



Friday, 9 July 2021

Dear Sir/Madam

A meeting of the Governance, Audit and Standards Committee will be held on Monday, 19 July 2021 in the Council Chamber, Council Offices, Foster Avenue, Beeston NG9 1AB, commencing at 7.00 pm.

Should you require advice on declaring an interest in any item on the agenda, please contact the Monitoring Officer at your earliest convenience.

Yours faithfully

Chief Executive

To Councillors: E Williamson (Chair)
S A Bagshaw (Vice-Chair)
E Cubley
M Handley
H G Khaled MBE
J M Owen
J C Patrick

J P T Parker
M Radulovic MBE
H E Skinner
P D Simpson
I L Tyler
D K Watts

A G E N D A

1. APOLOGIES

To receive apologies and to be notified of the attendance of substitutes.

2. DECLARATIONS OF INTEREST

Members are requested to declare the existence and nature of any disclosable pecuniary interest and/or other interest in any item on the agenda.

3. MINUTES

(Pages 3 - 4)

The Committee is asked to confirm as a correct record the minutes of the meeting held on 17 May 2021.

Council Offices, Foster Avenue, Beeston, Nottingham, NG9 1AB

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4. REVIEW OF PARLIAMENTARY CONSTITUENCIES (Pages 5 - 10)

To inform the Committee of the new Parliamentary Constituency for Broxtowe proposed by the Boundary Commission for England as part of the 2023 review of parliamentary constituencies.
5. REVIEW OF STRATEGIC RISK REGISTER (Pages 11 - 20)

To approve the amendments to the Strategic Risk Register and the action plans identified to mitigate risks.
6. INTERNAL AUDIT REVIEW 2020/21 (Pages 21 - 32)

To inform the Committee of the work of Internal Audit during 2020/21 and to provide an annual internal audit assurance opinion that can be used by the Council to inform its Annual Governance Statement.
7. INTERNAL AUDIT PROGRESS REPORT (Pages 33 - 56)

To inform the Committee of the recent work completed by Internal Audit.
8. COMPLAINTS REPORT 2020/21 (Pages 57 - 96)

To provide members with a summary of complaints made against the Council.
9. FREEDOM OF INFORMATION REPORT 2020/21 (Pages 97 - 100)

To provide members with an overview of Freedom of Information requests made to the Council.
10. WORK PROGRAMME (Pages 101 - 102)

To consider items for inclusion in the Work Programme for future meetings.

GOVERNANCE, AUDIT AND STANDARDS COMMITTEE

MONDAY, 17 MAY 2021

Present: Councillor E Williamson, Chair

Councillors: S J Carr (Substitute)
E Cubley
H G Khaled MBE
G Marshall (Substitute)
J M Owen
P J Owen (Substitute)
J P T Parker
J C Patrick
P D Simpson
H E Skinner
C M Tideswell (Substitute)
D K Watts

Apologies for absence were received from Councillors S A Bagshaw, M Handley, M Radulovic MBE and I L Tyler.

1 **DECLARATIONS OF INTEREST**

Councillor E Williamson declared a pecuniary interest in item 5 as her husband's business had received COVID business grants. Minute number 4 refers.

2 **INTERNAL AUDIT PROGRESS REPORT**

Under the Council's Constitution and as part of the overall corporate governance arrangements the Committee noted a report informing of the work of Internal Audit for 2020/21.

3 **MINUTES**

The minutes of the meeting held on 15 March 2021 were confirmed and signed as a correct record.

4 **COVID-19 BUSINESS SUPPORT GRANTS - AUDIT TRAIL**

The Committee noted a report which displayed the audit trail for the payment of COVID-19 business support grants and which ensured that all the relevant safeguards, key controls and fraud checks were in place.

5 CORPORATE GOVERNANCE ARRANGEMENTS

Members noted a report which informed of action taken to develop and comply with statutory obligations regarding corporate governance.

The Accounts and Audit Regulations 2015 require Authorities to conduct a review, at least once in each financial year, of the effectiveness of its system of internal control and to include an Annual Governance Statement report on the review with its Statement of Accounts for 2020/21.

RESOLVED that:

1. **The draft Annual Governance Statement as shown in appendix 3 be approved in principle for inclusion in the Council's Statement of Accounts be approved.**
2. **Responsibility be delegated to the Chief Executive and the Chair of the Committee to make any further amendments deemed necessary.**

6 COMMUNITY GOVERNANCE REVIEW

Members considered the proposals to be put forward for consultation as part of the Community Governance Review that would be starting June 2021.

The recommendations from a Corporate Governance Review would help to deliver improved community engagement, more cohesive communities, better local democracy and more efficient delivery of local services.

Discussions ensued around the proposed boundaries and how members of the public would be consulted. Suggestions included setting up a task and finish group, holding both face to face and virtual roadshows to engage with the public and ensure Parish/Town Councils were aware of the Council's proposals affecting their particular parish.

RESOLVED that:

1. **The Terms of Reference for the Review as attached in the report at appendix 1 be approved.**
2. **The proposed consultation programme as set out in Appendix 2 of the report be approved.**
3. **The Consultation proposals as set out in Appendix 3 of the report be approved.**
4. **A task and finish group be formed to assist with proposals.**

7 WORK PROGRAMME

The Committee considered the Work Programme.

RESOLVED that the work programme be approved.

Report of the Executive Director

REVIEW OF PARLIAMENTARY CONSTITUENCIES

1. Purpose of report

To inform the Committee of the new Parliamentary Constituency for Broxtowe proposed by the Boundary Commission for England as part of the 2023 review of parliamentary constituencies.

2. Background

The Boundary Commission for England (BCE) is an independent and impartial non-departmental public body, which is responsible for reviewing Parliamentary constituency boundaries in England. It has the task of periodically reviewing all the Parliamentary constituencies in England. It is currently conducting a review on the basis of rules most recently updated by Parliament in 2020 which retain 650 constituencies for the UK Parliament as a whole, and require constituencies to comply with strict parameters, in particular as far as the number of electors in each constituency is concerned.

Further information on the review process and the proposal for Broxtowe are set out in appendix 1, together with some concerns about the proposed arrangements. A map showing the BCE's proposed boundaries for the Broxtowe County Constituency is attached at appendix 2.

Recommendation

The Committee is asked to:

1. **NOTE** the proposed constituency arrangements for Broxtowe and the concerns relating to the proposed Parliamentary constituencies affecting Broxtowe.
2. **CONSIDER** alternative arrangements which could be put forward to the Boundary Commission, taking into account the need to address any knock on effects on the electorate figures of neighbouring constituencies and **RESOLVE** accordingly.

Background papers

Nil

Review Process and Proposed Arrangements for Broxtowe**1. Review process**

The 2023 Review of Parliamentary constituencies was formally launched in January this year. The Commission is required to ensure that the number of electors in each constituency is more equal; in doing so, the number of constituencies in England will increase from 533 to 543. The Commission is undertaking an independent review of all constituency boundaries in England and will present its final recommendations to Parliament by July 2023.

Comments of support or objection are invited on the proposals during an initial period of consultation until 2 August 2021. BCE recommends that objectors submit an alternative scheme in place of the BCE's proposal as a viable counterproposal is likely to carry more weight than a simple statement of objection. Any counterproposal, however, would need to address any knock-on effects on the electorate figures of neighbouring constituencies.

The BCE will consider all written representations within a statutory eight-week period following which it will prepare and publish the representations received for each region. There will then be a further statutory six-week period during which comments can be submitted on the representations received during the initial consultation period. There is also the opportunity during this period to make representations at public hearings. Further information on hearings will be published on the BCE's web site in due course.

The BCE staff and Assistant Commissioners will consider all the written representations received in the initial consultation period, and all the written representations and oral representations made at public hearings in the secondary consultation period. They will then submit a report to the Commissioners, summarising and considering the representations, and recommending whether, and, if so, how, the initial proposals for a region should be revised in the light of those representations. The Commissioners will then determine whether and to what extent revisions should be made to their initial proposals. The BCE will publish a report for each region stating whether or not revisions have been made to the initial proposals for that region, together with all the written representations received during the six-week secondary consultation period.

If the proposals are revised, there will be a further period of four weeks for written representations to be made to the BCE on the revised proposals for a region. There are no public hearings at this stage, nor is there a repeat of the six-week period for commenting on the representations of others. Any representations received during the four-week consultation on revised proposals will be published alongside publication of the final report.

The BCE will take into consideration any written representations made in the four-week consultation period about the revised proposals, and then make its final decisions as to whether further modifications need to be made in light of those representations. When it has decided on its final recommendations for the whole of England, a formal written report will be submitted to the Speaker of the House of Commons who will submit to the Privy Council an Order giving effect to all four

Commissions' recommendations. In drawing up that Order, the Government may not modify any of the Commissions' recommendations, unless specifically requested to do so by the relevant Commission. After the Privy Council approves the Order, the new constituencies take effect at the next General Election.

2. Considerations for the review

The most important consideration for the review will be to ensure that every constituency has an electorate (as at 2 March 2020) which is no less than 95% and no more than 105% of the 'UK electoral quota'. The UK electoral quota for the 2023 Review is, to the nearest whole number, 73,393. Therefore, every recommended constituency must have an electorate as at 2 March 2020 between 69,724 and 77,062.

Other factors which can be taken into account include:

- special geographical considerations such as mountains, hills, lakes, rivers, estuaries, islands, and major roads, rather than to human or social geography., including in particular the size, shape and accessibility of a constituency;
- local government boundaries as they existed (or were in prospect) on 1 December 2020;
- boundaries of existing constituencies; The BCE will have regard generally to existing constituencies as far as possible
- any local ties that would be broken by changes in constituencies; and
- the inconveniences attendant on such changes.

Factors which the BCE will not consider include:

- the impact on future election results;
- new local government boundaries (this does not apply to Broxtowe)
- changes to electorates after the review date

3. Proposals for Broxtowe

The BCE's initial proposals for the new constituencies show two constituencies covering Broxtowe:

Constituency	Broxtowe Wards
Broxtowe County Constituency Electorate: 72,461	Attenborough & Chilwell East Awsorth, Cossall & Trowell Beeston Central Beeston North Beeston Rylands Beeston West Bramcote Brinsley Eastwood Hall Eastwood Hilltop Eastwood St Mary's Greasley Chilwell West Stapleford North Stapleford South East Stapleford South West Toton & Chilwell Meadows

Constituency	Broxtowe Wards
Nottingham North & Kimberley Constituency	Kimberley Nuthall East & Strelley Watnall & Nuthall West

There are some concerns regarding the proposals:

1. Confusion for voters

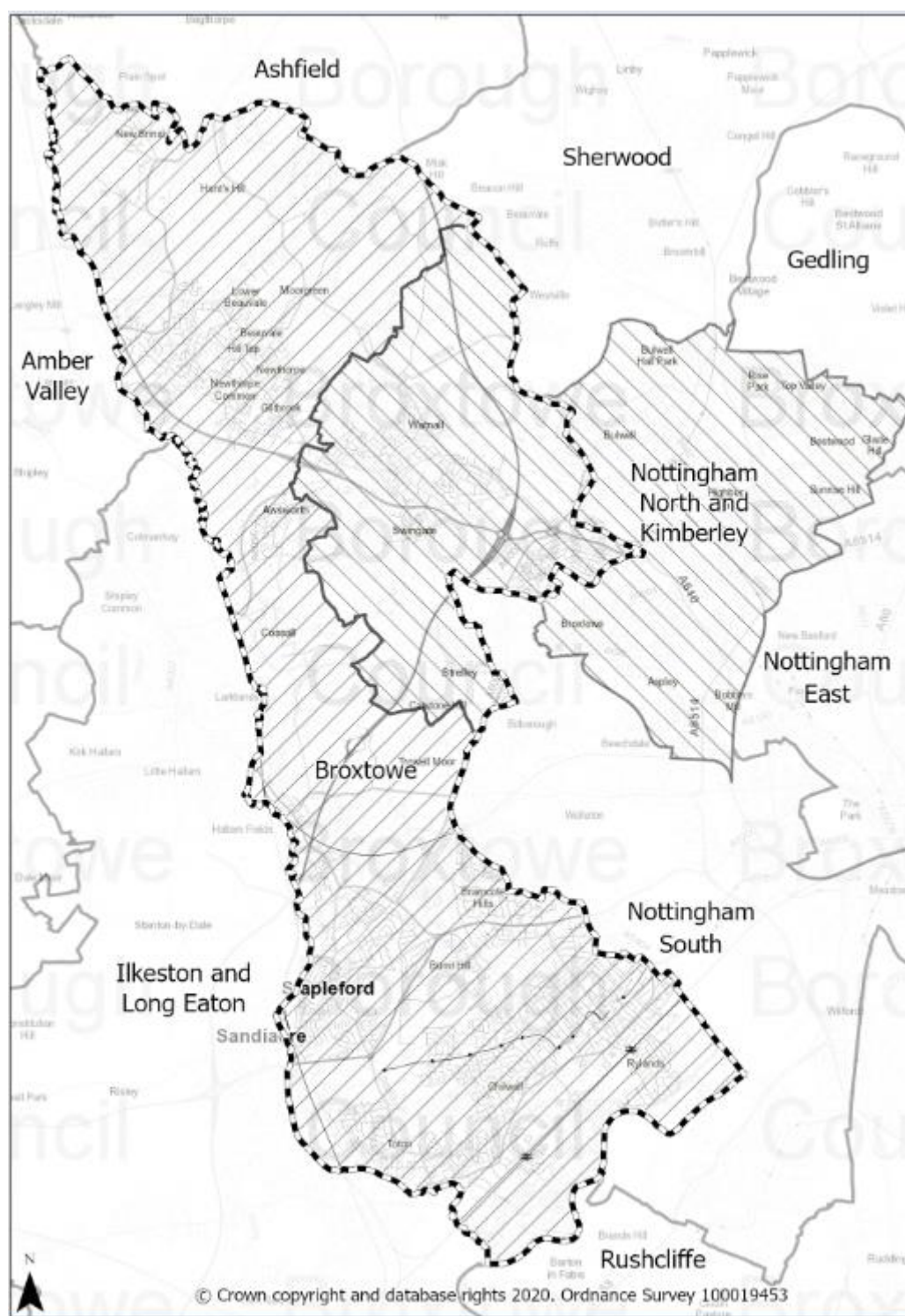
The BCE's proposals would mean that Broxtowe is covered by two different parliamentary constituencies to the current arrangement. This may cause confusion for some voters in the north of the borough who have voted in the Ashfield Constituency in the past and who would be part of the Broxtowe County Constituency. Voters in the Kimberley, Nuthall East and Strelley and Watnall and Nuthall West Wards who would previously have voted in Broxtowe, would, under the BCE's proposal, be part of the Nottingham North and Kimberley Constituency.

Cross boundary constituencies are an issue particularly in years where there is a combined election and voters have to deal with two different councils. This can be particularly confusing in respect of postal votes, when, under an agreement between the Nottinghamshire districts and County Council, these would be issued by Broxtowe, but might relate to the Nottingham North and Kimberley Constituency which is overseen by Nottingham City Council.

2. Local connections

The proposed arrangements appear to be based around the requirement to achieve electoral equality and do not take into account "any local ties which would be broken by changes in constituencies", one of the criteria which the Commission can consider in drawing up boundaries. The proposed Nottingham North and Kimberley Constituency comprises geographical areas which do not relate to each other - residents in Kimberley, Nuthall East and Strelley and Watnall and Nuthall West associate with Broxtowe and not Nottingham City and the facilities in those areas are used by residents in, for example, Greasley, which would be in the Broxtowe Constituency.

APPENDIX 2



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Report of the Deputy Chief Executive

REVIEW OF STRATEGIC RISK REGISTER

1. Purpose of report

To approve the amendments to the Strategic Risk Register and the action plans identified to mitigate risks.

2. Detail

In accordance with the corporate Risk Management Strategy, the Strategic Risk Management Group met on 5 May 2021 to review the Strategic Risk Register. General Management Team (GMT) has since considered the proposals from the Group. The objectives of the review were to:

- Identify the extent to which risks included in the Register are still relevant
- Identify any new strategic risks to be included in the Register
- Review action plans to mitigate risks.

A summary of the risk management process is included in appendix 1. The Risk Management Strategy includes a '5x5' risk map matrix to assess both the threats and opportunities for each strategic risk in terms of both the likelihood and impact. The risk map is included to assist the understanding of the inherent and residual risk scores allocated to each strategic risk. These scores will be considered further and amended as necessary in due course.

Details of proposed amendments to the Strategic Risk Register and the actions resulting from the process are attached in appendix 2. The revised Strategic Risk Register incorporating the proposed amendments is available on the intranet. Further reviews of the Strategic Risk Register will be reported to future meetings of this Committee.

Recommendation

The Committee is asked to RESOLVE that the amendments to the Strategic Risk Register and the actions to mitigate risks as set out in appendix 2 be approved.

Background papers

Nil

APPENDIX 1**REVIEW OF STRATEGIC RISK REGISTER****Introduction**

The Risk Management Strategy, as revised in December 2018, aims to improve the effectiveness of risk management across the Council. Effective risk management will help to ensure that the Council maximises its opportunities and minimises the impact of the risks it faces, thereby improving its ability to deliver priorities, improve outcomes for residents and mitigating legal action and financial claims against the Council and subsequent damage to its reputation.

The Strategy provides a comprehensive framework and process designed to support both Members and Officers in ensuring that the Council is able to discharge its risk management responsibilities fully. The Strategy outlines the objectives and benefits of managing risk, describes the responsibilities for risk management, and provides an overview of the process that the Council has in place to manage risk successfully. The risk management process outlined within the Strategy should be used to identify and manage all risks to the Council's ability to deliver its priorities. This covers both strategic priorities, operational activities and the delivery of projects or programmes.

The Council defines risk as "the chance of something happening that may have an impact on objectives". A risk is an event or occurrence that would prevent, obstruct or delay the Council from achieving its objectives or failing to capture business opportunities when pursuing its objectives.

Risk Management

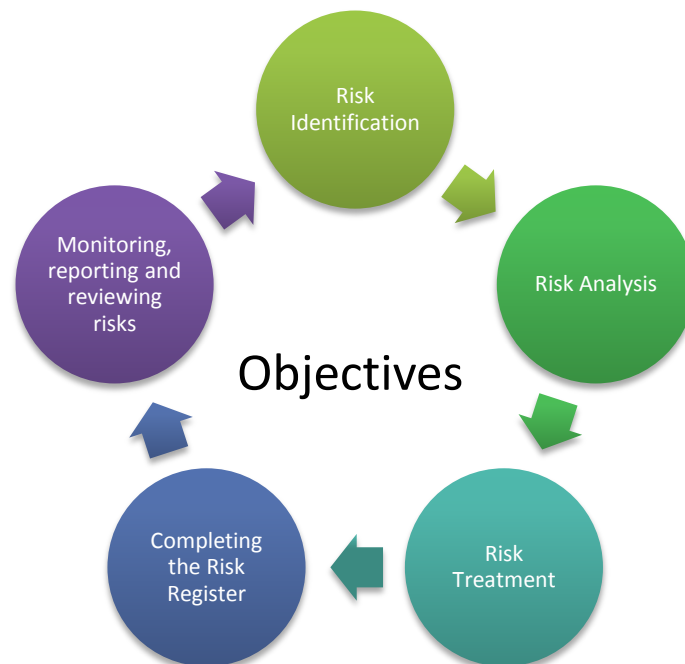
Risk management involves adopting a planned and systematic approach to the identification, evaluation and control of those risks which can threaten the objectives, assets, or financial wellbeing of the Council. It is a means of minimising the costs and disruption to the Council caused by undesired events.

Risk management covers the whole range of risks and not just those associated with finance, health and safety and insurance. It can also include risks as diverse as those associated with reputation, environment, technology and breach of confidentiality amongst others. The benefits of successful risk management include:

- Improved service delivery with fewer disruptions, efficient processes and improved controls
- Improved financial performance and value for money with increased achievement of objectives, fewer losses, reduced impact and frequency of critical risks
- Improved corporate governance and compliance systems with fewer legal challenges, robust corporate governance and fewer regulatory visits
- Improved insurance management with lower frequency and value of claims, lower impact of uninsured losses and reduced premiums.

Risk Management Process

The Council's risk management process has five key steps as outlined below.



Process Step	Description
Risk Identification	Identification of risks which could significantly impact the Council's aims and objectives – both strategic and operational.
Risk Analysis	Requires consideration to the identified risks potential consequences and likelihood of occurring. Risks should be scored against the Council's risk matrix
Risk Treatment	Treat; Tolerate; Transfer; Terminate – Identify which solution is best to manage the risk (may be one or a combination of a number of treatments)
Completing the Risk Register	Document the previous steps within the appropriate risk register. Tool for facilitating risk management discussions. Standard template to be utilised to ensure consistent reporting.
Monitoring, reporting and reviewing the risks	Review risks against agreed reporting structure to ensure they remain current and on target with what is expected or manageable.

Risk Matrix

		Risk – Threats				
Likelihood	Almost Certain – 5	5	10	15	20	25
	Likely – 4	4	8	12	16	20
	Possible – 3	3	6	9	12	15
	Unlikely – 2	2	4	6	8	10
	Rare – 1	1	2	3	4	5
		Insignificant – 1	Minor – 2	Moderate – 3	Major – 4	Catastrophic – 5
		Impact				



Risk Rating	Value	Action
Red Risk	25	Immediate action to prevent serious threat to provision and/or achievement of key services or duties
	15 to 20	Key risks which may potentially affect the provision of key services or duties
Amber Risk	12	Important risks which may potentially affect the provision of key services or duties
	8 to 10	Monitor as necessary being less important but still could have a serious effect on the provision of key services
	5 to 6	Monitor as necessary to ensure risk is properly managed
Green Risk	1 – 4	No strategic action necessary




APPENDIX 2




Strategic Risk Register – Summary of Proposed Changes







Inherent Risk – Gross risk **before** controls and mitigation







Residual Risk – Risk remaining **after** application of controls and mitigating measures




Risk	Inherent Risk	Residual Risk	Changes
<p>1. Failure to maintain effective corporate performance management and implement change management processes</p> <p><i>The position with regards to this risk is unchanged from the previous meeting.</i></p>	20	<p>4</p> <p> Green</p>	<p>No changes.</p> <p>It was noted that an update on the Corporate Governance Arrangements and the draft Annual Governance Statement 2020/21 was presented to the Governance, Audit and Standards Committee on 17 May 2021.</p>
<p>2. Failure to obtain adequate resources to achieve service objectives</p> <p><i>Although the residual risk score does not need to change, it was considered that the position with regards to this risk had improved.</i></p>	25	<p>16</p> <p> Red</p>	<p>New actions have been added to:</p> <ul style="list-style-type: none"> Produce a new Asset Management Strategy to replace the previous was added. Submit bids to the Levelling Up Fund for Eastwood and Kimberley. <p>The timeframe for the Fair Funding Review and accompanying proposals for greater localisation of business rates have been moved back due to other Central Government priorities and are now due to be considered as part of the next Spending Review scheduled to be announced in November 2021. This meant that any significant changes to the Local Government finance system would probably not take place until 2022/23 at the earliest.</p>

Risk	Inherent Risk	Residual Risk	Changes
<p>3. Failure to deliver the Housing Revenue Account (HRA) Business Plan</p> <p><i>Although the residual risk score does not need to change, it was considered that the position with regards to this risk had improved.</i></p>	25	<p>9</p>  <p>Amber</p>	<p>New actions have been added to:</p> <ul style="list-style-type: none"> Implement a customer portal to allow tenants to report requests for repairs and to review their rent account. Utilise funding from the Green Homes Grant (LAD Phase 2) for heating replacements and other energy efficiency works on the Council's housing stock. <p>The completed action to implement a new approach for service charges in Independent Living accommodation from 2021/22 has been replaced with an action to implement service charges to fully recover costs at general needs properties from 2022/23.</p> <p>The action to undertake a consultation exercise on options for developing the garage site at Barn Croft in Chilwell has been updated with an action to seek approval for a preferred option for developing the site.</p>
<p>4. Failure of strategic leisure initiatives</p> <p><i>The position with regards to this risk is unchanged.</i></p>	25	<p>20</p>  <p>Red</p>	<p>The actions to liaise with Kimberley School following notice of termination of the joint-use agreement governing the operation of Kimberley Leisure Centre and to determine an approach to leisure provision in the north of the Borough has been deleted given that there is an existing action point to establish a cross-party Task and Finish Group to consider options for potential leisure sites in the north and south of Broxtowe.</p>
<p>5. Failure of Liberty Leisure (LLL) trading company</p> <p><i>The position with regards to this risk is unchanged.</i></p>	25	<p>16</p>  <p>Red</p>	<p>No changes proposed to the key controls, risk indicators and actions.</p>

Risk	Inherent Risk	Residual Risk	Changes
<p>6. Failure to complete the re-development of Beeston town centre</p> <p><i>The residual risk score has been revised after it was considered that the position with regards to this risk had improved.</i></p>	25	<p>12</p> <p> Amber</p>	<p>Actions to seek external funding for the re-development of Beeston town centre and to consider initial “pop up” uses for proposed food and beverage outlets to generate activity before tenants can be secured were deleted.</p> <p>Completed actions to seek approval to increase the capital budget to enhance the offer to potential food and beverage outlets (Finance and Resources Committee on 11 February 2021) and to ensure that appropriate insurance cover is in place for the re-development and that all insurance requirements are being complied with have also been deleted.</p> <p>Given that the new cinema is now open and that there is strong interest from food and beverage operators in the available units, it was agreed that the residual risk score be reduced from 16 to 12.</p>
<p>7. Not complying with domestic or European legislation</p> <p><i>The position with regards to this risk is unchanged.</i></p>	25	<p>12</p> <p> Amber</p>	<p>No changes. It was noted that as the UK had now left the European Union that the action point to react to the impact of any legislative changes arising from this would have increased significance in the short-term.</p>
<p>8. Failure of financial management and/or budgetary control and to implement agreed budget decisions</p> <p><i>Although the residual risk score does not need to change, it was considered that the position with regards to this risk had improved.</i></p>	25	<p>8</p> <p> Amber</p>	<p>New action points have been added:</p> <ul style="list-style-type: none"> • Present an updated Medium Term Financial Strategy and a revised Business Strategy to the Finance and Resources Committee on 7 October 2021. • Provide a report on the Council's status as a going concern to the Governance, Audit and Standards Committee on 19 July 2021. <p>Actions to present the Internal Audit Plan 2021/22 and the external auditor's Broxtowe Audit Strategy Memorandum to the Governance, Audit and Standards Committee on 15 March 2021 were completed.</p>

Risk	Inherent Risk	Residual Risk	Changes
9. Failure to maximise collection of income due to the Council <i>Although the residual risk score does not need to change, it was considered that the position with regards to this risk had improved.</i>	20	12  Amber	The completed action to present a report to Finance and Resources Committee on 30 March 2021 with proposals to enhance bill payment services has been replaced with an action to implement the Allpay cash payment facility for council house tenants and council tax payers.
10. Failure of key ICT systems <i>The position with regards to this risk is unchanged.</i>	25	10  Amber	The action point to present a new ICT Strategy to Policy and Performance Committee in 2021 was amended to refer to a date of 2 December 2021.
11. Failure to implement Private Sector Housing Strategy in accordance with Government and Council expectations <i>The position with regards to this risk is unchanged.</i>	20	4  Green	No changes were proposed to the key controls, risk indicators and actions.
12. Failure to engage with partners/community to implement the Broxtowe Borough Partnership Statement of Common Purpose <i>The position with regards to this risk is unchanged.</i>	15	4  Green	No changes were proposed to the key controls, risk indicators and actions.
13. Failure to contribute effectively to dealing with crime and disorder <i>The position with regards to this risk is unchanged.</i>	15	3  Green	An action point for a project group to be formed to consider CCTV related issues was added.
14. Failure to provide housing in accordance with the Local Development Framework <i>Although the residual risk score does not need to change, it was considered that the position with regards to this risk had improved.</i>	20	12  Amber	New actions have been added to: <ul style="list-style-type: none"> • Present the Toton Supplementary Planning Document to Jobs and Economy Committee (24 June). • Respond as necessary to the outcome of the referendum on the Awsworth Neighbourhood Plan held on 10 June 2021. The action to provide an update on the East Midlands Development Corporation to Council on 3 March 2021 was completed.

Risk	Inherent Risk	Residual Risk	Changes
<p>15. Natural disaster or deliberate act, which affects major part of the Authority</p> <p><i>Although the residual risk score does not need to change, it was considered that the position with regards to this risk had improved.</i></p>	15	<p>12</p> <p> Amber</p>	<p>No changes were proposed to key controls, risk indicators and actions.</p> <p>At the time of the meeting (May) the reduction in the number of cases of Covid-19 both locally and nationally as well as the reduction in the number of hospitalisations and deaths due to the pandemic was noted.</p>
<p>16. Failure to mitigate the impact of the Government's welfare reform agenda</p> <p><i>The position with regards to this risk is unchanged</i></p>	20	<p>6</p> <p> Amber</p>	<p>No changes were proposed to key controls, risk indicators and actions.</p>
<p>17. Failure to maximise opportunities and to recognise the risks in shared services arrangements</p> <p><i>The position with regards to this risk is unchanged</i></p>	20	<p>9</p> <p> Amber</p>	<p>An action to present a review of CCTV cameras to the Community Safety Committee on 4 March 2021 was completed.</p>
<p>18. Corporate and/or political leadership adversely impacting upon service delivery</p> <p><i>The position with regards to this risk is unchanged</i></p>	20	<p>8</p> <p> Amber</p>	<p>No changes were proposed to key controls, risk indicators and actions.</p>
<p>19. High levels of sickness</p> <p><i>The position with regards to this risk is unchanged</i></p>	16	<p>6</p> <p> Amber</p>	<p>No changes were proposed to key controls, risk indicators and actions.</p>
<p>20. Inability to recruit and retain staff with required skills and expertise to meet increasing demands and expectations.</p> <p><i>Although the residual risk score does not need to change, it was considered that the position with regards to this risk had improved.</i></p>	20	<p>12</p> <p> Amber</p>	<p>The Succession Planning Framework was added as a key control.</p> <p>Actions were added to implement a salary sacrifice car lease scheme and to produce an action plan in response to the latest employee survey.</p> <p>The actions to present a Market Premium Policy to Personnel Committee for consideration and approval and to present a progress update on the Organisational Development Strategy were updated to refer to a date of 29 June 2021.</p>

Risk	Inherent Risk	Residual Risk	Changes
21. Failure to comply with duty as a service provider and employer to groups such as children, the elderly, vulnerable adults etc. <i>Although the residual risk score does not need to change, it was considered that the position with regards to this risk had improved.</i>	20	6  Amber	The Child Poverty Action Plan was added as a key control. A new action was added to provide an update on the Child Poverty Action Plan to Policy and Performance Committee on 30 September 2021.
22. Unauthorised access of data <i>The position with regards to this risk is unchanged</i>	20	6  Amber	No changes were proposed to the key controls, risk indicators and actions.
23. High volumes of employee or client fraud <i>Although the residual risk score does not need to change, it was considered that the position with regards to this risk had improved.</i>	20	9  Amber	The action to report on the framework of safeguards, key controls and fraud checks in respect of Covid-19 business support grants to the Governance, Audit and Standards Committee on 17 May 2021 was completed. An action to provide the Annual Counter Fraud Report 2020/21 to the Governance, Audit and Standards Committee was added.

Further Details

The following item is highlighted for the attention of Members.

1. Climate Change

The Council on 17 July 2019 resolved that a “climate emergency” be declared whilst the Corporate Plan 2020-2024 has protecting the environment for the future as one of its priorities with an objective to develop plans to reduce the Borough’s carbon emissions to net zero by 2027 and start implementing them.

It was agreed that climate change be considered further at the next meeting of the Strategic Risk Management Group with a view to establishing a specific risk for this within the strategic risk register with a risk owner, inherent and residual risk scores, key controls, risk indicators and action points.

Report of the Chief Audit and Control Officer

INTERNAL AUDIT REVIEW 2020/21

1. Purpose of report

To inform the Committee of the work of Internal Audit during 2020/21 and to provide an annual internal audit assurance opinion that can be used by the Council to inform its Annual Governance Statement.

2. Detail

Under the Constitution and as part of the overall governance arrangements, this Committee is responsible for monitoring the performance of Internal Audit.

In accordance with the Public Sector Internal Audit Standards, developed by the Chartered Institute of Public Finance and Accountancy (CIPFA) and the Chartered Institute of Internal Auditors (IIA), the Chief Audit and Control Officer must deliver an annual internal audit opinion and report that can be used by the Council to inform its Annual Governance Statement. The Internal Audit Annual Review Report for 2020/21 is included in the appendix.

The Council has to conduct, at least annually, a review of the effectiveness of its governance framework including the system of internal control. This review is informed by the work of senior management who have responsibility for the development and maintenance of the governance environment, the Internal Audit Review Report and comments from external auditors/other inspectorates.

The system of internal control has been reviewed. On the basis of Internal Audit work completed, it is the opinion of the Chief Audit and Control Officer that the current internal control environment is satisfactory such as to maintain the overall adequacy and effectiveness of the Council's framework of governance, risk management and control. Further context relating to this assurance opinion, including details of any caveats and limitations in scope, are provided in the appendix.

Overall, 89% of the planned audits were complete or awaiting finalisation at the year-end, which was slightly below the 90% target. All outstanding and deferred audits will now be completed as early as practicable in 2021/22.

Recommendation

The Committee is asked to NOTE the Chief Audit and Control Officer's annual assurance opinion and the work of Internal Audit in 2020/21.

Background papers

Nil

APPENDIX**INTERNAL AUDIT ANNUAL REVIEW REPORT 2020/21****1. INTRODUCTION**

This report provides a summary of Internal Audit activities for 2020/21.

The Accounts and Audit Regulations 2015 require the Council to undertake an adequate and effective internal audit of its accounting records and of its system of internal control in accordance with proper practices. The United Kingdom Public Sector Internal Audit Standards (the 'Standards') and the CIPFA Local Government Application Note constitute proper practices so as to satisfy the requirements for larger relevant bodies as set out in the Regulations.

The Standards requires the Chief Audit and Control Officer, as the Council's designated 'chief audit executive', to deliver an annual internal audit opinion and report that can be used by the Council to inform its governance statement. The opinion must conclude on the overall adequacy and effectiveness of the Council's framework of governance, risk management and control. The report must incorporate:

- an opinion on the overall adequacy and effectiveness of the Council's governance, risk and control framework – i.e. the control environment;
- a summary of the audit work from which the opinion is derived (including reliance placed on work by other assurance providers); and
- a statement on conformance with the Standards and the results of the quality assurance and improvement programme.

The annual opinion should also be guided by the CIPFA/SOLACE Delivering Good Governance in Local Government Framework.

2. BACKGROUND TO THE OPINION

The Council has to conduct, at least annually, a review of the effectiveness of its governance framework including the system of internal control. This review is informed by the work of senior management who have responsibility for the development and maintenance of the governance environment, this Internal Audit Review Report and from comments made by the external auditors and other review agencies and inspectorates.

A review of the effectiveness of the system of internal audit helps to ensure that the opinion in this report may be relied upon as a key source of evidence in the Annual Governance Statement. The latest review found Internal Audit to be sufficiently compliant with the requirements of the Standards to ensure that the opinion given can be relied upon for assurance purposes.

There are no causes of concern with regard to the independence and objectivity of Internal Audit. Whilst reporting on Internal Audit matters directly to the Deputy Chief Executive (fulfilling the duties of Section 151 of the Local Government Act 1972), the Chief Audit and Control Officer also has:

- free and unrestricted access to the General Management Team.
- free and unrestricted access to the Governance, Audit and Standards Committee (the 'Committee') and attends all of its meetings
- the right to meet with the Chair of the Committee and/or other relevant Members to discuss any matters or concerns that have arisen from Internal Audit work.

3. AUDIT OPINION ON THE OVERALL ADEQUACY AND EFFECTIVENESS OF THE COUNCIL'S INTERNAL CONTROL ENVIRONMENT

The system of internal control has been reviewed.

On the basis of Internal Audit work completed, it is my opinion, as the Chief Audit and Control Officer, that the current internal control environment is satisfactory such as to maintain the overall adequacy and effectiveness of the Council's framework of governance, risk management and control.

The framework for governance is as set out in the Annual Governance Statement and, in my view, is an accurate description of the governance arrangements. In relation to risk management, I have oversight of the risk management process and conclude that a range of significant risks for the Council have been identified and are being managed.

In terms of the audit assignments completed, services were found to be operating with an appropriate level of internal controls. Where weaknesses and exceptions were highlighted by Internal Audit work, any matters were discussed with management and recommendations made accordingly. Where improvement actions were agreed to address these matters, progress is being made for their implementation. Where this should not be the case, any outstanding significant recommendation is reported to this Committee as part of the regular progress reports.

The opinion has been arrived at with due regards to the following:

- The level of coverage provided by Internal Audit was considered to be adequate to enable this opinion to be delivered.
- **The service has been impacted by the Covid-19 pandemic, particularly with the urgency of diverting Internal Audit resources towards supporting other services early in the crisis. This included vital work associated with the governance, quality assessment and fraud checking of grants paid under the emergency business grants and local discretionary grants schemes.**

- Work has been planned and performed so as to obtain sufficient information and explanation considered necessary to provide evidence to give reasonable assurance that the Council's control environment is operating effectively.
- The independence and objectivity of Internal Audit has not been impaired in fact or appearance.
- **The scope of Internal Audit work has not been restricted in any way. A number of audits have taken place during the pandemic lockdown, which required the audit process to be adapted accordingly to enable it to be completed remotely. It is pleasing to report that Internal Audit considers that it was not overly restricted in terms of its access to systems, records and people. As a result, the audit conclusions and the strength of the individual audit opinions provided were not qualified. The support of officers was most welcome in successfully concluding the audit testing.**
- Insight gained from interaction with senior management and this Committee.
- No adverse implications for the Annual Governance Statement have been identified from work undertaken by Internal Audit.
- The Internal Audit Plan 2020/21, as approved by this Committee on 18 May 2020, and subsequently revised on 30 November 2020, was informed by the Chief Audit and Control Officer's own assessment of risk and materiality, following consultation with senior management, to ensure it was aligned to the Council's corporate objectives and key strategic risks.
- The following table summarises the outcomes of audit assignments completed in 2020/21, including those audits completed from the previous year's plan that were finalised in the year:

Audit Assignment	Status/ Completion	Assurance Opinion	Critical Risk Action	Significant Risk Action	Merits Attention Action
Council Tax #	Final Report 100%	Substantial	-	-	2
Independent Living #	Final Report 100%	Reasonable	-	-	5
Key Reconciliations #	Final Report 100%	Reasonable	-	-	1
Cash Receipting (Payment Kiosk) #	Final Report 100%	LIMITED	-	2	5
Discretionary Business Grants	Final Report 100%	Substantial	-	-	-
Payroll/Officers Allowances	Final Report 100%	Substantial	-	-	1
Information Governance #	Final Report 100%	Substantial	-	-	1
Whistleblowing & Complaints #	Final Report 100%	Reasonable	-	-	2
Enforcement	Final Report 100%	Reasonable	-	-	5
Financial Resilience #	Final Report 100%	Reasonable	-	-	4
Local Authority Trading Company #	Final Report 100%	Reasonable	-	1	2
Governance - Covid-19 Grants	Final Report 100%	Substantial	-	-	1
Council Tax Hardship Scheme	Final Report 100%	Substantial	-	-	-

Audit Assignment	Status/ Completion	Assurance Opinion	Critical Risk Action	Significant Risk Action	Merits Attention Action
Kimberley Depot (incl. Security) #	Final Report 100%	Reasonable	-	-	4
Housing Repairs #	Final Report 100%	LIMITED	-	1	4
Public Health Funerals	Final Report 100%	Reasonable	-	-	4
Leasehold Properties	Final Report 100%	Reasonable	-	1	2
Garages	Final Report 100%	Substantial	-	-	2
Car Parks	Final Report 100%	Substantial	-	-	-
Section 106 Agreements	Final Report 100%	Reasonable	-	-	3
HMO Licences	Final Report 100%	Substantial	-	-	1
Rents	Final Report 100%	Substantial	-	-	1
Council Tax	Final Report 100%	Substantial	-	-	2
Neighbourhood Warden	Final Report 100%	Reasonable	-	1	-
Fuel Management	Final Report 100%	Substantial	-	-	1
Benefits	Final Report 100%	Reasonable	-	-	3
Waste Management	Final Report 100%	Substantial	-	-	3
LLL – Online Payments System	Final Report 100%	Substantial	-	-	-
Gas Servicing and Maintenance	Final Report 100%	Reasonable	-	1	1
Employee Authentication Service	Final Report 100%	Substantial	-	-	2
Governance - Covid-19 Grants	Final Report 100%	Substantial	-	-	-
Utilities (Energy and Water)	Final Report 100%	Reasonable	-	1	1
Housing Delivery Plan	Final Report 100%	Substantial	-	1	2
LLL – Kimberley Leisure Centre	Final Report 100%	Substantial	-	-	4
Sundry Debtors	Final Report 100%	Reasonable	-	-	5
Declarations of Interest	Draft Report 90%	Pending	-	-	-
Creditors and Purchasing	Draft Report 90%	Pending	-	-	-
Housing Voids Management	In Progress 75%	Pending	-	-	-
Computer/ICT and Cyber Risk	In Progress 75%	Pending	-	-	-
Planning Enforcement	In Progress 50%	Pending	-	-	-
Bank Reconciliation	In Progress 50%	Pending	-	-	-
Operational Risk Management	Deferred 0%	-	-	-	-
Health and Safety	Deferred 0%	-	-	-	-
NNDR	Deferred	-	-	-	-
Treasury Management	Deferred 0%	-	-	-	-
Climate Change	Deferred 0%	-	-	-	-
Housing Management System	Deferred 0%	-	-	-	-
Human Resources	Deferred 0%	-	-	-	-
Planning and Building Control	Deferred 0%	-	-	-	-
Procurement/Contract Management	Deferred 0%	-	-	-	-
# Completed 2020/21 audits		Total	0	9	74

4. QUALIFICATIONS

The opinions expressed in this report have been based upon the work carried out by Internal Audit in 2020/21 (and subsequently beyond year-end) and other assurance reports received, including those from the external auditors.

In the context of the Standards, 'opinion' means that Internal Audit will have done sufficient, evidenced work to form a supportable conclusion about the activity being examined. Internal Audit will word its opinion appropriately if it cannot give reasonable assurance (e.g. because of limitations to the scope and/or adverse findings arising from its work).

In giving an opinion, it should be noted that assurance can never be absolute. The most that Internal Audit can provide to the Council is a reasonable assurance that there are no major weaknesses in risk management, governance and control processes. The matters raised in this report are only those which came to the attention of Internal Audit during the course of its work and are not necessarily a comprehensive statement of all the weaknesses that exist, or of all the improvements that may be required.

The overall opinion is therefore provided with the following caveats:

- The opinion does not imply that Internal Audit has reviewed all the Council's risks, controls and governance arrangements. The opinion is substantially derived from the conduct of risk-based audit assignment work and, as such, it is only one component that is taken into account when producing the Annual Governance Statement.
- No system of control can provide absolute assurance against material misstatement or loss, nor can Internal Audit give absolute assurance.
- Full implementation of all agreed actions is essential if the benefits of the control improvements detailed in each audit report are to be realised.

5. ISSUES RELEVANT TO THE ANNUAL GOVERNANCE STATEMENT

This Committee considered significant governance issues as part of the draft Annual Governance Statement for 2020/21 that was approved on 17 May 2021.

The Chief Audit and Control Officer has reviewed the draft Annual Governance Statement. The significant governance issues raised in the statement were considered to be appropriate. It was also found that the issues carried forward from the previous year had been addressed or were ongoing items that are in the process of being addressed.

With regard to the audits completed during the year, no actions were classed as being critical where action was considered imperative to ensure that the Council was not exposed to high risks. Where a limited assurance opinion was issued, the outstanding actions from these audits are not thought to be significant to the preparation of the Annual Governance Statement.

6. SUMMARY OF INTERNAL AUDIT ACTIVITY

6.1 Performance Overview

Overall, 89% of planned audits were completed or awaiting finalisation at the year-end, which is slightly below the target of 90%. The main impact on the service has been from the pandemic and the urgency of diverting Internal Audit resources towards supporting other areas, including vital work associated with the quality assessment and fraud checking of grants paid under the emergency business grants and local discretionary grants schemes. All outstanding and deferred audits will be reconsidered as early as practicable in 2021/22.

A total of five audits were completed in respect of the key financial systems (out of the 10 included in the original plan). The audits of Bank Reconciliation and Creditors and Purchasing are nearing completion at the time of writing and are expected to be completed by 31 July 2021. The audits of Business Rates, Cash Receipting and Treasury Management were referred as part of a revision to the Internal Audit Plan approved in November 2020 to reduce the pressure on the audit work programme. These audits have been included in the Internal Audit Plan 2021/22.

During the year, 40 audit reports were issued (including 11 in respect of 2019/20) with a further eight reports awaiting finalisation. The reports included 83 recommendations, of which nine were considered to be 'significant'. No recommendation was classified as 'critical' where action was considered imperative to ensure that the Council was not exposed to high risks.

A limited assurance opinion was issued in respect of the audits of Cash Receipting (Payment Kiosk) and Housing Repairs. This opinion is given where Internal Audit considered that controls within the respective systems provided only limited assurance that risks material to the achievement of the system's objectives are adequately managed. Progress is being made with the respective improvement actions (and/or the risk has been mitigated by current circumstances) and the outstanding matters are not thought to be sufficient so as to affect the overall opinion.

6.2 Internal Audit Resources

The three established auditors remained in post throughout the period.

No additional resources were required to complete the revised audit plan.

6.3 Special Investigations

Internal Audit completed work on the following special investigations:

- A governance review to provide assurance that the Council had complied with central government guidance on the various grants given to local businesses as part of the Covid-19 Emergency Grants Schemes.

The review also sought confirmation of compliance with internal governance protocols regarding the Covid-19 Community Support Grants provided to voluntary and mutual aid groups.

- Supporting the Head of Finance Services with the production of property values in the annual Statement of Accounts and supporting with the responses to accounts enquiries from the external auditors.
- Providing a series of compliance reports (seven in total) to the Head of Revenues, Benefits and Customer Services in respect of the Discretionary Business Grants Scheme. This work involved the prompt completion of summary quality assurance and fraud checks of provisional awards prior to the grants being released.
- Reviews of evidence presented in support of Right-to-Buy purchases.
- A review of the governance, systems and procedures operating in respect of the Council Tax Hardship Scheme.
- Providing further support with scrutiny and quality checking in respect of the Covid-19 related support payments 'Self-Isolation Payments' that the Council administered on behalf of central government.
- A review of the systems, procedures and key controls operating in respect of Access to Department for Work and Pensions Data through the Employee Authentication Service (EAS). The review was informed by the findings of the annual external audit of the EAS, details of which were provided by the DWP, which included a generic set of issues identified by auditors at a national level, Internal Audit provided DWP and management with an assurance opinion in a local context.
- Provide an assurance opinion following a review of the second phase of Covid-19 business grant making during autumn/winter 2020/21. This work included the production of a governance report showing Members the audit trail for the payment of business support grants and the relevant safeguards, key controls and fraud checks in place.
- Assessments of the financial viability of potential suppliers and service providers applying to be considered for a number of tendered contracts and of potential tenants for the Council's commercial premises.

6.4 Corporate Counter Fraud Activity and National Fraud Initiative (NFI)

Internal Audit continues to take a prominent role in leading and co-ordinating counter fraud activities. It committed around 30 days to counter fraud activity in 2020/21, which included work to co-ordinate and complete elements of the NFI data matching exercise.

An annual report on counter fraud activity will be presented to this Committee in September 2021 to provide Members with details of activity in 2020/21. The report will also include the outcome of a fraud risk assessment exercise, in conjunction with senior management, to inform the Fraud and Corruption Risk

Register, and a proposed action plan for the forthcoming year, the delivery of which will further strengthen the current arrangements in place.

6.5 Erewash Internal Audit

The Internal Audit Collaboration with Erewash Borough Council to provide joint working and management arrangements of internal audit services commenced in 2015. The key elements of the proposal were considered by the General Purposes and Audit Committee on 9 March 2015.

During 2020/21, a total of 17 audit days was allocated to work completed on behalf of Erewash, including an element of management time. Internal Audit has provided independent assurances to the Erewash management and Members of their Audit Committee on their risk management arrangements and services relating to cemeteries and the crematorium.

The collaboration with Erewash is ongoing with the potential to develop further in 2021/22 and allow opportunities to provide more resilience, help with officer development and produce financial savings for both authorities.

7. QUALITY ASSURANCE AND IMPROVEMENT PROGRAMME

7.1 Compliance with Proper Practice

In order to facilitate the review of the effectiveness of internal control required by the Accounts and Audit Regulations 2015, it is necessary to complete a review of the effectiveness of its internal audit.

The latest review was completed as a self-assessment against 'proper practice' consisting of the Public Sector Internal Audit Standards and the Local Government Application Note. Internal Audit was subjected to an External Quality Assessment (EQA) in 2018 by a qualified, independent assessor from outside of the organisation, which is a periodic requirement of the Standards.

The effectiveness of Internal Audit is not solely judged against the extent of compliance with the Standards since the reviews are about effectiveness and not process. In addition to the self-assessment checklist, other aspects provide evidence to support the review including reports on the results of completed audit assignments and any significant findings; reports setting out the Internal Audit Plan for the forthcoming year; and an annual report on the performance of Internal Audit.

The review concluded that progress continues to be made to strengthen the role of Internal Audit at a corporate level, not least through the formal reporting procedures to this Committee. The outcome of the earlier EQA indicated that Internal Audit is substantially compliant with the Standards with some areas for development. Whilst areas were identified where improvements could be made these were not felt to be fundamentally undermining the efficiency and effectiveness of Internal Audit, its role within the organisation or the Chief Audit

and Control Officer's ability to assess the internal control environment of the Council.

7.2 Quality Assurance and Improvement Programme

Overall, 89% of the planned audits were complete or awaiting finalisation at the year-end, which is slightly below the target of 90%. The main reason for this was the Covid-19 pandemic lockdown and the urgency of diverting Internal Audit resources towards supporting other areas of work. All outstanding and deferred audits brought forward into the new year audit plan will be considered as early as practicable in 2021/22.

The achievement of a percentage completion of the audit plan does not in itself provide sufficient evidence of the quality of the function. The Chief Audit and Control Officer will continue to develop the Quality Assurance and Improvement Programme (QAIP) as referred to in the Internal Audit Charter.

The QAIP covers all aspects of Internal Audit activity and includes both internal and external quality assessments. The QAIP should provide sufficient evidence of the efficiency and effectiveness of the Internal Audit activity and enable conformance with all aspects of the Standards to be evaluated. The programme should identify opportunities for improvement as appropriate.

The following points are noted with regards to the QAIP:

- A review of the effectiveness of internal audit was completed and the overall findings were satisfactory. An earlier, independent External Quality Assessment concluded that Internal Audit complied with the expectations of the Standards. This should provide Members with confidence in the assurance work provided by Internal Audit. The assessor acknowledged that the service benefits from an experienced team with relevant qualifications, and that it receives positive feedback from senior management and elected members. Furthermore, the review outcomes, when benchmarked against other providers in both the public sector and wider industry, showed that the team compares favourably against its peers.
- Membership of professional bodies and regional audit management groups supports the Chief Audit and Control Officer in identifying best practice and other potential service improvements.
- The Chief Audit and Control Officer undertakes quality reviews of the work of the internal audit activity to provide assurance that it complies with the Standards and meets the requirements of the Internal Audit Charter and Internal Audit Direction document.
- In addition to the wider service review, each audit assignment is subject to a quality management review of audit working papers prior to the distribution of the draft audit report for discussion and agreement with senior management.

- Improvement plans arising from any review of internal audit are prepared and reported to the Deputy Chief Executive and the Governance, Audit and Standards Committee as appropriate.

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Report of the Chief Audit and Control Officer

INTERNAL AUDIT PROGRESS REPORT

1. Purpose of report

To inform the Committee of the recent work completed by Internal Audit.

2. Detail

Under the Council's Constitution and as part of the overall corporate governance arrangements, this Committee is responsible for monitoring the performance of Internal Audit.

A summary of the reports issued and progress against the agreed Internal Audit Plans for 2020/21 and 2021/22 is included at appendix 1. A summary narrative of the work completed by Internal Audit since the previous report to this Committee is also included.

Internal Audit has also reviewed progress made by management in implementing agreed actions within six months of the completion of the respective audits. Details of this follow-up work are included at appendix 2. Where agreed actions to address significant internal control weaknesses have not been implemented this may have implications for the Council. A key role of the Committee is to review the outcome of audit work and oversee the prompt implementation of agreed actions to help ensure that risks are adequately managed.

Further progress reports will be submitted to each future meeting of this Committee. A final report detailing the overall performance and productivity of Internal Audit for 2020/21 is included elsewhere on this agenda.

Recommendation

The Committee is asked to NOTE the report.

Background Papers

Nil

APPENDIX 1

INTERNAL AUDIT REPORTS ISSUED SINCE JANUARY 2021

No	Audit Title	Report Issued	Assurance Opinion	Actions - Significant	Actions - Merits Attention
14	Rents (including Evictions)	06/01/21	Substantial	0	1
15	Council Tax	04/02/21	Reasonable	0	2
16	Neighbourhood Warden	23/02/21	Reasonable	1	0
17	Fuel Management	08/03/21	Substantial	0	1
18	Benefits	11/03/21	Reasonable	0	3
19	Waste Management	15/03/21	Substantial	0	3
20	LLL – Online Payments System	15/03/21	Substantial	0	0
21	Gas Servicing and Maintenance	18/03/21	Reasonable	1	1
22	Financial Appraisal – Stapleford Hub	22/03/21	n/a	-	-
23	Employee Authentication Service	26/03/21	Substantial	0	2
24	LA Compliance/Enforcement Grant	31/03/21	n/a	-	-
25	Governance - Covid-19 Grants Schemes	20/04/21	Substantial	0	0
01	Erewash BC – Risk Management	20/04/21	n/a	-	-
02	Erewash BC – Cemeteries	12/05/21	n/a	-	-
26	Utilities (Energy and Water)	21/05/21	Reasonable	1	1
27	Housing Delivery Plan	08/06/21	Substantial	1	2
28	LLL – Kimberley Leisure Centre	10/06/21	Substantial	0	4
29	Sundry Debtors	18/06/21	Reasonable	0	5
30	Corporate Governance Arrangements	18/06/21	Reasonable	-	-

REMAINING INTERNAL AUDIT PLAN 2020/21

No	Audit Title	Progress
	Declarations of Interest	Draft report issued – pending finalisation
	Creditors and Purchasing	Draft report issued – pending finalisation
	Housing Voids Management	Ongoing (Nearing completion)
	Computer/ICT (including Cyber Risk)	Ongoing (Nearing completion)
	Planning Enforcement	In progress
	Bank Reconciliation	Commenced
	Operational Risk Management	Now included in 2021/22 Internal Audit Plan
	Health and Safety	Now included in 2021/22 Internal Audit Plan
<p>The audits of Business Rates; Cash Receipting; Climate Change; Housing Management System; Human Resources; Planning and Building Control; Procurement and Contract Management; and Treasury Management were deferred following revision to the Internal Audit Plan approved on 30 November 2020.</p>		

REMAINING INTERNAL AUDIT PLAN 2021/22

No	Audit Title	Progress
	Private Sector Housing/DFG's	Ongoing (Nearing completion)
	Grounds Maintenance Services	In progress
	NNDR	In progress
	Planning Enforcement	In progress
	Procurement and Contract Management	Commenced
	Health and Safety	Expected to commence in Q2
	Operational Risk Management	Expected to commence in Q2
	Environmental Health	Expected to commence in Q2
	Homelessness	Expected to commence in Q2
	Capital Works	Expected to commence in Q2
	Public Buildings Maintenance	Expected to commence in Q2
	Garden Waste Collection	Expected to commence in Q2
	Treasury Management	Expected to commence in Q2/3
	Payroll	Expected to commence in Q2/3
	Climate Change	Expected to commence in Q2/3
	Human Resources	Expected to commence in Q2/3
	Information Governance	Expected to commence in Q2/3
	Transport/Fleet Management	Expected to commence in Q2/3
	Customer Services	Expected to commence in Q2/3
	Bramcote Leisure Centre	Expected to commence in Q2/3
	Financial Resilience/Budgetary Control	Expected to commence in Q3/4
	Stapleford Town Fund (i.e. Major Projects)	Expected to commence in Q3/4
	Local Authority Trading Company	Expected to commence in Q3/4
	Commercial/Industrial Properties	Expected to commence in Q3/4
	Choice Based Lettings	Expected to commence in Q3/4
	Creditors and Purchasing (inc P-Cards)	Expected to commence in Q3/4
	Bank Reconciliation	Expected to commence in Q3/4
	Benefits	Expected to commence in Q3/4
	Cash Receipting	Expected to commence in Q3/4
	Council Tax	Expected to commence in Q3/4
	Rents	Expected to commence in Q3/4
	D H Lawrence Birthplace Museum	Expected to commence in Q3/4
	Housing Repairs	Expected to commence in Q4
	Corporate Governance	Expected to commence in Q4

COMPLETED AUDITS

A report is prepared for each audit assignment and issued to the relevant senior management at the conclusion of a review that will:

- include an overall opinion on the adequacy of controls within the system to provide assurance that risks material to the achievement of objectives are adequately managed – the opinion being ranked as either ‘Substantial’, ‘Reasonable’, ‘Limited’ or ‘Little’ assurance;
- identify inadequately addressed risks and non-effective control processes;
- detail the actions agreed with management and the timescales for completing those actions, and;
- identify issues of good practice.

Recommendations made by Internal Audit are risk assessed, with the agreed actions being categorised accordingly as follows:

- Fundamental – urgent action considered imperative to ensure that the Council is not exposed to high risks (breaches of legislation, policies or procedures)
- Significant – action considered necessary to avoid exposure to significant risk.
- Merits Attention (Necessary Control) – action considered necessary and should result in enhanced control or better value for money.
- Merits Attention – action considered desirable to achieve enhanced control or better value for money.

The following audit reports have been issued with key findings as follows:

These audits have taken place during the pandemic lockdown, which has seen the audit process adapted accordingly to enable it to be completed remotely. It is pleasing to report that Internal Audit considers that it has not been restricted in terms of its access to systems, records and people. As a result, the audit conclusions and the strength of the opinion provided has not been overly impacted or qualified. The support of officers has been most welcome in successfully concluding the audit testing.

1. Erewash Borough Council – Cemeteries

As part of its Internal Audit Collaboration arrangements with Erewash Borough Council, Internal Audit has completed a review of the systems and procedures operating in respect of Cemeteries at Erewash which was carried out as part of the Erewash Internal Audit Plan for 2020/21.

2. Utilities (Energy and Water)Assurance Opinion – **Reasonable**

The specific audit objectives sought to confirm whether adequate controls exist to provide assurance that

- Contracts for the supply of utilities to the Council are subject to appropriate procurement processes and are adequately managed;
- Billing and metering processes are appropriately designed and implemented;
- Corporate objectives relating to the Green Futures Strategy – Strand Four: Energy and Building Infrastructure are achieved; and
- Known issues relating to billing for the supply of water is resolved with all refunds and credits due paid to the Council.

The Council has an appropriate framework the management of Utilities (Energy and Water) accounts and billing. The review did indicate areas for improvement and recommendations were proposed in order to ensure that processes and controls in place are effective. Internal Audit included one 'significant' risk action relating to the need to achieve compliance with procurement requirements with the supply of water and to resolve all current outstanding issues, as follows:

Procurement of Water and Resolution of Current Issues

There is presently no contract in place for the supply of water to the Council (or to Liberty Leisure Limited). This is in breach of the Council's Financial Regulations (Contract Standing Orders) which require a tendering exercise to be completed for all purchasing arrangements with an anticipated contract value of £25,000 or above.

Furthermore, there are a number of issues regarding accuracy and duplication of billing with the current supplier which require resolution at the earliest opportunity.

In addition to the ongoing regulatory compliance risk, there is a clear financial risk to the Council in the form of overpayments, unplanned and unbudgeted additional costs and potential unclaimed refunds and credits.

A potential solution is currently under consideration by the Head of Asset Management and Development and the Estates team in conjunction with the Procurement and Contracts Officer.

Agreed Action (Significant)

A new contract for the supply of water to the Council has been prepared for agreement with the current supplier. This contract will ensure compliance with Procurement Regulations and the Council's Financial Regulations (Contract Standing Orders).

The contract includes elements of performance management, including the provision of a customer care liaison (single point of contact with the supplier), which should improve the ability to ensure prompt resolutions of any contract management issues.

The new two-year contract will also allow the Council time to consider its strategy and future procurement options, which could include a contract extension with the current supplier, an award from a recognised procurement framework or an open tender exercise.

Managers Responsible

Head of Asset Management and Development
Estates Manager

Target Date: 31 July 2021

The review also proposed a further 'Merits Attention - Necessary Control' action relating to need to ensure that the Energy Procurement Strategy is refreshed and presented to the appropriate Committee for consideration and approval.

The actions were agreed by the Head of Asset Management and Development and the Estates Manager. Internal Audit will complete appropriate follow-up work at six months from the date of the audit report and will report back to Committee accordingly.

3. Housing Delivery Plan

Assurance Opinion – **Substantial**

The specific audit objectives sought to confirm whether adequate controls exist to provide assurance that

- Governance arrangements for the Housing Delivery Plan are sound and working effectively;
- The Housing Delivery Plan has been appropriately documented and approved and progress is regularly monitored and updated;
- Delivery of the Housing Delivery Plan is subject to appropriate scrutiny arrangements by management and elected members;
- The Housing Delivery Plan is adequately resourced and individual elements are subject to capital/business case appraisal; and
- Properties purchased under the 'buy-back' scheme are subject to a needs assessment and purchases are appropriately processed, reviewed and approved.

Internal Audit reports that the Council has an appropriate framework in place for the management of the Housing Delivery Plan. The review did indicate areas for improvement and recommendations were proposed in order to ensure that processes and controls in place are effective. Internal Audit included one 'significant' action relating to the need to resolve a potential procedure conflict between the Land Disposal Policy and further recommendations subsequently adopted by Members, as follows:

Potential Conflict in Procedure – Land Disposal Policy

A development under consideration as part of the Housing Delivery Plan will involve a significant sale of Council-owned land to a private housing developer.

The current Land Disposal Policy was approved by the Policy and Performance Committee in November 2017. The policy provides that although open market disposal is generally the preferred method for the sale of land, a private sale may be preferable where certain criteria are met. The potential sale of land under consideration at the present time appears to meet at least one of these criteria and a private sale would be the preferred route.

However, in a report submitted to Full Council in December 2018, it was recommended and resolved that there must be "provision for ensuring that there is effective market testing, using template practices, in the interests of achieving best consideration for a site" in seemingly all circumstances.

This is a potential conflict of correct Council procedure. Given the significant financial and political impact of land disposals and housing developments, it is recommended that this potential conflict be resolved and advice sought from Legal Services, General Management Team and, if considered appropriate, Members, prior to any commitments being entered into by the Council.

Agreed Action (Significant)

The potential conflict of procedure with regard to the disposal of land will be resolved in a report to the Policy and Performance Committee (and/or Full Council as appropriate) and authoritative guidance sought prior to entering into any commitments regarding the sale of Council land.

Managers Responsible

Deputy Chief Executive

Head of Asset Management and Development Target Date: 31 October 2021

The review also proposed two further 'Merits Attention - Necessary Control' actions relating to need to update the Housing Delivery Plan to fully reflect the current aspirations and potential of the project and to develop and maintain a standalone project-specific risk register for the Housing Delivery Plan.

The actions were agreed by the Head of Asset Management and Development and the Housing Delivery Manager. Internal Audit will complete appropriate follow-up work at six months from the date of the audit report and will report back to Committee accordingly.

4. **Kimberley Leisure Centre (L Leisure Ltd)** Assurance Opinion – **Substantial**

Internal Audit has reviewed the systems and procedures operating at Kimberley Leisure Centre. The terms of reference were agreed with the Liberty Leisure Managing Director and the Centre Manager prior to the commencement of the audit. The cost of this work will be recharged to Liberty Leisure.

Internal Audit sought to confirm whether adequate management control exists to provide assurance that the biometric entry to the gym is functioning appropriately; monies received are secured and banked promptly; inventories are accurate with insurers notified of any changes; and access to the Workflow Asset Management system and reviewing of outcomes is effective.

Internal Audit reports that Liberty Leisure Limited continues to maintain an appropriate framework for the administration of operations at Kimberley Leisure Centre. It was pleasing to report that appropriate controls are in place to ensure that the biometric entry system being used for the gym is operationally secure.

The review identified four 'Merits Attention actions, with three being 'Necessary Controls', relating to the retention of banking remittance slips for ease of reconciliations, updating risk assessments to take account of new cash banking arrangements, sharing inventory and asset valuations updates with the Insurance team and the quality assessment of work requests on the Workflow Asset Management system.

The necessary actions were agreed by the Liberty Leisure Managing Director and the Centre Manager.

5. **Final Accounts – Asset Valuations (Housing)**

The Senior Internal Auditor has supported the Head of Finance Services in the production of the Council's Financial Statement of Accounts. This work involved the checking and quality assurance of Housing Stock valuations and calculations. This ad-hoc assignment did not generate a formal report.

6. **Sundry Debtors** Assurance Opinion – **Reasonable**

The agreed terms of reference for this assignment included aspects relating to policy and procedure notes; key controls relating to the prompt and accurate production of sundry debtor bills, key reconciliations between the sundry debtors system, other feeder systems and the general ledger; system accessibility; and controls in relation to raising of credit notes and write-offs.

The Council has an established framework in place for the management and administration of Sundry Debtors. There has been a significant change in the approach to Sundry Debtor recovery since the last audit, with the Civica Legal module no longer being used to transfer debts into Legal Services. Where debts do need to be passed to Legal Services, the Quality and Control Manager will initially contact Legal Services to discuss if any further legal action would result in any payments from the debtor.

The review identified areas for improvement and further recommendations were proposed to ensure that the processes and controls in place are effective. Five 'Merits Attention – Necessary Control' actions were agreed relating to updating the Corporate Debt Policy and procedural guidance; the need for service areas to appropriately record VAT when producing bills; the timely completion of income reconciliations; undertaking annual reviews of system users and access permissions in conjunction with Heads of Service; and having adequate checks in place to ensure the accurate accounting of write-offs transactions.

The actions were duly agreed by the Head of Revenues, Benefits and Customer Services; the Head of Finance Services; and the Quality and Control Manager.

7. Corporate Governance Arrangements Assurance Opinion – Reasonable

The Chief Audit and Control has conducted the review of the system of internal control in order to deliver his annual internal audit opinion which concludes on the overall adequacy and effectiveness of the Council's framework of governance, risk management and control. This opinion is provided in the annual Internal Audit Review 2020/21 report included elsewhere on this agenda.

Further reviews in respect of Business Rates (NNDR); Computer/ICT and Cyber Risk; Creditors and Purchasing; Declarations of Interest; Grounds Maintenance Services; Housing Voids Management; Planning Enforcement; Private Sector Housing; and Procurement and Contract Management are ongoing and the reports have yet to be finalised. These will be included in the next progress report to Committee.

Current Audit Performance

Overall, although there has been some focus on completing the outstanding audits from 2020/21, the early level of performance for 2021/22 in terms of audits in progress is similar to what has been achieved at this stage in previous 'normal' years. The target of 90% completion of the Internal Audit Plan is expected to be achieved.

APPENDIX 2

INTERNAL AUDIT FOLLOW-UP

Internal Audit has undertaken a review of progress made by management in implementing agreed actions within six months of the completion of the audit. The table below provides a summary of the progress made with agreed actions for internal audit reports issued between June 2018 and December 2020 (excluding clearance reports). Those audits where all actions have previously been reported as completed have also been excluded from this list.

Audit Title	Report Issued	ORIGINAL Assurance Opinion	Number of Actions (Significant in brackets)	Progress
Cemeteries 2018/19	25/06/18	Substantial	1	1 Outstanding
Legionella Prevention and Testing 2018/19	11/09/18	Reasonable	5	2 Outstanding
Bramcote Crematorium 2019/20	21/10/19	Substantial	2 (1)	1 Outstanding
CCTV 2019/20	30/10/19	Substantial	1	1 Outstanding
Chilwell Olympia (Liberty Leisure Ltd)	28/01/20	Substantial	1	1 Outstanding
Procurement and Contract Management	02/03/20	LIMITED	6 (1)	3 Outstanding
Independent Living	05/05/20	Reasonable	5	1 Outstanding
Cash Receipting (Payment Kiosk)	05/06/20	LIMITED	7 (2)	7 Outstanding
Financial Resilience	03/07/20	Reasonable	4	2 Outstanding
Local Authority Trading Company	06/07/20	Reasonable	3 (1)	2 Outstanding
Kimberley Depot and Security	04/09/20	Reasonable	4	4 Outstanding
Housing Repairs	07/09/20	LIMITED	5 (1)	5 Outstanding
Public Health Funerals	16/10/20	Reasonable	4	1 Outstanding
Leasehold Properties	03/11/20	Reasonable	3 (1)	2 Outstanding
Garages	09/11/20	Substantial	2	1 Outstanding
Section 106 Agreements	16/11/20	Reasonable	3	1 Outstanding
HMO Licences	09/12/20	Substantial	1	Completed

Note: The 'Original Assurance Opinion' listed above refers to the individual opinions provided by Internal Audit at the date of concluding the audit. The summary details regarding the 'Limited' assurance opinion reports were presented to this Committee on 18 May 2020 for Procurement and Contract Management; 20 July 2020 for Cash Receipting (Payment Kiosk); and 27 September 2020 for Housing Repairs.

Further details of progress being made with agreed actions that have not yet been fully implemented are included below along with comments from management reflecting any updates on progress. Evidence of implementation will not be routinely sought for all actions as part of this monitoring process. Instead, a risk-based approach will be applied to conducting further follow-up work.

Where the agreed actions to address significant internal control weaknesses have not been implemented this may have implications for the Council. A key role of the Committee is to review the outcome of audit work and oversee the prompt implementation of agreed actions to help ensure that risks are adequately managed.

OUTSTANDING ACTIONS**1. Cemeteries**

June 2018, Substantial Assurance, Actions – 1

1.1 Digitisation of Cemetery RecordsAgreed Action (Merits Attention – Necessary Control)

A timetable for developing an efficient solution for maintaining an effective and accurate electronic cemetery records will be produced. The progress made against the plan will be monitored by management and Bereavement Services Joint Committee. The replacement of the current software solution is considered to be a key part in this medium-term project.

Manager Responsible

Head of Service

Bereavement Services Manager

Revised target date – 30 September 2021**Progress Report of the Bereavement Services Manager**

Tenders were evaluated for the provision of Bereavement Services Management Software. Due diligence carried out with the preferred supplier to ensure the proposed solution was suitable and within budget. Whilst implementation was delayed by the pandemic, the contract has now been agreed with supplier. The software is being mobilised with appropriate testing and training to follow. It is anticipated that the system will be fully integrated and operational by September 2021.

2. Legionella

September 2018, Reasonable Assurance, Actions – 5

2.1 Health and Safety AuditsAgreed Action (Merits Attention – Necessary Control)

Health and Safety will carry out annual audits of processes relating to Legionella prevention/detection and report its findings to the Safety Committee. This process will include seeking assurances from Responsible Persons that appropriate testing has been undertaken and completing a sample of substantive reviews linked to the areas of highest risk.

The review will cover all relevant Council properties, including premises managed by Liberty Leisure Limited and community facilities that are presently being tested by Property Services.

Managers Responsible

Head of Asset Management

Health and Safety Manager

Revised target date – 30 September 2021**Progress Report of the Health and Safety Manager**

The updated Legionella Policy was presented to the Safety Committee in February 2020. The designated persons list was brought up-to-date and those with roles relating to Legionella testing have been made aware of their responsibilities.

Refresher Legionella training has now started (having been postponed twice due to the pandemic) and follow-up management training will take place in June 2021.

An audit programme is being developed and the Council is on course to have the audit programme in place by September 2021.

2. Legionella (Continued)

2.2 Tendering and Contracts

Agreed Action (Merits Attention – Necessary Control)

A corporate review of the way that Legionella testing, risk assessment, cleaning, chlorination and training services are procured is being undertaken with a view to ensuring consistency, value-for-money and compliance with procurement regulations.

Managers Responsible

Head of Asset Management;

Health and Safety Manager;

Housing Repairs and Compliance Manager

Revised target date – 30 September 2021

Progress Report of the Head of Asset Management

This action is not considered to be a high risk/priority at this stage, given the ongoing pressure on resources. The action will be progressed during in 2021/22 with support from the Procurement team.

3. Bramcote Crematorium

October 2019, Substantial Assurance, Actions – 2

3.1 Bereavement Services Management System

Agreed Action (Merits Attention – Necessary Control)

The purchase and installation of a new Bereavement Services Management System will be completed as a matter of priority with key support provided by the Council's Procurement and Business Transformation officers.

Managers Responsible

Head of Service

Bereavement Services Manager

Revised Target Date: 30 September 2021

Progress Report of the Bereavement Services Manager

Tenders were evaluated for the provision of Bereavement Services Management Software. Due diligence carried out with the preferred supplier to ensure the proposed solution was suitable and within budget. Whilst implementation has been delayed by the pandemic, the contract has now been agreed with supplier. The software is being mobilised with appropriate testing and training to follow. It is anticipated that the system will be fully integrated and operational by September 2021.

4. CCTV

October 2019, Substantial Assurance, Actions – 1

4.1 Application for the Third Party Certification of Compliance with the Surveillance Camera Code of PracticeAgreed Action (Merits Attention – Necessary Control)

The final areas of non-compliance with the Surveillance Camera Code of Practice are to be addressed, with the long-term aim of applying for the Third Party Certification of Compliance at an appropriate time in the future. In the meantime, the following actions are proposed:

- Works to progress to enable the systems operating at Kimberley Leisure Centre to be made fully compliant and brought under the full control of the Parking & CCTV/Security Manager. In order to facilitate this, a budget has been earmarked towards the review and upgrade of the existing camera system at the site. (Target date – 31 March 2020)
- An approach will be made to the Head of Environment with a view to making progress towards CCTV systems operating at the Kimberley Depot (in particular those cameras operating from refuse freighters) being fully compliant with the Surveillance Camera Code of Practice. (Target date – 31 March 2020). It is recommended that the remote CCTV systems becomes the responsibility of the nominated single point of contact for CCTV surveillance and centralised in accordance with recommendation made by the Surveillance Camera Commissioner's Office. Alternatively, systems can be managed locally whereby compliance with the Commissioners Code of Practice and accreditation can be audited by the nominated senior responsible officer (SRO) for surveillance.
- The existing CCTV policies will be refreshed and arrangements made for these to be formally adopted by the Council. (Target date – 31 March 2020)

Managers Responsible

Head of Service

Parking and CCTV/Security Manager (in conjunction with the appropriate site managers)

Progress Report of the Head of Governance and the CCTV, Security and Parking Manager

Action 1 (Kimberley Leisure Centre) – This is on-hold pending the outcome of the Leisure Facilities Strategy, the joint-use agreement negotiations with the School and the future of the Centre.

Action 2 (Kimberley Depot) – A system of local management is being introduced whereby compliance with the Commissioners Code of Practice and accreditation can be audited by the nominated senior responsible officer (SRO) for surveillance. This is reinforced by local managers being required to complete annual training through the Broxtowe Learning Zone in addition to the completion of a form which outlines the justification for the retention of CCTV in their area.

Action 3 (Policy Updates) – A CCTV review is under way with a Councillor Task and Finish Group, the outcomes of which will inform future policies.

5. Chilwell Olympia

January 2020, Substantial Assurance, Actions – 1

5.1 Operational Safety Risks – Joint-Use AgreementAgreed Action (Merits Attention 'Necessary Control')

The current review of the Joint Use Agreement will incorporate the management of risk and allocation of responsibilities in respect of the key public health risk areas such as legionella, asbestos and fire.

The first draft of the updated Joint Use Agreement is being prepared by the Council's Legal Services team. A timetable has been prepared and meetings programmed with Chilwell School and Nottinghamshire County Council to consider the proposed Joint Use Agreement.

Managers Responsible

Deputy Chief Executive, Broxtowe Borough Council
Managing Director, Liberty Leisure Limited
Centre Manager

Revised Target Date: 30 September 2021**Progress Report of the Managing Director, Liberty Leisure Limited**

An initial meeting was held with the school to discuss the Joint Use Agreement. The Council's Legal section was involved and prepared a draft revised agreement that was shared with the school. Operational meetings were held with the school Head Teacher which focussed on the safe re-opening of the school and leisure centre in relation to Covid-19. The specific health and safety issues detailed in the audit are being jointly managed by the school and LLL to ensure the safety of all users of the site.

LLL and Chilwell School continue to have a good working relationship with all necessary checks taking place and information shared to manage health and safety risks. LLL is satisfied that the present arrangements are sufficient until a new joint use agreement is in place.

6. Procurement/Contract Management March 2020, Limited Assurance, Actions – 6**6.1 Procurement Training**Agreed Action (Merits Attention)

A procurement e-learning module will be developed, in conjunction with the Training Officer, to support the embedding of the Procurement and Commissioning Strategy. This will complement the existing support and guidance that is already available on the intranet and website.

Managers Responsible

Procurement and Contracts Officer

Revised Target Date: 30 September 2021**Progress Report of the Procurement and Contracts Officer**

A briefing on the refreshed Procurement Strategy was provided to all affected officers and managers. There has been some initial liaising with the Learning and Development Officer to develop an e-learning course for the Broxtowe Learning Zone. It is intended to deliver this action before the revised target date.

6. Procurement/Contract Management (Continued)

6.2 Structured Contract Management

Agreed Action (Significant)

A Contract Management Strategy and Framework is being developed to expand upon the adopted Procurement and Commissioning Strategy. This will incorporate both strategic and operational contract management and a multi-layered approach for 'softer' elements of supplier management and monitoring. A proposal was presented to General Management Team in February 2020 and will now be developed further.

The strategy proposed a three-stage process: advising suppliers that the relevant Council's policies as listed in tender documentation will provide the minimum standards required for suppliers engaged by the Council; monitoring progress with suppliers providing reports on performance; and undertake annual strategic reviews for major contracts (by value and/or strategic importance) to consider all aspects of contract performance and compliance and to carry out value engineering where appropriate. The framework will require stakeholders to periodically meet with contractors to discuss contract performance, with appropriate records maintained. Any issues can then be escalated accordingly. The process will also include regular dashboard and exception reporting to GMT.

An action plan is being developed as part of the rollout of the framework.

Managers Responsible

Head of Finance Services

Procurement and Contracts Officer

Revised Target Date: 30 September 2021

Progress Report of the Procurement and Contracts Officer

A Contract Management Strategy was approved by GMT in October 2020. A series of virtual briefing sessions will be provided to stakeholders. Unfortunately, the launch of this strategy was delayed as a result of other priorities linked to the pandemic. It is now intended to be delivered before the revised target date.

6.3 Contract Transparency Requirements

Agreed Action (Merits Attention)

A document has been prepared that will satisfy the Local Government Transparency Code 2015 publishing requirements for procurement and this will be adopted from 2020/21.

Manager Responsible

Procurement and Contracts Officer

Revised Target Date: 30 September 2021

Progress Report of the Procurement and Contracts Officer

A pro-forma and explanatory note has been prepared for Heads of Service to complete a quarterly return for the Transparency Code detailing their respective procurement activity. Unfortunately, the launch of this publication has been delayed as a result of other priorities linked to the pandemic. It is now intended to be delivered before the revised target date.

7. Independent Living

7.1 Independent Living Plans (I-plans)

Agreed Action (Merits Attention – Necessary Control)

The process for completing I-plans would be significantly enhanced by the Independent Living Coordinators utilising laptops or tablets. This would provide improvements in terms of data security (by going paper-light) and efficiencies in terms of data collection, analysis and reduced travel time. ICT Services will be approached to provide the necessary facility.

Managers Responsible

Head of Housing; Income and Housing Manager

Independent Living Manager

Revised Target Date: 30 September 2021

Progress Report of the Income and Housing Manager

This action was delayed by Covid-19. The Independent Living Coordinators have been working from home with only limited ICT capability. It has now been negotiated with ICT Services that when desktops come up for renewal, these units will be replaced with laptops. It is therefore anticipated that Independent Living team will migrate gradually onto an agile working solution over the next few years.

8. Cash Receipting (Payment Kiosk)

8.1 Balancing and Reconciliation Differences

Agreed Action (Merits Attention – Necessary Control)

An Officer Working Group will be established, with representation from key stakeholders across the business, to consider, respond, track and resolve the issues raised in respect of the payment kiosk.

The procedure for processing discrepancies identified during cashing-up will be reviewed and updated to allow for any differences to be accounted for in an appropriate manner pending further investigation.

Managers Responsible

Head of Administrative Services;

Senior Support Officer/Business Support Team Leader

Officer Working Group

Revised Target Date: 30 September 2021

8.2 Accuracy of Transaction Recording

Agreed Action (Significant)

A review of the systems and the effectiveness of how they interact will be undertaken by the Officer Working Group to ensure the accuracy and integrity of the data and management information the systems are expected to produce.

Managers Responsible

Head of Administrative Services;

Officer Working Group

Revised Target Date: 30 September 2021

8.3 Kiosk Receipts and Automated ReportsAgreed Action (Significant)

A review will be conducted by the Officer Working Group to identify improvements to the management information provided by the kiosk. Consideration will be given to skills and training needs to enable clear understanding of the data provided.

Managers Responsible

Head of Administrative Services;
Officer Working Group

Revised Target Date: 30 September 2021

8.4 Contract Management – Reporting of IssuesAgreed Action (Merits Attention – Necessary Control)

Any concerns identified with the kiosk system will be escalated to GMT and the service provider as required.

Managers Responsible

Head of Administrative Services;
Officer Working Group

Revised Target Date: 30 September 2021

8.5 Payment DetailsAgreed Action (Merits Attention – Necessary Control)

Enquiries will be made with the service provider as to the options for enhancing the controls within the kiosk to make mandatory fields for the payee to enter their details and for the kiosk to only process payments when a correct payment reference has been entered.

Managers Responsible

Head of Administrative Services;
Officer Working Group

Revised Target Date: 30 September 2021

8.6 Card Payments – Refunds ProcessingAgreed Action (Merits Attention – Necessary Control)

The option to process card payment refunds (for duplicate or erroneous payments) onto the original payment card used will be considered in conjunction with the service provider.

Managers Responsible

Head of Administrative Services;
Officer Working Group

Revised Target Date: 30 September 2021

Progress Report of the Head of Administrative Services

The payment kiosk has been closed to the public since the first pandemic lockdown in March 2020 and has only being used on a few occasions by Support Services. At this stage, there has been little need to establish an Officer Working Group to manage and resolve the historical issues raised in respect of the payment kiosk.

At a suitable point when the kiosk facility is re-opened to the public, the Officer Working Group will review and consider all of the points raised by Internal Audit.

8.7 Usage Reviews and Future Viability

Agreed Action (Merits Attention)

The statistics reports produced in relation to the kiosk will continue to be reviewed. Proactive work will continue to encourage customers to consider alternative cost effective payment channels such as Direct Debit and card payment via the website. This work will include direct contact at the kiosk and scrutiny of payments data (via reports analysed by fund) to identify customers who regularly use the kiosk.

The ongoing viability of the payment kiosk will be reviewed undertaken in terms of cost effectiveness and customer satisfaction, with comparison to alternative external solutions.

Managers Responsible

Head of Revenues, Benefits and Customer Services

Head of Administrative Services

Target Date: 31 July 2021

Progress Report of the Head of Revenues, Benefits and Customer Services

The kiosk has been closed to the public during the pandemic, only being used on a few occasions by Support Services as a matter of urgency. In view of this, it has been difficult to target individuals that use the kiosk and promote other services.

A team was established to evaluate the other cash payment options. A report was presented to the Finance and Resources Committee on 30 March 2021 where it was agreed that the Council will work with 'All Pay' to provide cash payment facilities using Paypoint and the Post Office. These services will be limited to those residents that have no other method of payment. The Council has commenced the procurement process with 'All-Pay'. Officers are working towards a target go-live date of 31 July, although there is work involving Finance Services to ensure payments are accounted for correctly. With the recent turnover of staff within that service area, there is a risk that this deadline might not be achieved.

9. Financial Resilience

9.1 CIPFA Financial Resilience Index

Agreed Action (Merits Attention 'Necessary Control')

It is anticipated that the CIPFA Financial Resilience Index will be refined post Covid-19 to ensure that it remains fit for purpose. The benefits of using this analytical tool to support good financial management and provide a common understanding amongst managers and members of the current financial position and potential risks are acknowledged. Further work in developing this for Broxtowe, at least in the short-term, will be dependent upon further updates from CIPFA.

Manager Responsible

Deputy Chief Executive

Revised Target Date: 31 October 2021

Progress Report of the Deputy Chief Executive

This action is still progressing. CIPFA has recently published the latest update of its Financial Resilience Index based upon the 2019/20 financial outturn. This will provide a useful pre-Covid baseline assessment of the financial position of local authorities. The indices for 2020/21 will be reviewed when available, with any significant action needed being reported through GMT and to the relevant Committee accordingly.

9. Financial Resilience (Continued)

9.2 Prioritisation of Schemes – Capital Project Appraisals

Agreed Action (Merits Attention 'Necessary Control')

A review of the current arrangements for prioritising capital schemes will be completed in time for the 2021/22 budget preparation, with the outcomes reported to GMT for approval and adoption. This review will consider the development of a rolling three-year Capital Strategy, linked to corporate priorities, and the introduction of robust business plans/capital project appraisal framework for individual schemes to support decision making and the prioritisation of limited capital resources.

Manager Responsible

Deputy Chief Executive;
Head of Finance Services

Revised Target Date: 31 October 2021

Progress Report of the Deputy Chief Executive

A Capital Strategy is approved annually by the Finance and Resources Committee. Further work will be undertaken to refine the process to prioritise capital schemes although for the latest capital programme the priority schemes have been linked to the corporate objectives, such as Housing, and the high-risk health and safety schemes relating to public buildings.

10. Local Authority Trading Company

10.1 Revision and Update of Service Management Agreement

Agreed Action (Significant)

The Council's new Leisure Facilities Strategy is currently being developed, although its full adoption and implementation will be a long-term project. In the meantime, it is anticipated that the proposed Strategy will have been developed by late summer 2020. At this stage, the Strategy will be used as the starting point for an initial review of the Service Management Agreement between the Council and the Company.

Managers Responsible

Deputy Chief Executive
Managing Director – Liberty Leisure Limited

Revised Target Date: 30 September 2021

Progress Report of the Deputy Chief Executive

The new Leisure Facilities Strategy is being developed. Some minor adjustments have been proposed for the Service Management Agreement between the Council and the Company that are currently being worked through in conjunction with Legal Services. A fundamental review of the agreement will be deferred until beyond the pandemic with current the priority being the financial stability of the company.

10. Local Authority Trading Company (Continued)

10.2 Review of Joint-Use Agreement with Chilwell School

Agreed Action (Merits Attention 'Necessary Control')

The ongoing review and re-negotiation of the Joint-Use Agreement with Chilwell School will recommence, in conjunction with Legal Services, with a view to finalising the agreement at the earliest opportunity.

Manager Responsible

Deputy Chief Executive

Revised Target Date: 30 September 2021

Progress Report of the Deputy Chief Executive

Some preliminary work has been undertaken, in conjunction with Legal Services, on the Joint Use Agreement with Chilwell School. Given the notice received from East Midlands Education Trust, the ongoing negotiations with EMET regarding Kimberley Leisure Centre remain the current priority.

11. Kimberley Depot and Security

11.1 Security Policy and Procedure

Agreed Action (Merits Attention 'Necessary Control')

A security policy and procedures guide will be produced for reference by managers and officers with responsibilities relating to depot security.

Manager Responsible

Head of Environment

Revised Target Date: 31 July 2021

Progress Report of the Head of Environmental Services

This task has not yet commenced.

11.2 Risk Assessments – Health and Safety

Agreed Action (Merits Attention 'Necessary Control')

A formal risk assessment will be completed and documented relating to the risk of flooding. The mitigating actions identified for a flooding event will be effectively communicated to those responsible to ensure the health and safety of employees.

Manager Responsible

Head of Environment

Revised Target Date: 31 July 2021

Progress Report of the Head of Environmental Services

A formal flood risk assessment has not yet been completed, although a Flood Plan is currently in draft form.

11. Kimberley Depot and Security (Continued)

11.3 Inventories

Agreed Action (Merits Attention 'Necessary Control')

An inventory of all plant and equipment held at the depot and/or used offsite by the Environment Department will be recorded and maintained. This inventory will then be used to review insurance arrangements and ensure that the most appropriate cover is in place.

Manager Responsible

Head of Environment

Revised Target Date: 31 July 2021

Progress Report of the Head of Environmental Services

A task to create a full inventory list of plant and equipment at the Depot is in progress.

11.4 Flood Plan

Agreed Action (Merits Attention 'Necessary Control')

A formal flood plan specific for Kimberley Depot will be developed. The plan will identify key officers and responsibilities; basic strategies to protect employees, equipment and machinery and to mitigate risks from contamination (including hazardous chemicals).

The plan will also include a checklist of actions to be completed when flooding is imminent, during the event and post-flood to ensure that no key actions are missed.

Manager Responsible

Head of Environment

Revised Target Date: 31 July 2021

Progress Report of the Head of Environmental Services

The Flood Plan has been drafted and is awaiting review by the Head of Service.

12. Housing Repairs

12.1 Completion and Reporting of Inspections

Agreed Action (Merits Attention 'Necessary Control')

As part of wider improvements to systems and processes (including form design), a review of the reporting framework will be undertaken with the aim of implementing an effective system of 'post-inspection' and 'monitored inspection', with progress being regularly reported to Housing Management accordingly.

Managers Responsible

Head of Service; Housing Repairs Manager

Target Date: 31 December 2020

Progress Report of the Head of Asset Management and Development

Action delayed due to the limitations on inspection during pandemic but will be picked up more robustly once restrictions on entering properties have been lifted. The action will also progress the reporting within the new web-based Capita reporting.

12. Housing Repairs (Continued)

12.2 Invoicing of Rechargeable Works

Agreed Action (Merits Attention 'Necessary Control')

The process for invoicing rechargeable repair works will be reinstated, although the current method for evidencing costs, producing bills and recovering the debt is very labour intensive.

The billing of rechargeable repair works will be reviewed as part of a wider piece of work to bring all housing related debt into the CAPITA system, depending upon system development.

Managers Responsible

Head of Service; Housing Repairs Manager

Revised Target Date: 30 September 2021

Progress Report of the Head of Asset Management and Development

This action is tied in with wider Capita system and resourcing issues.

12.3 Contact Centre (Customer Services)

Agreed Action (Merits Attention)

The key recommendations from commercial review of the Housing Repairs Service in relation to the Contact Centre will be implemented, in conjunction with the Head of Revenues, Benefits and Customer Services, as soon as practicable. The progress made on this should be regularly reported to Housing Management and the Housing Committee.

Managers Responsible

Head of Service; Housing Repairs Manager

Target Date: 30 September 2021

Progress Report of the Head of Asset Management and Development

Progress is being made towards completing this action.

12.4 Job Costing and Stock Control

Agreed Action (Significant)

The progress made in delivering the Housing Repairs Review Action Plan have stalled due to various circumstances, not least the coronavirus pandemic lockdown. This action plan will be revisited when resources and the lifting of restrictions allow.

The job costing and stock control processes will be reviewed and updated as planned for in the Housing Repairs Review Action Plan. The progress made on this will be regularly reported to Housing Management and the Housing Committee.

Managers Responsible

Head of Service; Housing Repairs Manager

Revised Target Date: 31 December 2021

Progress Report of the Head of Asset Management and Development

Work has commenced on reviewing stocks and stores.

12.5 Overdue Contract Renewals

Agreed Action (Merits Attention 'Necessary Control')

The expired contracts for Glazing Services and Scaffolding will be reviewed, in conjunction with the Procurement and Contracts Officer, and subjected to formal competitive tender or direct award from a recognised framework, where appropriate, at the earliest opportunity.

Managers Responsible

Head of Service; Housing Repairs Manager

Revised Target Date: 30 September 2021

Progress Report of the Head of Asset Management and Development

All expired and non-compliant arrangements are being reviewed and a programme developed to bring these into full compliance.

13. Public Health Funerals

13.1 Procurement of Funeral Director Services

Agreed Action (Merits Attention 'Necessary Control')

A review of the contract for Funeral Directors services will be undertaken to ensure compliance with Procurement Regulations and the Council's Contract Standing Orders.

Manager Responsible

Chief Environmental Health Officer

Target Date: 31 March 2021

Progress Report of the Chief Environmental Health Officer

The current contract was awarded following an informal tender with local funeral directors being asked to submit prices to undertake the various aspects of a welfare funeral. A formal tender was not felt necessary at the time due to the overall value and the award was made on the basis of lowest price. This is now being refreshed and draft tender documents are being prepared in conjunction with the Procurement team. The proposed revised target date is 30 September 2021.

14. Leasehold Properties

14.1 Control of Credit Notes and Write-Offs

Agreed Action (Merits Attention 'Necessary Control')

Following the anticipated transfer of the administration and recovery of Leasehold Service Charge bills to the Housing Income Collections team, the current (or enhanced) controls over credit notes, write-offs and any other amendment to billed amounts will be retained.

Managers Responsible

Income and Housing Manager

Income Collections Manager(s)

Target Date: 30 September 2021

Progress Report of the Housing Services and Strategy Manager

This on track, although part may be not achieved by the target date. On the preparation to transfer the administration and recovery of service charge bills to the Housing Income Collections team, with the upgrade to Capita Housing system being put back, this has subsequently delayed system related work.

14.2 Update of Leasehold Database and FunctionalityAgreed Action (Merits Attention 'Necessary Control')

A full reconciliation of the Leasehold Property database to new records on Capita Housing system will be completed to ensure 'day one' accuracy and completeness of the database.

Manager Responsible

Leasehold and Performance Manager

Target Date: 30 September 2021

Progress Report of the Housing Services and Strategy Manager**This is on track to be completed by target date.****15. Garages****15.1 Financial Appraisal of Individual Garage Sites**Agreed Action (Merits Attention 'Necessary Control')

The decision making process for individual garage sites will include consideration of likely costs, anticipated future rental income and the resultant payback period.

A retrospective review of the garages sites considered under phase 1 of the garage modernisation works will be undertaken to inform the consideration of options for phase 2.

Managers Responsible

Head of Housing; Garages Strategy Working Group

Target Date: 31 March 2021

Progress Report of the Head of Housing**Work has commenced. Target date needs extending to 31 July 2021****16. Section 106 Agreements****16.1 Reconciliation and Monitoring**Agreed Action (Merits Attention')

S106 agreements records held in Planning will be periodically reconciled with Finance records to ensure that expected contributions have been received and spending is in line with the agreements. This will provide additional control and ensure complete end-to-end process monitoring by one section in this multi-sectional activity.

A new 'master' spreadsheet is being developed to provide a definitive document that can be viewed/updated as appropriate by all involved in S106 agreements.

Managers Responsible

Head of Planning and Economic Development
Planning Contributions Officer

Target Date: 31 March 2021

Progress Report of the Head of Planning and Economic Development

The data required to suit all needs may be too much for a single spreadsheet. The revised action will be to simplify the Planning Department version and adapting it to meet the needs of other departments. As a result of a substantial caseload of planning applications no further progress has been made.

Report of the Executive Director

COMPLAINTS REPORT 2020/21

1. Purpose of report

To provide members with a summary of complaints made against the Council.

2. Detail

This report outlines the performance of the Council in dealing with complaints, including: at stage one, managed by the service areas, at stage two, managed by the Complaints and Compliments Officer and at stage three passed to the Local Government Ombudsman (LGO) or Housing Ombudsman (HO).

- Appendix 1 provides a summary of the Council's internal complaint statistics.
- Appendix 2 provides a summary of the complaints investigated by the Council formally under stage two of the Council's formal complaint procedure.
- Appendix 3 provides a summary of the complaints determined by the Ombudsman.

Of the 365 stage one complaints received overall, 59 were investigated under the stage 2 complaints procedure and 11 were investigated by the LGO. Under the stage 2 complaints procedure, 40 complaints (68%) were not upheld, six complaints (10%) were partially upheld, 12 complaints (20%) were upheld and one was withdrawn. Further details can be found in appendix 2. The Ombudsman investigated 11 complaints made against the Council. Nine complaints were recorded as not upheld, resulting in no further action being required by the Council and two complaints were upheld. Further details can be found in appendix 3.

Recommendation

The Committee is asked to NOTE the report.

Background papers

Nil

APPENDIX 1

Complaints received

The table below shows the figures for the overall complaints received in 2020/21 and the previous 2019/20 figures are shown in brackets for comparison.

	Total	Chief Execs	Deputy Chief Execs	Executive Director	Liberty Leisure Ltd	Members
Number of Stage 1 complaints	365 (449)	281	9	75	-	25*
No. of complaints investigated under Stage 2	59 (41)	49	6	4	-	-
No. of complaints determined by the Ombudsman	11 (9)	10	1	-	-	-

*member complaints follow a separate process to the Council's formal complaints process. These figures have not been included in the overall complaints statistics.

The Council has registered a total of 365 stage 1 complaints in the year 1 April 2020 to 31 March 2021, compared to 449 in the year 2019/20. The number of complaints concluded under stage 2 of the complaints procedure is 59, compared to 41 in 2019/20, and 11 complaints, compared to 9 in 2019/20 have been determined by the Local Government Ombudsman and the Housing Ombudsman Service.

Time taken to acknowledge receipt of stage one complaints (3 working day target)

	Total	Chief Execs	Deputy Chief Execs	Executive Director	Liberty Leisure Ltd	Members
Number of complaints acknowledged on the same day	255 (291)	196	6	53	-	-
Number of complaints acknowledged within one to three days	96 (142)	72	2	22	-	25*
Number of complaints acknowledged after three working days	14 (16)	13	1	-	-	-

*member complaints follow a separate process to the Council's formal complaints process. These figures have not been include in the overall complaints statistics.

255 stage 1 complaints (70%) were acknowledged on the same day. 96 (26%) were acknowledged in one to three days and 14 (4%) took more than three working days to acknowledge.

All 25 complaints regarding members were acknowledged within three working days.

The Council has seen an improvement in the time taken to acknowledge complaints, through continued use of electronic facilities in order to keep complainants updated as to the progress of their complaint.

Time taken to respond to stage 1 Complaints (15 working day target)

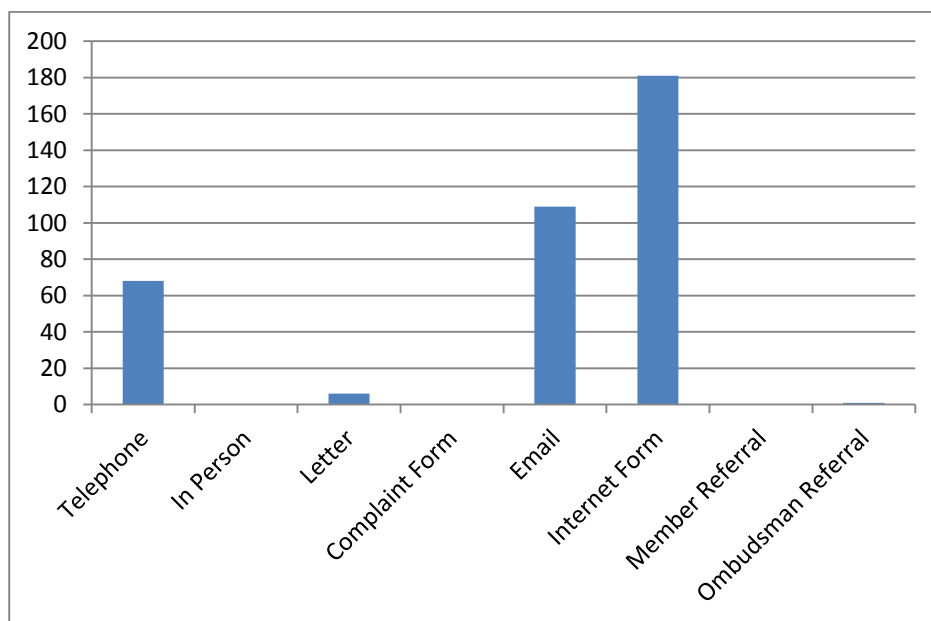
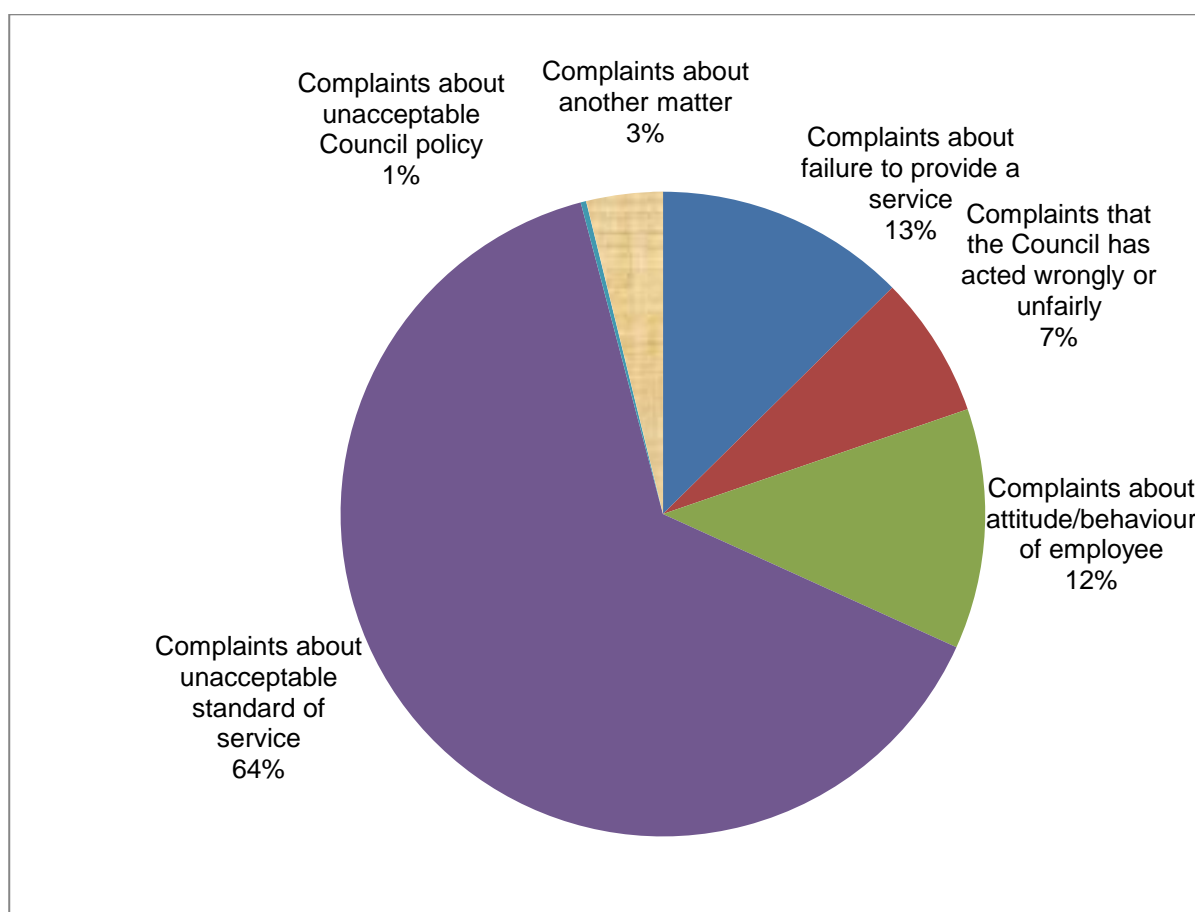
	Total	Chief Execs	Deputy Chief Execs	Executive Director	Liberty Leisure Ltd
Less than 5 working days	83 (121)	20	4	59	-
5 to 10 working days	55 (56)	47	3	5	-
10 to 15 working days	206 (247)	193	2	11	-
More than 15 working days	21 (25)	21	-	-	-

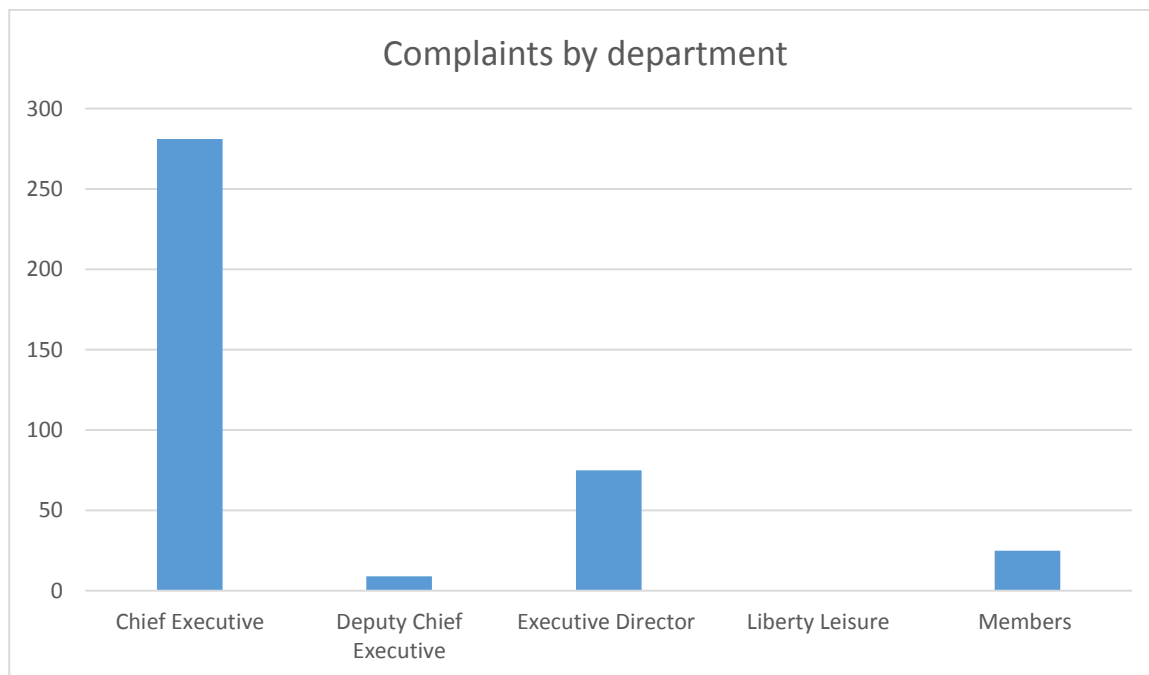
83 stage 1 complaints (23%) were responded to in less than five working days, 55 (15%) within five to ten days, 206 (56%) within ten to fifteen working days. 21 (6%) took longer than fifteen working days to provide a response. In these cases, the Heads of Service are asked to write to complainants to advise that a response will take longer and provide the complainant with an estimated timescale for completion.

Reasons for delays could include:

- Further information being required from the complainant.
- Complexity of the complaint including in-depth research required.
- Resource issues.
- COVID-19 pandemic.

(This list is not exhaustive)

How the complaints were made**What the complaints were about**

Complaints by department**Number of stage 2 complaints**

	Total	Chief Execs	Deputy Chief Execs	Executive Director	Liberty Leisure
Number of Stage 2 complaints	59 (41)	48	6	5	-

Time taken to acknowledge to stage 2 complaints (3 working day target)

	Total	Chief Execs	Deputy Chief Execs	Executive Director	Liberty Leisure
Acknowledged within 3 working days	59	48	6	5	-

Time taken to respond to stage 2 complaints (20 working day target)

	Total	Chief Execs	Deputy Chief Execs	Executive Director	Liberty Leisure
Responded in less than 10 working days	2	1	-	1	-
Responded in 11 to 20 working days	28	21	3	4	-
Responded in	29	26	3	-	-

	Total	Chief Execs	Deputy Chief Execs	Executive Director	Liberty Leisure
more than 20 working days					

59 complaints were investigated and responded to under stage 2 of the formal complaint procedure. 100% were acknowledged within three working days and 30 (51%) were responded to within the 20 working day timescale. All the complainants who received their responses after 20 working days were informed that there would be a delay and were informed of the reason.

Reason for the delays included:

- Further information being required from the complainant or officers.
- Complexity of the complaint.
- Resource Issues.
- COVID-19 pandemic.

Equalities Monitoring

Of the 365 stage 1 complaints recorded, 181 were completed with the monitoring data.

Gender

Male – 77
Female – 77
Not stated - 27

Age groups

<17 – 0
18–24 – 8
25–29 – 8
30–44 – 14
45–59 – 41
60–64 – 8
65+ – 32
Not stated – 70

Ethnic Groups

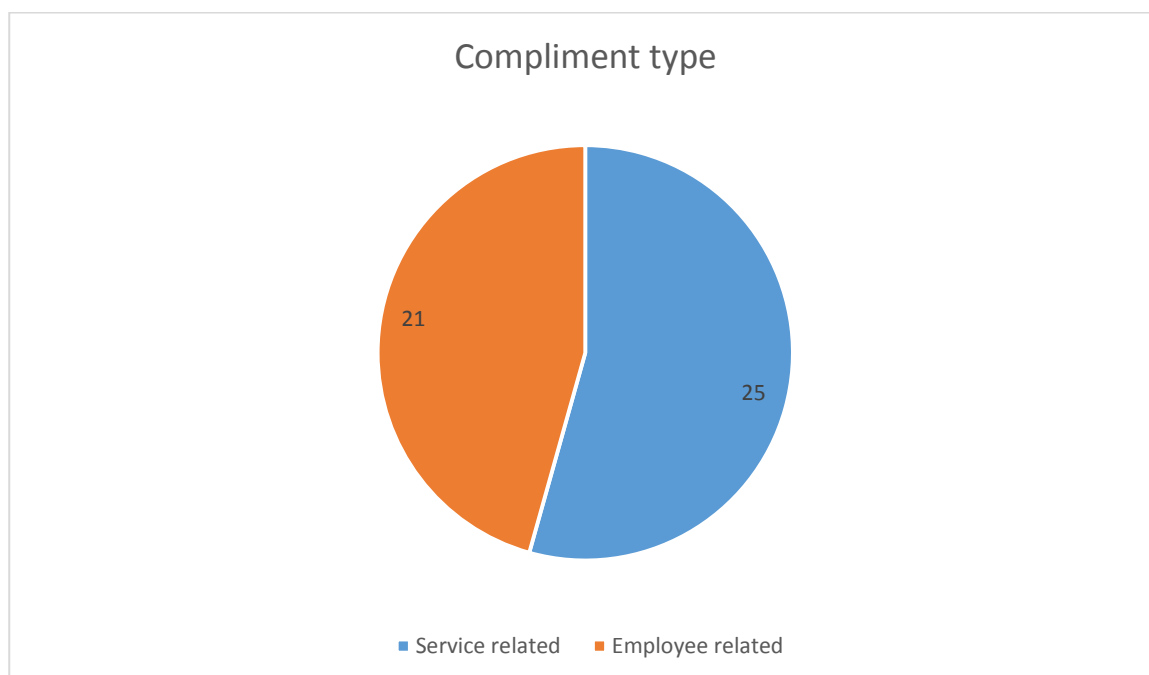
British – 112
Indian – 4
Caribbean - 5
Not stated – 57
Any other White – 3

Long term health problem that limits daily activity?

Yes – 46
No – 79
Not stated - 56

Compliments

There have been a total of 46 compliments registered in the period, 21 of which were in relation to specific employees and 25 were related to the service received.



A new system has been introduced to aid with the capturing of compliments. The system has been simplified and reworked to ensure all compliments are being recorded.

All staff members have been reminded of the necessity to record compliments as and when they are received.

Breakdown of complaints and compliments by department and section

Chief Executive's department

Service Areas	Stage 1 Complaints	Stage 2 Complaints	Ombudsman Complaints	Compliments
Communities	2	-	-	-
Development Control	36	11	3	1
Environmental Health	2	2	1	-
Garage Service	1	-	-	-
Housing and Income	39	1	-	-
Housing Operations	34	9	2	15
Housing Options	19	1	-	1
Housing Repairs	136	23	4	10
Housing Services and Strategy	3	-	-	-
Neighbourhood Services	7	-	-	-
Private Sector Housing	1	1	-	-
Strategy and Performance	1	-	-	-
Total	281	48	10	27

Deputy Chief Executive's department

Service Areas	Stage 1 Complaints	Stage 2 Complaints	Ombudsman Complaints	Compliments
Benefits	2	-	-	-
Bereavement	2	1	1	-
Customer Services	1	1	-	-
Revenues	4	4	-	-
Total	9	6	1	-

Executive Director's Department

Service Areas	Stage 1 Complaints	Stage 2 Complaints	Ombudsman Complaints	Compliments
Waste and Recycling	59	-	-	18
Parks and Environment	13	-	-	-
Data Protection	1	1	-	-
Democratic Services	3	3	-	1
Elections	1	1	-	-
Total	75	5	-	19

Service Area	Stage 1 Complaints	Stage 2 Complaints	Ombudsman Complaints	Compliments
Kimberley Leisure Centre	-	-	-	-
Bramcote Leisure Centre	-	-	-	-
Chilwell Leisure Centre	-	-	-	-

Standards

Area	Stage 1 Complaints
Members	25*

*member complaints follow a separate process to the Council's formal complaints process. These figures have not been include in the overall complaints statistics.

Financial Settlements

	Total	Chief Execs	Deputy Chief Execs	Executive Director	Liberty Leisure
Stage 1	-	-	-	-	-
Stage 2	8	8	-	-	-
Ombudsman	2	2	-	-	-
TOTAL	10	£2,760	-	-	-

APPENDIX 2

Stage 2 – Formal Complaints

1. Complaint against Housing Repairs

Acknowledgement – 2 working days

Response – 28 working days

Complaint not upheld

Complaint

The concern raised was that the Housing Repairs Team had not adequately attended to a repair regarding the complainants shower.

Council's response

The Council had attended the complainant's property on multiple occasions and found no issue with the shower. The complainant's issue related to the water pressure, however this was working correctly.

2. Complaint against Democratic Services

Acknowledgement – 1 working day

Response – 20 working days

Complaint not upheld

Complaint

The concern raised was that the Council knowingly submitted and allowed members to vote on incorrect minutes.

Council's response

The Council's members voted on an amendment to the minutes as per the Council's standing orders.

3. Complaint against Housing Repairs

Acknowledgement – 1 working day

Response – 22 working days

Complaint upheld

Complaint

The concern raised was that the Housing Repairs Team had not adequately attended to a leak in the complainant's roof.

Council's response

The Council had attended the complainant's property to repair the leak in the roof. However, only a temporary solution was provided and no repair had been booked to permanently repair this issue.

An apology was offered and the repair was booked.

Governance Services Recommendation

The complaint highlighted the necessity for the Housing Department to maintain records sufficiently in order to follow up progress on repairs. Housing staff were reminded to action repairs following inspections through diary management and the bookings system in order to minimise repeats of the error.

4. Complaint against Housing Repairs

Acknowledgement – 1 working day
Response – 23 working days
Complaint partially upheld

Complaint

The concerns raised was that the Housing Repairs Teams had not adequately repaired a garage door.

Council's response

The Council had attended the complainant's garage and noted that the garage lock was faulty and that the door frame was damaged. The lock was replaced, however, due to the COVID-19 pandemic the Council's garage door supplier was not operating. The complainant was offered the option to relocate garage sites or wait until the supplier was operating fully so that the door could be replaced.

5. Complaint against Housing Income

Acknowledgement – 1 working day
Response – 20 working days
Complaint not upheld

Complaint

The concerns raised were that the Housing Income Officer was rude in their correspondence.

Council's response

The e-mail correspondence between the Housing Income Officer and the complainant was polite and the professional. There was no evidence to suggest that the Housing Income Officer had been rude to the complainant when carrying out their duties.

6. Complaint against Private Sector Housing

Acknowledgement – 1 working day
Response – 20 working days
Complaint not upheld

Complaint

The concerns raised were that Private Sector Housing Officers were rude to the complainant and disrespectful to their property. Additionally, the Council had not offered adequate advice in relation to the complainant's homelessness issue.

Council's response

The e-mail correspondence between the Private Sector Housing Officer and the complainant was polite and the professional. When carrying out an inspection of the complainant's property the two Officers did not recall any reason to suspect causing upset to the complainant. The complaint in relation to the conduct of the Officers was received 10 months following the inspection.

Additionally, the Council had offered the complainant advice on their homelessness issue and set up a meeting with the complainant to review their case. The complainant did not attend this meeting.

7. Complaint against Bereavement Services

Acknowledgement – 1 working day

Response – 30 working days

Complaint upheld

Complaint

The concerns raised were that the Council had buried a recently deceased in the complainant's pre-purchased grave plot. The complainant stated it was their mother's dying wish that they be buried next to each other.

Council's response

It was found that the recently deceased's grave plot had overlapped with the complainant's due to an increase of casket sizes and widening of graves to prevent the grave walls collapsing. The plots were not remapped to accommodate this and the bereavement team had noted that the complainant's grave plot no longer existed but did not take action. The pre-purchased grave plots are the property of the owner in perpetuity. The Council has a legal obligation to provide the grave which it can no longer do.

The Council offered the complainant a full refund of the grave at £745 and an additional payment of £1000 in settlement of the complaint in addition to a new grave plot within the area at no cost.

Additionally, the Council offered the complainant the option of exhuming their mother and extending that grave plot so that they could be buried together. The cost of the exhumation would be paid for by the Council if the complainant wished to undertake this option.

The complainant did not accept these offers.

Governance Services Recommendation

The complaint highlighted that pre-purchased grave plots maybe have been subject to a similar issue in which the grave plots no longer exist due to a general widening of the plots. It was recommended an audit of all pre-purchased grave plots be undertaken to established if they still exist. This has been completed.

8. Complaint against Housing Repairs

Acknowledgement – 1 working day

Response – 23 working days

Complaint not upheld

Complaint

The concern raised was that the Housing Repairs team had not undertaken a repair to a drain that ran to the back of their property.

Council's response

It was found that the drain was a public surface water drain belonging to Severn Trent with a blockage occurring on the private land owner behind the complainant's property. The Council had notified Severn Trent and private land owner of the issue and requested that they undertake maintenance work to the drain.

9. Complaint against Planning Services

Acknowledgement – 1 working day

Response – 30 working days

Complaint not upheld

Complaint

The concerns raised were that the Planning Team had not undertaken an appropriate site visit to a neighbouring development and that they had not taken the complainant's objections into account.

Council's response

It was found that the Planning Officers had undertaken a visit to the development in which the complainant's relationship to the property could be viewed. The complainant requested that the Officer visit their property to view the development but this was refused citing the national guidelines surrounding the COVID-19 pandemic. There is no legal requirement for the Planning Team to undertake any site visits to the property.

Additionally, the complainant's objections were included in the Officers report.

10. Complaint against Democratic Services

Acknowledgement – 3 working day

Response – 7 working days

Complaint not upheld

Complaint

The concern raised was that the Complaint Teams had "cherry picked" the complainant's issues.

Council's response

It was found that all complaints had been responded to appropriately. The complainant had specifically asked for certain issues to be responded to. A full response was received for the issues raised in the first instance.

11. Complaint against Council Tax

Acknowledgement – 1 working day

Response – 11 working days

Complaint not upheld

Complaint

The concern raised was that the complainant had been issued a Council Tax penalty during the COVID-19 pandemic.

Council's response

It was found that the penalty had been charged correctly as there had been no legislative change to the Council Tax process.

12. Complaint against Housing Repairs

Acknowledgement – 1 working day

Response – 12 working days

Complaint not upheld

Complaint

The concern raised was that the Housing Repairs Team did not attend a leak to the complainant's toilet. The complainant paid a private plumber to attend the issue.

Council's response

It was found that when the repair was reported to the Council the complainant stated that the leak could be contained. An emergency repair was scheduled for the next working day. However, on the day of the repair complainant cancelled the booking as they had paid a private contractor to attend to the issue.

The Council would have undertaken the repair if given the opportunity.

13. Complaint against Housing Operations

Acknowledgement – 3 working day
Response – 33 working days
Complaint partially upheld

Complaint

The concerns raised were that the complainant was offered a property that was subsequently withdrawn. Additionally, the complainant was able to bid on a property that was already allocated.

Council's response

It was found that due a technical issue with the Council's bidding system the complainant was able to bid on a property that was already allocated. The property was offered to the complainant but was later withdrawn as it had already been allocated.

To remedy the issue, the complainant was offered a direct let. However, this property was withdrawn as the tenant who agreed to move as part the direct let, no longer wished to move.

An apology was offered and the complainant was offered £150 compensation for these issues. The offer was accepted.

14. Complaint against Housing Operations

Acknowledgement – 3 working day
Response – 20 working days
Complaint not upheld

Complaint

The concerns raised were that there were extended delays in the Housing Team responding to the complainant's enquiries and that they had been discriminated against due to their health issues.

Council's response

It was found that the complainant's enquiries had been dealt with within 2-3 working days. There was no evidence of any discrimination against the complainant.

15. Complaint against Housing Repairs

Acknowledgement – 3 working day
Response – 29 working days
Complaint not upheld

Complaint

The concerns raised were that the Housing Repairs Team had not dealt with the complainant's mould issues. Additionally, the complainant stated that they had not been offered any properties despite being a band 2 on the waiting list.

Council's response

It was found that the Housing Repairs Team had attempted on multiple occasions to gain access to the property to treat the mould issue but were unsuccessful in gaining access.

Additionally, at the time of the complaint there were 9 suitable properties for the complainant to bid on but they had not done so.

An offer of assistance with bidding on properties was extended to the complainant.

16. Complaint against Planning Services

Acknowledgement – 3 working day

Response – 30 working days

Complaint partially upheld

Complaint

The concerns raised were that there had been a lack of action from the Planning Team to rectify an issue with the complainant's e-mail's being quarantined with the in Council's ICT system. Additionally, the complainant received multiple requests for information to validate their planning application.

Council's response

It was found that the complainant had notified the Planning Team that their e-mails were being quarantined and this had been acknowledged by the Planning Team. However, there was no evidence of this issue having been resolved.

The issue was passed to the ICT team who have since rectified the problem.

It was reasonable for the Planning Team to request further information regarding the application when it was required.

17. Complaint against Housing Operations

Acknowledgement – 1 working day

Response – 19 working days

Complaint upheld

Complaint

The concerns raised were that there had been a lack of action from the Housing Operations Team to empty the bin stores and clean a communal area in the Spinney.

Council's response

It was found that the cleaning of the communal and bin stores was being undertaken by an external contractor who had not been attending the scheme regularly. The contractor stated this was due to the COVID-19 pandemic.

An audit process for the contractor was set up, such as signing in and out of the complex, to ensure that a level of cleanliness was maintained.

Governance Services Recommendation

The complaint highlighted the need for an audit process to be followed by the Council's contractor. After the implementation of this system there have been no further complaints regarding the cleanliness of the scheme.

18. Complaint against Planning Services

Acknowledgement – 1 working day

Response – 29 working days

Complaint not upheld

Complaint

The concerns raised were that the Council had not followed relevant policies when determining a planning application. Additionally, the Council did not accurately represent the number of objectors.

Council's response

It was found that the policies used to determine the planning application were included in the Planning Committee report. Furthermore, the objections had been summarised within this report, the late items and during a public speaking section of the Committee.

19. Complaint against Housing Repairs

Acknowledgement – 1 working day

Response – 28 working days

Complaint upheld

Complaint

The concerns raised were that there had been delays in plastering work being undertaken at the complainant's property and that there were delays in the kitchen countertops being repaired.

Council's response

It was found that while inspections for the plastering works were undertaken the works were delayed. This was due to the original job being closed due to an admin error and due to the COVID-19 pandemic delaying access.

The kitchen countertops were delayed as conflicting information had been recorded by the Council in relation to the extent of work required to replace the countertops.

An apology was offered and all works were booked and completed.

Governance Services Recommendation

The complaint highlighted the necessity for Housing Services to maintain records sufficiently in order to follow up progress on repairs. Housing staff were reminded to action repairs following inspections through diary management and the bookings system in order to minimise repeats of the error.

20. Complaint against Housing Repairs

Acknowledgement – 2 working day
Response – 20 working days
Complaint not upheld

Complaint

The concerns raised were that there had been a lack of action from the Housing Repairs to replace a damaged fence. Additionally, there had been a lack action regarding a contractor being rude to the complainant following the complainant causing an accident between their two vehicles.

Council's response

It was found that the Housing Repairs Team had installed a 6-foot privacy screen running the length of a shared access at the complainant's property. The Council are only obligated to provide a privacy screen; the rest of the garden fence was replaced with wire.

The Council are only obligated to mark the garden boundary.

Following an incident in which the complainant crashed their vehicle into a Council contractor's vehicle who was in the area, the complainant stated that the contractor was rude toward them. The Council's records showed that the contractor had reported the incident to the Housing Repairs Teams and stated that they had to leave the area without completing the allocated job as the complainant was being aggressive toward them.

21. Complaint against Democratic Services

Acknowledgement – 2 working day
Response – 20 working days
Complaint not upheld

Complaint

The concern raised was that the complainant's complaint was not acknowledged within three working days as stipulated by the Council's complaint procedure.

Council's response

The complainant, being subject to the Persistent and Vexatious Complainants Policy, had contacted an Officer outside of their terms of contact with the Council. Therefore, the Officer was not obligated to respond to this e-mail.

22. Complaint against Housing Repairs

Acknowledgement – 2 working day
Response – 30 working days
Complaint upheld

Complaint

The concern raised was that there was a delay in a leaking porch roof being repaired.

Council's response

It was found that the complainant had reported the leak from 2018 to 2020. Inspections were carried out, however, no follow up action was undertaken to fix the leak.

An apology was offered with £150 compensation, which was accepted. Additionally, remedial works were booked to repair the plastering damaged by the leak.

Governance Services Recommendation

The complaint highlighted the necessity for the Housing Department to maintain records sufficiently in order to follow up progress on repairs. Housing staff were reminded to action repairs following inspections through diary management and the bookings system in order to minimise repeats of the error.

23. Complaint against Planning Services

Acknowledgement – 1 working day

Response – 18 working days

Complaint not upheld

Complaint

The concerns raised were that the Council had not followed relevant policies when determining a planning application. Additionally, the Council did not accurately represent the number of objectors or taken into account a Planning Inspectorate's report.

Council's response

It was found that the policies used to determine the planning application were included in the Planning Committee report. Furthermore, the Planning Inspectorate's reports was attached as an appendix to the main Planning Committee report and a summary of these findings was also provided.

24. Complaint against Planning Services

Acknowledgement – 2 working day

Complaint withdrawn

Complaint

The concern raised was that the Planning Department had changed its validation process which meant agents and applicants were required to identify all parties for the notification of a planning application.

Council's response

The validation process was temporarily changed during the COVID-19 pandemic lockdown. When the lockdown ended the process was reversed and the complainant withdrew their complaint.

25. Complaint against Environmental Health

Acknowledgement – 1 working day
Response – 30 working days
Complaint not upheld

Complaint

The concern raised was that the Environmental Health Team had not effectively dealt with a noise nuisance issue.

Council's response

It was found that the Environmental Health Team processed the noise complaint in a timely manner in line with the Council's policies.

26. Complaint against Data Protection

Acknowledgement – 1 working day
Response – 20 working days
Complaint not upheld

Complaint

The concern raised was that the Council had not sent the complainant all their requested data as part of a Subject Access Request.

Council's response

It was found that the Council had issued all the complainant's data that had been requested.

27. Complaint against Housing Repairs

Acknowledgement – 1 working day
Response – 30 working days
Complaint upheld

Complaint

The concerns raised were that there were delays in a repair being undertaken to a hole in a roof which was causing a pest issue. Additionally, the Council had refused to contract a pest control service to deal with the pest issue.

Council's response

It was found that the roof leak had initially been misdiagnosed as a faulty pipe and not a hole in the roof. There were subsequent delays in the roof being repaired following this.

As the Council is responsible for the roof and loft space, the issue of the pests should have been dealt with by the Council.

An apology and £300 compensation was offered. This compensation included £150 for the hiring of the pest control service and £150 for the inconvenience caused. This was accepted.

Governance Services Recommendation

The complaint highlighted a knowledge gap within Housing Services regarding the Council's responsibilities as a landlord. Housing staff were reminded of the Council's responsibilities as a landlord in order to minimise further complaints of this nature.

28. Complaint against Housing Operations

Acknowledgement – 1 working day
Response – 20 working days
Complaint partially upheld

Complaint

The concerns raised were that there were delays in the right to buy process, the complainant had received another tenant's mail inside their mail, they had been contacted regarding rent arrears despite paying 95% of the time and there were delays in repairs being undertaken.

Council's response

It was found that the delays in the right to buy process had occurred due to the complainant not accepting the Council's offer and requesting a re-valuation of the property. As this is undertaken by the District Valuer, a separate organisation, the Council was unable to determine when this would be completed.

The complainant did receive another tenant's mail within their mail. This was investigated as a data protection breach.

The complainant was in rent arrears and therefore we were obligated to contact the tenant to pay the outstanding rent.

The repairs had been incorrectly logged which resulted in a delay in the repairs being undertaken.

Governance Services Recommendation

The complaint highlighted the necessity for Housing Services to maintain records sufficiently in order to follow up progress on repairs. Housing staff were reminded to action repairs following inspections through diary management and the bookings system in order to minimise repeats of the error.

29. Complaint against Housing Operations

Acknowledgement – 1 working day
Response – 20 working days
Complaint upheld

Complaint

The concern raised was that there were delays in rubbish being removed from a housing scheme.

Council's response

It was found that the complainant had contacted the Council from 2018 to 2020 for the removal of a broken chair and mattress from the communal area of a housing complex. It was found there were significant delays in these items being removed.

An apology was offered and items were removed.

Governance Services Recommendation

The complaint highlighted the necessity for Housing Services to maintain records sufficiently in order to follow up progress on request for service.

30. Complaint against Housing Repairs

Acknowledgement – 1 working day

Response – 20 working days

Complaint not upheld

Complaint

The concerns raised were that there had been a lack of action to repair a damaged fence at a housing scheme. The complainant stated that the damage was causing a security issue.

Council's response

It was found that the damage to the fence was minimal and that it did not compromise the security of the scheme. Furthermore, the scheme was locked with access to residents only.

31. Complaint against Housing Repairs

Acknowledgement – 1 working day

Response – 20 working days

Complaint not upheld

Complaint

The concerns raised were that there had been a lack of action to repair a bathroom leak which had caused significant damage to the complainant's property. Additionally, the complainant was not informed of asbestos within the property.

Council's response

It was found that the Housing Repairs team had attended on the same day every time a leak was reported. It was noted that the amount of water and location did not correspond

with a bathroom leak. An independent plumber attended the property but could not replicate the leak or the damage that was being caused.

The issue was review by the Council's insurer and the issue was dismissed.

It was noted that the complainant was not correctly informed of the asbestos within the property. An apology was offered for this. £750 compensation was offered but made explicit that it was not an admission of liability for the damage caused by the leak. The complainant accepted this offer.

32. Complaint against Council Tax

Acknowledgement – 1 working day

Response – 20 working days

Complaint not upheld

Complaint

The concern raised was that the Council had incorrectly applied the complainant's Council Tax discounts and were incorrectly chasing arrears.

Council's response

It was found that the Council Tax team had applied the complainant's discounts correctly with the information that they had been provided with. The complainant only supplied information for a certain period which the discount had been applied. Following its expiry, arrears were accrued and the complainant was notified at each stage of the necessity to pay.

33. Complaint against Customer Services

Acknowledgement – 1 working day

Response – 20 working days

Complaint not upheld

Complaint

The concerns raised were that the Council's telephone queue system was inadequate and that the complainant could not contact the Council's Council Tax team.

Council's response

It was found that the during the period in which the complainant attempted to contact the Council it was experiencing an abnormally high volume of telephone calls. This being 3000 calls over a two-day period. For the same period the year before only 600 calls were received.

A call back was given to the complainant and their issue was dealt with.

34. Complaint against Planning

Acknowledgement – 1 working day

Response – 20 working days

Complaint not upheld

Complaint

The concern raised was that the Council's planning team had not dealt with the complainant's planning application in a professional manner.

Council's response

It was found that the planning team had been in regular contact with the complainant regarding their application. It was found that planning team were asking the complainant to make amendments to their application to make it acceptable for approval.

The case officer was in regular contact with the complainant and their architect. Following the architect's dismissal by the complainant all communication was with the complainant. Subsequently, the Head of Planning met with the complainant to discuss their application.

There was no evidence to suggest the application was not dealt with in a professional manner.

35. Complaint against Housing Repairs

Acknowledgement – 1 working day

Response – 20 working days

Complaint upheld

Complaint

The concerns raised were that there were delays in repairs being undertaken to the property and that the property did not have working electricity when the complainant moved in. This affected their ability to work from home during the COVID-19 pandemic

Council's response

It was found that there were several repairs that were not undertaken before the complainant moved into the property.

An apology and £230 compensation was offered and accepted. This compensation was calculated based on the complainant's wage.

All outstanding repairs were booked and completed.

Governance Services Recommendation

The complaint highlighted the necessity for the Housing Department to maintain records sufficiently in order to follow up progress on repairs. Housing staff were reminded to action repairs following inspections through diary management and the bookings system in order to minimise repeats of the error.

36. Complaint against Planning

Acknowledgement – 1 working day

Response – 30 working days

Complaint not upheld

Complaint

The concern raised was that the Planning Team had not taken into account the loss of amenity to the complainant by approving a neighbouring planning application.

Council's response

It was found that the Planning Team had undertaken site visits to the development and obtained objections from the surrounding area. However, there was no record of the complainant having requested a site visit to their property. While the Council is not obligated to undertake site visits, it will endeavour to do so when requested.

37. Complaint against Housing Operations

Acknowledgement – 1 working day

Response – 30 working days

Complaint partially upheld

Complaint

The concern raised was that the Council had not delivered an appropriate homelessness service.

Council's response

It was found that the Homelessness Team had obtain a new property through a third party provider for the complainant. However, the complainant stated the property was not suitable and had to flee the area due to racial abuse.

A property secured for the complainant within the Council's stock was accepted by the complainant.

However, upon moving into the property, a third party energy company provided the Council with incorrect information which meant that the complainant was without utilities for several days.

An apology and £100 compensation was offered and accepted by the complainant for the inconvenience caused by the lack of utilities.

38. Complaint against Planning

Acknowledgement – 1 working day
Response – 30 working days
Complaint not upheld

Complaint

The concern raised was that there were delays in the Planning Team enforcing an issue of an untidy garden.

Council's response

It was found that the Planning Team had been in regular contact with the owner of the untidy garden. However, the owner was not capable of undertaking the works to the garden and required assistance from the Council.

As the clearance required several people and access through the property, this was put on hold due to the COVID-19 pandemic.

39. Complaint against Housing Repairs

Acknowledgement – 1 working day
Response – 20 working days
Complaint upheld

Complaint

The concern raised was that there were delays in a door being fixed that was catching on a pipe preventing access to the bathroom.

Council's response

It was found that when the issue was logged initially, it was due to be an emergency repair. However, this was incorrectly logged and then cancelled by the Customer Services Team which resulted in a delay in an operative attending the property.

An operative attended the property and rectified the issue.

Governance Services Recommendation

The complaint highlighted the necessity for Customer Services Team to maintain records sufficiently in order to follow up progress on repairs. Customer Services Team were reminded to action repairs following inspections through diary management and the bookings system in order to minimise repeats of the error.

40. Complaint against Housing Repairs

Acknowledgement – 1 working day
Response – 25 working days
Complaint not upheld

Complaint

The concern raised was that they were offered a property that was not suitable for their needs.

Council's response

It was found that the property was offered based on the information provided by the complainant. When a property viewing was undertaken and the complainant expressed that it was not suitable for their needs they were offered a period to think about the property before they accepted or rejected it.

The complainant subsequently made the decision to accept it.

41. Complaint against Environmental Health

Acknowledgement – 1 working day
Response – 20 working days
Complaint not upheld

Complaint

The concern raised was that an Environmental Health Officer was dismissive of their noise complaint.

Council's response

It was found that the Environmental Health Officer had actioned and been in regular contact with the complainant regarding their noise complaint.

42. Complaint against Planning

Acknowledgement – 1 working day
Response – 20 working days
Complaint not upheld

Complaint

The concern raised was that a planning application was determined under delegated powers instead of by the Planning Committee.

Council's response

It was found that the application was due to be heard at the Planning Committee as the developer had not agreed to pay a Section 106 contribution. However, once this contribution had been agreed it was not required to be heard at the Planning Committee.

Additionally, the application was not called in by the ward members.

43. Complaint against Housing Repairs

Acknowledgement – 1 working day

Response – 30 working days

Complaint not upheld

Complaint

The concern raised was that a contractor working on behalf of the Council had damaged the complainant's cooker while moving it.

Council's response

It was found that the contractor denied causing any damage to the cooker. The contractor suggested that the matter be dealt with through their business insurance.

44. Complaint against Housing Repairs

Acknowledgement – 1 working day

Response – 20 working days

Complaint upheld

Complaint

The concerns raised was that scaffolding erected next to the complainant's property was causing them to lose satellite signal.

Council's response

It was found that the scaffolding had been erected to complete roofing works at the neighbouring property. However, due to the COVID-19 pandemic the works were not undertaken and the scaffolding was in place for a significant amount of time.

An apology and £180, equivalent to the satellite bill, was offered and accepted.

45. Complaint against Housing Operations

Acknowledgement – 1 working day

Response – 20 working days

Complaint not upheld

Complaint

The concerns raised were that the Council were not dealing with an Anti-Social Behaviour complaint against the complainant appropriately.

Council's response

It was found that the Council had written to complainant on several occasions as a noise complaint had been registered against them. The Council is obligated to investigate and contact tenants when complaints are raised against them.

46. Complaint against Housing Repairs

Acknowledgement – 1 working day
Response – 30 working days
Complaint not upheld

Complaint

The concern raised was that the Housing Repairs Team had not adequately dealt with an issue of the complainant's garden flooding.

Council's response

It was found that the Housing Repairs team had attended the property on several occasions to deal with the flooding. This included installing several drains and issuing sandbags when required.

47. Complaint against Council Tax

Acknowledgement – 1 working day
Response – 30 working days
Complaint partially upheld

Complaint

The concern raised was that the Council Tax Team have incorrectly issued the complainant a Council Tax bill.

Council's response

It was found that a mistake had been made with the complainant's bill. Due to the COVID-19 pandemic and limited post days, the incorrect bill was not removed from the post and the complainant was subsequently issued an incorrect bill and a correct bill.

An apology was offered and the amount owed was clarified.

48. Complaint against Planning

Acknowledgement – 1 working day
Response – 30 working days
Complaint not upheld

Complaint

The concern raised was that the Planning Team have failed to enforce a planning application.

Council's response

It was found that while planning permission had been granted, as no works had commenced to the development there were no conditions to enforce.

49. Complaint against Council Tax

Acknowledgement – 1 working day
Response – 30 working days
Complaint not upheld

Complaint

The concern raised was that the Council Tax Team had incorrectly applied a Council Tax levy on an empty second property.

Council's response

It was found that the complainant had a second property that had been empty for more than 5 years. The levy was correctly applied in line with the Council's policies.

50. Complaint against Housing Repairs

Acknowledgement – 1 working day
Response – 30 working days
Complaint not upheld

Complaint

The concern raised was that the complainant's property, obtain via mutual exchange, was in a state of disrepair.

Council's response

It was found that the complainant had signed for the property in its current condition as part of the mutual exchange process. The waiver signed indicated a number of repair issues that Council was not obligated to undertake as these alterations/damages were caused by the previous tenant.

Ultimately, the complainant accepted the property in its current state.

51. Complaint against Housing Repairs

Acknowledgement – 1 working day

Response – 30 working days

Complaint not upheld

Complaint

The concerns raised was that there had been a lack of action to repair a garage leak.

Council's response

It was found that the garage was in a state of disrepair from the point of the complainant's tenancy starting. While the Council were aware of the significant leaks within the garage no repairs were undertaken before the commencement of the tenancy.

An apology and £100 compensation was offered and accepted. Additionally, the remaining rent account for the garage was cleared at £156.64.

52. Complaint against Housing Operations

Acknowledgement – 1 working day

Response – 20 working days

Complaint not upheld

Complaint

The concerns raised was that the Council had not consulted with the complainant regarding a change of tenancy type within a block of flats.

Council's response

It was found that the complainant, being a leaseholder, was not a statutory consultee. Therefore, as a private householder, the Council did not have to consult with them regarding the change of tenancy types within the block of flats.

The Council records showed that all statutory consultees had been contact via telephone and letter.

53. Complaint against Housing Repairs

Acknowledgement – 1 working day
Response – 30 working days
Complaint upheld

Complaint

The concerns raised were that there had been a lack of action to fix various repairs within the complainant's property. These include a roof leak, a cold working shower, a faulty immersion heater, mould within bedrooms and condensation on windows.

Council's response

It was found that while various inspections were undertaken for the various repairs ranging from 2016 to 2021, no follow up works were booked to repair the issues.

An apology and £350 compensation was offered. This offer has yet to be accepted.

The repair works are currently being undertaken.

Governance Services Recommendation

The complaint highlighted the necessity for Housing Services to maintain records sufficiently in order to follow up progress on repairs. Housing staff were reminded to action repairs following inspections through diary management and the bookings system in order to minimise repeats of the error.

It has been requested that the Head of Asset Management and Development undertake an internal audit of the repairs function to determine where the issue is occurring.

54. Complaint against Housing Repairs

Acknowledgement – 1 working day
Response – 20 working days
Complaint not upheld

Complaint

The concern raised was that there had been a lack of action to fix noisy plumbing in the complainant's property.

Council's response

It was found that the Council had attended the property on several occasions to investigate and repair the noisy plumbing. This was undertaken in timely manner.

55. Complaint against Elections

Acknowledgement – 1 working day
Response – 20 working days
Complaint not upheld

Complaint

The concerns raised were that a Household notification letter issued to the complainant indicated that they were not the head of their household as their name did not appear at the top.

Council's response

It was found that the letter issued includes all people registered within the household in alphabetical order. This was in line with statutory guidance.

56. Complaint against Housing Operations

Acknowledgement – 1 working day

Response – 30 working days

Complaint not upheld

Complaint

The concern raised was that a property offer was withdrawn unfairly.

Council's response

It was found that the Housing Team during the complainant's application required investigation into their local connection to the Broxtowe area. It is a requirement that all tenants have a connection to local area in order for them to be eligible to be housed.

The property offers are explicit in stating that all offers are provisional until signed and that any offer may be withdrawn until signed.

As the complainant had not signed for the property, it was correctly withdrawn.

57. Complaint against Housing Operations

Acknowledgement – 1 working day

Response – 30 working days

Complaint upheld

Complaint

The concern raised that the complainant had been unsuccessful bidding for properties. Additionally, the complainant felt they had been given false information by the Housing Team.

Council's response

It was found that the while bidding on properties as a band 2 tenant, the complainant had been unsuccessful. The Complainant had been asked to provided further information that would move them into a band 1 by the Housing Team

However, the circumstances of the individual would not be sufficient enough to move bands. This information was being requested needlessly and giving the complainant a

raised expectation. Furthermore, the complainant was not informed of multiple properties that they were eligible to bid on.

An apology was offered to the complainant.

Governance Services Recommendation

Housing Staff are to be reminded of their responsibilities in only requesting information when it is required and of providing housing details to potential tenants.

58. Complaint against Housing Operations

Acknowledgement – 1 working day

Response – 30 working days

Complaint not upheld

Complaint

The concern raised was that the Housing Team and not dealt with their Anti-Social Behaviour complaint.

Council's response

It was found that the issue that was raised was a criminal matter and the complainant was advised to contact the Police. The Police further reported that no evidence to support the complaint and the complaint was subsequently closed.

59. Complaint against Planning

Acknowledgement – 1 working day

Response – 20 working days

Complaint not upheld

Complaint

The concern raised was that a member of staff abused Council procedures to register a planning enforcement case against the complainant.

Council's response

It was found that the planning enforcement issue was raised privately and not as a member of staff. The enforcement issue was dealt with within regular time frames.

APPENDIX 3

Stage 3 - Ombudsman Complaints

1. Complaint against Housing Repairs (the stage 2 was concluded in 2019/20)

Complaint

The complainant complained that the Council had failed to undertake repairs to remedy an issue of damp which was causing damage to property.

Ombudsman's conclusion

The Housing Ombudsman concluded with the stage 2 complaint that there had been significant delays in the Council attending to repairs to remedy the damp issues.

The Housing Ombudsman did not consider the £600 offered at stage 2 to be sufficient and requested a payment of £700 be paid.

This was undertaken.

The complaint was upheld.

2. Complaint against Housing Operations (the stage 2 was concluded in 2019/20)

Complaint

The complainant complained that the Council wrongly withdrew an offer of a property.

Ombudsman's conclusion

The Local Government Ombudsman found that the while the Council had withdrawn the property correctly as it did not meet the complainant's needs, it had given the complainant a raised expectation as the letting process had started. It noted that further properties were offered to the complainant that suited their needs but these were not accepted.

The Local Government Ombudsman recommended that a payment of £100 be issued to the complainant for the inconvenience of the original offer being withdrawn.

This was undertaken.

The complaint was partially upheld.

3. Complaint against Planning (stage 2 no16)**Complaint**

The complainant complained that they had received multiple request for information to validate their planning application.

Ombudsman's conclusion

The Local Government Ombudsman found that it was reasonable to request further information to validate the planning application.

The complaint was not upheld.

4. Complaint against Planning (stage 2 no18)**Complaint**

The complainant complained that the Council had not followed relevant policies when determining a planning application. Additionally, the Council did not accurately represent the number of objectors.

Ombudsman's conclusion

The Local Government Ombudsman found that all policies and objections were taken into consideration.

The complaint was not upheld.

5. Complaint against Housing Repairs (stage 2 no1)**Complaint**

The complainant complained that the Council had not taken action to repair a shower and its low pressure.

Ombudsman's conclusion

The Local Government Ombudsman found that was insufficient evidence to investigate the issue.

The complaint was not upheld.

6. Complaint against Bereavement Services (stage 2 no7)

Complaint

The complainant complained that the Council had buried a recently deceased in the complainant's pre-purchased grave plot. The complainant stated it was their mother's dying wish that they be buried next to each other.

Ombudsman's conclusion

The Local Government Ombudsman found that there was no further information or remedy they could provide that had not already been offered as part of the stage 2 complaint.

The Local Government Ombudsman stated that:

"The Ombudsman will not investigate Mrs X's complaint that the Council has allowed another person to be buried partly in her cemetery plot. This is because the Council has offered a suitable remedy for Mrs X's injustice and we cannot say it must exhume the other person from their grave as she would like."

The complaint was not upheld.

7. Complaint against Housing Operations (stage 2 no17)Complaint

The complainant complained that there had been extended delays in the Housing Team responding to the complainant's enquiries and that they had been discriminated against due to their health issues.

Ombudsman's conclusion

The Local Government Ombudsman found that the complainant's enquiries had been responded to in a timely manner and that there was no evidence of discrimination against them.

The complaint was not upheld.

8. Complaint against Environmental Health (stage 2 no25)Complaint

The complainant complained that the Environmental Health Team had not effectively dealt with a noise nuisance issue.

Ombudsman's conclusion

The Local Government Ombudsman found that the complainant's enquiries had been responded to in a timely manner and that there was no evidence of fault on the Council's behalf. It noted that sufficient evidence had not been received from the complainant for the Council to act upon the noise issue.

The complaint was not upheld.

9. Complaint against Housing Repairs (stage 2 no20)

Complaint

The complainant complained that there had been a lack of action from the Housing Repairs to replace a damaged fence. Additionally, there had been a lack action regarding a contractor being rude to the complainant following the complainant causing an accident between their two vehicle.

Ombudsman's conclusion

The Housing Ombudsman found that the Council had repaired the fence satisfactorily and in accordance with its policies. This being that a privacy screen was erected by the shared passageway and all other fences were to mark the boundary only.

The Housing Ombudsman considered it did not have the authority to investigate a traffic accident.

The Complaint was not upheld.

10. Complaint against Planning (stage 2 no34)

Complaint

The complainant complained that the Council's planning team had not dealt with their planning application in a professional manner.

Ombudsman's conclusion

The Local Government Ombudsman found that there was insufficient evidence to indicate that there was fault in the planning process. Additionally, as the complainant had started the appeal process with the Planning Inspectorate the Local Government Ombudsman had no authority to investigate the issue further.

The Complaint was not upheld.

11. Complaint against Housing Repairs (stage 2 no1)

Complaint

The complainant complained that the Council had not taken action to repair a shower and its low pressure.

Ombudsman's conclusion

This complaint has not yet been concluded.

Report of the Executive Director

FREEDOM OF INFORMATION REPORT 2020/21

1. Purpose of report

To provide members with an overview of Freedom of Information (FOI) requests made to the Council.

2. Detail

The FOI Act came into force in 2000 and covers any information held by public bodies. The principle of the Act is that information on any subject held by any public body should be available to the public. The aim is to make public bodies more accountable and transparent. The right of access to information given in the Act includes both a right for members of the public to be told if the information exists, and if so a right to receive it, subject to certain exemptions. The most common exemptions used by the Council are listed below:

- Data Protection. This is information relating to a specific living individual.
- Commercial sensitivity. This is financial information relating to both the Council and its partners.
- Prevention of crime. This is information that could be used for fraud or the targeting of empty properties.

(This is not the full list of exemptions.)

This report outlines the performance of the Council in dealing with FOI requests and a breakdown of requests received to the various departments of the Council while the appendix provides a summary of the Council's internal FOI statistics.

The Council received a total of 742 FOI requests in 2020/21, marking a decrease from the 872 requests received in 2019/20, and is required to respond to FOI requests within 20 workings days. In 2020/21 96% of requests were responded to with the 20 working day time frame.

Recommendation

The Committee is asked to NOTE the report.

Background papers

Nil

APPENDIX

FOI requests received

	Total	Chief Execs	Deputy Chief Execs	Executive Director	Liberty Leisure Ltd	Nottinghamshire County request
Number of FOI requests	742 (873)	207	225	217	4	89

This table shows the figures for the overall FOI requests received in 2020/21 and the previous 2019/20 total is shown in brackets for comparison.

A further breakdown of the individual sections is provided below.

Chief Executive's Department

Service Area	Total number of requests
Housing	50
Private Sector Housing	10
Environmental Health	72
Public Protection	6
Whole Council	7
Human Resources	15
Licensing	9
Legal Services	9
Planning	29

Deputy Chief Executive's Department

Service Area	Total number of requests
Revenues and Benefits	61
Finance	28
Deputy Chief Executive	4
Property Services	22
Health and Safety	3
National Non Domestic Rates	43
Parking Services	20
Contracts	44

Executive Director's Department

Service Area	Total number of requests
Waste, Recycling, Parks and Environment	41
Elections	3
Administration	2
ICT Services	14
Land Charges	132
Corporate Communications	8
Payroll	14

Service Area	Total number of requests
Information Governance	3

Liberty Leisure

Service Area	Total number of requests
Leisure Services	4

Nottinghamshire County Council

Service Area	Total number of requests
Nottinghamshire County Council services	89

The Council is required to respond to requests for Nottinghamshire County Council Services (NCC) stating that Broxtowe Borough Council is not responsible for these services and that the requester should contact NCC.

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Report of the Executive Director

WORK PROGRAMME

1. Purpose of report

To consider items for inclusion in the Work Programme for future meetings.

2. Background

Items which have already been suggested for inclusion in the Work Programme of future meetings are given below. Members are asked to consider any additional items that they may wish to see in the Programme.

20 September 2021	<ul style="list-style-type: none"> • Internal Audit Progress Report • Review of Strategic Risk Register • Governance Dashboard – Major Projects • Code of Conduct • Annual Counter Fraud Report 2020/21 • Annual Audit Letter 2020/21- External Auditors Report on the Statement of Accounts 2020/21
29 November 2021	<ul style="list-style-type: none"> • Internal Audit Progress Report • Review of Strategic Risk Register • Community Governance Review – Draft Recommendations
14 March 2022	<ul style="list-style-type: none"> • External Audit Plan 2021/22 • Statement of Accounts 2021/22 – Accounting Policies • Statement of Accounts 2021/22 – Underlying Pension Assumptions • Statement of Accounts 2021/22-Going Concern • Internal Audit Plan 2022/23 • Internal Audit Progress Report • Review of Strategic Risk Register

Recommendation

The Committee is asked to CONSIDER the Work Programme and RESOLVE accordingly.

Background papers

Nil.

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