined on the form. A copy of the countersigned form is given to the employee and a copy sent to Human Resources for filing on the employee's personal file.
- 5.3 The Head of Service, Director or Chief Executive retains the original form and maintains a summary spreadsheet to record the forms. On a monthly basis the summary spreadsheet or a nil return is submitted to Human Resources for collation and monitoring for consistency and compliance.
- 5.4 In accordance with the Council's Code of Conduct for Employees, Gifts / Hospitality of less than £25 may be accepted by the employee but any Gift / Hospitality which could be seen by a third party as placing the employee under an improper obligation such as more than one Gift / Hospitality from the same party must be refused, irrespective of its value.
- 5.5 Employees may accept small offers of Hospitality only where the activity is of a nature where there is a genuine need to impart information or to represent the Council in the community. Offers to attend purely social or sporting functions should be accepted only when these are part of the life of the community or where the Council should be seen to be represented.
- 5.6 The table below details the number of declarations regarding Gifts submitted by Directorate for the period 1 July to 30 September 2022 and the previous three quarters for comparison.

<b>Directorate</b>	<b>July – Sept 2022</b>	<b>April – June 2022</b>	<b>Jan – March 2022</b>	<b>Oct – Dec 2021</b>
<b>Economy and Environment</b>	0	1	0	2
<b>Education and Corporate Services</b>	0	0	0	0
<b>Social Services and Housing</b>	1	2	0	0
<b>Total</b>	<b>1</b>	<b>3</b>	<b>0</b>	<b>2</b>

5.7 The table below details the number of declarations regarding Hospitality submitted by Directorate for the period 1 July to 30 September 2022 and the previous three quarters for comparison.

<b>Directorate</b>	<b>July – Sept 2022</b>	<b>April – June 2022</b>	<b>Jan – March 2022</b>	<b>Oct – Dec 2021</b>
<b>Economy and Environment</b>	0	0	0	1
<b>Education and Corporate Services</b>	0	0	0	0
<b>Social Services and Housing</b>	0	0	0	0
<b>Total</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>

## 5.8 Conclusion

The Head of People Services will continue to monitor the declarations submitted and work with Heads of Service to improve their understanding, promote best practice and corporate compliance of the Code of Conduct where appropriate.

## 6. ASSUMPTIONS

6.1 There are no assumptions made within this report.

## 7. SUMMARY OF INTEGRATED IMPACT ASSESSMENT

7.1 As this report is for information only an Integrated Impact Assessment is not required.

## 8. FINANCIAL IMPLICATIONS

8.1 None.

## 9. PERSONNEL IMPLICATIONS

9.1 The personnel implications are included in this report.

## 10. CONSULTATIONS

10.1 There are no consultation responses that have not been included in the report.

## 11. STATUTORY POWER

11.1 Local Government Act 2000.

Author: Lynne Donovan, Head of People Services  
(donovl@caerphilly.gov.uk)

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Appendices:  
Appendix 1 Declarations of Gifts and Hospitality 1 July to 30 September 2022



**Appendix 1**  
**Declarations of Gifts and Hospitality 1 July to 30 September 2022**

<b>Directorate</b>	<b>Service Area</b>	<b>Post Title of Employee Making the Declaration</b>	<b>Type of Declaration</b>	<b>Details of Declaration</b>	<b>Post Title of Head of Service, Director or Chief Executive who authorised the declaration</b>	<b>Outcome</b>
Social Services and Housing	Caerphilly Homes	Estate Management Officer	Gift	Three bunches of flowers from a tenant. Approximate value £7.29.	Head of Housing	Accepted

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