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For all enquiries relating to this agenda please contact Sharon Hughes  
(Tel: 01443 864281 Email: [hughesj@caerphilly.gov.uk](mailto:hughesj@caerphilly.gov.uk))

**Date: 1<sup>st</sup> November 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, 7th November, 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', enclosed in a large, loopy oval shape.

**Christina Harrhy**  
CHIEF EXECUTIVE

## A G E N D A

	Pages
1 To receive apologies for absence.	

A greener place Man gwyrdach



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 12th September 2023. 1 - 6

To receive and consider the following reports: -

- 4 Governance and Audit Committee Forward Work Programme. 7 - 20
- 5 Audit Wales Programme and Timetable - Caerphilly County Borough Council. 21 - 38
- 6 Annual Report on the Corporate Complaints received for the period 1st April 2022 to 31st March 2023. 39 - 84
- 7 Internal Audit Services - Update on Progress 2023/24. 85 - 102
- 8 Corporate Risk Register Quarter 2 Update. 103 - 112

To receive and note the following information item: -

- 9 Officers Declarations of Gifts and Hospitality July to September 2023. 113 - 118

*\*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 Sharon Hughes, 01443 864281, by 10.00 a.m. on Tuesday 7<sup>th</sup> November 2023.*

**Circulation:**

Councillors M.A. Adams, Mrs E.M. Aldworth, A. Broughton-Pettit, M. Chacon-Dawson, E. Davies, G. Enright, J. Taylor and C. Wright (Vice Chair)

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

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 12<sup>TH</sup> SEPTEMBER 2023 AT 2.00 P.M.

PRESENT:

Councillors:

M. Chacon-Dawson, G. Enright, and C. Wright (Vice Chair)

Lay Members:

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

Together with:

Officers: S. Harris (Head of Financial Services and S151 Officer), D. Gronow (Acting Internal Audit Manager), R. Roberts (Business Improvement Manager), N. Roberts (Principal Group Accountant), and J. Lloyd (Committee Services Officer).

S.J. Byrne, M. Jones, and I. Phillips (Audit Wales).

Also in attendance: Councillor P. Leonard.

#### RECORDING AND VOTING ARRANGEMENTS

The Vice 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. TO APPOINT A CHAIR FOR THE ENSUING YEAR

It was moved and seconded that Lay Member Mr. M. Rees be appointed as Chair and by way of Microsoft Forms this was unanimously agreed.

RESOLVED that Lay Member Mr. M. Rees be appointed as Chair of the Governance and Audit Committee for the ensuing year.

Mr M. Rees thanked the Vice Chair for covering the meetings to date and thanked Mr N. Yates for chairing the Governance and Audit Committee. He also thanked all for supporting the nomination for the appointment of Chair. Mr Rees proposed to include an action sheet for the Governance and Audit Committee meetings and the continuous self-assessment within audit. Mr Rees also informed Members of proposed CIPFA training for Members in due course.

## **2. TO RECEIVE APOLOGIES FOR ABSENCE**

Apologies for absence were received from Councillors M.A. Adams, Mrs E.M. Aldworth, A. Broughton-Pettit, P. Cook, and J. Taylor.

## **3. DECLARATIONS OF INTEREST**

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

## **4. MINUTES – 11<sup>TH</sup> JULY 2023**

It was moved and seconded that the minutes of the Governance and Audit Committee held on 11<sup>th</sup> July 2023 be approved as a correct record, and by way of Microsoft Forms (and in noting there were 4 For, 0 Against, and 2 Abstentions) this was agreed by the majority present.

RESOLVED that the minutes of the meeting held on 11<sup>th</sup> July 2023 (minute nos. 1-16) be approved as a correct record.

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

The Head of Financial Services and S151 Officer presented the Governance and Audit Committee Forward Work Programme for the period September 2023 to June 2024. Members were advised that the document is live, and items can be added or removed on request, noting that an Action Sheet would be included with the Forward Work Programme, from the next meeting agenda going forward.

A Member queried whether three items could be added to the Forward Work Programme, including the council's self-assessment of performance, the management of buildings and building safety regarding asbestos, and the updating of HR policies. The Committee was advised that the FWP would be updated and the Member was asked to provide a list of the HR policies that were being referred to.

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

It was moved and seconded that the Forward Work Programme be approved. By way of Microsoft Forms and verbal communication, 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.

## **6. UPDATE FROM AUDIT WALES**

S.J. Byrne, Audit Wales, introduced the report to Members which summarised the completed audit work in relation to performance audit work, with M. Jones, Audit Wales referring to the financial audit work, since the last Annual Audit Summary, which was issued in December 2022. Members were referred to the Assurance and Risk Assessment work which included the financial position, the Capital programme management, the setting of well-being objectives, and a digital thematic review and waste and recycling review.

Members were referred to the financial audit work which includes the annual accounts, grant returns, and the Blackwood Arts Centre.

A Member queried the purpose of the reports from Audit Wales, and the lack of covering reports to indicate whether the reports are only to be received and noted or voted on by the Governance and Audit Committee. Members were advised of the recent change in staff within the Audit Wales team, who regularly meet up with CCBC Officers, and that a covering report could be produced for future Audit Wales reports and that this would be incorporated into their Forward Work Programme.

A Member sought clarification on the assessment of the progress that the Council has made in implementing the 15 recommendations made in the Auditor General for Wales' report 'Raising Our Game' Tackling Fraud in Wales July 2020. Members were advised that this information would be provided to members following the meeting.

Members queried the report and work done on building safety, in relation to asbestos and concrete, and were advised that the detail which Members referred to would not have been included in the report. Members were also advised that the issue with the RAAC concrete would not be included in the current audit plan but would be included going forward. Mr. I Phillips from Audit Wales advised Members that a link to the building report could be provided to Members following the meeting. A Member queried the 'sampling strategy' undertaken by Audit Wales and how the chosen authorities are selected. Members were advised that all 22 authorities across Wales had been included in the building safety report, and where only some authorities are chosen for other reports, this could be determined by the nature of the work and their location, depending on the subject matter.

A Member sought clarification on the thematic reviews, and in particular the unscheduled care, and queried whether all other parties involved would be included in the review or if it was just based on the local authority work. Members were advised that the review was being undertaken between the health and local government teams, and not currently any other organisations that may have been impacted.

A Member queried the report on assurance and risk assessment and whether the role of the Governance and Audit Committee was included in this work. Members were advised that this would be included, together with the scrutiny and management decision making process.

A Member sought clarification on whether Audit Wales would be looking at the financial sustainability of local authorities, and Members were advised that this was on the Audit Wales programme for future work.

A Member queried whether Audit Wales carries out follow up work on recommendations they have previously given, where no timeframes appear to be applicable. Members were advised that this does occur as part of the assurance and risk assessment work, and progress is reported on each year in relation to the financial audit.

The Governance and Audit Committee noted the report.

**7. AUDIT WALES – CAERPHILLY COUNTY BOROUGH COUNCIL – DETAILED AUDIT PLAN 2023.**

M. Jones, Audit Wales introduced the report, and referred Members to exhibit 1 in the report relating to significant financial statement risks. Members were advised if any new risks were identified prior to the next Governance and Audit Committee meeting, this would be updated. Members were also referred to the timetable in exhibit 2 of the report, together with the two letters from Audit Wales that had been included in the agenda pack for Members information. Members were also referred to the Audit Wales fee increase included in the report.

A Member queried the 13 outstanding recommendations, and whether this would have an impact on fees, with any additional charges. Members were advised these had not yet been reviewed and would be included in the current fee estimate by Audit Wales, and not likely to cause any increase.

The Governance and Audit Committee noted the content of the report.

**8. REVIEW AND UPDATE OF INTERNAL AUDIT CHARTER.**

The Acting Internal Audit Manager introduced the report which provided information to Members in respect of the review and update of the Internal Audit Charter and gave Members the opportunity to review the document. Members were informed that the Charter was last updated in 2019.

A Member sought clarification on whether the document was to be reviewed and approved, and Members were advised that the updated Charter should be formally approved by the Committee.

A Member queried the due date of the external assessment of compliance with the Public Sector Internal Audit Standards (PSIAS), and Members were advised this was due every 5 years, with the next one due in February 2024.

Members were advised that the Charter could be reviewed at any time, at the request of the Governance and Audit Committee, and was currently scheduled to be reviewed in 4 years' time. A Member proposed that the Charter be reviewed and updated every 2 years, and this was agreed by Members as an additional recommendation.

Having reviewed the report, it was moved and seconded that the recommendations be approved, and for the Charter to be reviewed and updated every 2 years. By way of Microsoft Forms this was unanimously agreed.

RESOLVED to approve the updated Internal Audit Charter in order for the Committee to gain the required assurance to fulfil its role, and for the Charter to be reviewed and updated every 2 years.

**9. UPDATE ON INTERNAL AUDIT REPORT RECOMMENDATIONS.**

The Acting Internal Audit Manager introduced the report which provided Members with an update on progress on Audit Report recommendations, to ensure that the Committee is aware of the number of Internal Audit recommendations and associated risk ratings.

A Member noted their concerns on the overdue recommendations and requested the Committee be made aware of the details and nature of these recommendations. Members were advised that this information would be made available for Members in future reports. Members were also advised that an external assessment due to be completed, could have an impact on some of the overdue recommendations, and some have been delayed due to school holidays, and are due to be followed up. The Member also queried whether a specific timescale was specified when the recommendations were made. Members were advised that this is done in conjunction with the Service Manager, and the higher the risk, the more immediate the action needs to be. Members were also advised that going forward, if they weren't satisfied with the progress of a particular high-risk recommendation, they could request that the relevant Service Area be represented at a Governance and Audit Committee meeting for questioning.

The Head of Financial Services and S151 Officer advised Members that the process of recommendations, timescales and risk ratings could be incorporated into Members training in the future.

The Governance and Audit Committee noted the contents of the report.

#### **10-11. 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 Declarations of Gifts and Hospitality April to June 2023;

The Chair thanked Members and Officers for their attendance and contributions and the meeting closed at 4.08 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 7<sup>th</sup> November 2023.

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CHAIR

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**GOVERNANCE AND AUDIT COMMITTEE FORWARD WORK PROGRAMME**

**GOVERNANCE AND AUDIT COMMITTEE – 7<sup>th</sup> NOVEMBER 2023**

<b>TITLE</b>	<b>PURPOSE</b>	<b>KEY ISSUES</b>	<b>PRESENTING OFFICER</b>
Update from Audit Wales (Standing Item)	To provide the Governance and Audit Committee with information on the work performed by Audit Wales.	To ensure the Governance and Audit Committee has oversight of these activities	Audit Wales
Annual review of Complaints 2022/23	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 year ended 31/3/2023 together with the outcomes and lessons learned.	To provide the Committee with complaints data to enable the Committee to review and assess the effectiveness of complaints handling for the year.	L. Lane
Internal Audit update on progress.	To provide Members of the Governance and Audit Committee with information on progress being made against the Audit Plan and other unplanned work between the period 1st April 2023 and 30th September 2023, and to inform the Committee of the opinions derived from the work undertaken.	To provide the Committee with oversight of the status of work undertaken and progress against the Audit Plan.	D. Gronow

Corporate Risk Register Update	To provide an update on the Corporate Risk Register in accordance with the Council's Risk Management Strategy.	The updated Corporate Risk Register is presented to the Governance and Audit Committee to ensure 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.	R. Roberts
<b>INFORMATION ITEMS</b>			
Officers Declarations of Gifts and Hospitality	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 last quarter and a comparison with the previous three quarters.	To ensure members of the Governance and Audit Committee have an oversight of the position in relation to officers' Gifts and Hospitality.	L. Donovan

**GOVERNANCE AND AUDIT COMMITTEE – 15<sup>th</sup> February 2024**

<b>TITLE</b>	<b>PURPOSE</b>	<b>KEY ISSUES</b>	<b>PRESENTING OFFICER</b>
Update from Audit Wales (Standing Item)	To provide the Governance and Audit Committee with information on the work performed by Audit Wales.	To ensure the Governance and Audit Committee has oversight of these activities	Audit Wales
Draft Annual Self – Assessment report 2022/23	To present the Governance and Audit Committee with the Draft Annual Self-assessment Report for 2022/23 prior to its onward submission to Joint Scrutiny and Council.	To provide the Governance and Audit Committee with assurance that the Council’s self-assessment process is robust and effective.	R. Edmunds / R. Roberts
Public Sector Internal Audit Standards (PSIAS) Self-Evaluation update	To inform members of the Governance and Audit Committee of the results of the self-evaluation of compliance with PSIAS.	To ensure the Governance and Audit Committee is aware of the results of this process.	D. Gronow
Update and progress report on Internal Audit Recommendations.	To provide members of the Governance and Audit Committee with an update on the recommendations issued to Service Managers arising from Internal Audit work and the progress on completing agreed actions, in the period since the previous report.	The report provides updates on new recommendations issued since the previous report was presented to the Committee and progress on the implementation of agreed recommendations by Service Managers.	D. Gronow

Review and Refresh of Financial Regulations	To provide the Committee with the draft revised Financial Regulations for review and endorsement.	To ensure the Governance and Audit Committee has the opportunity to review and endorse the updated Financial Regulations prior to Council consideration.	S. Harris / D. Gronow
Regulator recommendations for improvement progress update	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.	To ensure the Governance and Audit Committee has oversight of this matter.	R. Roberts
<b>INFORMATION ITEMS</b>			
Regulation of Investigatory Powers Act 2000	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)	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.	L. Lane

Officers Declarations of Gifts and Hospitality	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 last quarter and a comparison with the previous three quarters.	To ensure members of the Governance and Audit Committee have an oversight of the position in relation to officers' Gifts and Hospitality.	L. Donovan
Management of buildings and building safety	To provide the Governance & Audit Committee with details of the arrangements in place for the management of buildings and building safety (including asbestos).	To provide assurances that appropriate arrangements are in place.	A. Ford / E. Townsend
Corporate Governance Panel Minutes	To provide the Governance and Audit Committee with information in relation to the matters under review by the Panel, outcomes, and actions.	To ensure members of the Governance and Audit Committee have an oversight of the activities of the Panel.	D. Gronow

**GOVERNANCE AND AUDIT COMMITTEE –16<sup>th</sup> April 2024**

<b>TITLE</b>	<b>PURPOSE</b>	<b>KEY ISSUES</b>	<b>PRESENTING OFFICER</b>
Update from Audit Wales (Standing Item)	To provide the Governance and Audit Committee with information on the work performed by Audit Wales.	To ensure the Governance and Audit Committee has oversight of these activities	Audit Wales
Financial Statements for 2022/23	To present the Governance and Audit Committee with the Audit Wales 'Audit of Accounts Report' for the 2022/23 financial year, along with the audited Financial Statements.	To ensure that the 2022/23 Financial Accounts are endorsed prior to approval by Council and submission to the Auditor General for Wales.	Audit Wales / S. Harris
Audit Wales Caerphilly CBC Annual Audit Summary 2023	To provide the Governance and Audit Committee with information in relation to the work completed by Audit Wales since the previous Annual Audit Summary.	This report forms part of the Auditor General for Wales duties and aims to ensure that the Governance and Audit Committee is updated appropriately.	Audit Wales
Corporate Risk Register Update	To provide an update on the Corporate Risk Register in accordance with the Council's Risk Management Strategy.	The updated Corporate Risk Register is presented to the Governance and Audit Committee to ensure 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	R. Roberts

		robustly monitored and scrutinised.	
Six month update on corporate complaints received.	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 1st April to 30th September together with the outcomes and lessons learned.	To provide the Committee with complaints data to enable the Committee to review and assess the effectiveness of complaints handling for the six-month period.	L. Lane
Internal Audit Annual Plan 2024/25	To seek Governance and Audit Committee approval of the Internal Audit Services Annual Audit Plan for the 2024/25 financial year.	The Governance and Audit Committee is responsible for ensuring that risk and internal controls are adequately managed and monitored, and that the work planned by Internal Audit will achieve the required levels of assurance.	D. Gronow
<b>INFORMATION ITEMS</b>			
Regulation of Investigatory Powers Act 2000	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)	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.	L. Lane

Officers Declarations of Gifts and Hospitality	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 last quarter and a comparison with the previous three quarters.	To ensure members of the Governance and Audit Committee have an oversight of the position in relation to officers' Gifts and Hospitality.	L. Donovan
Corporate Governance Panel Minutes	To provide the Governance and Audit Committee with information in relation to the matters under review by the Panel, outcomes, and actions.	To ensure members of the Governance and Audit Committee have an oversight of the activities of the Panel.	D. Gronow

**GOVERNANCE AND AUDIT COMMITTEE –18<sup>th</sup> June 2024**

<b>TITLE</b>	<b>PURPOSE</b>	<b>KEY ISSUES</b>	<b>PRESENTING OFFICER</b>
Update from Audit Wales (Standing Item)	To provide the Governance and Audit Committee with information on the work performed by Audit Wales.	To ensure the Governance and Audit Committee has oversight of these activities	Audit Wales
Audit Wales Audit of Accounts Addendum report	To present the Governance and Audit Committee with the Audit Wales 'Audit of Accounts	To ensure that the Committee is informed of the Audit Wales recommendations arising from the audit of the accounts and the	Audit Wales / S. Harris



	Addendum Report' for the 2022/23 financial year.	associated management responses.	
Update and progress report on Internal Audit Recommendations.	To provide members of the Governance and Audit Committee with an update on the recommendations issued to Service Managers arising from Internal Audit work and the progress on completing agreed actions, in the period since the previous report.	The report provides updates on new recommendations issued since the previous report was presented to the Committee and progress on the implementation of agreed recommendations by Service Managers.	D. Gronow
Regulator recommendations for improvement progress update	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.	To ensure the Governance and Audit Committee has oversight of this matter.	R. Roberts
Internal Audit Annual Report 2023/24	To inform the Governance and Audit Committee of the Internal Audit Manager's overall opinion on the Authority's Internal Control Systems derived from the work undertaken by Internal Audit Services during the 2023/24 financial year.	To ensure the Governance and Audit Committee has oversight of this matter.	D. Gronow
Draft Annual Governance Statement 2023/24	To present Members of the Governance and Audit	To ensure that the Draft Annual Governance Statement is	S. Harris

	Committee with the Draft Annual Governance Statement for the 2023/24 financial year.	considered by the Governance and Audit Committee prior to its inclusion in the Draft Financial Statements.	
<b>INFORMATION ITEMS</b>			
Regulation of Investigatory Powers Act 2000	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)	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.	L. Lane
Officers Declarations of Gifts and Hospitality	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 last quarter and a comparison with the previous three quarters.	To ensure members of the Governance and Audit Committee have an oversight of the position in relation to officers' Gifts and Hospitality.	L. Donovan
Register of Employee's interest forms 2023/24	To provide the Governance and Audit Committee with information regarding the Register of Employees' Interests Forms completed by officers of the Council (excluding Schools) for the 12 month period 1 April 2023 to 31 March 2024 and provide a comparison with the same	To ensure members of the Governance and Audit Committee have an oversight of the position in relation to officers' Register of Employees' Interests Forms.	L. Donovan

	information for the previous 2 financial years.		
Corporate Governance Panel Minutes	To provide the Governance and Audit Committee with information in relation to the matters under review by the Panel, outcomes, and actions.	To ensure members of the Governance and Audit Committee have an oversight of the activities of the Panel.	D. Gronow

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## GOVERNANCE AND AUDIT COMMITTEE ACTION SHEET

DATE OF MEETING	SUBJECT/AGENDA ITEM	ACTION	RESPONSIBLE OFFICER	COMPLETED
12.09.2023	4. Governance and Audit Committee Forward Work Programme	Forward Work Programme to include reports on self-assessment, building safety and outdated HR policies, together with an Action Sheet with actions agreed at each meeting going forward.	SH	<p>Draft 2022/23 Annual Self-Assessment report scheduled for 15.02.2024</p> <p>Building safety report scheduled as information item for 15.02.2024</p> <p>Head of People Services has confirmed that all HR policies are scheduled for review in consultation with the Trade Unions.</p>
12.09.2023	4. Governance and Audit Committee Forward Work Programme	CIPFA training for Members of the Governance and Audit Committee.	DG	Training scheduled for 05.12.2023
12.09.2023	6. Update from Audit Wales.	Information required from Audit Wales in relation to the 'Raising Our Game' Tackling Fraud in Wales July 2020.	S.J. Byrne (Audit Wales)	Information forwarded to Members 02.10.2023
12.09.2023	6. Update from Audit Wales.	Link to Building Safety report to be provided to Members.	I. Phillips (Audit Wales)	Information forwarded to Members 13.09.2023

12.09.2023	9. Update on Internal Audit Report Recommendations.	Information requested by Members on the detail and nature of the overdue recommendations.	DG	This information will be included in future reports.
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## Audit Wales Work Programme and Timetable – Caerphilly County Borough Council

**Quarterly Update: 30 September 2023**

### Annual Audit Summary

Description	Timetable	Status
A report summarising completed audit work since the last Annual Audit Summary, which was issued in December 2022.	Early 2024	n/a

### Financial Audit work

Description	Scope	Timetable	Status
<b>Audit of the Council's 2022-23 statement of accounts</b>	The statutory audit of the Council's annual accounts.	Some work has commenced. Our core work will be during the period November 2023 to March 2024.	Some initial work has commenced.

Description	Scope	Timetable	Status
<p><b>Audit of the Council's 2022-23 grant returns</b></p>	<p>We audit six grant claims and returns.</p>	<p>We expect to complete two of the audits by November 2023. start soon. The other audits are likely to start at the end of 2023 and conclude in the first quarter of 2024.</p>	<p>Commenced.</p>
<p><b>Audit of the Blackwood Arts Centre's 2022-23 charity accounts</b></p>	<p>The statutory audit of the annual charity account.</p>	<p>To start and conclude in January 2024, ahead of the Charity Commission's deadline of 31 March 2024.</p>	<p>Yet to commence.</p>



## Performance Audit work

2022-23 Performance Audit work	Scope	Timetable	Status
<b>Assurance and Risk Assessment</b>	<p>Project to identify the level of audit assurance and/or where further audit work may be required in future years in relation to risks to the Council putting in place proper arrangements to secure value for money in the use of resources and acting in accordance with the sustainable development principle.</p> <ul style="list-style-type: none"> <li>• Financial position</li>   <li>• Capital programme management</li> </ul>	<p>Ongoing monitoring of financial position</p> <p>September – December 2023</p>	<p>Ongoing</p> <p>AW will not undertake detailed work at all councils as part of our 2022-23 work programme. We are currently exploring our options for undertaking a detailed piece of work on this topic either in 2023-24 or future years.</p>

2022-23 Performance Audit work	Scope	Timetable	Status
	<ul style="list-style-type: none"> <li>• Use of performance information – with a focus on service user feedback and outcomes</li> <li>• Setting of well-being objectives</li> </ul>	<p>February – September 2023</p> <p>Due to be completed November 2023</p>	<p>Drafting report</p> <p>Drafting report</p>
<b>Thematic Review – Unscheduled Care</b>	<p>A cross-sector review focusing on the flow of patients out of hospital. This review will consider how the Council is working with its partners to address the risks associated with the provision of social care to support hospital discharge, as well as prevent hospital admission. The work will also consider what steps are being taken to provide medium to longer-term solutions.</p>	<p>August 2022 – July 2023</p>	<p>Fieldwork nearing completion, reporting from September 2023 onward.</p>
<b>Thematic review – Digital</b>	<p>A review of councils’ strategic approach to digital, and the extent to which this has been developed in accordance with the sustainable development principle; and that it will help to secure value for money in the use of councils’ resources.</p>	<p>January – September.</p>	<p>Fieldwork complete – drafting report to start shortly</p>
<b>Waste and recycling review</b>	<p>This project will focus on the Council’s plans to meet current and future statutory recycling targets.</p>	<p>October – March 2023</p>	<p>Final Report issued</p>

<b>2022-23 Performance Audit work</b>	<b>Scope</b>	<b>Timetable</b>	<b>Status</b>
<b>2023-24 Performance Audit work</b>	<b>Scope</b>	<b>Timetable</b>	<b>Status</b>
<b>Assurance and Risk Assessment</b>	Project to identify the level of audit assurance and/or where further audit work may be required in future years in relation to risks to the Council putting in place proper arrangements to secure value for money in the use of resources and acting in accordance with the sustainable development principle.	April 2023 – March 2024	Ongoing
<b>Thematic review – Financial Sustainability</b>	A review of councils’ financial sustainability including a focus on the actions, plans and arrangements to bridge funding gaps and address financial pressures over the medium term.	March – June 2024	Scoping
<b>Thematic review – commissioning and contract management</b>	A review focusing on how councils’ arrangements for commissioning, and contract management apply value for money considerations and the sustainable development principle.	January – July 2024	Scoping
<b>Counter fraud</b>	To assess the progress that the Council has made in implementing the 15 Recommendations made in the Auditor General for Wales’ report ‘Raising Our Game’ Tackling Fraud in Wales July, 2020	To be confirmed	Scoping

## Local government national studies planned/in progress

Study	Scope	Timetable	Status	Fieldwork planned at Caerphilly County Borough Council
<b>Planning for sustainable development – Brownfield regeneration</b>	Review of how local authorities are promoting and enabling better use of vacant non-domestic dwellings and brownfield sites	October 2022 – September 2023	Report drafting – publication due November/December 2023	Yes – interview with nominated officer at seven councils and survey.
<b>Governance of special purpose authorities – National Parks</b>	Review of systems and effectiveness of governance	November 2022 – September 2023	Report drafting – publication due November/December 2023.	No
<b>Corporate Joint Committees (CJCs)</b>	Assessing CJCs' progress in developing their arrangements to meet their statutory obligations and the Welsh Government's aim of strengthening regional collaboration.	September 2022 – August 2023	Individual letters have been issued to the four CJCs. National summary report due for publication October/November 2023.	Yes – We explored the Council's perspective via our routine liaison meetings. Fieldwork included interviews with the chief executive, director of finance and chair of each of the four CJCs.

Study	Scope	Timetable	Status	Fieldwork planned at Caerphilly County Borough Council
<b>Governance in Fire and Rescue Authorities</b>	Review of systems and effectiveness of governance	September 2023 – March 2024	Project brief issued	No
<b>Homelessness</b>	Examining how services are working together to progress the response to homelessness.	tbc	Scoping	tbc

## Estyn

Our link inspectors are continuing to work with Torfaen as part of our follow-up process for an authority causing significant concern. Wrexham local authority was removed from the causing significant concern category following a monitoring visit in July. We inspected Gwynedd in the week beginning 26 June and Carmarthenshire in the week beginning 10 July. Both reports have been published on our website. We will be inspecting Conwy local government education service on the week beginning 6 November.

Field work being carried out across local authorities during the autumn term includes a focus on attendance, school improvement and the work of the local authority to mitigate the impact of poverty on learners' attainment.

## Care Inspectorate Wales (CIW)

CIW planned work 2023-25	Scope	Timetable	Status
<b>Thematic reviews</b>			
<b>CLDT</b>	Working with HIW we will complete a small sample of joint CLDT inspections in 2024. We will use this approach to evaluate and consider our approach to joint inspection.	2024-25	Planning
<b>Deprivation of Liberty Safeguards – 10 years on</b>	We are working in partnership with HIW to consider our approach and follow up on the report: <u><a href="#">A National Review of the use of Deprivation of Liberty Safeguards (DoLS) in Wales (hiw.org.uk)</a></u> undertaken in 2014.	2024-25	Scoping

CIW planned work 2023-25	Scope	Timetable	Status
<b>Stoke pathway</b>	Working in collaboration with HIW a <a href="#">National Review of Patient Flow: a journey through the stroke pathway (hiw.org.uk)</a> has recently been published.	Complete	Published
<b>National review of Care Planning for children and young people subject to the Public Law Outline pre-proceedings</b>	<p>Purpose of the review</p> <p>To provide external scrutiny, assurance and to promote improvement regarding the quality of practice in relation to the care planning for children and young people subject to the public law outline pre-proceedings.</p> <p>To consider the extent to which practice has progressed since the publication of both the CIW 'National Review of care planning for children and young people subject to public law outline pre-proceedings' and the publication of the PLO working group report 2021 including best practice guidance.</p>	In progress	Publication November 2023
<b>Deprivation of Liberty Safeguards Annual Monitoring Report for Health and Social Care 2022-23</b>	<p>The <a href="#">2020-21 report</a> was published on 7 February 2021</p> <p>The 2021-2022 report is underway</p>	<p>Published</p> <p>To be confirmed</p>	<p>Published</p> <p>Preparing</p>

CIW planned work 2023-25	Scope	Timetable	Status
<p><b>Joint Inspection Child Protection Arrangements (JICPA)</b></p>	<p>We will complete a further two multi-agency joint inspections in total.</p> <p>The findings following Denbighshire County Council have been published - <a href="#">Joint Inspectorate Review of Child Protection Arrangements (JICPA): Denbighshire 2023   Care Inspectorate Wales</a></p> <p>The findings following Bridgend County Borough Council have been published - <a href="#">Joint Inspectorate Review of Child Protection Arrangements (JICPA): Bridgend 2023   Care Inspectorate Wales</a></p> <p>We will publish a national report in late spring 2024.</p>	<p>April 2023 – April 2024</p>	<p>Delivery</p>
<p><b>Performance review of Local Authorities</b></p>	<p><a href="#">We continue to inspect Local Authorities in line with our updated Code of Practice for our local authority inspection activity   Care Inspectorate Wales</a></p> <p><a href="#">How we inspect local authority services and CAFCASS Cymru</a></p>	<p>Ongoing</p>	<p>Ongoing</p>



## Audit Wales national reports and other outputs published since September 2022

Report title	Publication date and link to report
NHS workforce – data briefing	<a href="#">September 2023</a>
Income Diversification for National Park Authorities in Wales	<a href="#">September 2023</a>
Approaches to achieving net zero across the UK	<a href="#">September 2023</a>
Springing Forward: Lessons learnt from our work on workforce and assets (in local government)	<a href="#">September 2023</a>
Local Government Financial Sustainability Data tool update (further update planned autumn 2023)	<a href="#">September 2023</a>
NHS finances data tool – to 31 March 2023	<a href="#">September 2023</a>
Public interest reports – Ammanford Town Council and Llanferres Community Council	<a href="#">September 2023</a>
Cwm Taf Morgannwg University Health Board - Quality Governance Arrangements Joint Review Follow-up	<a href="#">August 2023</a>
‘Cracks in the Foundations’ – Building Safety in Wales	<a href="#">August 2023</a>
Maximising EU funding – the Structural Funds Programme and the Rural Development Programme	<a href="#">June 2023</a>

Report title	Publication date and link to report
Digital inclusion in Wales (including key questions for public bodies)	<a href="#">March 2023</a>
Orthopaedic Services in Wales – Tackling the Waiting List Backlog	<a href="#">March 2023</a>
Betsi Cadwaladr University Health Board – Review of Board Effectiveness	<a href="#">February 2023</a>
Welsh Government purchase of Gilestone Farm	<a href="#">January 2023</a>
Together we can – Community resilience and self-reliance	<a href="#">January 2023</a>
A Picture of Flood Risk Management	<a href="#">December 2022</a>
'A missed opportunity' – Social Enterprises	<a href="#">December 2022</a>
Poverty Data Tool	<a href="#">November 2022</a>
'Time for change' – Poverty in Wales	<a href="#">November 2022</a>
Learning from cyber-attacks	October 2022 (distributed privately to audited bodies)
National Fraud Initiative 2020-21	<a href="#">October 2022</a>
COVID-19 business support in 2020-21 – Memorandum for the Public Accounts and Public Administration Committee	<a href="#">October 2022</a>

Report title	Publication date and link to report
Payment to the Welsh Government's Former Permanent Secretary on Termination of Employment	<a href="#">September 2022</a>
Equality Impact Assessments: More than a Tick Box Exercise?	<a href="#">September 2022</a>
Welsh Government – setting of well-being objectives	<a href="#">September 2022</a>
Welsh Government workforce planning and management	<a href="#">September 2022</a>

### Audit Wales national reports and other outputs (work in progress / planned)<sup>1, 2</sup>

Title	Indicative publication date
Covering teachers' absence – follow-up (letter to the Public Accounts and Public Administration Committee)	October 2023
NHS quality governance	October/December 2023

<sup>1</sup> We will continue to keep our plans under constant review, taking account of the evolving external environment, our audit priorities, the context of our own resourcing and the capacity of audited bodies to engage with us. Follow up work could also lead to other outputs, as may other local audit work where we consider there is merit in a national summary output of some kind.

<sup>2</sup> We have also published to our website a paper – [Our work programme for 2023-2026](#) – that provides additional detail about our national work (including local thematic reviews). In addition to new work that we will be taking forward in 2023-24, the paper includes details about indicative topics for work to start in 2024-24 or 2025-26.

Title	Indicative publication date
A465 Section 2 – update	November/December 2023
Ukrainian refugee services	December 2023/January 2024
Local government digital strategy review – national summary	January 2024
Local government use of performance information, outcomes and service user perspective – national summary	November/December 202
Affordable housing	February/March 2024
Active travel	Spring 2024
Cancer services	To be confirmed (scoping)
Velindre Cancer Centre	To be confirmed (scoping)
Welsh Government capital and infrastructure investment	To be confirmed (scoping)
Addressing biodiversity decline (pan-public sector and at Natural Resources Wales)	R&D work underway September to December 2023. Data gathering with representative groups. Outputs will inform any further audit work.
Further and higher education funding and oversight – Commission for Tertiary Education and Research	To be confirmed (scoping)

Title	Indicative publication date
The senior public service	To be confirmed (scoping early 2024)
Challenges for the cultural sector	To be confirmed (starting in 2023-24)
Rebalancing care and support	To be confirmed (starting in 2023-24)
Tackling NHS waiting lists	To be confirmed (starting in 2023-24)
Access to education for children with Additional Learning Needs	To be confirmed (starting in 2023-24)
Audit Committees. ‘What does good look like?’. R&D work to understand the broad audit committee landscape across all sectors in Wales. Outputs to support Good Practice Exchange events and potential future audit work.	R&D work Sept – Dec 2023 Good Practice Event Spring 2024

## Good Practice Exchange events and resources

Title	Link to resource
<p><b>Strategy to Action: How digital makes a difference to everyday lives</b> This event will take a practical and honest view at the digital landscape in Wales and will offer practical ideas for public and third sector organisations which will help them achieve the best value for money.</p>	<p>27 September 2023 09:00 – 13:00 – North Wales – To register for <a href="#">North Wales</a></p> <p>5 October 2023 09:00 – 13:00 – Cardiff – To register for <a href="#">Cardiff</a></p>

Title	Link to resource
<p><b>Working in partnership to improve wellbeing</b> This event will bring together the North Wales Insight Partnership, the Public Service Boards and the C4C community to share wellbeing plans across the North Wales region, as well as sharing the innovative work being undertaken by a range of sectors around wellbeing in our communities. The event will provide opportunities to discuss how we can connect all of this work to deliver real change.</p>	<p>24 October 2023 09:30 – 16:30  <a href="#">To register for North Wales</a>            Cardiff date TBC</p>
<p><b>Integrity in the Public Sector</b> ‘Trust is built and maintained through competence, reliability, and honesty, as well as the building of genuine and sound relationships between the public sector and the public it serves. That means the public sector must be accountable for the management and delivery of public services and outcomes, for the direction and control of the work it does, the resources it manages, and for its behaviour and ethics.’ This event will look at how public services can promote a culture of integrity.</p>	<p>5 December 2023            10:00 – 12:00 Online  <a href="#">To register</a></p>
<p><b>Podcast: Auditing Community Resilience</b> In this edition of The Exchange, our Local Government team discuss some of the factors that cause poverty in Wales, as well as the value provided by social enterprises, and the importance of keeping wealth in communities.</p>	<p><a href="#">To listen</a></p>

## Recent Audit Wales blogs

Title	Publication date
<p><a href="#">Building Safety – Have we learnt from Grenfell?</a></p>	<p>1 August 2023</p>
<p><a href="#">Helping people to help themselves</a></p>	<p>15 February 2023</p>
<p><a href="#">A perfect storm – the cost of living crisis and domestic abuse</a></p>	<p>21 November 2022</p>

Title	Publication date
<a href="#"><u>Tackling poverty means tackling poverty data</u></a>	11 November 2022
<a href="#"><u>Cost of living and putting away the bayonet</u></a>	21 September 2022
<a href="#"><u>Heat is on to tackle Climate Change</u></a>	18 August 2022
<a href="#"><u>Direct Payments in Wales</u></a>	15 June 2022
<a href="#"><u>Unscheduled Care in Wales – a system under real pressure</u></a>	21 April 2022

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## **GOVERNANCE AND AUDIT COMMITTEE – 7<sup>TH</sup> NOVEMBER 2023**

**SUBJECT: ANNUAL REPORT ON THE CORPORATE COMPLAINTS  
RECEIVED FOR THE PERIOD 1<sup>ST</sup> APRIL 2022 TO 31<sup>ST</sup>  
MARCH 2023**

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

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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 annual period 1<sup>st</sup> April 2022 to 31<sup>st</sup> March 2023 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 annual period 1<sup>st</sup> April 2022 to 31<sup>st</sup> March 2023, the outcomes and lessons learned.

### **3. RECOMMENDATIONS**

3.1 The Committee is asked to note the complaints data contained in this report and to review and assess the effectiveness of complaints handling for the annual period 1<sup>st</sup> April 2022 to 31<sup>st</sup> March 2023.

### **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 requires the data to be reviewed by 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 on 11<sup>th</sup> October 2022. This report sets out details of the complaints dealt with for the annual period from 1<sup>st</sup> April 2022 to 31<sup>st</sup> March 2023 and will also be considered by a forthcoming meeting of Cabinet.
- 5.3 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. For completeness the report to the relevant scrutiny committee outlining the complaints dealt with under the Social Services complaints process for the same annual period is attached at Appendix 7 to this report. 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 As part of the implementation of the 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 In addition a cross section of officers from various departments have taken up the training offered by the Ombudsman. In 2021 the Ombudsman providing training to over 80 staff and further training was rolled out across the Directorates in February, April and May this year on complaint investigation skills and managing difficult behaviours and expectations. This training is further supported by the Complaints Officers within each Directorate who 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 As part of the ongoing improvements to the way in which we hold and analyse complaints data, the testing of a new digital complaints system is ongoing with assistance from colleagues in Digital and Customer Services. The aim of the system is to streamline controls and improve data records within the complaints process. Adjustments are being made to the system as a result of the ongoing feedback with a view to launching the system when all checks have been completed. 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 31<sup>st</sup> March 2023 under the Corporate Complaints policy is 456 and is broken down as follows:-

Directorate	Stage 1	Stage 2	Escalated	Total
Social Services	59	0	7	66
Education	5	2	1	8
Economy & Environment	157	17	28	202
Housing	132	3	25	160
Corporate	13	5	2	20
<b>TOTAL</b>	<b>366</b>	<b>27</b>	<b>63</b>	<b>456</b>

The Outcomes are as follows.

Directorate	Upheld	Not Upheld	Withdrawn	Ongoing	Total
Social Services	5	61			66
Education		8			8
Economy & Environment	127	73	2		202
Housing	52	93	15		160
Corporate	9	11			20
<b>TOTAL</b>	<b>193</b>	<b>246</b>	<b>17</b>		<b>456</b>

#### Ombudsman Referrals

Directorate	Number	Outcome
Social Services	1	Not Investigating
Education	3	Not Investigating
Economy & Environment	13	Not Investigating
Housing	12	Not Investigating
Corporate	5	3 Early Resolutions 2 Not Investigating

Unknown	4	Not Investigating
<b>TOTAL</b>	<b>38</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 that the data produced at Appendices 1-5 of this report outlines in particular the upheld complaints for each directorate. Whilst it is difficult to compare the types of complaints upheld between directorates, the Learning from Complaints Group were tasked with analysing their own data on upheld complaints to ascertain common themes which have arisen over and above the core categories identified within the Appendices.

5.13 With Education the issue was less clear as the service area had a small number of complaints which in the main related to the Additional Learning Needs and Inclusion service. These complaints centred on the implementation of the new curriculum for Wales which had led to confusion and frustration of some of our stakeholders, especially parents. In this respect the Council will continue to listen and adapt its processes in line with feedback.

5.14 However in terms of the Economy and Environment Directorate, the Housing Directorate, Social Services a key finding identified from this task was the issue of communication. This is also reflected albeit to a lesser extent in the complaint outcomes for the Corporate Services Directorate.

5.15 Communication itself is not framed or recorded as a complaint category as this issue often forms part of the main complaint for example a dissatisfaction with a decision which has been made. As such the communication issues are not fully reported within the data.

5.16 Further discussions within the Learning from Complaints Group identified the following communication issues which were running through many of the complaints which were upheld.

- Making contact with customers
- Not keeping customers informed or updated
- Lack of ownership or responsibility for communication and managing expectations
- Impression that the council is dismissive and doesn't care so there is no point
- Organisational or system issues
- Internal communication

5.17 It is recognised that we must act on this knowledge and use it as a positive opportunity to learn from experiences to drive continual organisational improvement. We strive to provide a fully rounded journey for every customer

whether it be via the telephone, in writing or via electronic means. To this end, complaints officers have assisted with the staff training for the complaints handlers within their respective service areas which it is anticipated will have a positive impact on the customer journey when interacting with the council and thereby aiding complaint handling. Staff across directorates have also attended the training sessions provided by the Public Services Ombudsman for Wales.

5.18 Directors have also held Staff Engagement Sessions which also included training exercises and discussions around the customer journey and communication.

5.19 In addition, the digital software complaints database which is to be rolled out shortly will streamline our lines of communication and provide prompts where timeframes for responding need to be met or extended where further investigation is required.

5.20 In terms of Housing, the service are looking to make the webpages for Caerphilly Homes more user friendly for contract holders.

#### 5.21 **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 Corporate Complaints Policy - [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)  
Appendix 7 Report to Scrutiny Committee re annual complaints dealt with under the separate Social Services complaints procedure

#### **BACKGROUND PAPERS**

**Report to Cabinet 24<sup>th</sup> March 2021** - [Link to Report to Cabinet 24<sup>th</sup> March 2021](#)

## 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	157	142	90.45
Stage 2	17	16	94.12
Escalated Stage 1 to 2	28	26	92.86
Totals	202	184	91.09

Table showing how the complaints were received.

By source	Count Stage 1	Count Stage 2	Count Escalated Stage 1 to Stage 2
Contact Centre	5	0	0
Email	104	14	25
Letter	3	0	3
On-line	39	1	0
Other	0	0	0
Telephone	6	2	0
Totals	157	17	28

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	97	90	92.78
Infrastructure	43	36	83.72
Property	0	0	0
Public Protection	10	10	100
Regeneration & Planning	4	3	75
Other - Combined	3	3	100
Totals	157	142	90.45

Service	Count Stage 2	Count Completed in Target Times	Percentage Completed in Target Times
Community & Leisure	2	1	50
Infrastructure	6	6	100
Property	0	0	0
Public Protection	3	3	100
Regeneration & Planning	6	6	100
Other - Combined	0	0	0
Totals	17	16	94.12

Service	Count Escalated Stage 1 to Stage 2	Count Completed in Target Times	Percentage Completed in Target Times
Community & Leisure	14	14	100
Infrastructure	9	8	88.89
Property	0	0	0
Public Protection	2	1	50
Regeneration & Planning	2	2	100
Other - Combined	1	1	100
Totals	28	26	92.86

More detailed information on the above corporate complaints data, is currently maintained, by the Directors PA 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.
- 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.

Complaint Themes	Q1	Q2	Q3	Q4	Grand Total
CA Sites	7	1	1	3	12
Delays in responses	2		4		6
Illicit Tipping	2				2
Refuse-Recycling-Green Waste-Missed Collections	8	11	9	14	42
Refuse-Recycling-Green Waste-Other	5	7	6	6	24
Planning-General	3		4	1	8
Parking	2	3	1	3	9
Other matters	9	12	14	18	53
General Weed Control-Grounds Maintenance		3			3
Poor communications	1	4		2	7
Drains-Flooding	1		1		2
Grass Cutting	1	1			2
Trees	2	1	4		7
Highway maintenance works	1	1	5	2	9
Cleansing	1			2	3
Delays in service delivery		3	2	2	7
Footpath Quality		1			1
Park maintenance-cleanliness			1	1	2



Bulky Waste			1		1
Street Lighting				2	2
Grand Total	45	48	53	56	202

### Identification of Trends – Particular to services

<b>Trends</b>
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 undertake circa 9.75 million collection per annum, the amount received didn't cause any major issues. It is also worth noting that a percentage of recycling wasn't collected due to the fact that the contents of the bin were contaminated and relevant advice would have been provided before the next collection took place.
<b>Examples</b>
Non collection of contaminated recycling, questioning processes.
Food waste missed on a regular basis, 4 times since January. After complaining in the past the crew leave food bin on the road rather than outside door. A food bag from another caddie has been left in the middle of the road.
Continuous missed waste collections including hygiene waste collections - reported on numerous occasions (CRM).

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	12
3	Delay in Service Provision	85
4	Officer/Contractors Conduct with public (including sensitivity/empathy of staff/politeness)	5
5a	Following Council Policies	45
5b	Following relevant Legislation	-
6	Accessibility of Services	2
7	Clarity/Accuracy/Timelines of information	7
8	Quality of Work	42
9	Openness/Fairness and Honest	2
10	Compliance with Complaints Procedure	0
11.	Combination of Categories (non-specific)	1
	Totals	202

### 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	127
Not upheld	73
Totals	200

\*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	57	39
Infrastructure	8	35
Property	0	0
Public Protection	2	8
Regeneration & Planning	0	4
Other - Combined	0	3
Totals	67	89

Services – Stage 2	Upheld	Not Upheld
Community & Leisure	0	2
Infrastructure	0	6
Property	0	0
Public Protection	0	2
Regeneration & Planning	0	6
Other - Combined	0	0
Totals	0	16

Services – Stage 1 escalated to Stage 2	Upheld	Not Upheld
Community & Leisure	5	9
Infrastructure	1	8
Property	0	0
Public Protection	0	2
Regeneration & Planning	0	2
Other - Combined	0	1
Totals	6	22

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.

Nature of complaint	Lessons learned	Category
Non collection of contaminated recycling, questioning processes	From the initial complaint the recycling bin had now been cleared of contamination to a level that allowed waste to be removed.	5 Following Council Policies/relevant Legislation
Food waste missed on a regular basis, 4 times since January.	Supervisor has reprimanded the team for the failings identified and reminded them of the importance of maintaining	8 Quality of Work

	collections and presenting replacement in an acceptable fashion. Situation to be monitored.	
Continuous missed waste collections including hygiene waste collections - reported on numerous occasions	Incorrect information provided on council website. Resident updated on correct collection days and technical support advised to change on website.	3 Delay in Service Provision
Customer is requesting sandbags urgently due to ongoing flooding issue; Water is running off road and into property. Constantly chasing Highways Customer Service. Never get hold of anyone. Initial complaint never acknowledged or responded too.	Staff should be aware that high priority items should be passed to others to respond when they are not available. This issue is to be highlighted in the next Team meeting.	3 Delay in Service Provision
Green Waste sacks not returned - objecting to paying for new sacks	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.  The supervisor has advised the team to take every care in securing the provision as best as is practicable going forward.	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
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

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	8
Gender Reassignment	-
Marriage and Civil Partnership	-
Pregnancy and Maternity	-
Race	-
Religion/Belief or Non-belief	-
Sex	-
Sexual Orientation	-
Welsh Language	-
Totals	9

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 loop. Unfortunately, it seems that this particular location, is subject to indiscriminate parking on a regular basis which has exacerbated the situation.	Disability
Non collection of assisted waste	Waste Strategy & Operations	Lesson learned is to ensure continuity in collection service and	Disability

		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.	
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 been 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	19 <sup>th</sup> May 2022	Not Investigating
Planning	21 <sup>st</sup> June 2022	Not Investigating
Planning	11 <sup>th</sup> November 2022	Not Investigating
Planning	5 <sup>th</sup> January 2022	Not Investigating
Planning	18 <sup>th</sup> January 2023	Not Investigating
Planning	2 <sup>nd</sup> March 2023	Not Investigating
Environmental Health	28 <sup>th</sup> April 2022	Not Investigating
Environmental Health	13 <sup>th</sup> September 2022	Not Investigating
Environmental Health	16 <sup>th</sup> September 2022	Not Investigating
Traffic Management	22 <sup>nd</sup> August 2022	Not Investigating
Waste	5 <sup>th</sup> September 2022	Not Investigating
Rights of Way	7 <sup>th</sup> September 2022	Not Investigating
Parks	20 <sup>th</sup> September 2022	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 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. Intelligence gathered through the engagement, 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 and further staff engagement sessions and training is planned which will focus on customer focussed service delivery.

There is also a system in place across the Directorate for the capture of compliments as these are equally important in terms of measuring the effectiveness of service delivery and customer satisfaction as complaints. The benefits of staff training programmes are now starting to be experienced and these will be cyclically delivered and kept under continuous review.

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## Directorate of Housing

### 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	132	58	43.9%
Stage 2	3	3	100.0%
Escalated from Stage 1 to 2	25	14	56.0%
Totals	160	75	46.9%

\*Target response rates for first 6-month period of 2022/23 were 69.9%

**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	16	11	68.8%
Antisocial Behaviour	3	2	66.7%
Enforcement	2	1	50.0%
Grants	2	2	100.0%
Homelessness	3	0	0.0%
Housing Management	29	14	48.3%
Leaseholder	1	1	100.0%
Heating	7	3	42.9%
Private Landlord	1	1	100.0%
Rents	2	2	100.0%
Response Repairs	61	18	29.5%
Sheltered Housing	1	1	100.0%
WHQS External	1	0	0.0%
WHQS Internal	2	2	100.0%
Totals	132	57	43.9%

Service	Count Stage 2	Count Completed in Target Times	Percentage Completed in Target Times
Allocations	3	0	0.0%
Grants	2	2	100.0%
Housing Management	11	8	72.7%
Heating	2	1	50.0%
Response Repairs	10	6	60.0%
Totals	28	17	60.7%

Generally, where target response times were not met, it has been identified that it was due to awaiting further information from other officers, other departments, or the complainants themselves. There is a notable drop in the compliance rate from the previous 6-month period. Two key areas are Response Repairs where the target figure significantly dropped from 80% to 29.5%. There are ongoing issues with a backlog of repairs which is having a negative impact on the target rate due to managers, supervisors and operatives turning their attention to reducing the backlog and placing their focus on this area as a key priority. Recruitment issues have also been experienced within this area which is strongly felt throughout this service, evidencing the knock on effect witnessed with investigation times and target rates. Housing Management also have a notable decrease in target rate from 62.5% in the first 6 months to 48.3%. 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. To encourage improvements in target response times, data will be provided monthly to managers and directors who attend SMB and HMT to discuss cases which fall short of meeting the target deadlines and to establish if trends can be identified in this area. Managers/Officers have attended training sessions provided by the CSA to ensure consistency and customer focus, ultimately improving quality of complaint investigations, and reducing escalation of complaints. 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	60	2	8
Email	57	1	17
Letter	3	0	0
On-line	12	0	0
Contact Centre	0	0	0
Other	0	0	0
<b>Totals</b>	<b>132</b>	<b>3</b>	<b>25</b>

\*In 2021/2022, the main source of contact was via e-mail however this has now changed, the main method of contact is via the telephone.



## 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 including delays in undertaking repair work, not allocating enough time to complete repairs, and missing agreed appointments without prior notification.
- Resident concerned with delay in considering succession application and the impact it has claiming housing benefit payments.
- Increased concerns relating to potential damp and mould issues in properties following increased media coverage.

In terms of identified trends, the re-let standard of some properties were identified as poor. Going forward meetings between managers were scheduled to 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). These changes worked hand in hand with updates required to meet the Renting Homed Act 2016.

### 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	1
2.	Decision Making	13
3.	Delay in Service Provision	23
4.	Officer/Contractors Conduct with public (including sensitivity/empathy of staff/politeness)	9
5a.	Following Council Policies	3
5b.	Following relevant Legislation	1
6.	Accessibility of Services	0
7.	Clarity/Accuracy/Timeliness of information	7
8.	Quality of Work	102
9.	Openness/ Fairness and Honesty	1
10.	Compliance with Complaints procedure	0
11.	Combination	0
	Totals	160

\*Quality of work (8) remains the most common category for reason for contact.

### 3. 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	52
Not upheld	93
<b>Totals</b>	<b>145</b>

\*Please note, 15 complaints were withdrawn

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	4	11
Enforcement	0	2
Energy Works	0	0
Grants	0	2
Homeless	0	1
Housing Management	15	11
Leaseholder	0	1
Private Landlord	0	1
Rents	2	0
Response Repairs	23	34
Sheltered Housing	0	1
WHQS External	0	1
WHQS Internal	2	0
Heating	0	4
Antisocial Behaviour	0	3
Homeless Prevention	0	1
<b>Totals</b>	<b>46</b>	<b>74</b>

#### Stage 2 Complaints

Service	Upheld	Not Upheld
Allocations	1	2
Grants	0	2
Housing Management	2	8
Response Repairs	3	6
Heating	0	1
<b>Totals</b>	<b>6</b>	<b>19</b>

**List of lessons learned. Comment on key findings resulting from the complaints in this reporting period, that 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> <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>	8 Quality of work
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	Improved communication requirements identified between us CCBC, the Contractor and the Contract Holders. HRO operatives will be reminded of the	8 Quality of work

replastered - also still waiting for decoration allowance payment	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.	
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 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 refresher for all the team is being arranged	7 Clarity/Accuracy/Timeliness of information
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 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

<p>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</p>	<p>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</p>	<p>8 Quality of work</p>
<p>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.</p>	<p>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 get call recording, we can use this for training purposes.</p>	<p>7 Clarity/Accuracy/Timeliness of information</p>
<p>Housing register application being closed down again</p>	<p>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.</p>	<p>7 Clarity/Accuracy/Timeliness of information</p>
<p>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</p>	<p>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.</p>	<p>3 Delay in Service Provision</p>
<p>Contractors working on property and left cans and food in house.</p>	<p>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</p>	<p>4 Officer/Contractors contact with public.</p>

	<p>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</p>	
<p>Contract holder requesting review of decision not to renew kitchen - disagrees with signing the form to opt out of new kitchen</p>	<p>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 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.</p>	<p>9 Openness/fairness and Honesty</p>
<p>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</p>	<p>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</p>	<p>8 Quality of work</p>

	about garden conditions in this location	
Contract Holder was due to have two windows fitted in the kitchen on 24/10, tenant called twice to confirm the fitters were calling, they did not attend and on final call was told appointment was mistake.	to ensure materials are available before making an appointment for a repair and to ensure when communicating with the Contract Holder checks are made to ensure the information we provide is correct.	8 Quality of work
Contract Holder raised concerns as having issues with damp and mould and wants them investigated.	After investigation it was established the MDF used was damp. Operatives advised this must not be repeated.	8 Quality of work
Contract Holder reported damp and wet walls for previous 7 years and the issue is still not resolved.	To ensure an in-depth Inspection is carried out for issues of recurring damp, to ascertain the actual cause and treat accordingly.	8 Quality of work
Contract Holder required another appointment to fit an extractor fan when they thought it would be completed in same day.	Established that SOR code for fitting fans does not cover coring out hole for fan which takes longer. A request has been made for this to be included to the surveying team who are responsible for the SOR codes. This should no longer happen for future repairs of this nature.	3 Delay in Service Provision
Contract Holder reported they had been living in damp property with rising damp for three years. To undertake the necessary works to rectify this, they have been decanted to another property which is also very damp.	Ongoing problem with our void's inspections identified. Improvements have been made to start rectifying this issue.	8 Quality of work
Son of Contract Holder unhappy with letters father has received regarding rent arrears as they have previously made contact with the Rents Department to make a complaint, but this was not recorded appropriately.	identified some staff are not fully aware of the corporate process of receiving and logging complaints and differentiating between a service request and a complaint. We should not rely on sending letters when we are awaiting information but telephone tenants to discuss matters.	8 Quality of work
Contract Holder unhappy with quality of finish following WHQS works, they reported it a while ago but now had to log some repairs. Contract Holder did not sign the work off as satisfactory so wants to know who did.	investigations indicated the contractor walked off site and did not return to complete the remedial works as the Contract Holder refused access. The WHQS works were completed 4 years previous.	8 Quality of work

Housing applicant is unhappy with banding as feels due to medical conditions they should be in a priority banding.	it was recognised that there were no real misgivings on how this case was approached however noted that maybe reviewing the rent account sooner to ensure a collaborative response was provided along with requesting up to date medical history information.	8 Quality of work
Contract Holder contacted to advise they have numerous unresolved repairs still outstanding.	it was acknowledged that poor communication and inconsistent inspection/surveys were the root of the problem, so toolbox talks were arranged to discuss the issues raised.	3 Delay in Service Provision
Contract Holder unhappy as thought sewerage in kitchen should have been initially logged as an official complaint and wants to investigate why it took 6 weeks to sort out.	£200 compensation offered for delay in arranging another appointment. Officers were reminded of the importance of follow up calls to ensure appointments.	3 Delay in Service Provision
Contract Holder unhappy with stage 1 response in relation to failures with replacing his kitchen after a leak.	Due to a number of ongoing issues including this complaint, the Contract Holder met with Christina Harray and Rob Tranter and an offer of £5000 was made and accepted along with an offer of an alternative property to better suit the Contract Holder's needs.	3 Delay in Service Provision
Contract Holder had an appointment to fit windows. Operatives didn't turn up and was not contacted to let her know it had been cancelled and rearranged.	relevant member of staff reminded of procedure which must be followed to ensure accurate communication is provided.	3 Delay in Service Provision
Contract Holders have been waiting for 2 years to have door fitted. Both are very ill and cancelled a hospital appointment for door to be replaced and no one turned up or called to cancel the appointment.	relevant member of staff reminded of procedure which must be followed to ensure accurate communication is provided.	3 Delay in Service Provision
Contract Holder unhappy with the re-let standard of the property and concerned with the amount of mould.	Poor communication and inconsistent inspections/surveys. Review of Void Process and letting standard and reissue updated version to all Staff involved in the completion and letting of empty homes.	8 Quality of work



#### 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	4
Gender Reassignment	0
Marriage and Civil Partnership	0
Pregnancy and Maternity	0
Race	0
Religion/Belief or Non-belief	0
Sex	1
Sexual Orientation	0
Welsh Language	0
<b>Totals</b>	<b>5</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.
- Contract Holder advised they were unhappy with the banding they were placed on the Common Allocations Register due to their medical conditions and feel they should have a priority banding. This complaint was considered at both Stage 1 and Stage 2 and was found to be upheld with lessons learnt.
- Resident raised issues of sexism within Housing Solutions Team as there would be more options available to him if were female. The resident later decided to withdraw this complaint.

#### 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.**

Twelve 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. The fourth related to mess in the resident's estate and the time it takes to exhaust the garden procedure, the Ombudsman reported it cannot investigate complaints about a properly made decision that a public body or a provider of public services is entitled to make. The fifth was of a similar nature regarding a neighbouring fence which the Ombudsman felt was a property made decision. The sixth was in relation to a garden fire which damaged a neighbour's garden furniture. The Ombudsman decided it cannot determine cause of liability and therefore would be remedied by the way of court proceedings. The seventh case related to a delay in outstanding repairs which we apologised for and communicated with the Contract Holder, considering this, the Ombudsman noted are efforts and agreed there were not further actions for us to take. The remaining five complaints

were made prematurely to the Ombudsman and were dismissed due to the complainant not completing the complaints process available to them.

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**Directorate for Education**  
**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	5	5	100
Stage 2	2	2	100
Escalated Stage 1 to 2	1	1	100
Totals	8	8	100

**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)	5	5	100
Totals	5	5	100

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
Totals	1	1	100

Service	Count Stage 2	Count Completed in Target Times	Percentage Completed in Target Times
Early Years / ALN & Inclusion	1	1	100
Youth Service	1	1	100
Totals	2	2	100

**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	5	2	1
Letter	0	0	0
On-line	0	0	0
Contact Centre	0	0	0
Other	0	0	0
Totals	5	2	1

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

## 1. 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.

An overview of the complaints received and dealt with are as follows:

- ALN and Inclusion Service – Lack of support
- ALN and Inclusion Service – Lack of education and ALN Involvement/Communication
- ALN and Inclusion Service - Dyslexia testing and The Educational Psychologist Service (EPS)
- ALN and Inclusion Service - Delay in request for an Education, Health, and Care (EHC) needs assessment in breach of its legal duty on the grounds of timescale
- ALN and Inclusion Service – Member of staff from our Advisory / Specialist Teaching Service and the LEA’s assessment process to establish if intervention/support was required from our Specific Learning Difficulty (SpLD) Team
- Youth Service - Treatment by two members of staff
- Early Years and ALN/Inclusion Services – Child to continue attending current Early Year setting and Matrix report used by ALN/Inclusion Services

## 2. 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)	1
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	5
Totals		8

## 3. 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	6
Early Years and ALN/Inclusion Services	0	1
Youth Service	0	1
Totals	0	8

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

The complainant raised a number of concerns in relation to the LEA and school setting.:

- 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

The investigation was conducted into the LEA 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. **Complaint not upheld.**

## **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 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 logged in a timely manner and emails were exchanged subsequently.

(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 the children. A setting for the children was identified.

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

Escalation to Stage 2 – A total of 45 points were raised within the Stage 2 complaint. In terms of the issues raised, all points were thoroughly investigated by the Lead for Additional Learning Needs & Inclusion Services. Complaint not upheld.

### **Lessons learned:**

While the decision was 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.

### **Stage 1 – Category 11 (3 & 6). Dyslexia testing and The Educational Psychologist Service (EPS)**

Allegation the LEA would not observe Pupil A, refused a dyslexia test and Information provided by the school that Pupil A was not referred to see an Education Psychologist due to budget cuts and Pupil A not meeting criteria. All issues were thoroughly investigated by the LEA Complaint Officer:

The LEA Complaint Officer was able to establish that officers from our Specific Learning Difficulty (SpLD) Team worked/met with parents and the school for the last 2 years in relation to how best the school could support Pupil A. The SpLD manager confirmed that a request for observation would not be denied if a pupil met the current referral criteria and at no point can the SpLD Team recall denying the request for an observation. The SpLD Team communicated with parent (and the school) regarding the support/interventions the school can/have put in place. The SpLD Team made it clear at every opportunity that neither the SpLD nor Educational Psychology Service (EPS) diagnose dyslexia.

The EPS did not see a reduction or cut-back to their budget. While staffing levels reduced in the service by 50%, this was a result of staff leaving the authority. The service was actively seeking to recruit new staff to fill all vacant positions and ensure the service was running at full capacity. Despite a reduction in staffing levels, at no point did the EPS instruct schools to refrain from making referrals due to budget cuts and as such, schools continued to make referrals to the EPS throughout. Taking this information allegedly came from the school, parent was advised they may wish to raise this with the school directly.

In addition to the EPS referrals, schools also have access to cluster consultations with the EPS. The school used their most recent consultation to seek advice around Pupil A. During the consultation, the expectations of the EPS involvement was discussed and what helpful next steps might look like to support Pupil A. The SpLD Team do not refer any pupil to the EPS for Dyslexia diagnoses. The EPS have a planning meeting protocol with schools, the same as the SpLD Team. **Complaint not upheld.**

### **Stage 1 – Category 11 (3 & 5b). Delay in request for an Education, Health, and Care (EHC) needs assessment and as a result, the LEA was in breach of its legal duty on the grounds of timescale**

Allegation parent submitted a request for an Education, Health, and Care (EHC) needs assessment on behalf of Pupil A under section 36(1) of the Children and Families Act 2014. The request was sent by e-mail before 5pm and therefore assumed to have been received on the date on which it was sent. Parent also alleged the LEA breached its legal duty under Regulation 5(1) of the Special Educational Needs and Disability Regulations 2014 (the LEA are required to notify parents/guardians within 6 weeks of receiving this request of the decision as to whether it is necessary to secure an EHC needs assessment) as more than 6 weeks had passed since we received the request and parent had not received notice of the decision. All issues were thoroughly investigated by the LEA Complaint Officer:

The LEA Complaint Officer was able to establish the Lead for Additional Learning Needs & Inclusion Services (ALN) received the email from parent on x date which was passed to the Senior Educational Psychologist (SEP) two days later and contact was made with parent the following day. As a result of the email received, the SEP and Statutory Officer worked and communicated with the school/parent throughout to identify how best to support Pupil A and a Person-Centred Planning meeting (PCP), was arranged. This meeting would identify Pupil A's needs and how best the school could support Pupil A moving forward. This process would also identify if further advice and/or guidance was required from the LEA during/after the process.

The regulation the parent was referring to relates to the Education, Health, and Care Plan legislation for pupils in England, not Wales. In Wales, the Additional Learning Needs (ALN) and Education Tribunal Wales Act 2018 applies. Under the ALN Code schools have 35 days to complete the statutory assessment unless it is impractical to do so due to circumstances beyond their control.

In line with the new ALN reform, schools are gradually moving pupils across to the new ALN system, which has come into effect in Wales from September 2021. This academic year will see all pupils in Year 10 moving over and so it was the appropriate time for Pupil A to be considered for an Individual Development Plan (IDP). As stated above, a PCP meeting was arranged to look at how best to support Pupil A moving forwards and to consider the IDP process. **Complaint not upheld.**

#### **Stage 1 – Category 11 (3 & 5b). Member of SpLD staff and the LEA's assessment process to establish if SpLD intervention/support was required**

Parents raised concerns in relation to a member of staff during a meeting held at school and during the assessment process. Parents also raised concerns regarding the LEA's assessment process for SpLD intervention/support. The LEA Complaint Officer conducted the investigation with the member of staff in question and two members of school staff who were present during the meeting, one of which was present during the assessment process. In terms of the issues raised against the member of staff, they were thoroughly investigated. In terms of the SpLD intervention/support assessment, the Complaint Officer was able to establish that the assessment process was in accordance with the LEA's criteria. **Complaint not upheld.**

#### **Lessons Learned:**

While the decision was made not to uphold the complaint in its entirety, there was an area where a lesson will be learnt on the following grounds:

Staff will have consideration to differences of opinions to the points raised in meetings and allow opportunities for all stakeholders to voice those opinions.

#### **Stage 2 – Category 4. Treatment by two members of staff at the Young Mums Group**

The complainant provided a number of concerns raised between November 2021 and March 2022 in relation to the treatment she received from two members of staff at a group setting.

Each concern was individually investigated by the Senior Youth Service Manager, and the appropriate evidence obtained.

The information provided by the two officers, managers and daily logs confirmed there was no evidence to substantiate the complaint. **Complaint not upheld.**

## **Stage 2 – Category 11 (5a & 5b). Child to continue attending current Early Year setting and Matrix report used by ALN/Inclusion Services**

The first element of the complaint was in relation for Pupil A to continue attending his current setting on the grounds that they do not become statutory school age until March 2023.

This element of the complaint was investigated by the Early Years Manager:

While the child was not legally required to attend their statutory school placement until the term after they turned 5 years of age (April 2023). The reception placement is offered from the September in the academic year in which the child turns 5 (Sept 2022). For clarification, the query was raised with WG. The response from WG confirms the Childcare Offer would not be eligible after August 2022 should the parent(s)/guardian(s) chose not to accept the reception place offered for your child:

*At the start of the school term when a child is eligible to receive a full-time education place, the child will no longer be eligible to access the Offer. In the majority of local authorities, children will be offered a full-time education place from the September after they turn 4. Where a school offers a staggered start to the term, parents will not be eligible to use the Offer for these term-time day(s) / week(s) when their child is not actually in the school.*

The second element of the complaint was in relation to the ALN Matrix document designed for children/young people aged 3-19yrs on roll at Local Authority and Grant Maintained Schools and Referral Units. Parent believed the Matrix document is a tick box exercise and not specific to a pupils needs. As such, how it can be used to write an Individual Development Plan (IDP) for Pupil A? Parent also requests that CCBC overhaul their policies & procedures to offer a truly person-centred approach to ALN.

This element of the complaint was investigated by the Lead for Additional Learning Needs and Inclusion Services:

The Matrix document is the first edition and the South East Wales Consortia (SEWC) are continuing to develop the Matrix for different interfaces. Comments relating to Early Years will be considered as part of future developments. The LA previously confirmed that the Matrix has been developed as an 'online' tool. The purpose of the Matrix is not to categorise or diagnose, but to identify the barriers to learning a pupil may be experiencing. The ALN Assessment Matrix is a pupil centred tool, which identifies the complexity and interrelationship of difficulties, which require Additional Learning Provision (ALP). The ALN policies and procedures have been produced regionally in line with the ALN Code and follow a person-centred approach to ALN. **Complaint not upheld.**

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

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

<b>Characteristic Strand</b>	<b>Count Stage 1, Stage 2 &amp; Escalated 1 to 2</b>	<b>Count Completed in Target Times</b>	<b>Percentage Completed in Target Times</b>
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
Totals	0	0	0



No specific characteristics links have been identified for this reporting period

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

A complainant contacted the Ombudsman on three separate occasions in relation to the LEA failing to provide a response under Stage 2 of the Corporate Complaint's Policy. The Ombudsman were issued with a copy of the response sent to the complainant and as a result, no investigation was required.

It is important to recognise that the changes currently being made to the ALN and Inclusion Service are due to the implementation of the new curriculum for Wales and the ALN Act which has led to a lot of confusion and frustration of some of our stakeholders, especially parents. The LA will continue to listen and adapt its processes in line with feedback.

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## Corporate Services

## 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	13	12	92.30%
Stage 2	5	4	80%
Escalated Stage 1 to 2	2	2	100%
Totals	20	18	

Table showing how the complaints were received.

By source	Count Stage 1	Count Stage 2	Count Escalated Stage 1 to Stage 2
Telephone	2	0	0
Email	7	4	2
Letter	0	0	0
On-line	3	0	0
Contact Centre	0	0	0
Other	1	1	0
Totals	13	5	2

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	4	3	75%
Corporate Finance	8	7	87.50%
Other – Combined	1	1	100%
Totals	13	11	

Service	Count Stage 2	Count Completed in Target Times	Percentage Completed in Target Times
Legal Services	3	3	100%
Corporate Finance	1	1	100%
Other – Combined	1	0	
Totals	5	4	

Service	Count Escalated Stage 1 to Stage 2	Count Completed in Target Times	Percentage Completed in Target Times
Corporate Finance	1	1	100%
Other - Combined	1	1	100%
Totals	2	2	

Corporate Services complaints which are not Corporate Finance comprises of 3 for Legal Services which all dealt with as stage 2, and 4 complaints for Customer Services which 3 were dealt with as stage 1 and 1 stage 2.

The target was met on all complaints for Legal Services and Customer Services  
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. There was also 1 stage 2 target date missed due to the number of responses being collated and other work pressures which led to an overall delay in all responses being received on time.

## 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.

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

Customer Services – Switchboard not answering the telephone for a long period, Officers not being available to speak to staff at main reception, Officers not answering their phones or returning calls when messages have been left, The criteria for qualifying for blue badges and also vehicles parked in the disabled bays and not displaying blue badge in council car park.

Legal Services – Disability discrimination complaint dealt with on behalf of the Economy and Environment Directorate where correspondence had not been sent as requested in a specific format, Dissatisfaction about FOI appeal and delay in responding to respond to the complaint, alleged Misinterpretation of Legal deeds resulting in grant being delayed.

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 10, Housing Benefits x 1, Accountancy x 1 and Other - Combined x 1.

## 3. 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	4
3 Delay in Service Provision	6
4 Officer/Contractors Conduct with public (including sensitivity/empathy of staff/politeness)	0
5a Following Council Policies	
5b Following relevant Legislation	3
6 Accessibility of Services	2
7 Clarity/Accuracy/Timeliness of information	3
8 Quality of Work	1
9 Openness/ Fairness and Honesty	0
10 Compliance with Complaints procedure	0
11 Combination of categories	1
Totals	20

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

Table showing number of complaints Upheld and Not Upheld

Service	Upheld	Not Upheld
Customer Services	1	3
Corporate Finance	7	6
Legal services	1	2
Totals	9	11

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
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.	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.	7 Clarity/ Accuracy/ Timeliness of information
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.	<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>	8 Quality of work
Stage 1: Combined (Customer Services/CTax) – Complainant sent cheque for April’s CT 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	<p>There were no lessons to be learned on the CTAX 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 were 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</li> </ul>	7 Clarity/ Accuracy/ Timeliness of information

<p>gets is a text messages saying he has not paid. Complainant angry with the whole service and sick of excuses why his calls are not answered.</p>	<p>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 DD on the 25<sup>th</sup> of each month which was subsequently set up and is ongoing at this time.</p>	
<p>Stage 1: Council Tax – Complaint re incorrect advice given and Court Summons being issued incorrectly regarding non payment of council tax</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 &amp; escalated to Stage 2: Council Tax - CTax refund not given After many conversations between complainant and section the refund was never mentioned until 'by chance'. Complainant asked why we never refunded this (over 10 months ago). The section never contacted or refunded her. Complainant feels this appears to be somewhat fraudulent as we have always had contact details, we should have at least posted a cheque.</p> <p>Never received any communication at address in question from section regarding how to claim the refund, would have acted on it immediately and claimed it straight away. In addition, colleague also advised on phone that we did not have her details so no attempt was made to contact her and credit was just 'sat' on account. Complainant feels this is completely contradictory</p>	<p>Complaint upheld but compensation not justifiable as Adjustment Notice was issued in Feb 2022 advising tax payer how to claim a refund.</p>	<p>3 Delay in Service Provision</p>

to the explanation given by the Finance Manager.		
Stage 1: Council Tax - Complaint made due to the time they have had to wait to be granted a decision on the section 13a application that was made on the 31st of October 2022.	No lessons learned. As explained in the Stage 1 response, the delay in reaching a determination was caused partly by the need to exhaust all other ways of reducing the amount of council tax payable, and more importantly, by officers having to prioritise the WG Cost of Living Support and Winter Fuel Payment Schemes which involved tens of thousands of households with the Council's area against the backdrop of ever increasing workloads caused by various WG and UK Government initiatives and the cost of living crisis in general.	3 Delay in Service Provision
Stage 1: Customer Services – Complaint was concerning Main Switchboard not answering the telephone for a long period.	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 blip on the system. Our queues are also constantly monitored by managers to ensure calls are being dealt with efficiently.	3 Delay in Service Provision
Stage 2: Legal Services – Complaint about the correspondence being dealt with as a FOI appeal rather than a formal complaint	To improve on the checks and balances already in place to support the process and compliance with timeframes.	2 Decision Making

## 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	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
Totals	1

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

<b>Service Area</b>	<b>Date received</b>	<b>Decision</b>
Benefits	06/04/22 went into junk emails received then on 31/05/22	Early Resolution – Apologise and confirm junk emails will be monitored in future.
Council Tax	14/10/22	Not Investigating
Council Tax	01/02/23	Early Resolution – The Council will write to the complainant within 30 working days, and provide a detailed summary of the current outstanding Council Tax balance, and the amounts going forward
Council Tax	10/02/23	Not Investigating
Legal Services	17/2/23	Early Resolution – To apologise within 4 weeks for failing to advise that it has no powers to investigate the concerns about elected members and for failing to promptly signpost Complainant to the Ombudsman

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## Directorate and Services

### 1. Diagram of Directorate and Service Framework.



### 2. 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.

### 3. 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	59	56	95%
Stage 2	0	0	0%
Escalated Stage 1 to 2	7	5	71%
Totals	66	61	92%

Of the 7 that escalated from Stage 1 to 2, 5 were completed within timescale, 1 was completed 3 days over timescale and the other 1 was completed 5 days over timescale. The Reason for the one being 5 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	12	0	3
Email	37	0	3
Letter	7	0	1
On-line	3	0	0
Contact Centre	0	0	0
Other	0	0	0
Totals	59	0	7

## 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	39	38	97%
Children's Services	20	18	90%
<b>Totals</b>	<b>59</b>	<b>56</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	4	2	50%
Children's Services	3	3	100%
<b>Totals</b>	<b>7</b>	<b>5</b>	<b>71%</b>

#### 4. 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  
 Withdrawal of care at short notice  
 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.  
 Timing of care calls/unsuitable times offered  
 Request change of Social Worker as no confidence in current worker  
 Staff attitude inappropriate/unprofessional/rudeness  
 Neighbour having Issues with young people who are supported by Social Services  
 Misinformed about long term care financial charge  
 Request Safeguarding Investigation be reopened  
 Removal of Looked After Child  
 Incorrect information being given in respect of care call  
 Breach of Confidentiality as did not give consent to release information  
 Delayed care costs  
 Increased day services community sessions not happened  
 Day services community sessions be changed from afternoon to morning sessions  
 Closure of day centres and the lack of services available to clients since Covid-19  
 Lack of support  
 Information sharing  
 Day Services consultation  
 Not made aware of charge for service from certain date  
 Contents of Child's Safety Plan  
 Procedures not being followed

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.

<b>Service Group or Team</b>	<b>Count Stage 1, Stage 2 &amp; Escalated 1 to 2</b>
Adult Services	43
Children's Services	23
Totals	66

## 5. Number of Complaints by Category

**Table showing complaints by category.**

	<b>Category</b>	<b>Count Stage 1, Stage 2 &amp; Escalated 1 to 2</b>
1.	Collaborative Working	0
2.	Decision Making	29
3.	Delay in Service Provision	4
4.	Officer/Contractors Conduct with public (including sensitivity/empathy of staff/politeness)	8
5a.	Following Council Policies	3
5b.	Following relevant Legislation	0
6.	Accessibility of Services	2
7.	Clarity/Accuracy/Timeliness of information	5
8.	Quality of Work	7
9.	Openness/ Fairness and Honesty	3
10.	Compliance with Complaints procedure	2
11.	Combination of Categories (Non-Specific)	3
	Totals	66

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

Service	Upheld	Not Upheld
Adult Services	4	39
Children's Services	1	22
Totals	5	61

**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 5 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. The day centre has since closed.	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. The assessment service commenced shortly after the complaint was made.	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
Complainant who is a newly registered foster carer never offered training despite requesting this. Not received a lockable storage box for confidential documents. Also general lack of information and not been visited 4-6 weekly/3monthly.	Not offered induction training for kinship carers until 2022 when it could be facilitated face to face. This course was not being offered during the pandemic as it was felt that it was better to be delivered face to face and not virtually. Advised of future induction training dates. A storage box was provided. Also advised to speak to Social Worker about issues. Due to restrictions and lock downs during the COVID-19 Pandemic, face to face home visits had to be stopped for significant periods of time. During this period monitoring of Children Looked After was being carried out via phone and video calls.	8. Quality of Work
Complainant unhappy that Council not accepting any fault in	Number of a number of issues with providing complainant with an accurate summary of the care costs due. Communication timeframes in responding	3. Delay in Service Provision

relation to the delayed care costs for late father and the Council should contribute towards the care costs as acknowledgment of the oversight	have been excessive and errors identified. Sincere Apologies offered to complainant for the distress and inconvenience experienced with the delayed handling the account. As a gesture of good will a discretionary reduction was applied the final account.	
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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.

## 7. 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
Totals	0

## 8. 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.

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

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## **GOVERNANCE AND AUDIT COMMITTEE – 7<sup>TH</sup> NOVEMBER 2023**

**SUBJECT: INTERNAL AUDIT SERVICES – UPDATE ON PROGRESS 2023/24**

**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 with information on progress being made against the audit plan and other unplanned work to date.

### **2. SUMMARY**

- 2.1 The report provides details of the progress made against the Internal Audit Annual Plan 2023/24 which was presented to the Governance and Audit Committee in April 2023. The original planned audits by quarter presented to the Committee are shown in Appendix 1.
- 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 The plan is a forecast taking account of known risks and resources and as in previous years the plan may be subject to change if there are changes in resources or new risks identified. Audits may therefore be reprioritised, or additional unplanned audits undertaken.
- 2.4 The status of all current audits is shown in Appendices 2 and 3, including audit opinions where these have been agreed and issued.

### **3. RECOMMENDATIONS**

- 3.1 The Governance and Audit Committee is asked to note the content of the report.

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

- 4.1 To ensure that the Authority is continually improving its governance, anti-fraud, and

security arrangements and that the Governance and Audit Committee is briefed on progress against the Internal Audit Plan.

## **5. THE REPORT**

- 5.1 In accordance with the Public Sector Internal Audit Standards (PSIAS), 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 2023/24 Internal Audit plan was submitted to the Governance and Audit Committee for approval in April 2023. 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 there have been some unforeseen issues such as bereavement and sickness absences that have impacted the auditor resource available. However the majority of the audits planned in the first half of the year have been started.
- 5.5 In addition, resource has been deployed to support the UK Government Additional Fuel Scheme grant payments in the early part of the year, and more recently to support elements of the Mobilising Team Caerphilly Transformation Programme. Any reduction in resource has an impact on the planned outputs for the team.
- 5.6 As in prior years there were a number of incomplete audits brought forward from the 2022/23 financial year, which were required to be progressed to completion in the first quarter of 2023/24. These are shown in Appendix 2 together with their current status and audit opinion.
- 5.7 As in prior 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, and priority will be given to any new or emerging risk areas.
- 5.8 As a result there has been a number of changes to the original plan . Some unplanned work has been undertaken and a small number of school audits have been rearranged to later in the year at the request of the Heads due to Estyn visits. Also a small number of audits have been rescheduled due to the impact of staff absences on staff resources. There will therefore be an impact on audits in the third and fourth quarter, and this will be managed in line with available resources and risk prioritisation, but the intention is to continue with the current plan in the main with some rescheduling where required
- 5.9 Appendix 3 shows the status of each audit started in 2023/24, the type of audit, and for completed audits the opinion that was issued.
- 5.10 The appendices illustrate the progress that has been made in completing all outstanding audits from 2022/23 and the status of audits that have been planned or started. Those audits in progress will be completed during the remainder of 2023/24



together with the audits planned for further into 2023/24.

#### 5.11 **Conclusion**

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

### 6. **ASSUMPTIONS**

- 6.1 It is assumed that sufficient resource will be available to complete planned audits for the remainder of the financial year.

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

- 7.1 This report does not relate to the development of a policy, strategy, practice, or project, so an Integrated Impact Assessment is not required.

### 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 Acting Internal Audit 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 Audits planned by quarter 2023/24 (original audit plan)  
Appendix 2 Status of audit work brought forward from the 2022/23 financial year  
Appendix 3 Status of 2023/24 Audit work

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**APPENDIX 1 TABLE SHOWING AUDITS PLANNED BY QUARTER 2023/24 (ORIGINAL AUDIT PLAN)**

<b>Audit title</b>		<b>Q1 Days</b>	<b>Q2 Days</b>	<b>Q3 Days</b>	<b>Q4 Days</b>
Completion of 2022/23 audits		130			
School Private funds	Follow up		5	10	
Annual Governance statement	Support	5			
Lewis School Pengam	Full audit visit	18			
Heolddu Comprehensive	Full audit visit		15		
Hengoed Primary School	Full audit visit	15			
St Gwladys Primary School	Full audit visit		18		
Risca Comprehensive School	Full audit visit		18		
Ysgol Gyfun Cwm Rhymni	Full audit visit				
St Martin's Comprehensive School	Full audit visit			18	
Islwyn High School	Full audit visit			18	
Bryn Awel Primary School	Full audit visit			15	
White Rose Primary School	Full audit visit			15	
Ysgol Gymraeg Bro Allta	Full audit visit			15	
Fochriw Primary School	Full audit visit				11
Graig-y-Rhacca Primary & Nursery	Full audit visit				11
Upper Rhymney Primary School	Full audit visit				11
Ysgol Gymraeg Gilfach Fargoed	Full audit visit				10
Ysgol Gymraeg Cwm Derwen	Full audit visit				10
Rhydri Primary School	Full audit visit				10
Hendre Infants School	Full audit visit				10
St James' Primary School	Full audit visit				10
Penllwyn Primary School	High level Internal Control Questionnaire (ICQ) Assessment visit			3	
Park Primary School	High level ICQ visit			3	
Hendre Junior School	High level ICQ visit			3	
Gilfach Fargoed Primary School	High level ICQ visit			3	
Markham Primary School	High level ICQ visit			3	
Maesycwmmmer Primary School	High level ICQ visit			3	
Hendredenny Park Primary School	High level ICQ visit			3	

Ysgol Gynradd Gymraeg Y Castell	High level ICQ visit			3	
Tŷnewydd Primary School	High level ICQ visit			3	
Trinity Fields School	High level ICQ visit			3	
St Helen's Primary School	High level ICQ visit			3	
Pantside Primary School	High level ICQ visit			3	
Deri Primary School	High level ICQ visit			3	
Newbridge Comprehensive School	High level ICQ visit			3	
St Cenydd Comprehensive School	High level ICQ visit			3	
Idris Davies	High level ICQ visit			3	
Blackwood Comprehensive School	High level ICQ visit			3	
Phillipstown Primary School	High level ICQ visit			3	
Cŵrt Rawlin Primary School	High level ICQ visit			3	
Bedwas Infants	High level ICQ visit			3	
Libanus Primary School	High level ICQ visit			3	
Tir-y-berth Primary School	High level ICQ visit			3	
Pentwynmawr Primary School	High level ICQ visit			3	
Ynysddu Primary School	High level ICQ visit			3	
Waunfawr Primary School	High level ICQ visit			3	
Plas-y-felin Primary School	High level ICQ visit			3	
Aberbargoed Primary	High level ICQ visit			3	
Ysgol Ifor Bach	High level ICQ visit			3	
Ysgol Gymraeg Cwm Gwyddon	High level ICQ visit			3	
Ysgol Bro Sannan	System Audit			3	
Education Improvement Grant	Grant audit		3	2	
Pupil Deprivation Grant	Grant Audit		3	3	
Supporting people grant	Grant Audit		3	3	
Blackwood Miners Institute	Full audit visit		25		
Special Guardianships	System Audit		20	10	
IT audit Cyber security	System Audit		20		
Treasury Management	System Audit		20		

Leisure Centres	High level ICQ visits		30		
Contract audits	Final Account Audits	10	10	10	10
NFI match checks	Data Matching	25	25	25	25
Recommendation tracking		5	5	5	5
Risk Management	System Audit		20		
Travel expenses	System Audit		20		
Council Tax	System Audit			20	10
Cashless catering	System Audit	5	10		
Social Services establishments	High level ICQ visits		30		
Residential charging and financial assessments	System Audit		13	7	
VAT	System Audit			20	
Housing benefits	System Audit				35
Contract compliance and management	System Audit				25
CCTV	System Audit				15
Payment Card Industry Security Compliance	System Audit				15
Car parks	System Audit				30
Gym memberships	System Audit				30
Fostering payments	System Audit				30
Additional Fuel Grant (non audit)	Non audit	64	10		
Information Governance	Non Audit	1	1	1	1
Contingency		60	60	60	60
<b>Total</b>		<b>338</b>	<b>384</b>	<b>347</b>	<b>374</b>

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## Appendix 2 Status of Audit work brought forward from the 2022/23 financial year

Audit Title	Audit Period	Audit Type	Audit Status 31/3/2023	Audit Status 30/9/2023	Compliance with Controls
EXT 17C-LC29PS - WHQS Scheme 9-20 Stanley Drive Contract Final Account updated	Mar-23	Contract Audit	Audit Work complete and draft report issued	Audit Closed and final report issued	Compliant
Starters and Recruitment Payroll -starters	Nov-22	System Audit	Audit Work complete and draft report issued	Audit Closed and final report issued	Effective
Purchase Card - Cardholder Testing @15 Audits	Sep-22	System Audit	Audit Work complete and draft report issued	Audit Closed and final reports issued	Effective
Abercarn Primary SAQ 2022/23 Schools 2022 - Control Risk Self-Assessment	Dec-22	SAQ Control Risk Self-Assessment	Audit Work complete and draft report issued	Chasing final report	Effective
Cwrt Rawlin Primary School SAQ 2022/23 Schools 2022 - Control Risk Self-Assessment	Dec-22	SAQ Control Risk Self-Assessment	Audit Work In progress	Audit Closed and final report issued	Effective
The Twyn Primary School SAQ 2022/23 Schools 2022 - Control Risk Self-Assessment	Dec-22	SAQ Control Risk Self-Assessment	Audit Work in progress	Audit Closed and final report issued	Effective
Ysgol y Lawnt SAQ 2022/23 Schools 2022 - Control Risk Self-Assessment	Dec-22	SAQ Control Risk Self-Assessment	Audit Work In progress	Audit Closed and final report issued	Effective
Purchase Card User Administration 73 Audit visits	Sep-22	System Audit	Audit Work complete and draft reports issued	Audit Closed and final reports issued	Effective with opportunity to improve
Purchase Card Authoriser Administration @62 Audits	Sep-22	System Audit	Audit Work complete and draft reports issued	Audit Closed and final reports issued	Effective with opportunity to improve

<b>Audit Title</b>	<b>Audit Period</b>	<b>Audit Type</b>	<b>Audit Status 31/3/2023</b>	<b>Audit Status 30/9/2023</b>	<b>Compliance with Controls</b>
HR Payroll Employee Existence Payroll - existence, duplicated posts, and ghost employees	Oct-22	System Audit	Audit Work complete and draft report issued	Chasing final report	Effective with opportunity to improve
Purchase Card - Cardholder @14 Audits	Sep-22	System Audit	Audit Work complete and draft reports issued	Audit Closed and final reports issued	Effective with opportunity to improve
Bryn Primary School Full Audit	Nov-22	Establishment Audit	Audit Work complete and draft report issued	Audit Closed and final report issued	Effective with opportunity to improve
Payroll Leavers Payroll - leavers	Sep-22	System Audit	Audit Started	Audit Closed and final report issued	Effective with opportunity to improve
Nant y Parc Primary SAQ 2022/23 Schools 2022 - Control Risk Self-Assessment	Dec-22	SAQ Control Risk Self-Assessment	Audit Work In progress	Audit Closed and final report issued	Effective with opportunity to improve
Plas y felin Primary School SAQ 2022/23 Schools 2022 - Control Risk Self-Assessment	Dec-22	SAQ Control Risk Self-Assessment	Audit Work In progress	Audit Closed and final report issued	Effective with opportunity to improve
YGG Caerffili SAQ 2022/23 Schools 2022 - Control Risk Self-Assessment	Dec-22	SAQ Control Risk Self-Assessment	Audit Work In progress	Audit Closed and final report issued	Effective with opportunity to improve
Idris Davies School SAQ 2022/23 Schools 2022 - Control Risk Self-Assessment	Dec-22	SAQ Control Risk Self-Assessment	Audit Work In progress	Audit Closed and final report issued	Effective with opportunity to improve
St Cenydd Comprehensive School SAQ 2022/23 Schools 2022 - Control Risk Self-Assessment	Dec-22	SAQ Control Risk Self-Assessment	Audit Work In progress	Audit Closed and final report issued	Effective with opportunity to improve



<b>Audit Title</b>	<b>Audit Period</b>	<b>Audit Type</b>	<b>Audit Status 31/3/2023</b>	<b>Audit Status 30/9/2023</b>	<b>Compliance with Controls</b>
Lewis Girls School SAQ 2022/23 Schools 2022 - Control Risk Self-Assessment	Dec-22	SAQ Control Risk Self-Assessment	Audit Work complete and draft report issued	Audit Closed and final report issued	Effective with opportunity to improve
Management of Temporary ID cards Temporary ID cards	Sep-22	Regularity	Audit Started	Audit Work In progress	In need of improvement
Ty Newydd Primary School SAQ 2022/23 Schools 2022 - Control Risk Self-Assessment	Dec-22	SAQ Control Risk Self-Assessment	Audit Work In progress	Audit Closed and final report issued	In need of improvement
Petty Cash User admin	Sep-22	SAQ Control Risk Self-Assessment	Audit Work complete and draft report issued	Audit Closed and final report issued	Inadequate and in need of immediate improvement
Tyn y Wern Primary School SAQ 2022/23 Schools 2022 - Control Risk Self-Assessment	Dec-22	SAQ Control Risk Self-Assessment	Audit Started	Audit Closed and final report issued	Inadequate and in need of immediate improvement
Homelessness Audit 2022-23 Homelessness VFM Audit	Jan-23	VFM	Audit Started	Audit Closed and final report issued	N/A
Administration Additional Fuel scheme payments Consultancy	Mar-23	Consultancy Review	In progress	Work complete	N/A
Hengoed Primary School Full Audit	Feb-23	Establishment Audit	Audit Started	Audit Work complete and draft report issued	Effective with opportunity to improve
Lewis School Pengam Full Audit	Mar-23	Establishment Audit	Audit Started	Audit Closed and final report issued	Effective with opportunity to improve
Fochriw Primary SAQ plus 2023/23 Schools 2022 - Control Risk Self-Assessment	Nov-22	SAQ plus	Audit Started	Audit Closed and final report issued	Effective with opportunity to improve

<b>Audit Title</b>	<b>Audit Period</b>	<b>Audit Type</b>	<b>Audit Status 31/3/2023</b>	<b>Audit Status 30/9/2023</b>	<b>Compliance with Controls</b>
YG Bro Allta SAQ plus 2022/23 Schools 2022 - Control Risk Self-Assessment	Nov-22	SAQ plus	Audit Started	Audit Closed and final report issued	Effective
YG Cwm Rymni SAQ plus 2022/23 Schools 2022 - Control Risk Self-Assessment	Nov-22	SAQ plus	Audit Started	Audit Closed and final report issued	Effective with opportunity to improve
St Martins SAQ plus 2022/23 Schools 2022 - Control Risk Self-Assessment	Nov-22	SAQ plus	Audit Started	Audit Closed and final report issued	Effective with opportunity to improve
Cwmaber Infants School 2022/23 Schools 2022 - Control Risk Self-Assessment	Dec-22	SAQ Control Risk Self-Assessment	Audit Started	Audit Closed and final report issued	Effective
Cwmaber Junior School SAQ 2022/23 Schools 2022 - Control Risk Self-Assessment	Sep-22	SAQ Control Risk Self-Assessment	Audit Started	Audit Closed and final report issued	Effective
Cwmcarn Primary School SAQ 2022/23 Schools 2022 - Control Risk Self-Assessment	Dec-22	SAQ Control Risk Self-Assessment	Audit Started	Audit Closed and final report issued	Effective with opportunity to improve
Gilfach Fargoed SAQ 2022/23 Schools 2022 - Control Risk Self-Assessment	Dec-22	SAQ Control Risk Self-Assessment	Audit Started	Audit Closed and final report issued	Effective with opportunity to improve
Glyngaer Primary School SAQ 2022/23 Schools 2022 - Control Risk Self-Assessment	Dec-22	SAQ Control Risk Self-Assessment	Audit Started	Audit Closed and final report issued	Effective
Hendredenny Park Primary School SAQ 2022/23 Schools 2022 - Control Risk Self-Assessment	Dec-22	SAQ Control Risk Self-Assessment	Audit Started	Audit Closed and final report issued	Effective

<b>Audit Title</b>	<b>Audit Period</b>	<b>Audit Type</b>	<b>Audit Status 31/3/2023</b>	<b>Audit Status 30/9/2023</b>	<b>Compliance with Controls</b>
Machen Primary School SAQ 2022/23 Schools 2022 - Control Risk Self-Assessment	Dec-22	SAQ Control Risk Self-Assessment	Audit Started	Audit Closed and final report issued	Effective with opportunity to improve
Pantside Primary School SAQ 2022/23 Schools 2022 - Control Risk Self-Assessment	Dec-22	SAQ Control Risk Self-Assessment	Audit Started	Audit Closed and final report issued	Effective
Park Primary School SAQ 2022/23 Schools 2022 - Control Risk Self-Assessment	Dec-22	SAQ Control Risk Self-Assessment	Audit Started	Audit Closed and final report issued	Effective with opportunity to improve
Trinity Fields School SAQ 2022/23 Schools 2022 - Control Risk Self-Assessment	Dec-22	SAQ Control Risk Self-Assessment	Audit Started	Audit Closed and final report issued	Effective
Ty Isaf Primary School SAQ 2022/23 Schools 2022 - Control Risk Self-Assessment	Dec-22	SAQ Control Risk Self-Assessment	Audit Started	Audit Closed and final report issued	In need of improvement
Ysgol Ifor Bach SAQ 2022/23 Schools 2022 - Control Risk Self-Assessment	Dec-22	SAQ Control Risk Self-Assessment	Audit Started	Audit Closed and final report issued	Effective
Blackwood Comprehensive School SAQ 2022/23 Schools 2022 - Control Risk Self-Assessment	Dec-22	SAQ Control Risk Self-Assessment	Audit Started	Audit Closed and final report issued	Effective with opportunity to improve
Islwyn High School SAQ 2022/23 Schools 2022 - Control Risk Self-Assessment	Dec-22	SAQ Control Risk Self-Assessment	Audit Started	Audit Closed and final report issued	Effective

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### Appendix 3 Status of 2023/24 Audit work

Audit Title	Audit Period	Audit type	Audit Status
4455 Ty Sign Curtain Walling Works	April 2023	Contract audit	Audit Closed
Purchase card usage review	April 2023	Social Services Special review	Audit in review
4537 Longbridge Pavilion Demolition and Refurbishment Works	April 2023	Contract audit	Audit Closed
Education Improvement Grant	May 2023	Grant Certification	Audit Closed
Pupil Deprivation Grant	May 2023	Grant Certification	Audit Closed
EXT 19C - UC39 Nelson	May 2023	Contract audit	Audit Closed
2023 NFI VAT mis match and error review and VAT compliance	May 2023	Regularity	Audit Started
Council Tax	June 2023	System Audit	Planned not started
White Rose Primary School Establishment Audit	June 2023	Establishment Audit	Audit Started
Bryn Awel Primary School	June 2023	Establishment Audit	Planned not started
5045- Heolddu Comprehensive Roofing Works	June 2023	Contract audit	Audit Closed
EXT16C LC18PS Phase 1 14-36 Penybryn	June 2023	Contract audit	Audit Closed
Designated Drivers Audit	June 2023	System Audit	Audit Completed
Petty Cash Themed Review	June 2023	System Audit	Audit Started
5024 Ty Ni	June 2023	Contract audit	Audit Closed
St Gwladys Primary School Establishment Audit	July 2023	Establishment Audit	Audit Closed
Risca Comprehensive School Establishment Audit	July 2023	Establishment Audit	Audit Completed
Blackwood Miners Institute 2023	July 2023	Establishment Audit	Audit in review
Newbridge Leisure Centre Establishment Audit	July 2023	Establishment Audit	Audit in review
Bedwas Leisure Centre Establishment Audit	July 2023	Establishment Audit	Audit in review

<b>Audit Title</b>	<b>Audit Period</b>	<b>Audit type</b>	<b>Audit Status</b>
Caerphilly Leisure Centre Establishment Audit	July 2023	Establishment Audit	Audit in review
Cefn Fforest Leisure Centre Establishment Audit	July 2023	Establishment Audit	Audit in review
Centre for Sporting Excellence Establishment Audit	July 2023	Establishment Audit	Audit in review
Heolddu Leisure Centre Establishment Audit	July 2023	Establishment Audit	Audit in review
New Tredegar Leisure Centre Establishment Audit	July 2023	Establishment Audit	Audit in review
Risca Leisure Centre Establishment Audit	July 2023	Establishment Audit	Audit in review
St Cenydd Leisure Centre Establishment Audit	July 2023	Establishment Audit	Audit in review
Sue Noake Leisure Centre Establishment Audit	July 2023	Establishment Audit	Audit in review
4905 Trinity Fields Phase 4 Modifications	July 2023	Contract audit	Audit Closed
Treasury Management 2023	August 2023	System Audit	Audit Started
Heolddu Comprehensive School	September 2023	Establishment Audit	Audit in review
Supporting people Grant 2022-23	September 2023	Grant Certification	Audit Closed
Overtime Audit 2022-23	September 2023	System Audit	Audit In Development
WHQS External Works Waunfawr Gardens, Crosskeys	September 2023	Contract audit	Audit Closed
5178 Maesycwmmwr Primary	September 2023	Contract audit	Audit Closed
St Martins Comprehensive School Establishment Audit	September 2023	Establishment Audit	Audit in review
Ysgol Cwm Derwen Establishment Audit	October 2023	Establishment Audit	Planned not started
Upper Rhymney Primary School Establishment Audit	October 2023	Establishment Audit	Planned not started
5179 Cwmcarn Primary School Artificial Grass Install	October 2023	Contract audit	Planned not started
5118 Resurfacing School Yards	October 2023	Contract audit	Planned not started

<b>Audit Title</b>	<b>Audit Period</b>	<b>Audit type</b>	<b>Audit Status</b>
5180 St James Primary	October 2023	Contract audit	Planned not started
5182 Twyn School Classroom Refurbishments	October 2023	Contract audit	Planned not started
5183 Heolddu Comprehensive Adaption Works	October 2023	Contract audit	Planned not started
5185 Phillipstown Primary Internal Adaptions	October 2023	Contract audit	Planned not started
4701 Ysgol Y Castell	October 2023	Contract audit	Planned not started
Graig y Rhacca Primary School	October 2023	Establishment Audit	Planned not started
St James Primary School	October 2023	Establishment Audit	Planned not started
Hendre Infants School	October 2023	Establishment Audit	Planned not started
4831 Tynewydd Primary School Boiler Replacement	October 2023	Contract audit	Planned not started
5012 Ysgol Y Castell Boiler Replacement	October 2023	Contract audit	Planned not started
5219 Pontllanfraith Primary School Works	October 2023	Contract audit	Planned not started
WHQS Claude Road, Caerphilly	October 2023	Contract audit	Planned not started

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## GOVERNANCE AND AUDIT COMMITTEE – 7<sup>TH</sup> NOVEMBER 2023

**SUBJECT: CORPORATE RISK REGISTER QUARTER 2 UPDATE**

**REPORT BY: CORPORATE DIRECTOR OF EDUCATION AND 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, 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 **October 2023**
- 2.3 There are currently 19 risks on the Corporate Risk Register with 2 new one added.

### 3. RECOMMENDATIONS

It is recommended that the Governance and Audit Committee review 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 Council identifies and manages risks at different levels. Service priorities identify risks to delivering business whilst directorate risks can be more significant risks and 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 routine 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 or more frequent 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 The Risk Register was last updated to Governance and Audit Committee June 2023.

Currently there are **19** Risks on the Risk Register (Appendix A) of which 9 are rated as a high risk, 9 medium and 1 low.

Movement of risk rating from the last update is that 1 risk CRR12 regarding the Covid-19 Recovery and Future wave response has reduced from medium to a lower risk at this time as many of the building blocks are in place and moving into to day to day business.

There are **2** new risks have been added to the register, up and coming Winter pressures and the conflict in Israel. There are no risks that are suggested to be removed or deleted in this reporting period.

Following a proposal for improvement from the Governance and Audit Committee in March 23, the Risks (where relevant) have now been cross referenced to any local reports received by Audit Wales from their local audit and assurance work, and as cross referenced in the 'Recommendation tracker'.

The same risks but to the Well-being of Future Generations have been reviewed and 4 have been changed to reflect how the risk could impact future generations and scores changed accordingly.

## **5.5 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 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 HARRY, 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, Deputy Chief Executive  
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 (as at Quarter 2)**

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# Caerphilly CBC Corporate Risk Register Oct 23

Appendix A

Risk ID & Regulator	Date added to Register	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 2023/24	Q3 2023/24			
CRR-17	Q1 22/23	Impact of cost of living (inflationary) increases on our communities	The 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 2024.	DS	High	High	<ul style="list-style-type: none"> <li>• CoL strategic working group established and meeting monthly and Operational group meeting fortnightly to ensure CoL crisis at forefront of planning and decision making</li> <li>• CoL web page will be continuously refreshed</li> <li>• Cost of Living team in Housing Rents now providing additional services for residents for income maximisation, welfare benefits, support and energy advice</li> <li>• Welcoming Spaces at 55 venues across CCBC offering warm place, food, activities, social opportunities for those unable to heat their homes effectively</li> <li>• Warm Packs purchased and issued to vulnerable residents via staff, partners and via Welcoming Spaces and community groups</li> <li>• Hardship Fund established to provide additional financial assistance for those not eligible for other grants.</li> <li>• Energy grant scheme developed to provide grants for installation of energy efficiency option (inc boilers, windows etc) for households.</li> <li>• Additional small scale measures including mobile phones, hygiene packs available for those in need</li> <li>• Ongoing additional funding and support to be made available to Food Poverty network (e.g. Foodbanks, fareshare schemes) throughout 22/23 to ensure adequate capacity to provide support to those at risk of food poverty (supported by initiatives including Cooking Champions to provide cooking skills &amp; slow cookers etc)</li> <li>• Fuel, energy and food prices continue to be monitored</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	17/18	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 2023/24 for independent sector but feedback indicating this is insufficient for some 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>• Capacity/fragility issues flagged up at a regional level via RPB and associated strategic groups</li> <li>• Recent Domicillary Care provider failure resolved by bringing carers onto in-house payroll</li> <li>• Given the likely financial settlements for Local Government it is unlikely that fee levels for 2024/25 will meet Provider needs or expectations.</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.	High
CRR-25	19/10/2023 New for Q3	Winter Pressures	Indications are that the pressures across the health and social care system in Wales are going to be significant and challenging throughout the remainder of the financial year. Pressures associate with hospital discharge are already very significant and will increase as the winter progresses. Pressures across the Health Services mean that people will not be able to be admitted to or discharged from hospital as quickly as needed. This will have a knock on effect on demand for social care services. We know that in the winter of 2022 that an average of 70 people were waiting for care services at any one time and all the evidence currently suggest this will be worse. An inability to recruit and retain carers means that capacity will be stretched across the public and private sector.	DS		High	<ul style="list-style-type: none"> <li>• Budget pressures will mean that fee uplifts for 2023/24 are likely to be unable to be at the same levels as the cost pressures experienced by providers, see above. Routine mointoring and actions include;</li> <li>• Regular meetings between head of adult services and Aneurin Bevan University Health Board (ABUHB)</li> <li>• Waiting list figures now incorporated into Directorate Performance Assessment</li> <li>• Standard topic on Regional Partnership Agenda</li> <li>• Weekly info provided to WG</li> <li>• Attendance at ADSSC meeting with the Chief Social Care Officer for Wales</li> <li>• Continued recruitment campaign for carers</li> <li>• Lobbying of WG for funding for Provider fees.</li> </ul>	Yes people being unable to access care se4rvicesc means that patient flow from hospitals is adversely affected and there are people in their own home who are unsupported.	High

CRR-16	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.	ED	High	High	<ul style="list-style-type: none"> <li>Recruitment Team appointed and now actively supporting the organisation</li> <li>Recruitment webpages successfully launched and being refreshed with additional video content</li> <li>Specialist campaigns and resources have been designed and have successfully supported specific recruitment campaigns</li> <li>Council has purchased access to specialist social media recruitment solutions</li> <li>Improved benefits package established (includes 6 additional days leave)</li> <li>Leadership Capacity increased through successful appointment of Deputy Chief Executive, Deputy Section 151 Officer and ongoing appointment of Corporate Director Social Care &amp; Housing</li> <li>Successful recent recruitment interventions in Digital, Social Care, Catering</li> <li>Performance metrics around new entrants, internal moves and exits being collated for ongoing review</li> <li>Migration of HR system to the Cloud provides comprehensive workforce data and intelligence around vacancies and the establishment</li> <li>Workforce Development Toolkit now in use and being applied more broadly across the organisation following a successful pilot</li> <li>Actions set out within the Management response to Audit Wales Springing Forward - Workforce Review are also being implemented</li> </ul>	Yes - Should the Council experience a loss of staff from a particular service coupled with an inability to recruit, there is a potential risk to service deliver which could impact the community albeit this is considered low at this point	Low
CRR 11	Q1 May 2020	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>A Fleet Transformation Project has been established to shape the future arrangements of the service</li> <li>An additional officer is undergoing the qualification required to be added to the Operators License</li> <li>Work continues with Recruitment to seek to increase staffing numbers directly and via Agency arrangements</li> <li>Residual workshop staffing capacity concentrating primarily on HGV Fleet maintenance</li> <li>Sub contractors being engaged for other work where the market is able to respond.</li> <li>Processes and procedures for vehicle safety and driver compliance are currently under review and will be revised if necessary</li> <li>Arrangements to transition from current managed service contract which ends in January 2024 form part of the Fleet Transformation Project</li> <li>Any vehicles leased through existing arrangement will need to be maintained by the Council through the lease period</li> <li>Councils use of short term or 'spot hires' to plug gaps in provision is also being considered as part of the Fleet Transformation Project</li> </ul>	Yes - Should the Council be unable to ensure sufficient HGV vehicle availability, there is a risk that some services will not be able to be provided to residents.	Medium
CR-18	Q2 Sept 2022	Ukraine War	The Ukraine War has displaced a significant number of Ukrainian Nationals and the 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>Council has invested in a temporary Resettlement Team to help manage the situation</li> <li>Regular meetings with Welsh Government and WLGA continue to understand impact</li> <li>Dialogue with Private Sector Landlords underway to identify vacant properties</li> <li>Grant applications submitted to WG to enable improvements to private sector stock</li> <li>Weekly Multi Disciplinary Team operating with key partners in attendance</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 current time but position remains very volatile</li> <li>Update to Cabinet given</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

CR-19 Linked to AW Waste and Recycling Review Reported to Scrutiny 31 Oct 23	22/23	Waste Strategy and Recycling Performance	All Councils are required to comply with Welsh Government Statutory Recycling Targets. The Council is not currently meeting its statutory targets and needs to drive an increase in performance to avoid potential fines.	MSW	High	High	<ul style="list-style-type: none"> <li>Minister has agreed the Council's proposed route map which sets out the principles and timescales for achieving enhanced recycling performance and interventions</li> <li>Joint Scrutiny considered route map end of June 2023</li> <li>Cabinet decision approving the route map taken in July 2023</li> <li>Cross Party Member Working Group established to help shape key aspects of the emerging Strategy</li> <li>Behaviour change and communication campaign initiated</li> <li>New enforcement process for recycling contamination agreed at Cabinet October 2023</li> <li>Draft waste strategy for political consideration Winter 2023</li> <li>Public consultation early 2024 before approval of waste strategy Spring 2024</li> </ul>	Yes <ul style="list-style-type: none"> <li>Achieving higher levels of re-use and recycling has a positive impact on reducing carbon emissions</li> <li>Failure to achieve future statutory recycling targets may lead to WG fines which are significant financially and reputationally.</li> </ul>	Medium
CRR-02 AW ongoing monitoring of Financial position in ARA 23/24. No output yet.	2018 - 2023 From MTFP to COL	Medium Term Finances - cost of living impact on organisation	The cost of living crisis is having a significant impact on the Council's financial position due to rising inflation, higher than expected pay awards, the increased costs of energy and supplies and the wider impact of cost of living on our residents.	SH	High	High	<ul style="list-style-type: none"> <li>2023/24 budget approved by Council 23/02/23</li> <li>Total 2023/24 cost pressures of £55.5m funded through 6.9% uplift in Financial Settlement (£22.2m), permanent savings of £5m, temporary savings of £6.9m, use of reserves totalling £15.3m and 7.9% increase in Council Tax (£6.1m)</li> <li>£22.2m of temporary measures for 2023/24 contributing to overall anticipated savings requirement of £48.3m for the two-year period 2024/25 to 2025/26.</li> <li>Work underway to refocus the transformation programme and to identify other savings proposals to address the financial gap</li> <li>External partners engaged by the Council to support the Transformation Programme in the early summer 2023</li> <li>Capital funding review underway</li> <li>Cabinet update planned for Autumn 2023.</li> </ul>	Yes - Savings requirement of £48.3 will mean a refocus of how we provide services, so we need to be aware of how this will impact citizens through a range of methods and our engagement programmes.	High
CRR-06	16/17 previous ref CMT 44	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	High	High	<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 (WG)</li> <li>Recent correspondence from WG will require further regional work (including the CCR) on growth assumptions</li> <li>Given the recent interaction with WG, then the LDP is probably not deliverable in its current form and in accordance with the existing delivery agreement timeline.</li> <li>Council report was considered 4th July 2023. Council agreed to "pause" progress with the LDP while regional work is completed on growth scenarios and regional Strategic Development Plan (SDP).</li> <li>Leader of Council has written to the Minister regarding the WG view of LDP growth scenarios and has also invited her to a meeting to discuss the matter as well as viewing the mid valley strategic housing site</li> </ul>	The LDP is the overarching document which governs land use planning decisions in the County Borough. It can therefore have a significant impact on future development which is of particular relevance to future generations for future housing provision, schools and leisure facilities. The LDP is also a key policy document in terms of the economic prosperity as it will ultimately determine land allocations for economic development purposes which impacts on the availability of employment opportunities for future generations.	Medium
CR-20	Added May 2023	Potential Withdrawal of Bus Support Funding and Contraction of Local Bus 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.	MSW	Medium	Medium	<ul style="list-style-type: none"> <li>Meetings being held nationally and regionally (regional scrum) as Wales wide issue</li> <li>In June 2023, WG confirmed a continuation of BES funding until March 2024 and the regional scrum has agreed revisions to the bus schedule with each local authority</li> <li>The amendments to CCBC services are relatively minor overall but the funding is only in place until March 2024</li> </ul>	Yes - restricting connectivity of communities and limiting potential to travel for those without access to a car or rail travel	Medium
CR-19	19/10/2023 New for Q2	Conflict in Israel	The current conflict in Israel may result in a further influx of refugees to the country and may also have an adverse impact on supply chain.	CH		Medium	<ul style="list-style-type: none"> <li>Corporate Management Team to keep situation under review as part of Risk Management Planning process</li> </ul>	Yes - pressure around housing and possible education and social care needs should refugees enter the county albeit no emerging need as yet.	Low

CRR-04	01/07/2015 Prev ref CMT41	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 and way forward for decarbonisation presented to Scrutiny 2nd May 2023 and Cabinet 14th June 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>Effective management of the natural environment across the countryside/green open space portfolio/culture and embedding across organisation</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	Q1 22/23	Housing Supply	The authority currently has around 6000 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, the Afghan resettlement programme and local homelessness challenges are increasing the need an appropriate supply of housing.	DS	Medium	Medium	<ul style="list-style-type: none"> <li>Caerphilly Keys service now in place</li> <li>New build programme agreed and progressing with 400 homes target</li> <li>Outline planning for circa 130 homes at Ty Darren and Oakdale Secondary School</li> <li>Transitional Accommodation Programme Board established</li> <li>Progression of Development and Governance Strategy.</li> <li>Cabinet updates</li> <li>Quality of offer - review of service and standards.</li> <li>Increase in expectations of UK Government re. refugees from Afghanistan will further increase demand in this area</li> </ul>	Yes people having a roof over their heads and living in accommodation of a suitable size and standard is a fundamental part of wellbeing and is evidenced as having a positive impact on people's health.	Medium
CRR 13 AW homelessness review Issued Nov 22	Q1 21/22	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>Caerphilly Keys service now in place</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 B&amp;B</li> <li>Look at opportunities to further increase the availability of properties in the private sector as an alternative means of accommodating homeless individuals</li> <li>Work with the police &amp; 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>	As above	Medium
CRR-07	Q2 2020	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>Education Strategy that focuses on Reignite, Recover, Reform Agenda now live</li> <li>Developing the information, intelligence and data to ensure the LEA 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-22	01/12/22	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> <li>• Awaiting feedback from Covid Inquiry</li> <li>• Further modules announced via enquiry website</li> <li>• Some concern re absence of input from WLGA.</li> </ul>	No - this risk relates to organisational capacity following which organisational capacity and functionality will be reviewed.	N/A
CR-23	01/12/22	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. Expectation 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>• Rollout of the Workforce Development Toolkit</li> </ul>	Although this risk relates to organisational capacity, well-being of staff can indirectly affect productivity and sickness levels can affect capacity to deliver services	Low
CRR-24	Dec-22	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.	CH	Medium	Medium	<ul style="list-style-type: none"> <li>• NAHT Action Short of Strike continues, although clarification has been provided in respect of the activities that LAs, consortia and Head Teachers will engage in during this period.</li> <li>• Potential Industrial action across multiple sectors continues to be monitored</li> </ul>	Potential unrest could affect ability to provide services in the short term	Low
CRR 12	Added Q1 2020/21	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	Low	<ul style="list-style-type: none"> <li>• Cabinet have adopted an Economic Recovery Framework to stimulate growth and a progress is regularly reported to Cabinet</li> <li>• New Economic Development Strategy TOR being developed</li> <li>• Adoption of Corporate Plan November 2023 - WBO4 - Enabling our Economy to Grow</li> <li>• Cabinet have adopted a Social Value Policy to drive community benefit and the foundational economy across the locality</li> <li>• The Council maintains a critical service list and business continuity plans</li> <li>• The Council has formalised and embedded its Agile Working approaches to ensure</li> </ul>	The mitigating actions have helped recovery and the cost of living economic pressures are reflected in other risks	Low

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## **GOVERNANCE AND AUDIT COMMITTEE – 7<sup>TH</sup> NOVEMBER 2023**

**SUBJECT: OFFICERS DECLARATIONS OF GIFTS AND HOSPITALITY  
JULY TO SEPTEMBER 2023**

**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 2023 ie the second quarter of the financial year 2023/2024 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 2023.

### **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 2023 and the previous three quarters for comparison.

<b>Directorate</b>	<b>July – Sept 2023</b>	<b>April – June 2023</b>	<b>Jan – March 2023</b>	<b>Oct – Dec 2022</b>
<b>Chief Executive</b>	0	0	0	0
<b>Economy and Environment</b>	0	0	0	0
<b>Education and Corporate Services</b>	0	1	0	0
<b>Social Services and Housing</b>	0	0	0	0
<b>Total</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>

5.7 The table below details the number of declarations regarding Hospitality submitted by Directorate for the period 1 July to 30 September 2023 and the previous three quarters for comparison.

<b>Directorate</b>	<b>July – Sept 2023</b>	<b>April – June 2023</b>	<b>Jan – March 2023</b>	<b>Oct – Dec 2022</b>
<b>Chief Executive</b>	2	0	0	0
<b>Economy and Environment</b>	1	0	1	0
<b>Education and Corporate Services</b>	1	0	1	0
<b>Social Services and Housing</b>		0	0	0
<b>Total</b>	<b>4</b>	<b>0</b>	<b>2</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.

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Appendices:  
Appendix 1 Declarations of Gifts and Hospitality 1 July to 30 September 2023

**Appendix 1**  
**Declarations of Gifts and Hospitality 1 July to 30 September 2023**

<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>
Chief Executive		Chief Executive	Hospitality	Evening dinner and networking event hosted by the University of South Wales. Attended on behalf of Caerphilly CBC in role as CEO. Approx value £50.00.	Leader	Accepted
Chief Executive		Chief Executive	Hospitality	Dinner and overnight accommodation at WLGA conference to support the request to speak at the conference. Approx value Accommodation £125, Dinner £50.	Leader	Accepted
Economy and Environment	Infrastructure	Group Manager Highway Engineering	Hospitality	Consultant Arcadis. Evening dinner and networking event Institution of Civil Engineers. Cost of ticket sponsored by a consultant. Approx value £45.	Head of Infrastructure	Accepted
Education and Corporate Services		Corporate Director Education and Corporate Services	Hospitality	Argus Awards Evening Dinner. Attended to present award as Caerphilly CBC sponsoring event. Approx value £30.	Chief Executive	Accepted

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