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NOTICE

OF

MEETING

CORPORATE OVERVIEW & SCRUTINY PANEL

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Royal Borough
of Windsor &
Maidenhead

will meet on

WEDNESDAY, 25TH SEPTEMBER, 2019

At 6.30 pm

in the

COUNCIL CHAMBER - TOWN HALL, MAIDENHEAD

TO: <u>MEMBERS OF THE CORPORATE OVERVIEW & SCRUTINY PANEL</u>

COUNCILLORS LYNNE JONES, JULIAN SHARPE, CHRIS TARGOWSKI (CHAIRMAN), LEO WALTERS (VICE-CHAIRMAN) AND SIMON WERNER

<u>SUBSTITUTE MEMBERS</u>
COUNCILLORS CLIVE BASKERVILLE, PHIL HASELER, GEOFF HILL, ROSS MCWILLIAMS AND JOHN STORY

Karen Shepherd – Service Lead Governance - Issued: 17/09/2019

Members of the Press and Public are welcome to attend Part I of this meeting. The agenda is available on the Council's web site at www.rbwm.gov.uk or contact the Panel Administrator **David Cook** 01628 796560

AGENDA

PART I

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MEMBERS' GUIDE TO DECLARING INTERESTS IN MEETINGS

Disclosure at Meetings

If a Member has not disclosed an interest in their Register of Interests, they **must make** the declaration of interest at the beginning of the meeting, or as soon as they are aware that they have a DPI or Prejudicial Interest. If a Member has already disclosed the interest in their Register of Interests they are still required to disclose this in the meeting if it relates to the matter being discussed.

A member with a DPI or Prejudicial Interest **may make representations at the start of the item but must not take part in the discussion or vote at a meeting.** The speaking time allocated for Members to make representations is at the discretion of the Chairman of the meeting. In order to avoid any accusations of taking part in the discussion or vote, after speaking, Members should move away from the panel table to a public area or, if they wish, leave the room. If the interest declared has not been entered on to a Members' Register of Interests, they must notify the Monitoring Officer in writing within the next 28 days following the meeting.

Disclosable Pecuniary Interests (DPIs) (relating to the Member or their partner) include:

- Any employment, office, trade, profession or vocation carried on for profit or gain.
- Any payment or provision of any other financial benefit made in respect of any expenses occurred in carrying out member duties or election expenses.
- Any contract under which goods and services are to be provided/works to be executed which has not been fully discharged.
- Any beneficial interest in land within the area of the relevant authority.
- Any licence to occupy land in the area of the relevant authority for a month or longer.
- Any tenancy where the landlord is the relevant authority, and the tenant is a body in which the relevant person has a beneficial interest.
- Any beneficial interest in securities of a body where:
  a) that body has a piece of business or land in the area of the relevant authority, and
  b) either (i) the total nominal value of the securities exceeds £25,000 or one hundredth of the total issued share capital of that body **or** (ii) the total nominal value of the shares of any one class belonging to the relevant person exceeds one hundredth of the total issued share capital of that class.

Any Member who is unsure if their interest falls within any of the above legal definitions should seek advice from the Monitoring Officer in advance of the meeting.

A Member with a DPI should state in the meeting: *'I declare a Disclosable Pecuniary Interest in item x because xxx. As soon as we come to that item, I will leave the room/ move to the public area for the entire duration of the discussion and not take part in the vote.'*

Or, if making representations on the item: *'I declare a Disclosable Pecuniary Interest in item x because xxx. As soon as we come to that item, I will make representations, then I will leave the room/ move to the public area for the entire duration of the discussion and not take part in the vote.'*

Prejudicial Interests

Any interest which a reasonable, fair minded and informed member of the public would reasonably believe is so significant that it harms or impairs the Member's ability to judge the public interest in the item, i.e. a Member's decision making is influenced by their interest so that they are not able to impartially consider relevant issues.

A Member with a Prejudicial interest should state in the meeting: *'I declare a Prejudicial Interest in item x because xxx. As soon as we come to that item, I will leave the room/ move to the public area for the entire duration of the discussion and not take part in the vote.'*

Or, if making representations in the item: *'I declare a Prejudicial Interest in item x because xxx. As soon as we come to that item, I will make representations, then I will leave the room/ move to the public area for the entire duration of the discussion and not take part in the vote.'*

Personal interests

Any other connection or association which a member of the public may reasonably think may influence a Member when making a decision on council matters.

Members with a Personal Interest should state at the meeting: *'I wish to declare a Personal Interest in item x because xxx'. As this is a Personal Interest only, I will take part in the discussion and vote on the matter.*

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CORPORATE OVERVIEW & SCRUTINY PANEL

TUESDAY, 30 JULY 2019

PRESENT: Councillors Lynne Jones, Julian Sharpe, Chris Targowski (Chair), Leo Walters and Simon Werner

Also in attendance: Councillor D Hilton & Jonathan Gooding (Deloitte)

Officers: Duncan Sharkey, Rob Stubbs, Elaine Brown, Karen Shepherd, Ruth Watkins, Catherine Hickman, Nabihah Hassan-Farooq.

APPOINTMENT OF THE VICE CHAIRMAN

The Chairman introduced the above titled item and asked for a proposal for vice Chairman. Councillor Sharpe proposed Councillor Walters and this was seconded by Councillor Targowski.

RESOLVED UNANIMOUSLY; That Councillor Walters be appointed as vice Chairman for the Corporate Overview & Scrutiny Panel for the municipal year 2019/2020.

APOLOGIES FOR ABSENCE

No apologies for absence were received.

DECLARATIONS OF INTEREST

None.

MINUTES OF THE LAST MEETING

RESOLVED UNANIMOUSLY; That the minutes of the last meeting held on the 13th June 2019 were approved as a correct and true record.

ANNUAL STATEMENT OF ACCOUNTS

The Chair introduced the item and informed members that this report would return to the next scheduled meeting.

Rob Stubbs, Deputy Director & Head of Finance (RBWM) outlined that the final audit was yet to be concluded. Members were informed that approval and publication were required to take place by no later than the 31st July in the relevant financial year or as soon as reasonably practicable after the receipt of the auditor's final findings. The Panel were told that the code on Local Authority guidelines was flexible and that all reasonable adjustments had been made by the Local Authority. Deloitte had been working upon meeting the deadline but there were several complications which had led to the delay in approving the final annual statement of accounts. Members were told that there had been a change in auditing partners and that RBWM had previously used KPMG but that this was the 1st year of five where Deloitte would be carrying out the full audit and producing the annual statement of accounts. It was highlighted that there were significant differences between KPMG and Deloitte which included an increase in working papers and level of detail required.

The Chair queried when the final statement would be ready and Jonathan Gooding (Deloitte) stated that it was difficult to assess as there were multiple factors involved with the delayed submission. It was highlighted that Deloitte's ambition had been to complete in early July and that mitigating measures had been put in place, such as placing a freeze on annual leave

entitlement for staff involved with the audit over June/July. Members were informed that the final accounts would be submitted beyond August and additional resources had been deployed for the audit. Members agreed that a placeholder date be found for the 1st two weeks of September in readiness to approve the accounts.

Councillor Werner queried what the contract was like with Deloitte and whether the authority would suffer any penalties as a result of the delayed submission. Councillor David Hilton (Lead Member for Finance and Ascot) addressed the panel and stated that Deloitte had not failed on their contractual obligations but that there were lessons to be learnt. It was highlighted that as KPMG had a long standing working relationship but that the ways in which Deloitte handled data was more intensive and required more time for formatting. It was highlighted that Deloitte had delivered upon the expectations as outlined in the Audit Plan. Members agreed that greater planning in detail was needed and that conversations with Deloitte should be had with respect to future actions and expectations.

Councillor Walters commented that no catastrophic mistakes had been made and that the authority would not be penalised for the delayed submission. Councillor Werner queried whether mistakes had been made and it was confirmed that there had been a number of factors including senior staff illness absence which had contributed to the delay in submission of the final statement. Rob Stubbs highlighted that the audit was intensive and would prove to be more thorough than last years accounts and there was confidence that the information and detail provided would be more robust.

ACTION- Seek additional date for special Corporate Overview & Scrutiny Panel for September.

RESOLVED UNANIMOUSLY; That the Corporate Overview and Scrutiny Panel noted the report and agreed to hold a special meeting once the audit had been concluded.

ANNUAL GOVERNANCE STATEMENT

Elaine Browne, Head of Law & Governance (RBWM) outlined the above titled item. Members were informed that the annual review of the Council's governance framework was required under the Accounts and Audit regulations 2015 required a sound system of internal control. It was outlined that the AGS was required to demonstrate that systems and processes were in place to ensure that Council business was conducted lawfully and in accordance with proper standards. The AGS process was intended to demonstrate that public money was safeguarded, properly accounted for and used economically, efficiently and effectively. It was recommended that this report be fully considered at the special meeting to be arranged for September.

ACTION- That the Annual Governance Statement be added as an agenda item for the special meeting of the Corporate Overview & Scrutiny Panel in September.

Councillor Targowski queried whether the Corporate Governance issues reported in appendix 2 had been properly considered and whether further scrutiny in areas such as budget pressures, health and safety, GDPR compliance and the business continuity plan should be looked at in more detail. Members agreed that a short report be provided in relation to the emerging corporate governance issues as identified within the AGS.

ACTION- That Elaine Brown provide a progress report on the corporate governance issues identified within the Annual Governance statement at the next special meeting.

Opposition members expressed their concerns in relation to speaking rights at Cabinet and felt that they did not have opportunity to have their questions answered when in attendance. Councillor Hilton addressed the panel and advised that he would speak with the Leader of the Council to address these concerns.

RESOLVED UNANIMOUSLY; That the Annual Governance Statement report be deferred and further scrutiny of the report be considered at the special meeting in September.

ANNUAL AUDIT AND INVESTIGATION REPORT

Catherine Hickman, Lead Specialist, Audit and Investigation outlined the above titled item. Members of the Panel were informed that the proper practices for internal audit were defined in the CIPFA/IIA Public Sector Internal Audit Standards (PSIAS) and required the Chief Audit Executive, Assistant Director, Governance (Wokingham Borough Council), to deliver an annual internal audit opinion on the Council's internal control, governance and risk management framework and a report that would be used by the organisation to inform its Annual Governance Statement (AGS). Members were reminded that this report compliments the 2018/19 Interim Audit and Investigation Progress report that had been considered by the previous Audit Performance and Review Panel (now disbanded and amalgamated into Corporate Overview & Scrutiny Panel) in February 2019, which outlined the first 9 months of work (to December 2018). At the time of this report, there were five audit areas that had fallen into a lower category of audit report opinion, a summary of which is contained within this report. Follow up work has been programmed to be undertaken in each of the areas as part of the 2019/20 Audit and Investigation Plan to ensure that concerns were being addressed by management and the outcome of this work would be reported to a subsequent meeting of this Panel.

It was highlighted that work in corporate investigations in 2018/19 had proved to be successful, with total financial losses identified of £344,756 (of which £269,907 related specifically to Business Rates relief/exemptions investigations) Work of corporate investigations during the year concentrated onthe following areas:

- Business rates/relief exemption
- Council Tax Reduction Scheme (CTRS)
- Council Tax discount/exemption
- School investigation

In respect of a School investigation, from a potential loss to official funds of £25,598, £19,299 was identified as part of the investigation and a further £8,185 wasrepaid to the School.

It was highlighted that there were no investigations undertaken during 2018/19 that required authorisation under theRegulation of Investigatory Powers Act (RIPA). In addition, refresher training was provided in May 2019 for key RIPA officers.

At the conclusion of the report, Councillor Walters queried whether £344,756 was a good recoverable amount for the local authority. Catherine Hickman outlined that this was a new field of proactive work and that the results achieved in the year were good.. Councillor Sharpe queried how RBWM ranked compared with other neighbouring local authorities in this investigative work and it was confirmed that there were differing approaches taken across local authorities in relation to corporate investigation work and areas covered and this Council were committed to resource this work and it has proved lucrative for the Royal Borough with the highlighting of recoverable financial lossesand monies recovered from misadministration. Rob Stubbs highlighted that the Audit and Investigation team were integral to the ongoing good work.
RESOLVED UNANIMOUSLY; That the Corporate Overview & Scrutiny Panel noted the report summarising:-

i) **The Shared Audit and Investigation Service activity for the financial year end 31ˢᵗ March 2019**
ii) **Progress in achieving the 2018/19 Audit and Investigation Plan.**

EXTERNAL AUDIT- DRAFT IAS260 REPORT

Jonathan Gooding, Partner- Audit and Assurance; Deloitte outlined the above titled report. Members were informed that the audit was ongoing and whilst significant amount of audit work had been performed but that the final completed audit would surpass the 31st July 2019 deadline. Members were told that progress of the pensions audit was overall good. Third party communications had been worked on and currently work streams relating to specialist valuations and bonds was being undertaken. Progress updates on the audit plan included significant risks, which comprised of management override of controls and capital expenditure. The Panel were told that data extraction included all transactions from the general ledger and that these would be reconciled. Deloitte employed a data analytics platform which highlighted fraud through transactions. The platform provided evidence whilst looking at transactions to negate fraud. It was noted that there had been no highlighted or visible issues with the ongoing work in capitalised expenditure.

Members were told that the Council participates in the fund it administers, the Berkshire Pension Fund. It was highlighted that the Council's pension liability was affected by the recent legal case; McCloud in respect of potential discrimination in the implementation of transitional protections following changes in the public sector. It was highlighted that there was a need for assumptions to be amended and that this had been tested by the selected actuary. There were two international standards being published over the upcoming months and it was confirmed that this would have little to no impact on RBWM. There had been various strengths highlighted with financial reporting measures. It was highlighted that value for money arrangements were in progress with no significant identified weaknesses.

At the conclusion of the report, Councillor Targowski queried if there were any current pressures that would negate the audit being completed. It was stated that there were no obvious concerns but that working collaborations and willingness to adjust had been working well, but that confirmation could not be given at this stage. Councillor Walters queried whether Deloitte had an independent valuation partner and it was confirmed that they did but that they remained impartial and independent of the organisation. Councillor Jones queried whether the narrative report had been updated and it was confirmed that the narrative report had been amended and would be discussed with the team and further amendments would be made if needed with relation to non-financial KPIs. Duncan Sharkey, Managing Director (RBWM), outlined that the Council had selected key identifiable indicators and these had limited flexibility. It was noted that more context would be added to improve performance monitoring and that proxy measures showed the general direction of travel of Council performance for its respective service areas. Councillor Sharpe queried how the authority compared nationally and it was confirmed that a high number of local authorities did not have a good quality annual report and that strengthening was needed to identify clear opportunities and KPIs.

ACTION- That the final IAS260 report return to the special meeting of the Corporate Overview & Scrutiny in September for consideration and agreement.

ANNUAL PERFORMANCE REPORT

Duncan Sharkey, Managing Director(RBWM) outlined the above titled item. The Annual Performance Report 2018/19 summarises the annual performance for the 25 measures aligned to the strategic objectives in the Council Plan 2017-2021. It was highlighted that in total, 16 of the 25 measures had met or exceed target. Seven measures had fallen short of their respective targets but remained within tolerance and two measures had fallen below target and required improvement. The report set out commentary on performance and remedial action for those measures which had fallen short of target. The measures which needed improvement were as follows:

- Percentage of children with a review at 2-2.5 years of age
- Performance of the Tivoli contract

It was noted that various measures had been put in place to improve performance in these areas which included children in areas of deprivation to be seen and review and that further work would be carried out upon voluntary reviews. It was highlighted that nationally there were difficulties in this area of work with residents and that these figures varied nationally. Next steps included looking at best practice and focusing on residents who were engaged with services and needed further support.

At the conclusion of the report, Councillor Jones queried whether geographical locations were a barrier to accessing support. It was confirmed that there may be some linkages to geographic locations but that the main settings were nursery based and not in one central location. Duncan Sharkey outlined that Hilary Hall, Deputy Director Strategy and Commissioning had spoken with Tivoli and had advised that they would be placed on significant notice if performance did not improve. Members were informed that positive improvements had taken place since those conversations and new software had been implemented, personnel changes had occurs and there was confidence that there would be better performance moving forward.

Councillor Targowski commented that it was difficult to see how a difference was being made through performance measures as there was no context provided. It was confirmed that as part of future work that this would be included in performance reports moving forward. Members discussed that more detailed information relating to sample numbers vs % were needed and it was agreed that this would also be included moving forward. Councillor Werner queried whether targets should be evaluated. It was confirmed that the targets set were reasonable and that the measures and targets were set a result of a number of considered factors. Councillor Sharpe stated that efforts should be focussed on the impact to residents and their customer journey with the Council. Members discussed that this could be a possible task and finish group item for further consideration and would return to this at a later meeting.

RESOLVED UNANIMOUSLY; That the Corporate Overview & Scrutiny Panel noted the report.

SCRUTINY TOPICS AS SUGGESTED BY RESIDENTS

Nabihah Hassan-Farooq, Scrutiny Officer outlined the above titled item. Members were informed that work with the communications team had been carried out and that there was now a live form for residents to submit their scrutiny topic for consideration and assessment. It was outlined that when the forms were received that they were assessed against a criteria which was available on the RBWM website. The Panel were told that there had been a good number of comments and good engagement from residents on recent Facebook posts and Twitter feeds. It was also highlighted that an article had been produced and published in the most recent In and Around the Royal Borough resident newsletter. Members were told that three topics had been received and that they were currently being assessed and that residents would be informed as to whether they had been accepted for onward submission to the relevant Overview & Scrutiny Panel.

At the conclusion of the update, members noted the update.

WORK PROGRAMME

Nabihah Hassan-Farooq, Scrutiny Officer (RBWM) outlined that the work programme as above.

Members requested that a special meeting be arranged for the start of September and to include:

- Annual Governance Statement (final),
- Annual Statement of Accounts(final);

- External Audit IAS260 report (final),
- LGA Peer Review Recommendations

Members also requested an extra meeting to be scheduled for October/November.

Task and Finish Groups:

Members discussed a need to focus on the customer journey for residents and to look at the way in which each service performs.

Members also discussed the need for a separate task and finish group to focus on contracts and procurement process. This group would look at ways to review and monitor existing and new contract performance. It was agreed that this working group would have a particular focus on highways and to provide a visible audit of these contracts.

DATES OF FUTURE MEETINGS

Dates of future meetings were confirmed as follows:

- Special meeting to be scheduled- September (Date and Venue -TBC)
- Additional Meeting- October/November (Date and Venue- TBC)
- 25th September 2019, 6.30pm- Council Chamber, Town Hall, Maidenhead
- 4th February 2020, 6.30pm, Council Chamber, Town Hall, Maidenhead
- 22nd April 2020, 6.30pm, Council Chamber, Town Hall, Maidenhead

The meeting, which began at 6.30pm, finished at 20.04pm

CHAIRMAN………………………………

DATE…………………………….........

Shared Audit & Investigation Service

Internal Audit Review 2019/20

Commissioned Services
Highways Contract Performance

(Draft) TERMS OF REFERENCE
(and Discussion Document for Corporate Overview & Scrutiny Panel)

1. BACKGROUND

1.1 This review is being undertaken in accordance with the 2019/20 Annual Internal Audit Plan which has been approved by Members. In addition, this review will provide an input into the Corporate Overview and Scrutiny Task and Finish Group.

2. AUDIT OBJECTIVES AND SCOPE

2.1 The principal objectives of this Audit are to determine whether the Highways contract including any statutory responsibilities are being complied with by Volker Highways (commissioned service) and whether the contractual objectives / benefits are being achieved.

2.2 The areas to be reviewed are:

   a) The Volker Highways contractual arrangements including management and reporting.
   b) Delivery of contractual objectives and benefits, including Performance Indicators.

2.3 The scope and objectives of the audit may be subject to change depending on the initial findings of the review. Any such changes will be communicated to the client contact (and/or other officers, as required) at the earliest opportunity.

2.4 During the course of the review and testing, it may be necessary to inspect personal data either relating to clients and/or staff. Audit activity is carried out under the terms of the new Data Protection Act 2018.

3. METHODOLOGY

3.1 Initial discussions will be held with the Executive Director, Place and the Interim Director of Adult Services and Deputy of Director, Strategy and Commissioning.

3.2 Key documentation will be examined.

3.3 A sample of documents / transactions will be reviewed in detail and the controls over the accuracy and integrity of these will be evaluated.

3.4 Full working papers and documentation of each audit test will be prepared. On completion of the fieldwork, the Executive Director, Place, the Interim Director of Adult Services and Deputy Director-Strategy and Commissioning and the Head of Strategy/Commissioning will be apprised of the key issues prior to the issue of the draft audit report.

3.5 For details on reporting, please refer to the Internal Audit Protocol.

4. RESOURCE, TIMING & DISTRIBUTION

4.1 This Terms of Reference is being circulated to:

Name	Title
Duncan Sharkey	Managing Director
Russell O'Keefe	Executive Director, Place
Hilary Hall	Interim Director of Adult Services and Deputy Director, Strategy and Commissioning
Rob Stubbs	Deputy Director and Head of Finance (& S151 Officer)
Ben Smith	Head of Strategy/Commissioning

4.2 The Officers listed above should confirm the contents or supply appropriate comments within 5 working days of receipt of this draft Terms of Reference. Otherwise, this will be taken as the final version.

4.3 The audit will be undertaken by:

Auditors: Sheldon Hall and Stephen Murtagh
Start Date: To be confirmed
Draft Report: To be confirmed

Draft Report Distribution

Name	Title
Hilary Hall	Interim Director of Adult Services and Deputy Director, Strategy and Commissioning
Russell O'Keefe	Executive Director, Place
Ben Smith	Head of Strategy/Commissioning

Additional Distribution for Final Report

Name	Title
Duncan Sharkey	Managing Director
Rob Stubbs	Deputy Director and Head of Finance (Section 151 Officer)
Steve Mappley	Insurance & Risk Manager
Deloitte LLP	External Audit

Date of Issue: 11 September 2019

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Report Title:	**Q1 Performance Report**
Contains Confidential or Exempt Information?	No - Part I
Member reporting:	
Meeting and Date:	Corporate Overview and Scrutiny Panel, 25 September 2019
Responsible Officer(s):	Duncan Sharkey, Managing Director
Wards affected:	All

REPORT SUMMARY

1. On 27 June 2019 Cabinet resolved to delegate authority to Executive Directors in conjunction with Lead Members to amend and confirm the Strategic Performance Management Framework for 2019/20. The framework is set out in Appendix A.

2. The Corporate Overview and Scrutiny Panel has quarterly oversight of a range of performance measures relating to the following council strategic priorities for 2019/20:
   - An excellent customer experience
   - Well-managed resources delivering value for money

3. Appendix B sets out the Q1 Performance Report for all measures relating to the Panel's remit, and includes performance commentary, related business intelligence and an overview of achievements and key milestones reached in the period April – June 2019.

1.   **DETAILS OF RECOMMENDATION(S)**

   RECOMMENDATION: That the Corporate Overview and Scrutiny Panel notes the report and:

   i)   **Notes the 2019/20 Strategic Performance Framework in Appendix A.**

   ii)   **Notes the 2019/20 Q1 Corporate Overview and Scrutiny Panel Performance Report in Appendix B.**

   iii)   **Requests relevant Lead Members, Directors and Heads of Service to maintain focus on improving performance.**

2.   **REASON(S) FOR RECOMMENDATION(S) AND OPTIONS CONSIDERED**

2.1   On 27 June 2019 Cabinet resolved to delegate authority to Executive Directors in conjunction with Lead Members to amend and confirm the Performance Management Framework for 2019/20 (Appendix A).

2.2   The framework has 42 different measures aligned to the strategic objectives in the Council Plan 2017-21, 22 of which are key measures reported to Cabinet bi-annually. The Corporate Overview and Scrutiny Panel has oversight of the relevant key measures reported to Cabinet as well as a range of other

performance measures relating to the following council strategic priorities for 2019/20:

- An excellent customer experience
- Well-managed resources delivering value for money

2.3 Appendix B sets out the Q1 Performance for all measures relating to the Panel's remit, and related business intelligence. It shows that:
- 11 of the 13 measures met or exceeded target,
- Two measures fell just short of target, although still within the tolerance for the measure,
- No measures were out of tolerance and require improvement.

Options

Table 1: Options arising from this report

Option	Comments
Endorse the evolution of the performance management framework, focused on embedding a performance culture within the council and measuring delivery of the council's six strategic priorities. **This is the recommended option**	The council's focus on continuous performance improvement provides residents and the council with more timely, accurate and relevant information; evolving the council's performance management framework using performance information and business intelligence ensures it reflects the council's ongoing priorities.
Failure to use performance information to understand the council, improve and maintain performance of council services and develop reporting to members and residents.	Without using the information available to the council to better understand its activity, it is not possible to make informed decisions and is more difficult to seek continuous improvement and understand delivery against the council's strategic priorities.

3. KEY IMPLICATIONS

3.1 The key implications of this report are set out in table 2.

Table 2: Key Implications

Outcome	Unmet	Met	Exceeded	Significantly Exceeded	Date of delivery
The council is on target to deliver all six strategic priorities.	< 100% priorities on target	100% of priorities on target			31 March 2020

4. FINANCIAL DETAILS / VALUE FOR MONEY

4.1 There are no direct financial implications arising from the recommendations.

5. LEGAL IMPLICATIONS

5.1 There are no legal implications arising from the recommendations.

6. RISK MANAGEMENT

6.1 The risks and their control are set out in table 3.

Table 3: Impact of risk and mitigation

Risks	Uncontrolled risk	Controls	Controlled risk
Poor performance management practices in place resulting in lack of progress towards the council's agreed strategic priorities and objectives.	HIGH	Robust performance management within services to embed a performance management culture and effective and timely reporting.	LOW

7. POTENTIAL IMPACTS

7.1 There are no Equality Impact Assessments or Privacy Impact Assessments required for this report.

8. CONSULTATION

8.1 Ongoing performance of the measures within the Performance Management Framework 2019/20, alongside other measures and business intelligence information, will be regularly reported to the council's four Overview and Scrutiny Panels. Comments from the Corporate Overview and Scrutiny Panel will be reported to Lead Members and Heads of Service as part of an ongoing performance dialogue.

9. TIMETABLE FOR IMPLEMENTATION

9.1 Implementation date if not called in: Immediately. The full implementation stages are set out in table 4.

Table 4: Implementation timetable

Date	Details
Ongoing	Comments from the Panel will be reviewed by Lead Members and Heads of Service
4 February 2020	Q2 and Q3 Performance Report

10.   APPENDICES

10.1   This report is supported by two appendices:
- Appendix A: 2019/20 Strategic Performance Framework.
- Appendix B: Corporate Overview and Scrutiny Panel Performance Report Q1 2019/20.

11.   BACKGROUND DOCUMENTS

11.1   This report is supported by one background document:
- Council Plan 2017-21:
  https://www3.rbwm.gov.uk/downloads/file/3320/2017-2021_-_council_plan

12.   CONSULTATION (MANDATORY)

Name of consultee	Post held	Date sent	Date returned
Duncan Sharkey	Managing Director	31/07/19	
Rob Stubbs	Section 151 Officer	31/07/19	15/08/19
Russell O'Keefe	Executive Director	31/07/19	
Andy Jeffs	Executive Director	31/07/19	13/09/19
Hilary Hall	Deputy Director of Commissioning and Strategy	31/07/19	30/08/19
Nikki Craig	Head of HR and Corporate Projects	31/07/19	07/08/19
Louisa Dean	Communications	31/07/19	
Louise Freeth	Head of Revenues and Benefits	31/07/19	06/09/19

REPORT HISTORY

Decision type:	Urgency item?	To Follow item?
Non-key decision	No	No
Report Author: Rachel Kinniburgh, Strategy Officer, 01628 796370		

Appendix A: 2019/20 STRATEGIC FRAMEWORK

Note: where available, benchmarking data will be included in all reports.

Measure	Ref.	Overview & Scrutiny Panel	PMF 2019/20	Target	Notes
Healthy, skilled and independent residents					
No. permanent admissions to care for those aged 65+yrs	1.4.1	Adults, Children and Health	✓	≤ 210 year-end	Target unchanged from 18/19.
Rate of delayed transfers of care attributable to Adult Social Care (per 100,000 pop.)	Opt_7	Adults, Children and Health	✓	≤ 1.5	Reported as part of Optalis contract. Target unchanged from 18/19.
Percentage of rehabilitation clients still at home 91 days after discharge from hospital	Opt_8	Adults, Children and Health	✓	≥ 87.5%	Reported as part of Optalis contract. Target unchanged from 18/19.
No. carers supported by dedicated services directly commissioned by RBWM	1.5.3	Adults, Children and Health	✓	≥ 606 year-end	Target increase of at least 85 additional carers by year-end.
Percentage of care-leavers in education, employment or training	AfC_35	Adults, Children and Health	✓	≥ 50%	Reported as part of Achieving for Children contract. Target unchanged from 18/19.
Percentage of children receiving a 6-8wk review within 8wks of birth	AfC_6	Adults, Children and Health	✓	≥ 70%	Reported as part of Achieving for Children contract. Target unchanged from 18/19.
Percentage of borough schools rated by Ofsted as good or outstanding	1.3.1	Adults, Children and Health		≥ 86%	Reported as part of Achieving for Children contract. Target unchanged from 18/19.
Percentage of long-term cases reviewed in the last 12mths	Opt_3	Adults, Children and Health		≥ 85%	New measure for 2019/20.
Percentage of current carers assessed or reviewed in last 12mths	Opt_4	Adults, Children and Health		≥ 60%	Reported as part of Optalis contract. Target unchanged from 18/19.

Measure	Ref.	Overview & Scrutiny Panel	PMF 2019/20	Target	Notes
Percentage of successful treatment completions (alcohol)	Cr_1	Adults, Children and Health		See note	Within 17/18 and 18/19 strategic frameworks these measures were reported against fixed targets. In 19/20 the target is the changing national average.
Percentage of successful treatment completions (opiates)	Cr_2	Adults, Children and Health			
Percentage of successful treatment completions (non-opiates)	Cr_3	Adults, Children and Health			
Safe and vibrant communities					
Percentage of adult safeguarding service users reporting satisfaction	Opt_11	Adults, Children and Health	✓	≥ 80%	Reported as part of Optalis contract. Target unchanged from 18/19.
Percentage of children subject to a Child Protection Plan for 2+yrs on ceasing	AfC_22	Adults, Children and Health	✓	≤ 3.5%	Reported as part of Achieving for Children contract. Target unchanged from 18/19.
Percentage of re-referrals to CSC within 12mths	AfC_17	Adults, Children and Health	✓	≤ 20%	Reported as part of Achieving for Children contract. Target unchanged from 18/19.
Percentage of Education, Health and Care Plans completed on time	AfC_3	Adults, Children and Health		100%	Reported as part of Achieving for Children contract. Target unchanged from 18/19.
No. attendances at leisure centres	CEP_2	Communities		≥ 1,915,000 year-end	Targets based on analysis of 18/19 trends.
No. visits (physical and virtual) to museums	LRS_6	Communities		≥ 65,000 year-end	
No. visits (physical and virtual) to libraries	LRS_10	Communities		≥ 800,000 year-end	
No. library issues	LRS_9	Communities		≥ 625,000 year-end	New measure for 19/20. Target informed by 18/19 trends and this year will be used to benchmark.

Measure	Ref.	Overview & Scrutiny Panel	PMF 2019/20	Target	Notes
Third Sector	*BI*	*Communities*		-	*Contextual business intelligence relating to the growth of the Third Sector.*
Growing economy, affordable housing					
No. homelessness preventions through council advice and activity	3.5.1	Infrastructure	✓	≥ 100 year-end	Target increased from 97 to at least 100 by year-end.
No. homeless households in temporary accommodation	(H_1)	Infrastructure	✓	≤120 year-end	New measure. Measure is a statement on the latest position every 6mths, rather than measuring the number of new households who are actively placed in temporary accommodation within the period (as per measure 3.5.2 in the 18/19 strategic framework).
Footfall in Maidenhead town centre	CEP_1a	Infrastructure		≥ 6,350,000 year-end	New measures for 19/20. In previous strategic frameworks the combined footfall total for Windsor and Maidenhead was reported.
Footfall in Windsor town centre	CEP_1b	Infrastructure		≥ 8,050,000 year-end	
Local Employment *Third Sector* *Apprenticeships*	*BI*	*Infrastructure*		-	*Contextual business intelligence relating to trends in local employment and the growth of the Third Sector.*
Regeneration and Affordable housing	*Activity update*	*Infrastructure*		-	*An update on key achievements and milestones reached in the quarter.*
Attractive and well-connected borough					
Performance of the Tivoli contract	Tiv_1	Communities	✓	≥ 92	Measure reports the consolidated performance score for this contract. Target unchanged from 18/19.
Percentage of household waste sent for reuse, recycling	4.2.1	Communities	✓	≥ 45%	Target unchanged from 18/19.

Measure	Ref.	Overview & Scrutiny Panel	PMF 2019/20	Target	Notes
Percentage of Major planning applications processed in time	P_1	Infrastructure	✓	≥ 65%	Target increased by 5%, from 60% in 18/19 to 65%.
Percentage of Minor planning applications processed in time	P_2	Infrastructure	✓	≥ 70%	Target increased by 5%, from 65% in 18/19 to 70%.
Percentage of "Other" planning applications processed in time	P_3	Infrastructure		≥ 85%	Target increased by 5%, from 80% in 18/19 to 85%.
Percentage of potholes repaired within 24hrs *new measure definition*	TBC	Infrastructure	✓	100%	New measure for 19/20 and based on agreed new definition. Data under revised definition not available until Q3.
Number of fly-tipping instances across Borough	4.1.1	Communities		≤ 623 year-end	Target unchanged from 18/19.
An excellent customer experience					
Percentage of calls answered within 60 seconds	LRS_1	Corporate	✓	≥ 80%	Target unchanged from 18/19.
Percentage of calls abandoned after 5 seconds	LRS_2	Corporate	✓	≤ 4%	Target adjusted from <5% to <4% to make more challenging in 19/20.
Average number of days to process new claims	RB_5	Corporate	✓	≤ 12	New measures for 19/20. In previous strategic frameworks the combined average of new claims and changes in circumstances was reported.
Average number of days to process change circumstances	RB_6	Corporate	✓	≤ 5	
Number of visits (physical and virtual) to libraries	LRS_10	Corporate		≥ 800,000 year-end	Target based on analysis of 18/19 trends.
Percentage of residents confirming that they feel informed about the council	5.1.1	Corporate		≥ 49%	Annual measure which derives its data from the Residents' Survey, last conducted in 2018. Target is based on results of the latest Local Government Association Survey.

Measure	Ref.	Overview & Scrutiny Panel	PMF 2019/20	Target	Notes
No. digital customer interactions	6.3.1a	Corporate		≥ 83,000 year-end	New measure for 19/20. Target informed by 18/19 trends and this year will be used to benchmark.
No. "My Account" users (running total)	CM_3a	Corporate		≥ 40,474 year-end	Target based on analysis of trends in 18/19.
Residents' e-bulletin sign-ups *Complaints*	*BI*	*Corporate*		*-*	*Contextual business intelligence to monitor promotion of e-bulletin and also volumes of complaints.*
5-Year Commissioning Strategy	*Activity update*	*Corporate*		*-*	*An update on key achievements and milestones reached in the quarter.*
Well-managed resources delivering value for money					
Percentage collection rate for Council Tax	RB_1	Corporate	✓	≥ 98.5% year-end	Targets unchanged from 2018/19.
Percentage collection rate for Non Domestic Rates (Business Rates)	RB_2	Corporate	✓	≥ 98.3% year end	
Council Tax level comparative with the average unitary Band D (£)	6.1.3	Corporate		≤ £1431.00	Target is the average unitary Band D value in £.
Percentage of residents expressing satisfaction with services	6.4.1	Corporate		≥ 61%	Annual measure which derives its data from the Residents' Survey, last conducted in 2018. Target is based on results of the latest Local Government Association Survey.
No. digital customer interactions	6.3.1a	Corporate		≥ 83,000 year-end	New measure for 19/20. Target informed by 18/19 trends and this year will be used to benchmark.
Percentage voluntary turnover (YTD)	RBWM_P1	Corporate		≤ 12.9% year-end	Target amended from 18/19 (14%).
HR Establishment	*BI*	*Corporate*			*Contextual business intelligence outlining key Establishment data (FTE*

Measure	Ref.	Overview & Scrutiny Panel	PMF 2019/20	Target	Notes
					/ Headcount / new starters / leavers / agency staff / active vacancies).
Staff Survey and People Plan	*Activity update*	*Corporate*			*An update on key achievements and milestones reached in the quarter.*
Capital Programme					
Council Annual Report	*Annual Report*	*Corporate*			
Joint Committee and Optalis Board Review of Performance	*Routine Report*				

Corporate Overview and Scrutiny Panel

Q1 2019-20 Performance Report (April – June 2019)

Date prepared: 31 July 2019 (v 1)

1. Executive Summary

1.1 The Corporate Overview and Scrutiny Panel has oversight of a range of performance measures relating to the following council strategic priorities for 2019/20:

- An excellent customer experience
- Well-managed resources delivering value for money

1.2 The Panel retains an interest in the following business intelligence related to these strategic priorities:

- RBWM Establishment
- Complaints

1.3 As at 1 July 2019 performance of all measures related to the Panel's remit can be broadly summarised as:

Q1 RAG Status	No.	Measure
Red (Needs improvement)	**0**	
Amber (Near target)	**2**	• (6.3.1a) No. digital customer interactions • (RB_6) Average no. days to process changes in circumstances (Housing Benefits)
Green (Succeeding or achieved)	**11**	• (LRS_10) No. visits (physical and virtual) to libraries • (5.1.1) Percentage of residents confirming they feel informed about the council • (5.3.1) Percentage of calls answered within 60 seconds • (5.3.2) Percentage of calls abandoned after 5 seconds • (CM_3a) No. "My Account" users (running total) • (RB_5) Average no. days to process new claims (Housing Benefits) • (6.1.3) Council Tax level comparative with the average unitary Band D (£) • (6.4.1) Percentage of residents expressing satisfaction with services • (RB_1) Percentage of council tax collected • (RB_2) Percentage of Non Domestic Rates (Business Rates) collected • (RBWM_P1) Percentage voluntary turnover (YTD)
Total	**13**	

1.4 Commentary is provided for all measures in deviation from target (either Red or Amber) year-to-date, and where key information supports understanding of the measure.

2. Key activities and milestones achieved

Strategic Priority	Item	Q1 Achievements and key milestones
An excellent customer experience	**5-Year Commissioning Strategy**	The five year commissioning strategy is being drafted and will go to Cabinet in November.
	York House Resident Services Hub	York House was re-opened in May following substantial re-development. The site hosts a dedicated resident services hub for face-to-face support with highly trained resident advisors on a range of topics from Council Tax to reporting a missed bin collection.
Well-managed resources delivering value for money	**Staff Survey and People Plan**	Following successful planning across Q1, the 2019 Staff Survey Temperature Check was launched in July, the survey received a response rate of 60.95% compared to 52.38% in the 2018 full staff survey. This raise in response rate can be seen as an indication of staff engagement in consulting and feedback to senior management. Every area of results showed a significant improvement in staff engagement, with overall positive responses increasing by 7.65 percentage points. 81.66% felt that their work gave them a sense of personal achievement and 74.64% felt that their manager visibly demonstrated the CREATE values. As part of the People Plan the Council has a commitment to creating a positive work environment and ensuring staff wellbeing. As part of this: • A new eLearning system has been launched to all staff which allows access to Mental Health Awareness Training and Equality and Diversity Training. This training will be mandatory annually for all staff. • A new staff wellbeing plan is currently being developed. • Staff ambassadors continue to engage with senior management on a variety of issues and initiatives impacting staff. While all areas of the staff survey results have improved, it is acknowledged that there is still rooms for improvement. In order to develop a new People Plan action plan, address the areas for improvement which have been

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		raised as part of the staff survey, and review the Councils culture and Values, CLT have committed to running sessions with all staff to give staff an opportunity to feedback and develop new values, these will commence in September 2019.
	Annual Report of Commissioned Services	The annual report on commissioned services will go to the Overview and Scrutiny Panels in September, and then to Cabinet in October.

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3. Performance Summary Report (YTD)

Near Target

(6.3.1a) No. digital customer interactions
30 Jun 19
21,646
percentage
Near Target

(RB_6) Average no. days to process changes in circumstances (Housing
30 Jun 19
6.29
number
Near Target

Achieved

(LRS_10) No. visits (physical and virtual) to libraries
30 Jun 19
225,512
number
Achieved

Succeeding

(5.1.1) Percentage residents confirming they feel informed about the council
30 Jun 19
72.0
percentage
Succeeding

(5.3.1) Percentage of calls answered within 60 seconds
30 Jun 19
82.3
percentage
Succeeding

(5.3.2) Percentage of calls abandoned after 5 seconds
30 Jun 19
2.2
percentage
Succeeding

(CM_3a) No. "My Account" users (running total)
30 Jun 19
35,953
number
Succeeding

(RB_5) Average no. days to process new claims (Housing Benefits)
30 Jun 19
10.83
number
Succeeding

(6.1.3) Council Tax level comparative with the average unitary Band D (£)
30 Jun 19
961.33
£000s
Succeeding

(6.4.1) Percentage of residents expressing satisfaction with services
30 Jun 19
74.0
percentage
Succeeding

(RB_1) Percentage of Council Tax collected
30 Jun 19
30.98
percentage
Succeeding

(RB_2) Percentage of Non Domestic Rates (Business Rates) collected
30 Jun 19
31.84
percentage
Succeeding

(RBWM_P1) Percentage voluntary turnover (YTD)
30 Jun 19
1.6
percentage
Succeeding

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4.   An excellent customer experience: Detailed Trends and Commentary

4.1   Communications

Benchmarking: (5.1.1) Percentage of residents confirming they feel informed about the council — RBWM 72.0%, LGA Residents Poll Oct 2018 58.0% (Dec 18)

(5.3.5) Percentage of residents who feel that the council is responsive — Mar 19 66.0%

(CM_14) No. of sign-ups to residents bulletin — Actual / Actual (YTD):
Jul 18: 2 / 11; Aug 18: 61 / 72; Sep 18: 20 / 92; Oct 18: 61 / 153; Nov 18: 56 / 209; Dec 18: 15 / 224; Jan 19: 11 / 235; Feb 19: 487 / 722; Mar 19: 319 / 1,041; Apr 19: 32 / 32; May 19: 3 / 35; Jun 19: 19 / 54

Q1 Commentary
The most recent Residents' Survey (conducted across September and October 2018) delivered encouraging results regarding the percentage of residents who feel that the council is both informative and responsive. Generally, themed council information campaigns are planned to correspond with events and developments in the borough (e.g. promotion of food waste recycling to coincide with Halloween), and the Communications and Marketing Team works closely with all council services to ensure cohesive messaging.

The results of the Residents' Survey showed that 51% of respondents preferred to receive information from the council by email, and it is encouraging to see the peak in sign-ups to the Residents' e-Bulletin across February and March 2019 in response to a proactive effort by the Communications and Marketing Team to promote awareness of this bulletin to existing Library and Advantage bulletin subscribers. At an operational level it is anticipated that the Residents' Bulletin will, over time, be the primary e-bulletin as part of a rationalisation of existing bulletins and so the number of sign-ups will continue to be monitored. Use of social media (Twitter and Facebook) continues to support the council's communications and marketing efforts. |

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	Actual	Actual (YTD)	Trend
Jul 18	6,648	26,866	?
Aug 18	6,533	33,399	?
Sep 18	6,327	39,726	?
Oct 18	6,175	45,901	?
Nov 18	5,758	51,659	?
Dec 18	4,469	56,128	?
Jan 19	6,283	62,411	?
Feb 19	5,867	68,278	?
Mar 19	7,189	75,467	?
Apr 19	7,088	7,088	?
May 19	7,371	14,459	⬆
Jun 19	7,187	21,646	⬆

Whilst historical data exists, a target to drive increases in digital customer interactions was not applied until Apr 19
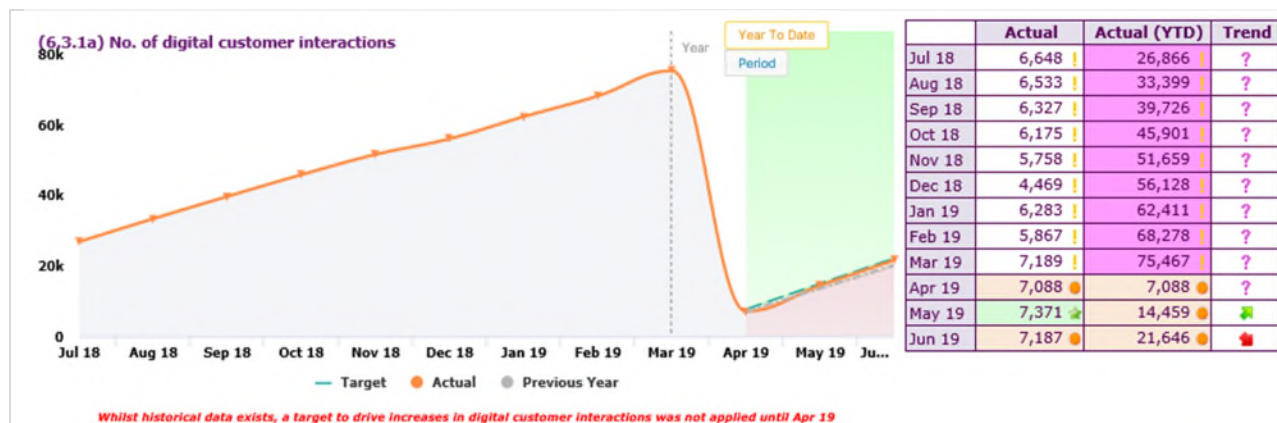
Q1 Commentary

This is a new measure for the 2019/20 strategic framework and so setting a target was more difficult. This year will be used largely to benchmark however in the meantime the Q1 performance was only 2.5% below target and efforts to increase digital interactions continue. This measure also supports strategic priority "Well-managed resources delivering value for money".

4.2 Communities and leisure

	Actual	Actual (YTD)	Trend
Jul 18	86,913	316,674	⬆
Aug 18	85,406	402,080	⬆
Sep 18	78,106	480,186	⬆
Oct 18	77,164	557,350	⬆
Nov 18	77,267	634,617	⬆
Dec 18	62,777	697,394	⬆
Jan 19	74,228	771,622	⬆
Feb 19	67,739	839,361	⬆
Mar 19	74,350	913,711	⬆
Apr 19	75,534	75,534	⬆
May 19	78,869	154,403	⬆
Jun 19	71,109	225,512	⬆
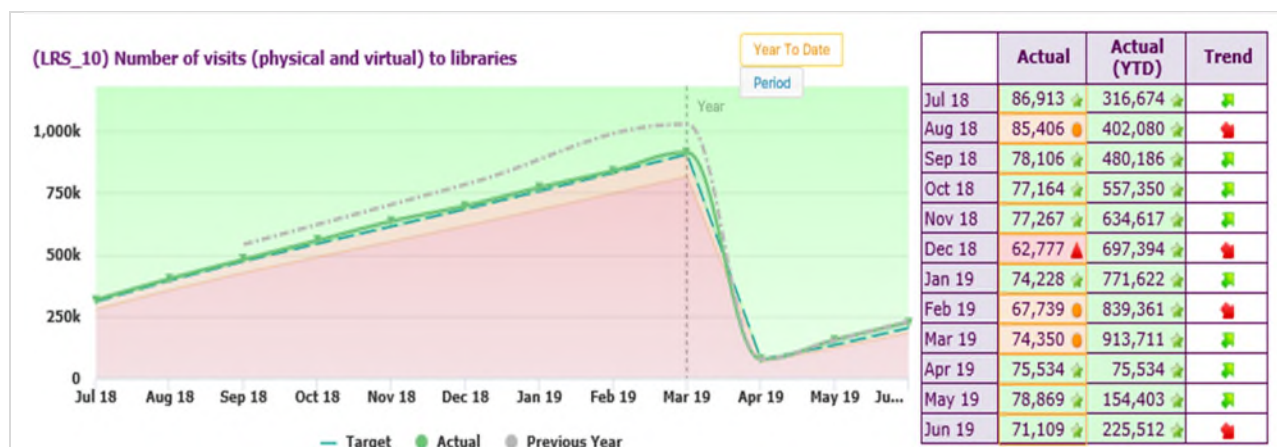
Q1 Commentary

Whilst June 2019 saw a reduction in the number of visits compared to April and May the total number of visits in Q1 (Apr-Jun) was above target (203,000) by 22,512. A comparison of the number of visits in this period with Q1 2018/19 (229,761) shows a reduction in the number of visits by 4,249.

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4.3 Customer and business services

(LRS_1-2) Monthly Call Volumes

	Actual	Actual (YTD)	Trend
Jul 18	80.5%	75.1%	
Aug 18	83.2%	76.7%	
Sep 18	92.1%	79.1%	
Oct 18	90.2%	80.6%	
Nov 18	85.7%	81.1%	
Dec 18	85.0%	81.4%	
Jan 19	79.2%	81.2%	
Feb 19	81.4%	81.2%	
Mar 19	83.7%	81.4%	
Apr 19	79.5%	79.5%	
May 19	83.1%	81.4%	
Jun 19	84.4%	82.3%	

(LRS_1) Percentage of calls answered within 60secs (Monthly View)

	Actual	Actual (YTD)	Trend
Jul 18	2.4%	3.9%	
Aug 18	1.9%	3.5%	
Sep 18	1.1%	3.1%	
Oct 18	1.5%	2.9%	
Nov 18	2.1%	2.8%	
Dec 18	2.1%	2.7%	
Jan 19	2.4%	2.7%	
Feb 19	2.0%	2.7%	
Mar 19	2.3%	2.6%	
Apr 19	2.6%	2.6%	
May 19	2.1%	2.3%	
Jun 19	2.0%	2.2%	

(LRS_2) Percentage of calls abandoned after 5secs (Monthly View)

Q1 Commentary

Call performance remains consistently on target and the council has achieved 82% of calls answered within 60 seconds for the first time since the council has been monitoring this measure. The target for the percentage of calls abandoned after 5 seconds has been reduced from 5% to 4% and remains within target.

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(CM_3a) Number of "My Account" users (Running Total)

	Actual	Trend
Jul 18	26,421 ⭐	🔽
Aug 18	27,515 ⭐	🔽
Sep 18	28,481 ⭐	🔽
Oct 18	29,304 ⭐	🔽
Nov 18	30,260 ⭐	🔽
Dec 18	30,943 ⭐	🔺
Jan 19	31,532 ⭐	🔺
Feb 19	32,235 ⭐	🔺
Mar 19	32,758 ⭐	🔺
Apr 19	33,857 ⭐	🔺
May 19	35,010 ⭐	🔽
Jun 19	35,953 ⭐	🔽

— Target ● Actual ● Previous Year

Q1 Commentary

Within Q1 there have been no major design developments within the "My Account" system to prompt any spikes in performance and so performance for this measure remains steady and within target, following the same trajectory as 2018/19.

(RB_5) Average no. of days to process new claims (Housing Benefits)

Year To Date
Period

	Actual	Actual (YTD)	Trend
Apr 19	10.05 ⭐	10.05 ⭐	?
May 19	9.80 ⭐	9.93 ⭐	🔽
Jun 19	12.63 ●	10.83 ⭐	🔺
Jul 19			?
Aug 19			?
Sep 19			?
Oct 19			?
Nov 19			?
Dec 19			?
Jan 20			?
Feb 20			?
Mar 20			?

— Target ● Actual ● Previous Year

Benchmarking: Trends: (RB_5) Average no. of days to process new claims (Housing Benefits)
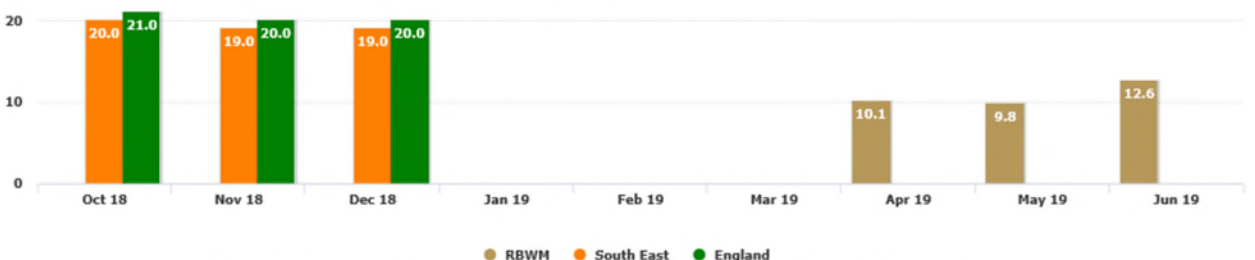
	Oct 18	Nov 18	Dec 18	Jan 19	Feb 19	Mar 19	Apr 19	May 19	Jun 19
South East	20.0	19.0	19.0						
England	21.0	20.0	20.0						
RBWM							10.1	9.8	12.6

● RBWM ● South East ● England

Source: https://www.gov.uk/government/statistics/housing-benefit-statistics-on-speed-of-processing-2018-to-2019
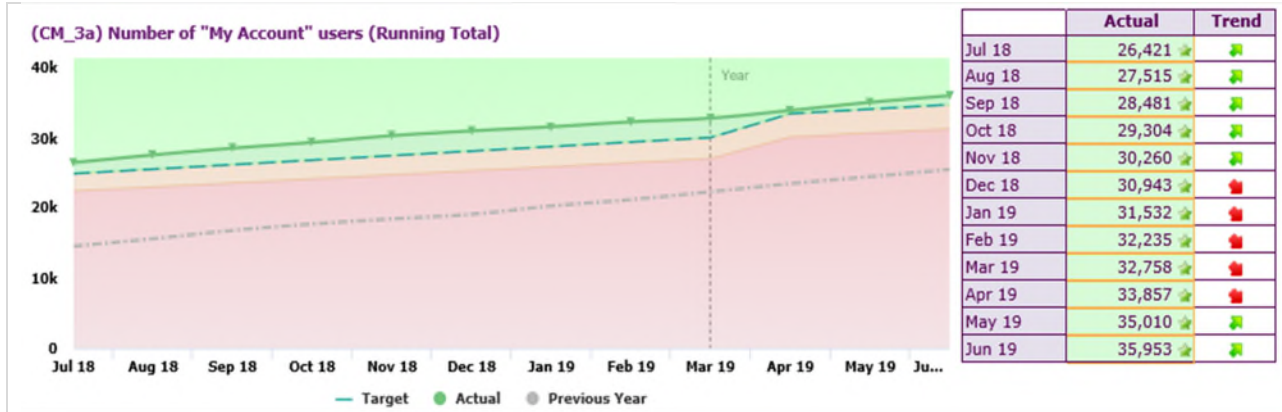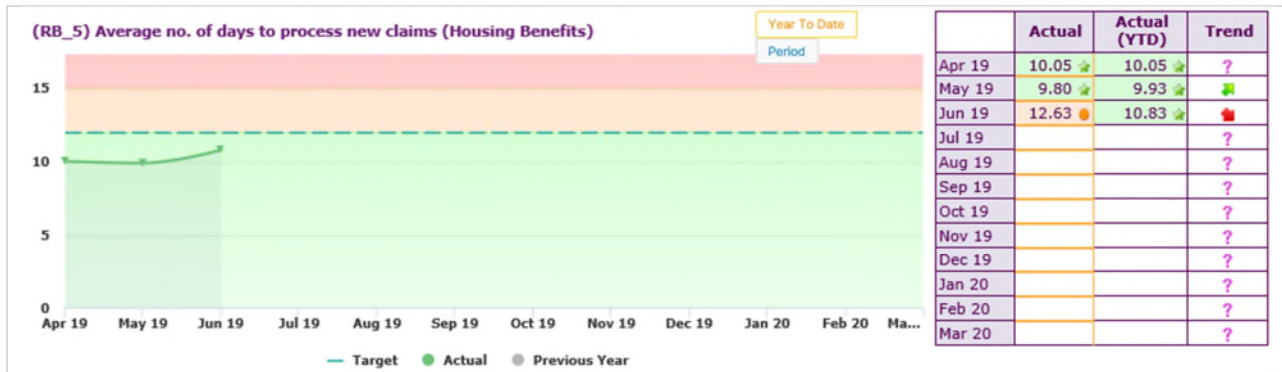This measure has been introduced as a PMF Measure for RBWM only this year 2019-20. Hence there is no data for previous year.

Q1 Commentary

This is new measure for the 2019/20 strategic framework. The year-to-date figure reported shows the latest position. Whilst performance in June 2019 was off-target, year-to-date performance remains within target.

(RB_6) Average no. of days to process changes in circumstances (Housing Benefits)

	Actual	Actual (YTD)	Trend
Apr 19	4.19	4.19	?
May 19	7.90	6.05	
Jun 19	6.78	6.29	
Jul 19			?
Aug 19			?
Sep 19			?
Oct 19			?
Nov 19			?
Dec 19			?
Jan 20			?
Feb 20			?
Mar 20			?

— Target ● Actual ● Previous Year

Benchmarking: Trends: (RB_6) Average no. of days to process changes in circumstances (Housing Benefits)
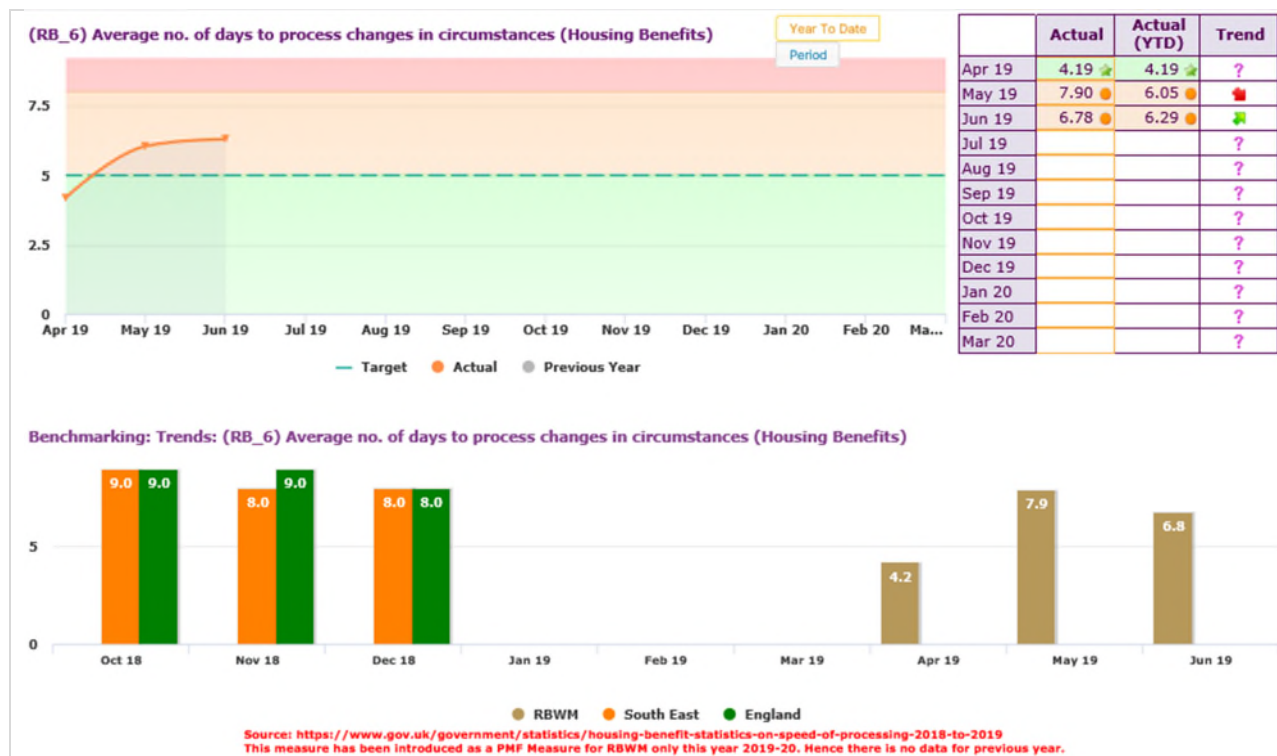
● RBWM ● South East ● England

Source: https://www.gov.uk/government/statistics/housing-benefit-statistics-on-speed-of-processing-2018-to-2019
This measure has been introduced as a PMF Measure for RBWM only this year 2019-20. Hence there is no data for previous year.
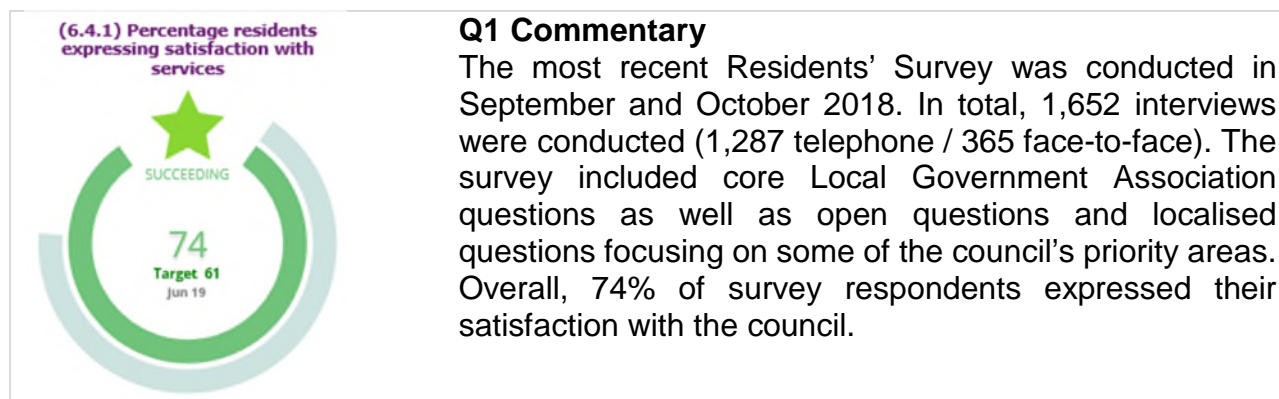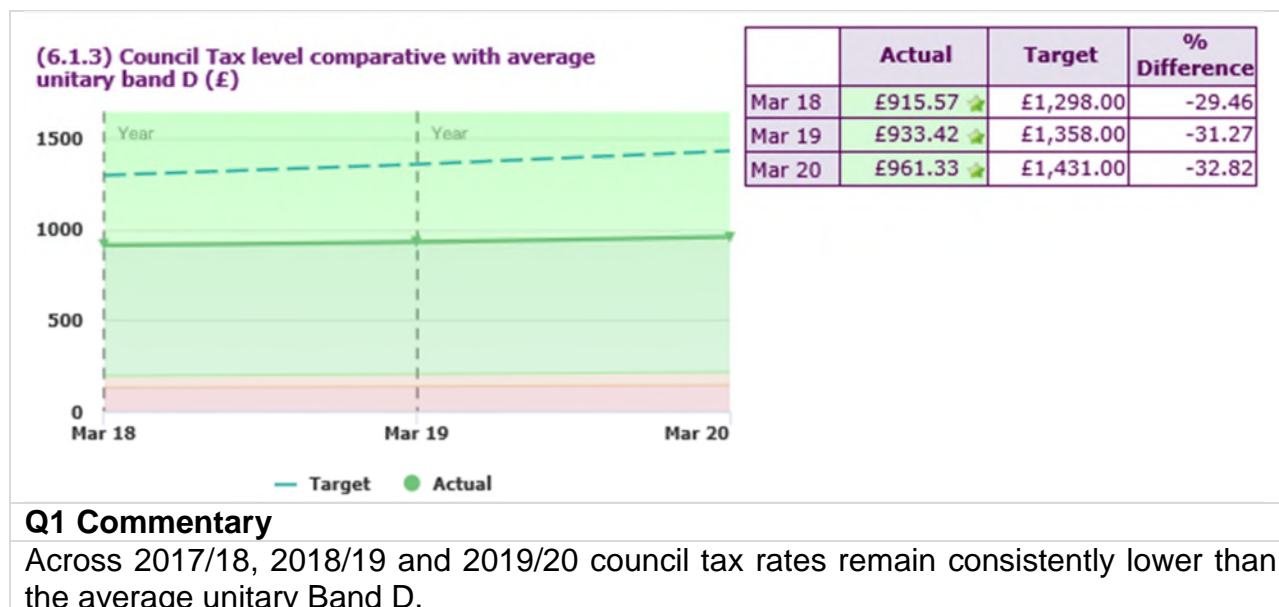
Q1 Commentary

This is new measure for the 2019/20 strategic framework. The year-to-date figure reported shows the latest position. There are currently 2 vacancies within the Benefit Assessment team which represents a reduction of 40% capacity. Senior staff are supporting the assessment process and reviewing all high statistics while recruitment takes place.

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5.   **Well-managed resources delivering value for money: Detailed Trends and Commentary**

5.1   **Customer and business services**

<table>
<tr>
<td>

(6.4.1) Percentage residents expressing satisfaction with services

SUCCEEDING

74

Target 61

Jun 19

</td>
<td>

Q1 Commentary

The most recent Residents' Survey was conducted in September and October 2018. In total, 1,652 interviews were conducted (1,287 telephone / 365 face-to-face). The survey included core Local Government Association questions as well as open questions and localised questions focusing on some of the council's priority areas. Overall, 74% of survey respondents expressed their satisfaction with the council.

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5.2   **Finance**

(6.1.3) Council Tax level comparative with average unitary band D (£)

	Actual	Target	% Difference
Mar 18	£915.57	£1,298.00	-29.46
Mar 19	£933.42	£1,358.00	-31.27
Mar 20	£961.33	£1,431.00	-32.82

— Target ● Actual

Q1 Commentary

Across 2017/18, 2018/19 and 2019/20 council tax rates remain consistently lower than the average unitary Band D.

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(RB_1) Percentage of council tax collected

	Actual (YTD)	Trend (YTD)
May 18	21.5%	↑
Jun 18	30.7%	↑
Jul 18	39.9%	↑
Aug 18	48.9%	↑
Sep 18	58.4%	↑
Oct 18	67.6%	↑
Nov 18	76.7%	↑
Dec 18	85.8%	↑
Jan 19	94.8%	↑
Feb 19	97.2%	↑
Mar 19	98.0%	↑
Apr 19	16.2%	↑
May 19	21.8%	↑
Jun 19	31.0%	↑

— Target ● Actual ● Previous Year

Value of council tax collected (£)

Benchmarking: (RB_1) Percentage of council tax collected

● RBWM ● Unitary Authorities ● England

Source: https://www.gov.uk/government/statistics/collection-rates-for-council-tax-and-non-domestic-rates-in-england-2017-to-2018

Q1 Commentary

Performance of this measure remains on target and available benchmarking data shows RBWM performance to be consistently higher than Unitary Authorities and England in 2017/18 and 2018/19.
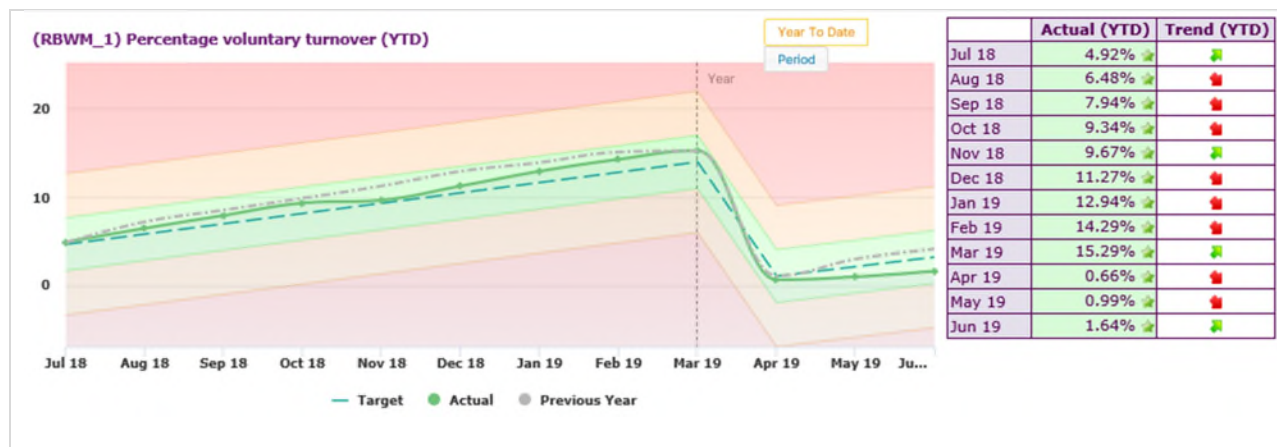
(RB_2) Percentage of Non Domestic Rates (Business Rates) Collected

	Actual (YTD)	Trend (YTD)
May 18	21.0% ⭐	🟢
Jun 18	32.6% ⭐	🔴
Jul 18	40.6% 🟠	🔴
Aug 18	49.8% ⭐	🟢
Sep 18	58.6% ⭐	🔴
Oct 18	66.9% ⭐	🔴
Nov 18	75.4% ⭐	🟢
Dec 18	83.1% 🟠	🔴
Jan 19	91.4% 🟠	🔴
Feb 19	95.4% ⭐	🟢
Mar 19	96.9% 🟠	🔴
Apr 19	12.2% ⭐	🟢
May 19	19.9% 🟠	🔴
Jun 19	31.8% ⭐	🟢

— Target ● Actual ● Previous Year

Value of Business Rates collected (£)

Benchmarking: (RB_2) Percentage of Non Domestic Rates Collected

● RBWM ● England ● Unitary Authorities

Source: https://www.gov.uk/government/statistics/collection-rates-for-council-tax-and-non-domestic-rates-in-england-2017-to-2018

Q1 Commentary

Performance of this measure remains on target and available benchmarking data shows RBWM performance to be consistently higher than Unitary Authorities and England in 2017/18 and 2018/19.

5.3 RBWM Establishment

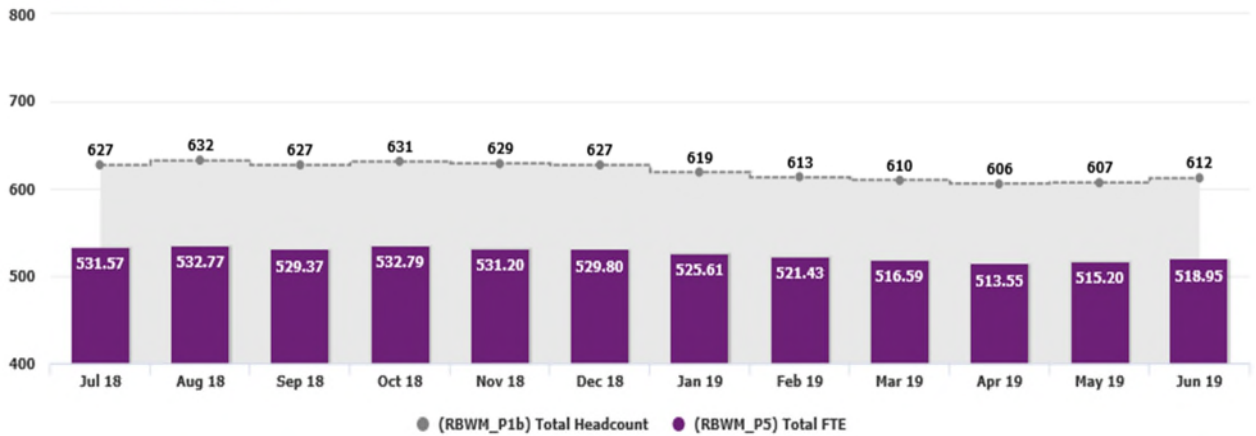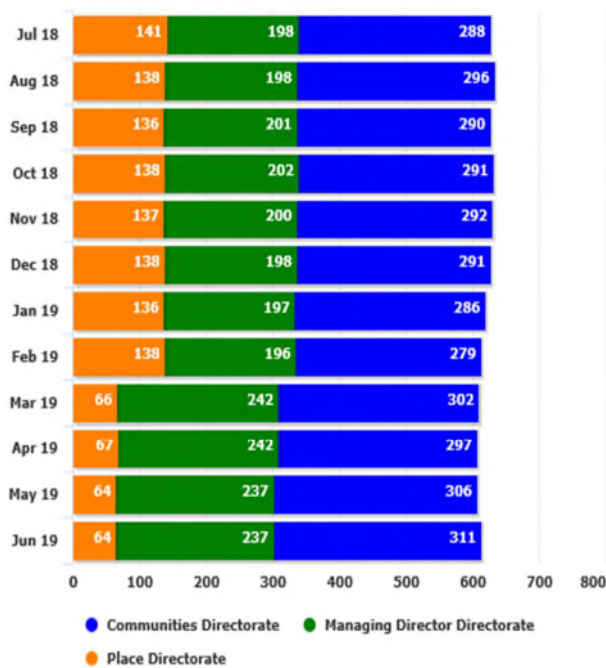|	Actual (YTD)	Trend (YTD)
Jul 18	4.92%	
Aug 18	6.48%	
Sep 18	7.94%	
Oct 18	9.34%	
Nov 18	9.67%	
Dec 18	11.27%	
Jan 19	12.94%	
Feb 19	14.29%	
Mar 19	15.29%	
Apr 19	0.66%	
May 19	0.99%	
Jun 19	1.64%	

Q1 Commentary

Performance against this measure remains within target and shows a significant reduction when compared with Q1 2018/19 (4.2%). Turnover is calculated by dividing voluntary leavers by the average headcount (headcount at start and end of period / 2). The updated ExpertHR median average voluntary turnover for 2016 is 15.6% for private sector (annual) and the RBWM year-end figure for 2018/19 was 15.29%.

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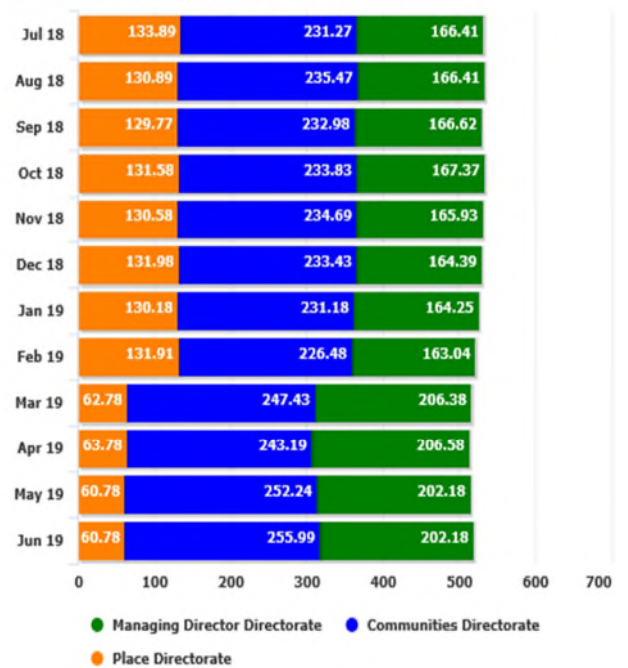## 6. Business Intelligence: RBWM Establishment

Total headcount and FTE (RBWM)

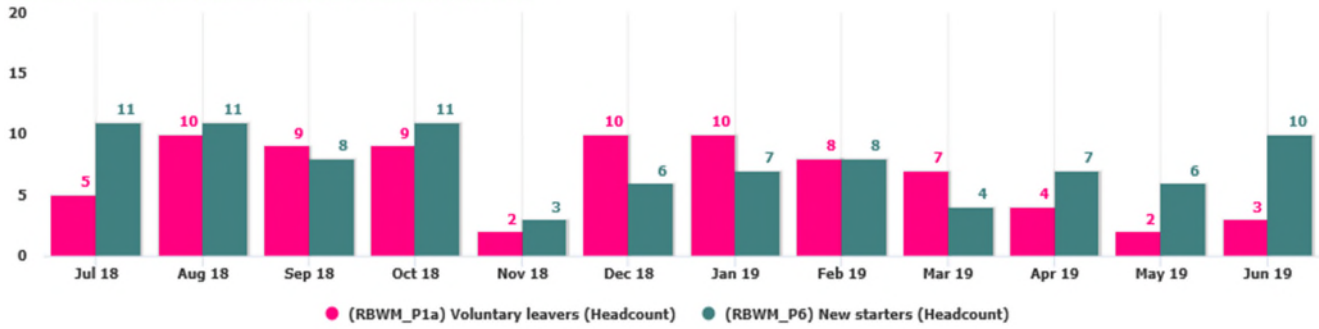**Total Headcount across RBWM with Directorate comparison**

Month	Place	Managing Director	Communities
Jul 18	141	198	288
Aug 18	138	198	296
Sep 18	136	201	290
Oct 18	138	202	291
Nov 18	137	200	292
Dec 18	138	198	291
Jan 19	136	197	286
Feb 19	138	196	279
Mar 19	66	242	302
Apr 19	67	242	297
May 19	64	237	306
Jun 19	64	237	311

Total FTE across RBWM with Directorate comparison

Month	Place	Communities	Managing Director
Jul 18	133.89	231.27	166.41
Aug 18	130.89	235.47	166.41
Sep 18	129.77	232.98	166.62
Oct 18	131.58	233.83	167.37
Nov 18	130.58	234.69	165.93
Dec 18	131.98	233.43	164.39
Jan 19	130.18	231.18	164.25
Feb 19	131.91	226.48	163.04
Mar 19	62.78	247.43	206.38
Apr 19	63.78	243.19	206.58
May 19	60.78	252.24	202.18
Jun 19	60.78	255.99	202.18

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No. new starters and voluntary leavers (Headcount) (RBWM)

Legend: ● (RBWM_P1a) Voluntary leavers (Headcount) ● (RBWM_P6) New starters (Headcount)

Total new starters (Headcount) across RBWM with Directorate comparison

● Communities Directorate ● Managing Director Directorate
● Place Directorate
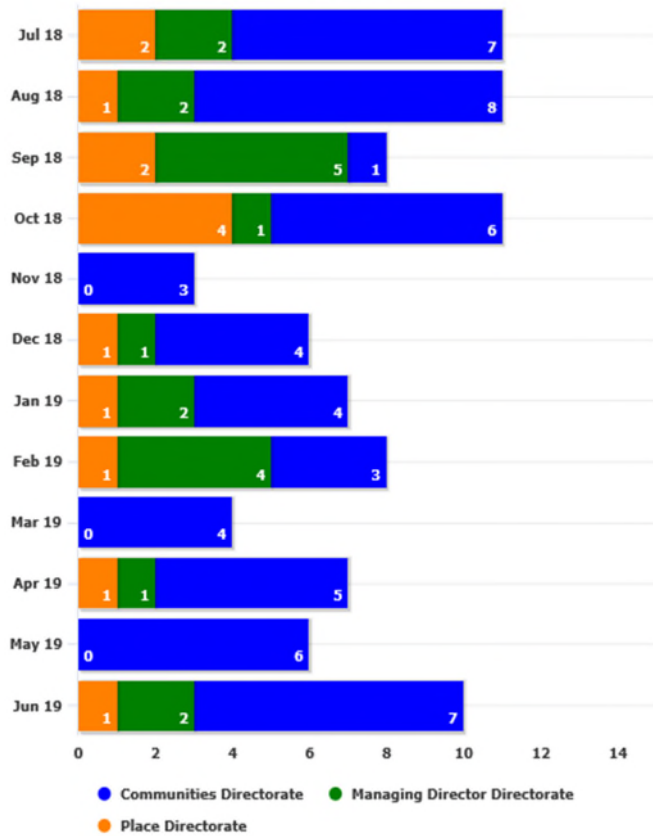
Total voluntary leavers (Headcount) across RBWM with Directorate comparison

● Communities Directorate ● Managing Director Directorate
● Place Directorate

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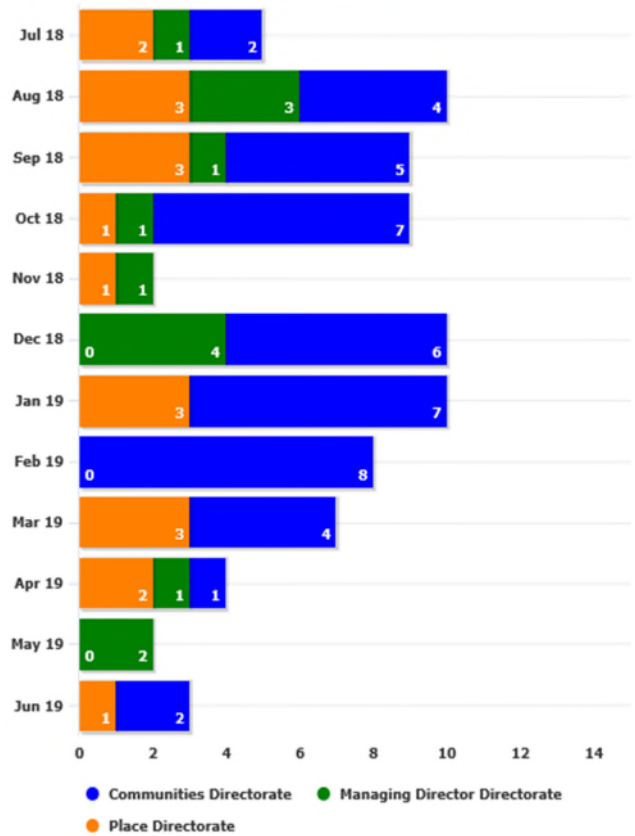
No. Agency staff (Headcount) (RBWM)

- Royal Borough of Windsor and Maidenhead ● Communities Directorate ● Managing Director Directorate ● Place Directorate
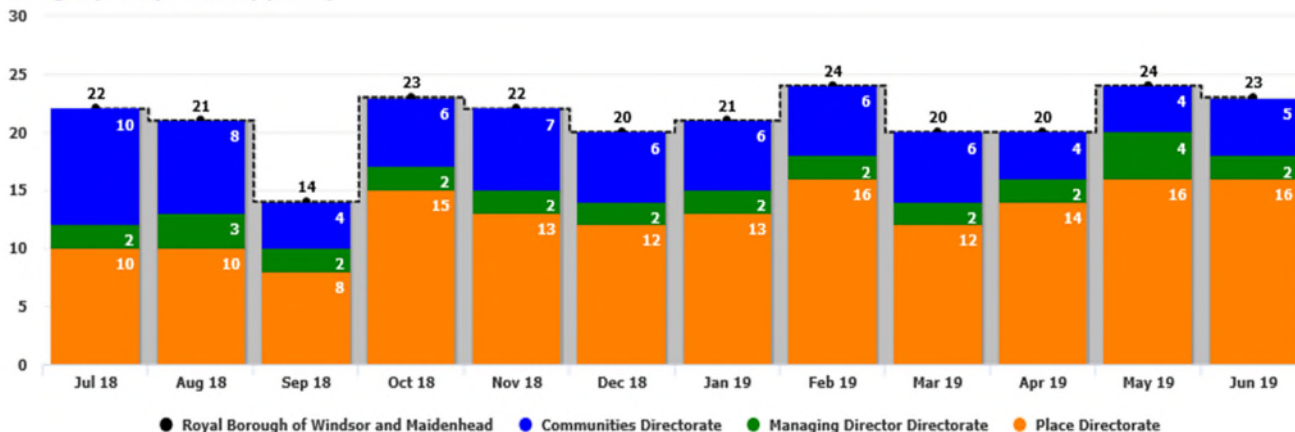
Active vacancies (FTE) across RBWM with Directorate comparison

- Royal Borough of Windsor and Maidenhead ● Communities Directorate
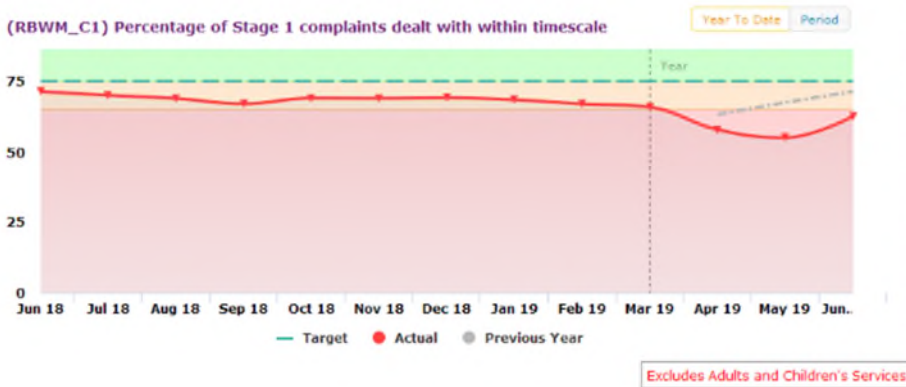- Managing Director Directorate ● Place Directorate
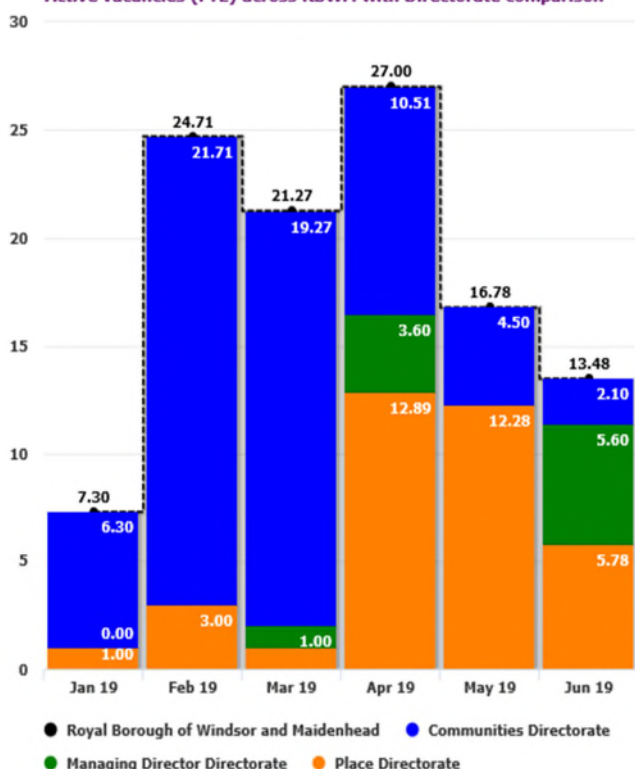
Total vacancies covered by agency staff (Headcount) across RBWM with Directorate comparison

- Royal Borough of Windsor and Maidenhead ● Communities Directorate
- Managing Director Directorate ● Place Directorate

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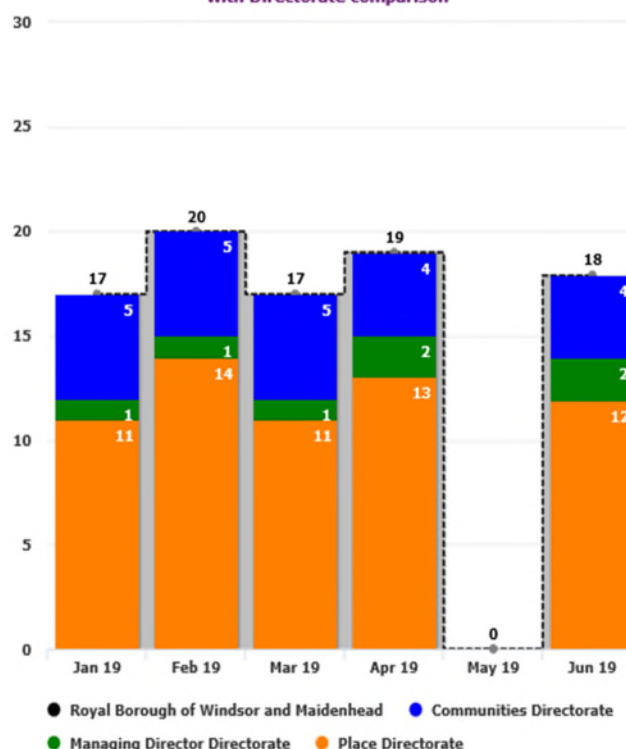
7. Business Intelligence: Complaints

7.1 The data provided here constitutes a snapshot in time of the live Complaints Database as at 02 September 2019 and up to the end of Q1 2019/20. Data relates to corporate complaints and therefore excludes complaints relating to both Adults and Children's services.
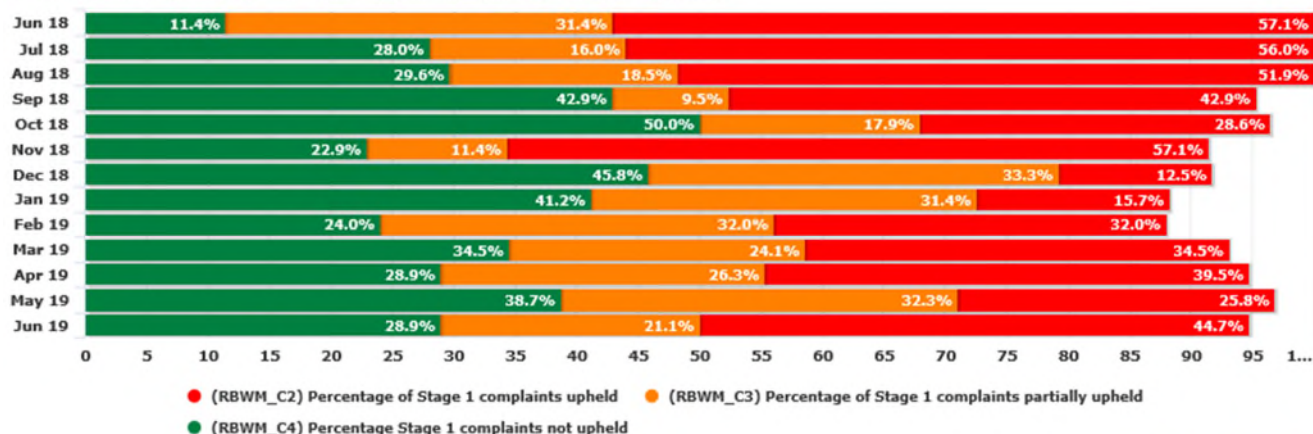
No. contacts progressed as complaints (RBWM YTD)	Percentage Stage 1 complaints dealt with within timescale (RBWM YTD)	Percentage Stage 1 complaints upheld (RBWM YTD)	Percentage Stage 1 complaints partially upheld (RBWM YTD)	Percentage Stage 1 complaints not upheld (RBWM YTD)
107	62.6%	37.4%	26.2%	31.8%
Exc. Adults and Children's Services	Exc. Adults and Children's Services	Exc. Adults and Children's Services	Exc. Adults and Children's Services	Exc. Adults and Children's Services

(RBWM_C1) Percentage of Stage 1 complaints dealt with within timescale

Excludes Adults and Children's Services

	Actual	DoT	Actual (YTD)
Jun 18	80.0%		71.3%
Jul 18	64.0% ▲		70.0%
Aug 18	63.0% ▲		68.9%
Sep 18	52.4% ▲		67.0%
Oct 18	82.1%		69.0%
Nov 18	68.6%		68.9%
Dec 18	70.8%		69.1%
Jan 19	64.7% ▲		68.4%
Feb 19	48.0% ▲		67.0%
Mar 19	51.7% ▲		65.8%
Apr 19	57.9% ▲		57.9% ▲
May 19	51.6% ▲		55.1% ▲
Jun 19	76.3%		62.6% ▲
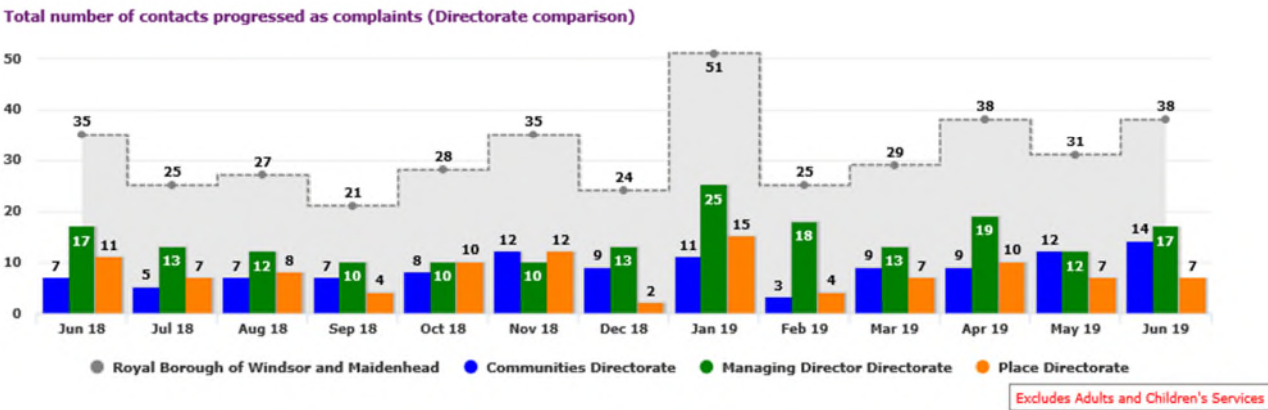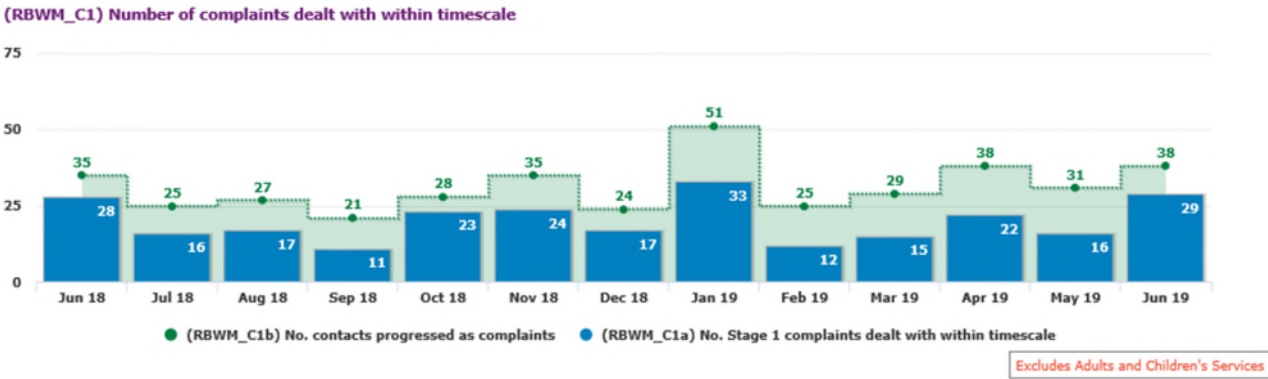
(RBWM_C1) Number of complaints dealt with within timescale

- (RBWM_C1b) No. contacts progressed as complaints
- (RBWM_C1a) No. Stage 1 complaints dealt with within timescale

Excludes Adults and Children's Services

Total number of contacts progressed as complaints (Directorate comparison)

- Royal Borough of Windsor and Maidenhead
- Communities Directorate
- Managing Director Directorate
- Place Directorate

Excludes Adults and Children's Services

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Percentage of Stage 1 complaints upheld / partially upheld / not upheld (RBWM)

Month	Not upheld (green)	Partially upheld (orange)	Upheld (red)
Jun 18	11.4%	31.4%	57.1%
Jul 18	28.0%	16.0%	56.0%
Aug 18	29.6%	18.5%	51.9%
Sep 18	42.9%	9.5%	42.9%
Oct 18	50.0%	17.9%	28.6%
Nov 18	22.9%	11.4%	57.1%
Dec 18	45.8%	33.3%	12.5%
Jan 19	41.2%	31.4%	15.7%
Feb 19	24.0%	32.0%	32.0%
Mar 19	34.5%	24.1%	34.5%
Apr 19	28.9%	26.3%	39.5%
May 19	38.7%	32.3%	25.8%
Jun 19	28.9%	21.1%	44.7%

- ● (RBWM_C2) Percentage of Stage 1 complaints upheld ● (RBWM_C3) Percentage of Stage 1 complaints partially upheld
- ● (RBWM_C4) Percentage Stage 1 complaints not upheld

Excludes Adults and Children's Services

RBWM Complaints (Breakdown of outcome)

Month	No. contacts progressed as complaints (C1b)	No. Stage 1 complaints upheld (C2a)	No. Stage 1 complaints partially upheld (C3a)	Number of Stage 1 complaints not upheld (C4a)
Jun 18	35	20	11	4
Jul 18	25	14	4	7
Aug 18	27	14	5	8
Sep 18	21	9	2	9
Oct 18	28	8	5	14
Nov 18	35	20	4	8
Dec 18	24	3	8	11
Jan 19	51	8	16	21
Feb 19	25	8	8	6
Mar 19	29	10	7	10
Apr 19	38	15	10	11
May 19	31	8	10	12
Jun 19	38	17	8	11

- ● (RBWM_C1b) No. contacts progressed as complaints ● (RBWM_C2a) No. Stage 1 complaints upheld ● (RBWM_C3a) No. Stage 1 complaints partially upheld
- ● (RBWM_C4a) Number of Stage 1 complaints not upheld

Excludes Adults and Children's Services

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Report Title:	**Annual Complaints and Compliments report 2018-19**
Contains Confidential or Exempt Information?	No - Part I
Meeting and Date:	Corporate Overview and Scrutiny Panel – 25 September 2019
Responsible Officer(s):	Duncan Sharkey, Managing Director & Nikki Craig, Head of HR and Corporate Projects
Wards affected:	None

REPORT SUMMARY

1. The purpose of the report is to share with Overview and Scrutiny the annual compliments and complaints report for 2018-19 before this is published on the council's website. Local Authorities are not required to produce an annual report on complaints relating to corporate activities. They are required to report complaints submitted on adults and children's services

2. The compliments and complaints report is produced annually details all compliments and complaints made by or on behalf of customers, that are investigated under the:
   - Formal corporate complaints policy.
   - Statutory adults and children's complaints policies.
   NB: children's complaints taken under the corporate complaints policy are reported in Section 7 of the annual report (Appendix 1) with other information about children's complaints.

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1. **DETAILS OF RECOMMENDATION(S)**

RECOMMENDATION: That Corporate Overview and Scrutiny Forum notes the report and:

i) **That the report is published on the Council's website.**

ii) **That the annual report continues to be produced and presented at Overview and Scrutiny panels,**

2. **REASON(S) FOR RECOMMENDATION(S) AND OPTIONS CONSIDERED**

2.1 The council's complaints and compliments report is written annually. There is a statutory requirement to publish information on Adult and Children's complaints and compliments and the report for April 2018 – March 2019 will be published in October 2019. While there is no requirement to publish information on complaints about other services provided by the council the decision has been taken to include this information in the annual report. This captures all the information about complaints and compliments to the council and ensures transparency.

2.2   The report looks at numbers of compliments received, complaints received, themes of complaints, timeliness of complaint responses, outcomes of complaints, learning from complaints and number of complaints made to and decided by the Local Government and Social Care Ombudsman (LGSCO).

Overview of all complaints to the council

2.3   Table 1 compares the number of complaints received across the council for 2018-19 with the figures for 2017-18. See Appendix 1, 4.5, table 1.

Table 1

	2018-19	2017-18
Adult complaints	19	33
Children complaints	38	37
Complaints about other services	380	574
Total complaints	**437**	**665**

Complaints to services considered by Corporate Overview and Scrutiny Panel

2.4   The number of complaints received for services considered at Corporate Overview and Scrutiny Panel is shown below in table 2. See Appendix 1, 5.2, 5.7, table 8.

Table 2

	2018-19	2017-18
HR and Corporate Projects	0	1
Law and Governance	7	5
Communications	14	2
Finance	0	3
Revenues and Benefits	41	34
Total	**62**	**45**

Themes of complaints

2.5   Across the council, the theme with the highest number of complaints received in both 2017-18 and 2018-19 was 'lack of action'. See Appendix 1, 4.9-4.12 and 5.10-5.14, tables 9 and 10.

Timeliness of complaints

2.6   Across the council, timeliness of complaint responses being provided has improved rising from 51% in 2017-18 to 64% in 2018-19. See Appendix 1, 4.13-4.14, table 3.

2.7   Timeliness for those services considered at Corporate Overview and Scrutiny Panel was 53% in 2017-18 and 85% in 2018-19, which is higher than the council average. See Appendix 1, 5.19, table 11.

Outcomes of complaints

2.8   Across the council, the number of complaints fully or partially upheld has fallen from 76% in 2017-18 to 67% in 2018-19. See Appendix 1, 4.15, table 4.

2.9   The number of complaints fully or partially upheld for those services considered at Corporate Overview and Scrutiny Panel was 63% in 2018-19,

which is slightly lower than the council average. See Appendix 1, 5.24-2.25, tables 12-13.

Complaints made to and decisions made by the LGSCO

2.10 Table 3 compares the number of complaints made to the LGSCO in 2018-19 against those made in 2017-18. See Appendix 1, 4.16-4.22.

Table 3

	Adult Care services	Benefits and Council Tax	Corporate and other services	Education and Children's services	Environment services	Highways and transport	Housing	Planning and Development	Other	Total
2018-19	13	2	5	9	4	1	5	4	1	44
2017-18	12	6	2	10	6	4	4	9	1	54

2.11 Table 4 compares the number of complaints decided by the LGSCO in 2018-19 against those decided in 2017-18.

Table 4

	Incomplete or invalid	Advice given	Referred back for local resolution	Closed after initial enquiry	Detailed investigations		Uphold rate of detailed investigations	Total
					Not upheld	Upheld		
2018-19	3	0	15	11	5	12	71%	46
2017-18	4	0	18	19	4	9	69%	54

2.12 If we were to include those investigations closed after an initial enquiry to the council, then the upheld rate for 2018-19 is 42%. This is higher than in 2017-18 when under this calculation 28% would have been upheld

2.13 The Ombudsman made 46 decisions during 2018-19 compared to 54 in 2017-18. This includes decisions on 14 enquiries submitted to the LGSCO in 2017-18 and 32 enquiries submitted in 2018-19. 12 enquiries made to the LGSCO in 2018-19 will be included in the decisions reported in 2019-20.

Overview of all compliments to the council

2.14 Table 5 compares the number of compliments received across the council for 2018-19 with the figures for 2017-18. See Appendix 1, 4.25 and 4.26.

Table 5

	2018-19	**2017-18**
Adult compliments	19	57
Children compliments	93	97
Compliments about other services	452	303
Total compliments	**555**	**456**

Compliments to services considered by Corporate Overview and Scrutiny Panel

2.15 The number of compliments received for services considered at corporate overview and scrutiny panel is shown below in table 6. See Appendix 1, 5.32-5.36, tables 16-17.

Table 6

	2018-19	2017-18
HR and Corporate Projects	5	8
Law and Governance	0	1
Communications	1	3
Finance	0	0
Revenues and Benefits	7	6
Total	**13**	**18**

Options

Table 7: Options arising from this report

Option	Comments
Undertake to complete an annual report for 2019-20	To fulfil statutory obligations and to continue to learn from resident complaints
Do not undertake to complete an annual report for 2019-20	Statutory obligations will not be fulfilled.

3. KEY IMPLICATIONS

3.1 There are a number of indicators of success for the council. Improvements in all of these show increased customer satisfaction.

Table 8: Key Implications

Outcome	Unmet	Met	Exceeded	Significantly Exceeded	Date of delivery
Reduced percentage of upheld complaints	67-100%	66%	50-65%	<50%	31 March 2020
Increased percentage of complaints completed within timescales	0-51%	52%	53-70%	>70%	31 March 2020
Reduced percentage of complaints to the LGSCO are upheld	71-100%	70%	55-69%	<55%	31 March 2020

4. FINANCIAL DETAILS / VALUE FOR MONEY

4.1 None.

5. LEGAL IMPLICATIONS

5.1 Children's and Adult reports are statutory.

6.   RISK MANAGEMENT

6.1   None

7.   POTENTIAL IMPACTS

7.1   None

8.   CONSULTATION

8.1   None

9.   TIMETABLE FOR IMPLEMENTATION

9.1   N/A

10.   APPENDICES

10.1   This report is supported by 1 appendix:

- Appendix 1 – Annual complaints report

11.   BACKGROUND DOCUMENTS

- LGSCO Annual Letter (see Appendix to Appendix 1)

11.1   These are the annual summary of statistics on the complaint on complaints made to the Local Government and Social Care Ombudsman about the authority for the year ending 31March 2019. The annual letters and corresponding data tables were published on LGSCO website on 31 July 2019.

12.   CONSULTATION (MANDATORY)

Name of consultee	Post held	Date sent	Date returned
Duncan Sharkey	Managing Director	16/08/19	16/08/19
Russell O'Keefe	Executive Director	16/08/19	16/08/19
Andy Jeffs	Executive Director	16/08/19	16/08/19
Rob Stubbs	Section 151 Officer	16/08/19	16/08/19
Elaine Browne	Interim Head of Law and Governance	16/08/19	16/08/19
Nikki Craig	Head of HR and Corporate Projects	14/08/19	14/08/19
Louisa Dean	Communications	16/08/19	16/08/19
Kevin McDaniel	Director of Children's Services	16/08/19	16/08/19

Name of consultee	Post held	Date sent	Date returned
Hilary Hall	Deputy Director of Commissioning and Strategy and Interim Director of Adult Social Services	16/08/19	16/08/19

REPORT HISTORY

Decision type:	Urgency item?	To Follow item?
For information	No	No
Report Author: Claire Burns		

Royal Borough of Windsor & Maidenhead

Annual Compliments and Complaints Report

1 April 2018 - 31 March 2019

"Building a borough for everyone – where residents and businesses grow, with opportunities for all"

Our vision is underpinned by six priorities:
Healthy, skilled and independent residents
Growing economy, affordable housing
Safe and vibrant communities
Attractive and well-connected borough
An excellent customer experience
Well-managed resources delivering value for money

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APPENDICES

Frequently used acronyms

LGSCO	Local Government and Social Care Ombudsman
RBWM	Royal Borough of Windsor & Maidenhead
ADR	Alternative Dispute Resolution

Complaints processes

	Adult services complaints	Children's services complaints	Corporate complaints	Not within the formal complaints process
Incoming concern	Received via online form, email, telephone call or face to face contact. However received, all complaints are logged on the complaints database (Jadu) for monitoring and tracking. Once logged the complaint is acknowledged within 3 working days and customer informed whether this will be taken as a complaint and if so, under which complaints process			
Stage 1	**Statutory** No specific timescale but aim to respond within 10 working days. Response from Service Manager or higher.	**Statutory** Up to 10 working days. Can agree extension for a further 10 working days. Response from Head of Service.	Up to 10 working days. Can agree extension for a further 10 working days. Response from Head of Service.	N/A
Stage 2	N/A	**Statutory** 25-65 working days. Completed by independent complaints investigators and report produced. Adjudicating letter in response to report completed by Children's Director of Social Care.	Up to 20 working days. Review of stage 1 complaint and response by Director.	N/A
Stage 3	N/A	**Statutory** Stage 3 independent panel. Up to 70 working days. Panel of three independent members who produce a report. Letter in response to the report completed by the Directors of Children's Services.	N/A	N/A
LGSCO	Can complain to the Local Government and Social Care Ombudsman			N/A
Alternative appeal process	N/A	N/A	N/A	Customer given timescales for response

1. INTRODUCTION

1.1 The annual report covers the period 1 April 2018 to 31 March 2019 and details all compliments and complaints made by or on behalf of customers, that are investigated under the:
- Formal corporate complaints policy.
- Statutory adults and children's complaints policies.

1.2 Local Authorities are not required to produce an annual report on complaints relating to corporate activities. They are required under statute to report complaints submitted on adults and children's services. The complaints and compliments team produce an annual report capturing all complaints and compliments. This allows the Council to assess how residents experience the Council in its entirety. Learning taken from compliments and complaints informs the services for improved operational satisfaction and could feed into the training needs analysis.

1.3 The council is a multi-faceted business, for instance council activity during 2018-19 included:
- 65,897 phone calls, 12,307 emails and 72,033 face-to-face enquiries.
- 697,516 library loans from 913,711 visits.
- 614 births / birth declarations and 903 deaths registered.
- 704 marriages conducted and 960 notices of marriage/civil partnership taken
- 432 people conferred British Citizenship
- 85,375 visits to museums.
- 67,577 tonnes of waste collected from residents, from over five million collections.
- 315 referrals to children's safeguarding.
- 57 families supported through the Troubled Families Program.
- 185 adult transfers into long term care.
- 668 support plan assessments
- 353 adult safeguarding concerns investigated.
- 1,908 planning applications determined.
- 98.0% of council tax and 96.92% of business rates collected.

1.4 In 2018/19 the Council received 555 compliments an increase on the 463 received in 2017/18 and 437 complaints, significantly lower than in 2017-18 when 664 were received. The 437 complaints received is relatively low compared to the amount of activity and interactions with residents.

1.5 This report summarises the number and themes of compliments and complaints received. It provides details of compliments and complaints split by service area and response rate. For ease, the report is organised into sections:
- Section 2 Council's complaints processes and procedure.
- Section 3 National and legislative context.
- Section 4 Summary of activity.
- Section 5 Formal corporate complaints and compliments.
- Section 6 Adult services complaints and compliments.
- Section 7 Children's services complaints and compliments.

2.   COUNCIL'S COMPLAINTS PROCESS AND PROCEDURES

2.1   The principle behind the council's complaints procedure is to ensure that every opportunity for resolution is sought through dialogue or local resolution before a complaint is submitted. Where agreement is not achieved someone has the right to complain and the complaints process has different stages dependant on the area of service the complaint is about.

2.2   Complaints made about the council's services are dealt with under three processes. The formal corporate complaints process for general council activity such as: council tax; housing; highways; communications; democratic services and so on; and the statutory adult and statutory children's processes.

2.3   The different complaint processes have different stages, however regardless of which policy a complaint is investigated under, or the outcome, the complainant still has the right to refer their complaint on to the Local Government and Social Care Ombudsman. The different stages are:
- The formal corporate complaints process contains two stages.
- The adult complaints process contains one stage
- The children's complaints process contains three stages.

2.4   Although customers can refer complaints to the Local Government and Social Care Ombudsman (LGSCO) at any stage, the LGSCO will not normally investigate until the council have exhausted their complaints processes.

2.4   Complaints are made by email, phone call, letter, face to face or by logging the complaint online. All complaints received, along with comments and compliments, are recorded on the council's complaints database (Jadu). The Jadu system provides for compliments and complaints to be captured by number, types, themes, postal address and timeliness of complaint.

2.5   The council's complaints policies are intended for use by service users, customers, residents, businesses and visitors or their chosen representatives, which may include councillors.

2.6   The council's complaints process is managed through one team. This means the team is independent of the two statutory adult and children's services, ensures independence from services, removes the possibility of conflicts of interest and secures impartial challenges.

Quality assurance
2.7   Effective complaint management is crucial to allow confidence on the part of complainants to submit complaints in the understanding that the council will take these seriously and respond.

2.8   When a complaint is received the complaints and compliments team focus on ensuring:
- The process for investigating the complaint is followed and on time.
- Complaint responses answer the questions asked and are clear and easy to read.

- Lessons learned and recommendations are captured to secure continual improvement – this includes one to one training/advice/meetings with relevant employees providing them with support and guidance on how best to resolve a complaint.
- Any actions or recommendations are noted on Jadu and monitored.

3. NATIONAL AND LEGISLATIVE CONTEXT

Formal corporate complaints

3.1 The council's formal corporate complaints policy is discretionary and has been developed based on the Local Government and Social Care Ombudsman's guidance 'Running a complaints system - Guidance on good practice'.

Adult services

3.2 The council has a statutory duty, under the NHS and Community Care Act 1990, to have in place a complaints procedure for Adult Social Care services and is required to publish an annual report relating to the operations of its complaints procedures.

3.3 The Local Authority Social Services and NHS Complaints (England) Regulations 2009 introduced a single approach for dealing with complaints for both the NHS and Adult Social Care, the key principles of which are:
- Listening - establishing the facts and the required outcome.
- Responding - investigate and make a reasoned decision based on the facts/information.
- Improving - using complaints data to improve services and influence/inform the commissioning and business planning process.

Children's services

3.4 The procedure for dealing with children's statutory complaints and representations is determined by the following legislation:
- The Children Act 1989, Representations Procedure (England) Regulations 2006.
- The Children & Adoption Act 2002 and Children (Leaving Care) Act 2000 and
- The accompanying guidance 'Getting the Best from Complaints' (DfE July 2006).

3.5 Qualifying individuals are defined in national guidance as the child or young person, their parent, carer or foster carer or 'anyone who could be seen to be acting in the best interests of the child.'

3.6 Under the regulations, the council is required to produce and publish an annual report.

4. SUMMARY OF ACTIVITY

4.1 In 2018-19, the council received 1,638 contacts from customers that were initially recorded as complaints. This compares to 1,809 in 2017-18; a 10% decrease in contacts year-on-year.

4.2 Contacts that were not progressed as complaints were signposted to an alternative means of resolution, for example, a service request or via an alternative appeals process, such as parking appeals or statutory tribunals.

4.3 The total number of complaints that were progressed through stage 1 of the specific complaints process that they followed was 437.

4.4 Stage 2 and 3 complaints are escalations of stage 1 complaints and so are not counted as new complaints. Information on these will be shown separately in this report.

4.5 This report will look at complaints according to whether they were made under the formal corporate, the statutory adult or the statutory or corporate children's complaints processes, see table 1

Table 1: complaints received

	Formal corporate	Adult Statutory	Children Statutory	Children Corporate	Total
2018-19	380	19	28	10	**437**
2017-18	592	33	36		**665**

Children's services complaints

4.6 The reporting this year differentiates between children's statutory and children's corporate complaints. Both types of complaints are looked at within section 7.

4.7 A children's statutory complaint is invoked when the complaint is by or on behalf of a child in need or a child in care.

4.8 A children's corporate complaint covers all other complaints about children's services. The exception to this is complaints specifically regarding child protection conferences, which are taken under the Local Safeguarding Children's Board complaints process.

Themes

4.9 Complaints are captured as themes, see table 2.

Table 2: themes of complaints 2018/19 and 2017/18

	2018-19		2017-18	
Theme	**Number**	**%**	**Number**	**%**
Lack of action - did not do what we said we would	91	21%	150	23%
Require help, intervention or guidance	60	14%	30	5%

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Theme	2018-19		2017-18	
	Number	**%**	**Number**	**%**
Attitude or behaviour of staff	48	11%	78	12%
Failed to follow timescales	43	10%	71	11%
Situation handled incorrectly	43	10%	54	8%
Services delivered at a lower standard than in our policy	42	10%	78	12%
Did not follow policy	38	9%	34	5%
Unhappy with the decision made	16	4%	61	9%
Failed to take all information into account	14	3%	10	2%
Did not answer all questions	9	2%	9	1%
Gave the wrong information	9	2%	24	4%
Inaccurate or wrong information recorded	7	2%	16	2%
Breach of data protection	6	1%	5	1%
Objecting to a policy	6	1%	15	2%
Safeguarding	5	1%	9	1%
TOTAL	**437**	**100%**	**665**	**100%**

4.10 Complainants self-select the theme when they log their complaint via the council website. As this is the theme they feel is most relevant to their complaint the complaints and compliments team do not change this. Only one theme can be selected for each complaint and the information from themes is therefore an indicator only of the reasons behind often complex complaints.

4.11 As with 2017-18, the theme with the highest number of complaints received was lack of action. There are similarities between this theme and the theme of failed to follow timescales as they are both about actions not being taken by the council. Between them these two themes make up 31% of complaints.

4.12 It is notable that the number of complaints logged against the theme of require help, intervention or guidance has doubled in a year when the overall number has dropped. The majority of these (53) were recorded for complaints against corporate services. See table 10 for a further breakdown within this theme.

Timescales

4.13 Each stage of the three individual complaint processes have indicative response times. However, these can be extended or alternative timescales agreed from the outset with the complainant. In 2018-19, there was an improvement in complaints responded to within agreed timescales compared to 2017-18, see Table 3.

Table 3: Percentage of complaints responded to within timescale

Year	Progressed complaints	Responded to within timescale	% within timescales
2018-19	437	280	64%
2017-18	644	329	51%

4.14 Processes are embedded to monitor the timeliness of responses more robustly, including weekly reports to services of outstanding complaints. Use of the council's performance management software InPhase continues to be refined and will give a further tool for service areas to monitor their complaints.

Decisions

4.15 The outcome of complaints is recorded, see table 4.

Table 4: Outcome of complaints

	Fully upheld	Partially upheld	Not upheld	Not yet concluded*	% Partially or fully upheld
2018-19	169	124	137	7	67%
2017-18	346	130	133	35	74%

*It should be noted that the category 'not yet concluded' means that the complaint response had not been finalised at the time that the data snapshot was taken for this report.

Local Government Social Care Ombudsman

4.16 The Local Government Social Care Ombudsman (LGSCO) received 44 complaints and enquiries about the council in 2018-19, compared to 54 in 2017-18, see table 5.

Table 5: complaints and enquiries received by the LGSCO

	Adult Care services	Benefits and Council Tax	Corporate and other services	Education and Children's services	Environment services	Highways and transport	Housing	Planning and Development	Other	Total
2018-19	13	2	5	9	4	1	5	4	1	44
2017-18	14	4	4	12	5	3	4	11	1	58

4.17 The Ombudsman made 46 decisions during 2018-19 compared to 54 in 2017-18. This includes decisions on 14 enquiries submitted to the LGSCO in 2017-18 and 32 enquiries submitted in 2018-19. 12 enquiries made to the LGSCO in 2018-19 will be included in the decisions reported in 2019-20. See table 6.

Table 6: LGSCO decisions 2018-19

	Incomplete or invalid	Advice given	Referred back for local resolution	Closed after initial enquiry	Detailed investigations Not upheld	Upheld	Uphold rate of detailed investigations	Total
2018-19	3	0	15	11	5	12	71%	46
2017-18	4	0	18	19	4	9	69%	54

See appendix 1, for full details of decisions as per the 2018-19 LGSCO annual letter on cases upheld and not upheld.

4.18 If we were to include those investigations closed after an initial enquiry to the council, then the upheld rate for 2018-19 is 42%. This is higher than in 2017-18 when under this calculation 28% would have been upheld.

4.19 The 12 complaints that were investigated and upheld were:
- Adult social care 8.
- Children's 1.
- Highways and transport 1.

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- Planning and development 2.

See sections 5.17, 6.17 and 7.16 for further details.

4.20 The upheld rate for detailed investigations remains similar to 2017-18.

LGSCO reports

4.21 No public interest reports for the council were published in 2018-19.

Improvements in working with the LGSCO

4.22 LGSCO enquiries are now logged on the complaints section of the customer contact database (Jadu) using a bespoke module. They can then be monitored more efficiently, improving the response times to the LGSCO.

Learning and improvements from complaints

4.23 Understanding why complaints are made, establishing root causes, changing processes and delivering training as a result is essential to help drive improvements across the council. Listening to customers and reflecting on examples of where we did not get it right can highlight opportunities for improvement and increase satisfaction, fulfilling our strategic priority to provide an excellent customer experience.

4.24 Learning from complaints can be found in sections 5.18, 6.18 and 7.21.

Compliments

4.25 In 2018-19, 555 compliments were recorded for teams or individuals across the council, see table 7. Compliments received are fed back to the relevant service areas to ensure that due recognition is given to staff and that learning is shared and disseminated across the directorate.

Table 7: Compliments received

	2018-19	2017-18
Corporate *	446	303
Adult	19	50
Children's	90	103
TOTAL	**555**	**456**

* For the purpose of this report corporate services refers to compliments that were received by services other than those within adult and children's services.

4.26 There is overall a continuing improvement in compliments recorded in 2018-19, which have risen by 20% from 2017-18. This may be because of improved services, the ability for customers to record compliments themselves via the council's website and the readiness of services to share compliments that they have received. The exception to this is adult services, which has dropped from 50 to 19 compliments recorded. See section 6.17 for a commentary on this.

4.27 Examples of compliments received can be found in sections 5.20, 6.17 and 7.19.

5. FORMAL CORPORATE COMPLAINTS

Overall corporate complaints summary

5.1 In 2018-19, there were 380 corporate complaints compared to 574 in 2017-18. This represents 87% of all complaints progressed. This compares to 2017-18 when 89% of all complaints progressed were formal corporate complaints

Internal process
- 66% were either fully or partially upheld.
- 54% were responded to within timescales.
- 446 compliments were received.

External process
- 26 corporate complaints or enquiries were decided by the LGSCO, of these:
  - 7 were investigated.
  - 2 were upheld.
  - 5 were not upheld.

Complaints received

5.2 Table 8 details the number and percentage of stage 1 complaints received by service area.

Table 8: Corporate complaints received by service

Teams	2018-19		2017-18	
	Number of complaints	%	Number of complaints	%
Communities, Enforcement & Partnership	25	7%	34	6%
Communications	14	4%	2	0%
Finance	0	0%	3	1%
Housing Services	53	14%	59	10%
HR & Corporate Projects	0	0%	1	0%
Law & Governance	7	2%	5	1%
Library & Resident Services	38	10%	101	18%
Planning	39	10%	63	11%
Property Services	2	1%	3	1%
Revenues & Benefits	41	11%	34	6%
* Waste management	69	18%	100	17%
* Highways Includes Highways, Volker, street lighting and permitting & licensing	55	14%	106	18%
* Parking	33	9%	53	9.2%
* Outdoor facilities	4	1%	10	2%
TOTAL	**380**	**100%**	**574**	**100%**

* Teams within Commissioning – Communities

5.3　Commissioning – Communities service area delivers the largest volume of resident facing services which impact upon every resident, household, business and visitor to the Royal Borough (for example: waste collections; highways; management of road works, parking and parks). Services are often delivered which cause disruption (for example: road works); these are essential and widespread as the council continues to invest in infrastructure across the Borough.

5.4　As a result the number of complaints received by teams within this service area would be expected to be high when compared to other service areas. Despite this the service area as a whole reduced the number of complaints received by 40% with 108 fewer complaints. This accounts for 56% of the drop in complaints across corporate service areas. Commissioning – Communities, and Library and Resident services (see 5.6) together make up 88% of the total drop seen in formal corporate complaints.

5.5　The reduction in Commissioning – Communities complaints received is significant when considering that the recorded enquiries went up 13% in a comparable period. This is largely due to the introduction and wider use of the 'report it' function which allows someone to report a range of enquiries through the RBWM website and through Library & Residents Services. Once logged, enquiries are automatically generated for services providers to action and a notification is sent to the person who logged the concern. This ensures they are kept up to date with the progress of their enquiry. This has resulted in a more efficient customer centred service.

5.6　Library and Resident Services achieved a 62% drop in the number of complaints received. To achieve this a 100 Day Action Plan was put in place, focussing on building a high functioning team and reassessing recruitment practices which concentrated on skill, will and fit. Staff training was prioritised and steered by feedback from customers and staff. Further development of positive working relationships with back office council staff and commissioned services has enabled a more streamlined customer centred approach and delivery by Library and Resident Services.

5.7　Revenues and Benefits saw a slight rise in the number of complaints made to them during 2018-19. While there was nothing obvious to account for this, for instance no changes in legislation that would impact, this was the first year in some time that that there was a rise in council tax; this may have indirectly affected the number of complaints received.

5.8　In mid-April 2018 the current interim Head of Housing commenced in post. At this time there was a backlog of some 28 complaints that were already past the due date. These were subsequently completed and the housing service began a process of improving its customer service.

5.9　There remains a legacy of complaints for the Housing service as a result of previous working practices which are still being dealt with. However, with the improved methods of working and an increased focus on complaints, the issues are being given the focus they need.

Themes

5.10   Table 9 details the number and percentage of complaints received by theme during 2018-19.

Table 9: Corporate complaints received by themes

Type of complaint	2018-19		2017-18	
	Number	%	Number	%
Lack of action[1]	83	22%	141	24%
Require help or intervention	53	14%	23	5%
Attitude or behaviour of staff[3]	41	11%	68	12%
Failed to follow timescales[2]	40	11%	69	12%
Situation or incident handled incorrectly[4]	31	8%	46	8%
Services delivered below standard	40	11%	65	11%
Did not follow policy	28	7%	27	5%
Unhappy with a decision that has been	13	3%	54	9%
Failed to take all information into account	13	3%	9	2%
Gave the wrong information	8	2%	22	4%
Did not answer all questions asked	9	2%	9	2%
Inaccurate information recorded	7	2%	14	2%
Believe our policy to be incorrect	6	2%	15	3%
Breach of data protection	5	1%	4	1%
Safeguarding	3	1%	2	0%
TOTAL	**380**	**100%**	**574**	**100%**

5.11   Themes of complaints are in the main self-selected by the person making a complaint and not all complaints fit neatly into a single category. Of the 15 themes available however, complaints that were broadly to do with delays or a lack of timely action[1,2] make up 31% and those to do with the customer's experience of dealing with staff[3,4] make up 21%. Together these two areas make up over 50% of all complaints.

5.12   As noted in the summary of complaints (section 4) the number of complaints with a theme of require help or intervention has risen markedly. The split across corporate services is shown in table 10 (with a further breakdown for teams in Commissioning – Communities, as the largest service area).

Table 10: complaints by service received against theme require help, intervention or guidance

Service area	Number	%
Communities, Enforcement & Partnerships	4	8%
Communications	8	14%
Housing Services	3	6%
Law & Governance	3	6%
Libraries and Resident Services	2	4%
Planning	6	11%
Revenues & Benefits	4	8%
* Parking	2	4%

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Service area	Number	%
* Highways Includes Highways, Volker, street lighting and permitting & licensing	15	28%
* Waste	6	11%
Total	**53**	**100**

* Teams within Commissioning – Communities

5.13 Highways received the highest number of complaints logged against this theme. Within this, the majority (11) were logged against permitting and licensing. However, of these, eight were not upheld, two were partially upheld and one upheld. None of these complaints was escalated to stage 2.

5.14 Significant investment in infrastructure is currently being undertaken by or on behalf of the council through teams included in Highways. The increased volume of complaints in this category is likely to reflect the impact of this work on residents, businesses and visitors leading to increased complaints activity and requests for information.

Timescales

5.15 Table 11 details the number and percentage of stage 1 complaints responded to within timescales for each service.

Table 11: Stage 1 corporate complaints responded to within timescale

Teams	2018-19			2017-18		
	Number of complaints	In timescales	%	Number of complaints	In timescales	%
Communities, Enforcement & Partnerships	25	19	76%	34	20	59%
Communications	14	10	71%	2	1	50%
Finance	0	0	N/A	3	2	67%
Housing Services	53	28	53%	59	11	19%
HR & Corporate Projects	0	0	N/A	1	0	0%
Law & Governance	7	7	100%	5	3	60%
Libraries and Resident Services	38	33	87%	101	47	47%
Planning	39	20	51%	63	20	32%
Property Services	2	2	100%	3	0	0%
Revenues & Benefits	41	36	88%	34	18	53%
* Parking	33	28	85%	53	47	89%
* Highways Includes Highways, Volker, street lighting and permitting & licensing	55	21	38%	106	64	60%
* Waste management	69	38	55%	100	62	62%
* Outdoor facilities	4	2	50%	10	3	30%
TOTAL	**380**	**244**	**64%**	**574**	**298**	**52%**

* Teams within Commissioning – Communities

5.16 Most services that received complaints have improved their timescales since 2017-18.

5.17   Library and Resident Services improved the percentage of complaints that were responded to in timeframes from 47% to 87%. Complaints are prioritised as they are received. All complaints are reviewed by the Library and Resident Services management team to track the robustness and timeliness of complaints and ensure that any lessons arising are included in training. The reduction in complaints has enabled colleagues within the team to give greater attention to those received so that mistakes are corrected quickly.

5.18   Response times in the highways and waste areas have declined which is an area for focus. This is recognised and dedicated service specialist customer support is now in place. In addition, the 'Report It' function is in place which enables customers to report issues online whereby progress updates are automatically issued to improve feedback and communications.

5.19   Revenues and Benefits saw a good increase in the number of complaints responded to within timescales, with a rise from 53% in 2017-18 to 88% in 2018-19. A restructure took place in September 2018 and a change was made to the way in which complaints are allocated within the service area. This means that the service lead takes into account workloads and availability to ensure more timely responses.

5.20   There has been a marked improvement in timescales for responses to complaints to housing services, owing to improved service methods. It is anticipated that this will continue until a point is reached where only exceptionally complex complaints will have the potential to take longer than the usual timeframe.

5.21   Complaints about Communities, Enforcement and Partnerships service area that were within timescale have also risen. There has been a concerted effort both from teams and from support to ensure timescales are being addressed.

5.22   Planning has also seen an increase in complaints completed within timescales, rising from 32% in 2017-18 to 51% in 2018-19

5.23   Numbers of complaints and responses within timescales are shared in service area team meetings. Weekly email updates of current open complaints are sent to all service areas and work is ongoing with the policy and performance team to enable monitoring of performance through InPhase.

Decisions

5.24   The outcome of complaints is recorded, see tables 12 and 13.

Table 12: Outcome of complaints

	Fully upheld	Partially upheld	Not upheld	Not yet concluded*	% Partially or fully upheld
2018-19	158	92	124	6	66%
2017-18	328	108	117	21	76%

*It should be noted that the category 'not yet concluded' means that the complaint response had not been finalised at the time that the data snapshot was taken for this report.

Table 13: Outcomes: breakdown by service area

Area	2018-19			2017-18		
	Total	Fully or partially Upheld	%	Total	Fully or partially Upheld	%
Communities, Enforcement & Partnerships	25	13	52%	34	24	71%
Communications	14	9	64%	2	1	50%
Finance	0	0	N/A	3	3	100%
Housing Services	53	37	70%	59	43	73%
HR and Corporate Projects	0	0	N/A	1	1	100%
Law & Governance	7	5	71%	5	1	20%
Libraries and Resident Services	38	33	87%	101	86	85%
Planning	39	14	36%	63	25	40%
Property Services	2	1	50%	3	2	67%
Revenues & Benefits	41	25	61%	34	30	88%
* Highways Includes Highways, Volker, street lighting and permitting & licensing	55	32	58%	106	93	88%
* Parking	33	28	85%	53	47	89%
* Outdoor facilities	4	4	100%	10	7	70%
* Waste management	69	54	78%	100	74	74%
TOTAL	**380**	**255**	**67%**	**574**	**437**	**76%**

* Teams within Commissioning – Communities

5.25 Across corporate services there has been a drop in the percentage of complaints that were fully or partially upheld from 76% in 20178-18 to 67% in 2018-19.

Stage 2 complaints

5.26 If a complainant remains dissatisfied after receiving a response at stage 1 of the corporate complaints process they may request a review by the service director.

5.27 The percentage of formal corporate complaints that was escalated to stage 2 rose from 4% in 2017-18 to 12% in 2018-19.

5.28 The timescale for response at stage 2 is within 20 working days. 71% of formal corporate complaints that went to stage 2 were answered within timescales. As with 2017-18, this is higher than the response rate in timescales at stage 1.

5.29 The number of upheld and partially upheld Stage 2 complaints is shown in table 14.

Table 14: stage 2 corporate complaints 2018-19 – number upheld

Teams	2018-19	Number upheld or partially upheld
Communities, Enforcement & Partnerships	4	4
Communications	3	2
Housing Services	7	3

Teams	2018-19	Number upheld or partially upheld
Libraries and Resident Services	2	1
Planning	10	2
Revenues & Benefits	6	2
* Parking	1	0
* Highways Includes Highways, Volker, street lighting and permitting & licensing	10	7
* Waste	6	2
TOTAL	49	18

* Teams within Commissioning – Communities

Complaints to the LGSCO

5.30 The LGSCO made decisions about 25 complaints and enquiries for corporate services. Seven were decided following detailed enquiries and of these, two were upheld and five were not upheld. This leaves 18 that were not fully investigated. See appendix 1 for details on 2018-19 decisions.

Learning from complaints

5.31 An important part of the complaints process is capturing the learning and embedding good practice across the council. Table 15 picks up some of the learning across corporate services during 2018-19.

Table 15: Learning from corporate complaints

Complaint area	Actions and learning
Communities, Enforcement & Partnerships – Environmental health	• We are clearer when responding to an initial service request about the need for the required information to be provided so as to minimise the time before RBWM is able to visit. This will reduce the risk of any delays in the future.
Housing	• All housing staff are receiving ongoing training on service standards and managing expectations to ensure a prompt response to enquiries and requests for updates. • Customers have access to mobile numbers and email addresses for their case officers. • Managers continue to closely manage cases.
Waste	• The website and web form for van permits to be used at household waste and recycling centres has been updated to clarify the acceptable size and type of vehicle.
Planning	• The Planning department has updated its enforcement policy and templates to better set expectations of timeframes for investigations and what we can and can't investigate. • Performance with regards determination of applications is high due to investment and improvements in service delivery. This has reduced complaints with regards applications.

Compliments

5.32 Corporate services received 452 compliments during 2018-19. This is an increase from 2017-18 when there were 303 compliments received. Table 16 shows the breakdown of compliments across corporate services.

Table 16: Compliments by service

Teams	2018-19		2017-18	
	Number of compliments	%	Number of compliments	%
Communities, Enforcement & Partnerships	73	16%	25	8%
Communications	1	0%	3	1%
Housing Services	10	2%	3	1%
HR & Corporate Services	5	1%	8	3%
Law & Governance	0	0%	1	0%
Libraries and Resident Services	225	50%	140	46%
Planning	19	4%	22	7%
Property Services	1	0%	0	0%
Revenues & Benefits	7	2%	6	2%
* Parking	13	3%	3	1%
* Highways Includes Highways, Volker, street lighting and permitting & licensing	63	14%	70	23%
* Parking	27	6%	18	6%
* Outdoor facilities	2	0%	4	1%
TOTAL	**452**	**100%**	**303**	**100%**

* Teams within Commissioning – Communities

5.33 Library and Resident Services received half of the compliments received by corporate services. Staff are encouraged to consistently exceed the expectation of the customer. Feedback cards are available in libraries to enable customers to say what they think about the service and to make suggestions. These are reviewed by the team leader and supervisors regularly, suggestions are implemented where possible and customer compliments for individual staff members are shared which boosts staff morale and encourages excellent levels of service.

5.34 Compliments to Communities, Enforcement and Partnerships have also risen this year. Of the 73 received, 47 were for the Community Safety team. This shows the very positive support for the Community Wardens who deal with lots of diverse issues, often in difficult circumstances.

5.35 Table 17 shows examples of compliments received across service areas. Front facing services that interact regularly with customers received the highest number of compliments in the same way as they also receive the highest volumes of complaints.

Table 17: Examples of compliments received

Service	Compliment received
Libraries and	• The librarian on duty at Old Windsor provided a really good service. The next book club selection was not available in the

Service	Compliment received
Resident Services	afternoon of Friday but it appeared with a later delivery and she phoned me at 6pm to tell me it had arrived and that she would put a copy by for me. Picked it up this morning and I can't thank her enough. Excellent service as always from Old Windsor. I can't rate all the staff highly enough. • Thank you very much for today's session. The girls enjoyed it very much & loved their little bugs & make a pet sheets. I thought you'd be interested to know that the mums I had helping today all commented on how nice the library is. They also said they intend to use it much more than they do currently and that they had forgotten what a tremendous service it is.
Highways	• I would like to thank you for your time this morning. It was nice to be welcomed and have a pleasant and thorough update on the matters in hand. Your clarifications on the complexity of the matter and the procedures that each of the departments are following helped me understand the issues. Your reassurances that the departments involved are coordinating with each other and that you have spoken to each of them is heartening. Your involvement has been invaluable. • I am a tour guide and arrive at the coach park regularly. I wrote recently to mention the rubbish once you cross the footbridge on the right side beside the railway. I was pleased to see it had all been cleared!
Housing	• I would like to personally thank you for the household items the Borough has purchased for me for my new flat. Without this help I was eating takeaways daily, not being able to store food in a fridge and sleeping in an inflatable bed. I now have a cooker to cook in, a fridge freezer and a bed to sleep in. • I would like to bring to your attention the excellent Service I was provided me with. My case worker has been extremely helpful, caring and approachable, and most of all, interested in my wellbeing. I feel very fortunate to have been under her care and service.
Planning	• A big word of thanks if I may to one of your younger planning officers who has been very efficient over the last year. Hang on to her if you can - a boro like Windsor needs bright sharp staff and she has been great!!! • Many thanks to the planning team with whom I have had contact. • I just wanted to drop you a line to say thank you. We live at X so this proposed airport parking was a real concern for us. I did object but I had prepared myself for the worst. We truly appreciate your involvement.
Waste	• I wanted to say thank you to the cheerful crew doing the waste collection yesterday. I was getting ready for work when I heard the van and dashed out in my slippers to catch them and they kindly said don't come out in your slippers and come and got the bins from the door and put them back. So impressed it's not far, and I am not elderly, but really nice to have helpful and cheerful staff, please say thank you to them
Community	• Thank you or organising such an interesting talk. It was very

Service	Compliment received
wardens	useful and with lots of excellent advice. It is really good to know we have somewhere to turn to advice on safety etc. • I'd like to place on record my sincere thanks for the highly professional way in which you investigated our concerns and dealt with everyone involved. I've been trying to resolve this matter directly with my neighbour for some time now and wish I'd contacted the Borough at a much earlier stage. You've managed to achieve in just over one week what I've failed to do in several years.
Registrars	• I just wanted to say thanks for a wonderful ceremony yesterday with me becoming a British citizen. I thought the set up was great and to have a cup of tea and a biscuit after was fun. The Mayors kids had gone to my kids school and the Lord Lieutenant had spent a good chunk of his schools years in Adelaide so we had a chat about my previous homeland. Thanks again for making it a special day and as the last person to apply through your offices last year, a new chapter for all has started.
Parks & Open Spaces	• Resident would like to compliment whoever has been maintaining Oakley Green Cemetery. The cemetery is in excellent condition and being kept very well maintained and trimmed. • Thank you so much for the support you provide to the Maidenhead Festival. We took our young daughter this year who enjoyed it immensely. Thank you also for the recent refurbishments to Oaken Grove Park, our daughter absolutely loves the park and hugely enjoys all the activities in the play area (the trampoline in particular!). Maidenhead's parks really make the town; as a fourth generation Maidonian thank you so much for continuing to make this town a great place to live.

5.36   The variety of compliments highlights the breadth of work carried out across the council and helps celebrate the good work carried out by a wide range of officers.

6.   ADULT SERVICES

Overall adult complaints summary

6.1   In 2018-19 there were 19 adult complaints compared to 33 in 2017-18. This represents 4% of all complaints received by the Council.

Internal process

- 68% of complaints were either fully or partially upheld.
- 74% were responded to within timescales.
- 19 compliments were received.

External process

- 12 complaints or enquiries were decided by the LGSCO
  - Eight were investigated.
  - Eight were upheld.
  - Zero were not upheld.

Complaints received

6.2   There was a significant drop in the number of complaints received for adult services from the previous year, see table 18 for the volumes for the periods 2012-19. There has been a concerted effort by staff to resolve any issues at an early stage and therefore reduce the number of people making a complaint.

Table 18: Total number of adult complaints, 2010-2019

2011-12	2012-13	2013-14	2014-15	2015-16	2016-17	2017-18	2018-19
16	49	78	21	44	37	33	19

6.3   Table 19 details the number and percentage of stage 1 complaints received by each team.

Table 19: Adult complaints received by service

Teams	2018-19		2017-18	
	Number	%	Number	%
People with disabilities and older people's team	5	28%	17	51%
Community mental health team	1	5%	3	9%
Community team for people with learning Difficulties	1	5%	1	3%
Hospital team	1	5%	1	3%
Occupational therapy	0	0%	1	3%
Short term team	2	12%	1	3%
Adult financial assessments	2	12%	1	3%
Safeguarding	0	0%	1	3%
Partner agencies (including care homes)	6	33%	7	22%
Total	**19**	**100%**	**33**	**100%**

6.4 Most of the complaints to teams remained at a similar number to 2017-18 however complaints to the people with disabilities and older people's team fell from 17 to 5. This is a reduction of just over 70% of those received in 2017-18. This is largely due to teams within this area now identifying potential problems much earlier and addressing the issues and resolving them at an informal stage where this is possible.

6.5 The overall number of complaints for Adult Social Care is very low compared to the number of people that are supported. At any one time in the year 1,400 people are supported by the Physical Disabilities and Older People team.

6.6 The area receiving the highest number of complaints, 6 (33%), were external providers working with RBWM clients, such as care agencies and homes. These providers have their own complaints procedures, however if they are services procured by adult services then the complaint may be directed towards the local authority if the person prefers to do this.

6.7 The number of complaints received by the council relating to external providers is also low compared to the number of people being provided with ongoing support. All complaints received relating to providers are managed through the contract monitoring process.

Themes

6.8 Table 20 details the number and percentage of complaints received by theme during 2018-19.

Table 20: Themes of adult complaints received

	2018-19		2017-18	
Type of Complaint	**Number**	**%**	**Number**	**%**
Unhappy with how a situation/incident was handled	5	26%	5	15%
Attitude or behaviour of staff	3	17%	4	13%
Unhappy with the decision made	2	11%	3	9%
Did not follow policy	2	11%	0	0%
Services being delivered at lower standard than is set out in our policy	1	5%	9	27%
Safeguarding	1	5%	5	15%
Lack of action - did not do what we said we would do	1	5%	3	9%
Failed to follow timescales	1	5%	1	3%
Require help or intervention	1	5%	1	3%
Failed to take all information into	1	5%	0	0%
Gave the wrong information	1	5%	0	0%
Breach of data protection	0	0%	1	3%
Inaccurate information recorded	0	0%	1	3%
Total	**19**	**100%**	**33**	**100%**

6.9   The highest number of complaints received were recorded under the theme of 'unhappy with how a situation/incident was handled'. It is difficult, given an overall low number of complaints and a high number of themes, to say how meaningful these figures are.

Timescales

6.10   Table 21 details the number and percentage of complaints responded to within timescales for each team.

Table 21: Adult complaints responded to within timescales

Teams	2018-19			2017-18		
	Number of complaints	In timescales	%	Number of complaints	In timescales	%
People with disabilities and Older people's team	5	2	40%	17	10	59%
Community mental health team	1	1	100%	3	0	0%
Community team for people with learning difficulties	1	1	100%	1	1	100%
Hospital team	1	1	100%	1	0	0%
Occupational therapy	0	0	0%	1	1	100%
Short term team	3	3	100%	1	0	0%
Adult financial assessments	2	1	50%	1	1	100%
Safeguarding	0	0	0%	1	0	0%
Partner agencies (including care homes)	6	5	83%	7	5	71%
TOTAL	**19**	**14**	**74%**	**33**	**18**	**55%**

6.11   Although there is no specified limit for statutory complaints about adult social care the council's target for dealing with adult services complaints is 10 to 20 working days. This timescale may be increased for complaints that are particularly complicated. Of the 19 complaints received during 2018-19, 74% were responded to within agreed timescales. This is a significant improvement on 2017-18 where 55% were responded to within timescales.

6.12   The complaints team and managers in Optalis have worked together to tighten the processes in place and this continues to have a positive impact on achieving timescales.

6.13   See table 22 for outcomes of complaints

Table 22: Outcome of complaints

	Fully upheld	Partially upheld	Not upheld	% Fully or partially upheld
2018-19	2	11	6	68%
2017-18	13	9	10	61%

Complainants

6.14   The majority of complaints made in 2018-19 were by the son or daughter of the person receiving the service, followed by the person themselves, see table 23 for full breakdown.

Table 23: People making adult complaints

Who made the complaint	Number	%
Son or Daughter of the person receiving the service	8	42%
Person receiving the service	4	21%
Spouse or partner	3	16%
Extended family	2	11%
Parent of person receiving the service	1	5%
Advocate	1	5%
Total	**19**	**100%**

Complaints and enquiries to the LGSCO

6.15 The LGSCO made decisions about 12 complaints and enquiries for adult services that were referred to them following complaints that were made about services provided by or on behalf of adult social care. Eight were decided following detailed enquiries and of these, eight were upheld. The remaining four were closed without a full investigation. See appendix 1 for details on 2018-19 decisions.

6.16 Of the eight complaints upheld:
- 1 complaint related to concerns in 2015
- 2 complaints related to concerns in 2016
- 4 complaints related to concerns in 2017
- 1 complaint related to concerns in 2018

6.17 Although the original dates of the concerns spanned a wide range, all complaints regarding these were received by the complaints and compliments team between June 2017 and May 2018, with the exception of 2 which were first considered by care providers before escalation to the LGSCO. The LGSCO direct their enquiries to the council as the commissioning and procurement of those services was via the council and Optalis.

Learning from complaints

6.18 Table 24 picks up some of the learning across adult services during 2018-19.

Table 24: Learning from adult complaints

Complaint area	Actions and learning
Day centre	• The service has been asked to re-look at their procedure when customers go into hospital, to ensure that the process is clear for all staff to follow, with a simple check list in place.
Domiciliary care	• The council has implemented an action plan to improve the service from a care agency. This includes monitoring the care agency's daily records for three months to ensure it is delivering the service expected
PDOPT	• Training was delivered around duties under the Care Act 2014 and the

Complaint area	Actions and learning
	Mental Capacity Act 2005.
General	• There is ongoing training with staff to ensure that any issues are resolved at the earliest point to prevent complaints arising.

Compliments

6.19 Adult services received 19 compliments during 2018-19. This is a decrease from 2017-18 when there were 50 compliments received. Table 25 shows the breakdown of compliments across adult services.

Table 25: Compliments by service

Teams	2018-19		2017-18	
	Number	%	Number	%
People with Disabilities and Older People's Team	9	47%	24	41%
Short Term Team	6	32%	13	23%
Occupational Therapy	2	11%	3	5%
Hospital Team	1	5%	2	4%
Community Mental Health Team	1	5%	1	2%
Community Team for People with Learning Difficulties	0	0%	12	21%
Access Team	0	0%	2	4%
Total	**19**	**100%**	**57**	**100%**

6.20 As with complaints, the highest number of compliments received were for the people with disabilities and older people's team.

6.21 This is a very low level of compliments for adult services, which has been higher in recent years. It is not clear why the number of compliments has fallen; but is possible that they are not being passed to the complaints and compliments team for logging. Reminders to send compliments on is being reiterated in team meetings so we have a more realistic level in future reports.

6.22 Table 26 shows examples of compliments received across adult services.

Table 26: Examples of compliments received

Service	Compliment received
PDOPT	• I wanted to express my thanks for arranging this transfer from hospital for my mother. It was achieved so quickly and with few or no complications. I am so impressed with this service, which I know was orchestrated by yourself and the team at the care home. • Thank you so much for all your hard work and helpfulness. I know that you have had to go far beyond the basic ordering of a chair for me and I appreciate it. You have done everything with cheerfulness and attention to detail. You are an inspiration and I'm sure that you brighten, not just mine

Service	Compliment received
	but everybody's day when they see you.
Short Term Team	• The carers have given me a very useful and worthwhile service over the past few weeks. They were very pleasant and patient with me and have given enormous help in arranging aids within the house and advising on an exercise programme, all of which I have found of great benefit. I am very grateful to them and also to the RBWM for arranging this service.
CMHT	• I just wanted to say thank you for all you have done to successfully get him into an environment where he can start a recovery. As you know this has not been easy, but I really appreciate what you have done, it is such a relief to Dad and myself. He was not in a good place as he left as I am sure Dad will have told you, so we are looking forward to hearing that he is making some progress.

7. CHILDREN'S SERVICES

Overall children's complaints summary

7.1 In 2018-19 there were 38 children's complaints, 28 of these followed the statutory children's complaints process and 10 followed the formal corporate complaints process. The distinction between statutory and formal corporate complaints was not made in 2017-18 so the figures are not directly comparable. Together these represent 6% of all complaints received.

Internal process
- 81% of complaints were either fully or partially upheld.
- 54% were responded to within timescales.
- 93 compliments were received

External process
- 8 complaints or enquiries were decided by the LGSCO; of these, none were investigated.
  - One was investigated
  - One was upheld
  - Zero were not upheld.

Complaints received

7.2 The total number of complaints received for children's services during 2018-19 (both statutory and formal corporate) has remained at a similar level to 2017-18. See table 27 for a breakdown

Table 27: Children Services overview

Children's services statutory complaints	2018-19	2017-18
Stage 1	28	37

Children's services corporate complaints	2018-19
Stage 1	10

7.3 The number of complaints relating to children's social care services has varied over the last eight years, peaking at 90 in 2013-14, see table 28 for a breakdown for the period 2011-18.

Table 28: Complaints received comparison 2011-18

	2011-12	2012-13	2013-14	2014-15	2015-16	2016-17	2017-18	2018-19
Stage 1	18	43	90	61	81	36	37	38

7.4 Table 29 give a breakdown by team of statutory complaints.

Table 29: Complaints received in 2018-19 and 2017-18

	2018-19		2017-18	
Teams	Number	%	Number	%
Children & Young People Disabilities Service (including SEND)	9	33%	6	16%
Pods (child protection, children in need and children in care)	8	30%	14	38%

Teams	2018-19		2017-18	
	Number	%	Number	%
School transport	3	11%	5	14%
Leaving care	3	11%	0	0%
Duty and assessment	2	7%	1	3%
Youth Services	1	4%	0	0%
Multi-Agency Safeguarding Hub	1	4%	7	19%
Education	1	0%	0	0%
Family placement team (fostering)	0	0%	2	5%
Children's centres	0	0%	1	3%
Frontline	0	0%	1	3%
Total	**28**	**100%**	**37**	**100%**

7.5   In 2018-19, the majority of statutory complaints received related to CYPDS, In addition four of the corporate complaints were also within this team. There are approximately 900 children with Special Educational Needs Disabilities and there has been a significant national growth in the demand for EHCPs. A strong code of practice regarding parental choice causes disappointment and dissatisfaction for some families when we disagree with their preferences.

Themes

7.6   Table 30 sets out the themes of children's complaints during 2018-19.

Table 30: Themes of complaints

Type of Complaint	2018-19		2017-18	
	Number	%	Number	%
Did not follow policy	8	21%	7	19%
Lack of action - did not do what we said we would	7	18%	6	16%
Situation handled incorrectly	7	18%	3	8%
Require help, intervention or guidance	6	16%	0	0%
Attitude or behaviour of staff	4	11%	6	16%
Failed to follow timescales	2	5%	1	3%
Services delivered at a lower standard than in our policy	1	3%	4	11%
Unhappy with the decision made	1	3%	4	11%
Breach of DP	1	3%	0	0%
Safeguarding	1	2%	2	5%
Gave the wrong information	0	0%	2	5%
Failed to take all information into account	0	0%	1	3%
Inaccurate or wrong information recorded	0	0%	1	3%
Total	**38**	**100%**	**37**	**100%**

7.7   The highest number of complaints received were categorised as did not follow policy, process or the law followed by lack of action and situation handled incorrectly. While the number fully upheld is low the themes can, in themselves, give an indication of how it feels to be involved with Children's Social Care and could indicate an opportunity for reflection by and with practitioners. For that reason, the complaints and compliments team leader attends the Performance Board, so that these themes can be discussed and actions taken accordingly.

Timescales

7.8   The timescale for dealing with a stage 1 complaint is 10 working days. However, this can be extended to 20 working days for more complex complaints or if additional time is required.

7.9   Table 32 details the number and percentage of complaints responded to within timescales for each service.

Table 32: Response timescales

Teams	2018-19			2017-18		
	Complaints	Number in timescales	%	Complaints	Number in timescales	%
Pods (child protection, children in need and children in care)	8	2	25%	14	4	29%
Multi-Agency Safeguarding Hub	1	1	100%	7	0	0%
Children & Young People Disabilities Service	20	11	55%	6	2	33%
Duty and assessment	2	0	0%	1	0	0%
Family placement team	0	0	0%	2	1	50%
Children's centres	0	0	0%	1	1	100%
School transport	2	1	50%	5	2	40%
Frontline	0	0	0%	1	0	0%
Education	1	1	100%	0	0	0%
Leaving care	3	2	67%	0	0	0%
Youth Services	1	0	0%	0	0	0%
Total	**38**	**18**	**47%**	**37**	**10**	**27%**

7.10   Of the 38 complaints that were received during 2018-19, 47% were responded to within timescales, which is an improvement from 2017-18, when 27% were responded to within timescales

7.11 The complaints and compliments team continue to send weekly reports of outstanding complaints to heads of services and directors. They also meet with the managers investigating complaints to clarify the complaint and ensure the scope of this is understood. This is having a positive impact not just on the timeliness but also the quality of complaints responses.

7.12 See table 33 for the outcome of complaints.

Table 33: Outcome of complaints

	Fully upheld	Partially upheld	Not upheld	Not yet concluded	% Fully or partially upheld
2018-19	9	21	7	1	81%
2017-18	6	14	7	10	74%

*It should be noted that the category 'not yet concluded' means that the complaint response had not been finalised at the time that the data snapshot was taken for this report.

Complainants

7.13 The vast majority of complaints made in 2018-19 were by parents. One formal complaint was made by a young person, which is currently being investigated under stage 2 of the statutory children's complaints process, see table 31 for further detail.

Table 31: People making children's complaints

Who made the complaint	Number	%
Child/young person	1	3
Advocate	2	5
Parent/Step parent/Adoptive parent	34	89
Carer	1	3
Total	**38**	**100**

Stage 2 complaints

7.14 Four stage 2 complaints were resolved in 2018-19. Two of these were investigated under the statutory children's complaints process and two under the children's formal corporate complaints process. In all cases the outcome was 'partially upheld'.

7.15 One statutory complaint was resolved at stage 3 in 2018-19. This was escalated from a stage 1 complaint made in 2016-17. Elements of the complaint were upheld by the stage 3 panel.

7.16 Complaints resolved under the formal corporate complaints process are reported within the children's services annual report to give an overview of all complaints about children's services.

Complaints and enquiries to the LGSCO

7.17 The LGSCO made decisions on eight enquiries regarding complaints for children's services during 2018-19. One, which was started in a previous year was completed and upheld. The remaining seven were not investigated. See appendix 1 for details on 2018-19 decisions.

Representations

7.18 Representations are comments by children and young people, normally within a child's review. These can be positive or negative and are acted upon by referring these comments to the social care team working with the child or young person so this can be acted upon and responded to by that team.

7.19 Children's services are now capturing views through 'My Say' and through the online feedback forms and will be reported upon within Achieving for Children's annual reports in 2019-20.

7.20 If a child or young person makes a complaint they are supported to appropriately use the compliments and complaints service.

Case concerns

7.21 In addition to complaints under the children's services statutory complaints and the formal corporate complaints processes, we have captured information regarding case concerns. Case concerns are recorded when an issue has been raised with the complaints and compliments team but has been dealt with informally by children's services.

7.22 Figures for case concerns do not count towards the overall number of complaints but are useful to help identify issues and help promote timely resolutions. In addition they can show if there is a pattern if a complaint is raised later.

7.23 In 2018-19 there were 11 case concerns recorded. Table 35 shows the split across children's services for case concerns received.

Table 35: Case concerns across children's services 2018-19

Leaving care	Pods	Transport	CYPDS	MASH	School admissions
2	3	3	1	1	1

Learning from complaints

7.21 Table 36 sets out learning from children's complaints

Table 36: Learning from children's complaints

Complaint area	Actions and learning
Children and young people disability service	• Consideration will always be given to each parent regarding sharing of email content and other information between separated parents without agreement, unless there are immediate safeguarding concerns. • Further documentation is being developed to clarify the difference between supported contact, rather than supervised contact for young people over 18 years of age.
Leaving Care team	• The Local Authority now have a designated 16+/ Care Leavers team

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Complaint area	Actions and learning
	which will ensure that young people in care and young asylum seekers are given the right support and work is progressed as quickly as possible.
Pods	• Any Child in Need meetings or similar is now chaired by a Manager. • Within Team Meetings we have discussed with the managers and staff the importance of agreed actions being followed up within timescales, alongside realistic timescales being initially set.
General	• Actions from responses are now being captured. Meetings are being put in place with the complaints team in order to ensure that all learning is captured and acted upon
Business Support	• There has been significant learning around 'better communication' and our Business Support Staff have attended 'Customer Service' Training.

Compliments

7.19 93 compliments were recorded for children's service in 2018-19. This is a similar amount to the 97 compliments recorded in 2017-18, see table 37 for a full breakdown.

Table 37: Number of compliments by children's services teams

Teams	2018-19		2017-18	
	Number of compliments	%	Number of compliments	%
Youth services	33	36%	44	45%
Pods	25	27%	16	16%
CYPDS	8	9%	14	14%
Duty and assessment and MASH	1	1%	6	6%
Education and School admissions	11	12%	5	5%
Children's centres	3	3%	3	3%
Family placement team	2	2%	3	3%
Frontline student team	0	0%	3	3%
Educational psychology	1	1%	1	1%
Leaving care	2	2%	1	1%
School transport	2	2%	1	1%
LADO	1	1%	0	n/a
Youth Offending Team	4	4%	0	n/a
TOTAL	**93**	**100%**	**97**	**100%**

7.20 Table 38 shows examples of compliments received across children's services.

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Table 38: Examples of compliments received

Service	Compliment received
Youth Service	• I don't know whether you remember me, but you were my connexions advisor and much more about 10 years ago. I was shocked to see that you are still running Esteem, I'm glad that it has done so well and people speak so highly of it. Can I just thank you for all you've done for me, you managed to get me up, out, socialising and into education – I've finished my degree in Childhood and Youth at Sussex with a First!! I would never have been in this position had you not worked so hard.
CYPDS	• We saw both staff members within about half an hour of you leaving our house and all equipment delivered to us by 4pm! That's what I call a brilliant service, couldn't fault it!
Family placement team	• I am sole carer for the children. I am sure that without my supervising social worker's support and care I would find it much harder. It can be a very unsettling time when you have a change of Supervising Social worker that you have built a professional relationship with but immediately she just seemed to get an understanding of my situation and made a smooth transition. Ever since then she has gently guided me in regards with training, log keeping and is always ready with advice and encouragement. I believe she is a real asset to your organisation and hope you value her as much as I do.
Leaving Care	• Thank you so much for your time and kindness without you I won't be where I am now you are big part of my life even if I don't keep in touch I always have you in my thoughts.

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Appendices

LGSCO Annual Letter 2018-19

24 July 2019

By email

Duncan Sharkey
Managing Director
Royal Borough of Windsor and Maidenhead Council

Dear Mr Sharkey

Annual Review letter 2019

I write to you with our annual summary of statistics on the complaints made to the Local Government and Social Care Ombudsman about your authority for the year ending 31 March 2019. The enclosed tables present the number of complaints and enquiries received about your authority, the decisions we made, and your authority's compliance with recommendations during the period. I hope this information will prove helpful in assessing your authority's performance in handling complaints.

Complaint statistics

As ever, I would stress that the number of complaints, taken alone, is not necessarily a reliable indicator of an authority's performance. The volume of complaints should be considered alongside the uphold rate (how often we found fault when we investigated a complaint), and alongside statistics that indicate your authority's willingness to accept fault and put things right when they go wrong. We also provide a figure for the number of cases where your authority provided a satisfactory remedy before the complaint reached us, and new statistics about your authority's compliance with recommendations we have made; both of which offer a more comprehensive and insightful view of your authority's approach to complaint handling.

The new statistics on compliance are the result of a series of changes we have made to how we make and monitor our recommendations to remedy the fault we find. Our recommendations are specific and often include a time-frame for completion, allowing us to follow up with authorities and seek evidence that recommendations have been implemented. These changes mean we can provide these new statistics about your authority's compliance with our recommendations.

I want to emphasise the statistics in this letter reflect the data we hold and may not necessarily align with the data your authority holds. For example, our numbers include

enquiries from people we signpost back to your authority, some of whom may never contact you.

In line with usual practice, we are publishing our annual data for all authorities on our website, alongside our annual review of local government complaints. For the first time, this includes data on authorities' compliance with our recommendations. This collated data further aids the scrutiny of local services and we encourage you to share learning from the report, which highlights key cases we have investigated during the year.

Last year I commented on the delay in your Council responding to our enquiries and my Assistant Ombudsman and I met with your senior officers to discuss this. I am pleased to say the changes the Council has made have resulted in a better position during the year. I welcome this improvement in your Council's liaison with my office and hope to see it continue.

New interactive data map

In recent years we have been taking steps to move away from a simplistic focus on complaint volumes and instead focus on the lessons learned and the wider improvements we can achieve through our recommendations to improve services for the many. Our ambition is outlined in our corporate strategy 2018-21 and commits us to publishing the outcomes of our investigations and the occasions our recommendations result in improvements for local services.

The result of this work is the launch of an interactive map of council performance on our website later this month. Your Council's Performance shows annual performance data for all councils in England, with links to our published decision statements, public interest reports, annual letters and information about service improvements that have been agreed by each council. It also highlights those instances where your authority offered a suitable remedy to resolve a complaint before the matter came to us, and your authority's compliance with the recommendations we have made to remedy complaints.

The intention of this new tool is to place a focus on your authority's compliance with investigations. It is a useful snapshot of the service improvement recommendations your authority has agreed to. It also highlights the wider outcomes of our investigations to the public, advocacy and advice organisations, and others who have a role in holding local councils to account.

I hope you, and colleagues, find the map a useful addition to the data we publish. We are the first UK public sector ombudsman scheme to provide compliance data in such a way and believe the launch of this innovative work will lead to improved scrutiny of councils as well as providing increased recognition to the improvements councils have agreed to make following our interventions.

Complaint handling training

We have a well-established and successful training programme supporting local authorities and independent care providers to help improve local complaint handling. In 2018-19 we delivered 71 courses, training more than 900 people, including our first 'open courses' in Effective Complaint Handling for local authorities. Due to their popularity we are running six

more open courses for local authorities in 2019-20, in York, Manchester, Coventry and London. To find out more visit www.lgo.org.uk/training.

Finally, I am conscious of the resource pressures that many authorities are working within, and which are often the context for the problems that we investigate. In response to that situation we have published a significant piece of research this year looking at some of the common issues we are finding as a result of change and budget constraints. Called, Under Pressure, this report provides a contribution to the debate about how local government can navigate the unprecedented changes affecting the sector. I commend this to you, along with our revised guidance on Good Administrative Practice. I hope that together these are a timely reminder of the value of getting the basics right at a time of great change.

Yours sincerely,

Michael King
Local Government and Social Care Ombudsman
Chair, Commission for Local Administration in England

Local Authority Report: Royal Borough of Windsor and Maidenhead Council
For the Period Ending: 31/03/2019

For further information on how to interpret our statistics, please visit our website

Complaints and enquiries received

Adult Care Services	Benefits and Tax	Corporate and Other Services	Education and Children's Services	Environment Services	Highways and Transport	Housing	Planning and Development	Other	Total
13	2	5	9	4	1	5	4	1	44

Decisions made

				Detailed Investigations			
Incomplete or Invalid	Advice Given	Referred back for Local Resolution	Closed After Initial Enquiries	Not Upheld	Upheld	Uphold Rate (%)	Total
3	0	15	11	5	12	71	46

Note: The uphold rate shows how often we found evidence of fault. It is expressed as a percentage of the total number of detailed investigations we completed.

Satisfactory remedy provided by authority

Upheld cases where the authority had provided a satisfactory remedy before the complaint reached the Ombudsman	% of upheld cases
0	0

Note: These are the cases in which we decided that, while the authority did get things wrong, it offered a satisfactory way to resolve it before the complaint came to us.

Compliance with Ombudsman recommendations

Complaints where compliance with the recommended remedy was recorded during the year*	Complaints where the authority complied with our recommendations on-time	Complaints where the authority complied with our recommendations late	Complaints where the authority has not complied with our recommendations	
13	12	1	0	Number
	100%		-	Compliance rate**

Notes:
* This is the number of complaints where we have recorded a response (or failure to respond) to our recommendation for a remedy during the reporting year. This includes complaints that may have been decided in the preceding year but where the data for compliance falls within the current reporting year.
** The compliance rate is based on the number of complaints where the authority has provided evidence of their compliance with our recommendations to remedy a fault. This includes instances where an authority has accepted and implemented our recommendation but provided late evidence of that.

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Report Title:	**RBWM risk management report**
Contains Confidential or Exempt Information?	No - Part I
Member reporting:	Councillor Hilton, Lead Member for Finance
Meeting and Date:	Corporate Services overview and scrutiny panel - 25 September 2019
Responsible Officer(s):	Duncan Sharkey, Managing Director and Rob Stubbs, Deputy Director and Head of Finance
Wards affected:	None

REPORT SUMMARY

1. This report sets out how satisfactory risk management is in place for RBWM as part of its governance arrangements.
2. It includes the key strategic risks and how they are monitored and managed.

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1.   DETAILS OF RECOMMENDATION(S)

RECOMMENDATION: That the corporate services overview and scrutiny panel notes the report and:

    i)   Approves this approach to managing risk.

2.   REASON(S) FOR RECOMMENDATION(S) AND OPTIONS CONSIDERED

    Options

    Table 1: Options arising from this report

Option	Comments
To accept this report. **This is the recommended option.**	The council is required to publish an annual governance statement in which a central requirement is to demonstrate how it manages risk.
Not accept this report. This is not recommended.	Without a risk management framework the council may be exposed to the impact of unnecessary levels of or avoidable risks by not focussing resources where they are not needed.

2.1   Risk management is a governance process open to scrutiny from councillors and the public at the council's audit and performance review panel meetings.

2.2   If the council makes sound use of risk management processes it supports good performance and effective service delivery to residents.

2.3   The corporate risk register records the risks relating to the council's objectives. The purpose of risk analysis is to help decision-makers get a better feel for a

realistic range of possibilities, what drives that uncertainty and hence where efforts can be focussed to manage this uncertainty.

2.4 The risk registers are pertinent to the point in time at which they are produced and require free thinking by those who put them together. Anything that could inhibit the way in which such risks are expressed would impair the quality of decision making when determining the most appropriate response to a risk.

2.5 The potentially most damaging risks are classified as key risks. The inclusion of risks within any level of risk register does not inevitably mean there is a problem – what it signifies is that officers are aware of potential risks and have devised strategies for the implementation of mitigating controls.

2.6 Appendix A contains a current summary of the key risks. These risks were last presented to members at the meeting of the audit and performance review panel 9 April 2019. There have been no additions or removals from this schedule since then.

2.7 Members are regularly notified of the key risks where named as the risk owner either by direct information from the risk and insurance manager or as part of lead member briefings. Officer risk owners are tasked with ensuring that any comments by members are reflected in the assessment.

2.8 Risk reports are reviewed and debated at CLT meetings. If risks are considered to be of such low impact that there is little reason that ongoing monitoring is beneficial then they are removed from the risk register.

3. KEY IMPLICATIONS

3.1 **Table 2: Key Implications**

Outcome	Unmet	Met	Exceeded	Significantly Exceeded	Date of delivery
Lead officers and members are engaged in quarterly risk reviews of the risk register - the nature of the threat and the progress on mitigations.	Risks are left without officer or member attention.	Quarterly reviews.	Risks are reviewed more frequently than quarterly.	None	Ongoing by quarterly review.
Officers and members make strategic, operational and investment decisions around	Risks are left without officer or member attention.	Monthly reviews.	Risks are reviewed more frequently than monthly.	None.	Ongoing until conclusion as part of project management.

Outcome	Unmet	Met	Exceeded	Significantly Exceeded	Date of delivery
projects with the risks in mind.					

4. FINANCIAL DETAILS / VALUE FOR MONEY

4.1 No financial implications. Any resources for mitigations would depend on the existing budgets.

5. LEGAL IMPLICATIONS

5.1 There are potential legal implications should a risk occur to the council is not prepared for. The purpose of risk management is to provide awareness of these so that management can make a risk based judgement.

5.2 The council must comply with regulations[1] by publishing an annual governance statement which demonstrates how it manages risk.

6. RISK MANAGEMENT

Table 3: Impact of risk and mitigation

Risks	Uncontrolled risk	Controls	Controlled risk
HIGH The council fails to make good use of risk management processes. Risk register ref: IRM0003	Management and members have insufficient awareness of those risks which carry the potential to severely damage the organisation and affect residents..	• Risks are reviewed by risk owners, the senior management team and members. • The overview and scrutiny panel provides a mechanism for examination of the process.	LOW

7. POTENTIAL IMPACTS

7.1 Equalities. None directly although some individual risks may contain obligations.

7.2 Climate change/sustainability. None directly although some individual risks may contain associated obligations.

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[1] Regulation 6(2) of the Accounts and Audit Regulations 2015

7.3 Data Protection/GDPR. None directly although some individual risks may contain obligations.

8. CONSULTATION

8.1 Consultations take place with the former audit and performance review panel, corporate leadership team, heads of service and the shared audit and investigation service.

9. APPENDICES

9.1.1 This report is supported by two appendices:
  - A – heat map showing assessment of current key risk impact/likelihoods
  - B – detail supporting the key **strategic risk** element of appendix A.

10. BACKGROUND DOCUMENTS

10.1 This report is not supported by any background documents.

11. CONSULTATION (MANDATORY)

Name of consultee	Post held	Date sent	Date returned
Cllr Hilton	Lead Member for Finance	16/09/19	16/09/19
Duncan Sharkey	Managing Director	13/09/19	
Russell O'Keefe	Executive Director	13/09/19	
Andy Jeffs	Executive Director	13/09/19	
Rob Stubbs	Head of Finance	12/09/19	
Elaine Browne	Interim Head of Law and Governance	13/09/19	
Nikki Craig	Head of HR and Corporate Projects	13/09/19	
Louisa Dean	Communications	13/09/19	
Kevin McDaniel	Director of Children's Services	13/09/19	
Hilary Hall	Deputy Director of Commissioning and Strategy	13/09/19	16/09/19
	Other e.g. external	n/a	

REPORT HISTORY

Decision type: For information	Urgency item? No	To Follow item? No.
Report Author: Steve Mappley, insurance and risk manager, 01628 796202		

	1 Minor	2 Moderate	3 Major	4 Extreme
4 Very Likely				
3 Likely			Critical event resilience Community protection Children's safeguarding Waste management	Brexit impications
2 Unlikely		Flooding response Adult safeguarding School buildings School improvement	Maidenhead regen Data security Data breach Tree management Borough Local Plan Hospital discharge Adult social care Flood resilience IT infrastructure	Building safety Fire safety Security Better Care Fund Pensions
1 Very Unlikely			Council Tax billing S106 monies	MTFP Commissioned services

Probability (vertical axis)

Impact (horizontal axis)

Detailed Risk Information

Current Risk Rating	Risk Ref	Summary	Assigned to	Next review date
12	RBWM0015	**Brexit** This Brexit risk focuses on the ability of the council services to prepare for the UK departure from the EU originally scheduled by the government for 29/03/19, then for 12/04/19 with an emergency EU summit then making the deadline 31 October 2019. As at 12/09/19, it is not known what the exit deal will look like and despite what parliament have indicated, the government are stating the prospect of a no deal scenario remains real. In such a situation consumers, businesses and public bodies would have to respond immediately to changes as result of leaving the EU. The publication in the Sunday Times of the Government's own document on potential effects, 'Operation Yellowhammer', suggests a rational awareness of what could happen. Potential impacts depending on the nature of the negotiations at the deadline include: - Inflation, increased regulation and uncertainty could affect the council's tenders i.e. less bidders or rising costs for services. - Impact on our supply chains, both with direct tier suppliers and their sub-contractor network potentially increasing cost and reprioritisation of resources. There is a risk that a complete failure in supply e.g. Carillion from key suppliers could be felt. - Resilience of contracted services / workforce. With 46 care homes, if providers struggle with workforce resilience there could be higher demands on statutory services. - Any post-Brexit arrangement that results in greater friction around data transfers between the UK and the EU could present problems. Office 365 and Microsoft Azure presently host data for us in Europe. Our IT Helpdesk is hosted in Germany. - SMEs will likely be the least resilient in the event of any economic downturn which could increase the take up of revenue and benefits services, housing advice, financial assistance if this impacts families/individuals. RBWM is unaware of any big business relocations/loss of business rates. - In the event of higher demands on public services, front facing services in particular may find difficulty in providing the quality and speed of customer provision based on current resource levels. - Transition period instability could result in increased need for signposting; e.g. elections/voting information/issues around settled status. - Increases in anti-social behaviour e.g. if the government were to compromise on the question of EU citizens' access to the UK labour market in order to secure a trade deal, there is potential for a voter backlash on immigration, with worrying implications for community cohesion. - There could be a risk to delay in the projected timetable of regeneration if there is a skills/workforce shortage in the construction industry.	CLT with Andy Jeffs leading	08/11/2019
9	CMT0040	**Resilience to major critical event** Insufficient local community resilience which could lead to residents being without the necessary assistance and increased financial impact on RBWM should a critical event occur. Underdeveloped and untested business continuity planning may reduce the ability of the council to provide critical functions in the event of emergency situation. Avoid single officer point of failure to fulfil duties under Civil Contingencies Act.	David Scott	07/11/2019

Detailed Risk Information

Current Risk Rating	Risk Ref	Summary	Assigned To	Next review date
9	ENFOR0002	**Community protection** Failure to meet preventative statutory obligations around community protection results in: a. death or serious illness/injury of residents; b. public health implications from spread of notifiable disease and decimation of local/national farming economy consequent prosecution, fines, publicity. c. National government intervention. d. Reputational damage to the council. Failure to meet minimum legislative requirements for 1) food, 2) health and safety, 3) housing, 4) environmental protection for contaminated land. There is no central government requirement for an animal health policy nor is there a Defra SDP to comply with any more. (Instead a local inspection plan is drafted annually which targets inspection of 100% of high-risk premises).	David Scott	21/11/2019
9	SSS0011	**Children's safeguarding failure**. Nationally increasing levels of demand are putting pressure on all elements of the service. Lack of intelligence around unknown risk areas e.g. trafficking, child sexual exploitation (CSE) and County Lines could lead to major preventable injuries occurring. There is particular focus at present on issues related to continued exploitation of vulnerable people and children.	Kevin McDaniel	07/11/2019
9	WASTE0001	**Waste** There is the ongoing risk of ensuring that waste/recycling is collected from the bins as per resident expectations. The new collection contract was approved at Cabinet on 28 February to commence on 1 October 2019. There is risk that the changeover to a new contractor may not be seamless causing significant resident dissatisfaction and complaints. Sufficient mitigations are deemed to be in place but their effectiveness will not be clear until the changeover period is suitably mature, hence the current risk assessment is medium/high.	Hilary Hall	24/09/2019
8	BS0014	**Building safety** Failure to comply with statutory obligations e.g. legionella policy, asbestos policy, gas, electric policies etc leads to personal injury, damage and possible legal action. There is also exposure should any improvement notices not be carried out.	Russell O'Keefe	01/11/2019
8	BS0015	**Fire safety** Failure to carry out fire safety works to council properties including schools leads to increased exposure to fire risk, enforcement notice issued on inspection and reputation damage in event of fire. The probable key exposure to the council is not so much about the likelihood of a fire occurring but around being held culpable for not complying with its statutory duties regarding this hazard. (a) the financial level of fines that can be levied by fire safety inspectors should the organisation either not carry out a fire risk assessment and/or not act on its findings. This is compounded by very few property managers having sufficient understanding of the premises messages resulting from surveys e.g. over-occupancy, and, to a lesser extent, physical alterations e.g. alarms, fire doors; (b) a sudden need to inject money into a building should an improvement notice be served. There is insufficient funding to be able to get the necessary works completed.	Russell O'Keefe	30/10/2019

Detailed Risk Information

Current Risk Rating	Risk Ref	Summary	Assigned To	Next review date
8	CMT0039	**Security** The UK is facing threats and not just from groups inspired by al Qaida e.g, far right extremists, disenfranchised groups. There is the risk of security and community problems putting residents and visitors at risk of personal injury arising from the actions and behaviour of such groups, particularly in the area around Windsor. This is due to the high volume of visitors, the military and ceremonial links to the town centre and castle as well as being under the flight path. Clause 26 of the Counter Terrorism and Security Act requires LAs to establish panels (in RBWM's case, the Channel Panel) to assess the extent to which identified individuals are 'vulnerable to being drawn into terrorism'.	Andy Jeffs	20/09/2019
8	HSG0009	**Better Care Fund** 1. The pooled Better Care Fund budget (of which £12M is RBWM's) fails to deliver services that meet health and social care needs in an integrated way to reduce avoidable admissions to care homes and hospitals. 2. Failures could potentially lead to DoH intervention. This all culminates in less prevention work and additional cost to us and the NHS.	Hilary Hall	19/06/2019
8	PEN0001	**Pensions** Insufficient resources to meet demands leading to pension fund having a substantial deficit. The fund covers all 6 Berkshire unitaries along with over 200 other smaller scheme employers.	Kevin Taylor	22/01/2020
6	CORP0002	**Maidenhead regeneration** 1. There is a risk that we do not get the capital receipts we are anticipating to fund the various schemes we are using borrowing to initially progress. 2. Changes in the economy could affect the benefits that can be realised e.g. a loss of consumer confidence and rising build costs would affect the financial viability of schemes and could result in stalled development. 3. Ensuring effective join up of sites and infrastructure delivery.	Russell O'Keefe	27/11/2019
6	FOI0003	**Data security** (a) Serious external security breaches, (b) data loss or damage to data caused by inadequate information.	Andy Jeffs	23/09/2019
6	FOI0006	**Data breach** Statutory breach arising from non-compliance with the Data Protection Act 2018 leads to fines of up to €20m plus legal action costs following judicial remedies. Non-compliance can only be identified if a breach actually occurs. The type of information breach is key - only if significant harm is likely to arise from the breach are fines expected to be punitive. Regulators can also issue temporary or permanent bans on processing. Confidence level in accuracy of current risk assessment: medium.	Elaine Browne	22/11/2019
6	HE0011	**Tree management** Failure to undertake essential health and safety works to RBWM trees could lead to their collapse leading to property damage, injury, compensation claims, criticism. There are two areas: 1. Inadequate capacity to inspect (a) trees within parks, open spaces and cemeteries and (b) highways trees. 2. Failure to undertake the maintenance and safety works identified from inspection.	David Scott, Ben Smith, Hilary Hall	01/10/2019

Detailed Risk Information

Current Risk Rating	Risk Ref	Summary	Assigned To	Next review date
6	HPLAND0018	**Borough Local Plan** If we do not deliver sound Borough Local Plan we risk a) Increased pressure on our ability to demonstrate we have a five year supply of land for housing.This could lead to development taking place at locations and/or in a way we would not otherwise accept or to planning by appeals; b) Stagnation and failure to provide for a range of housing needs; c) Inability to resist inappropriate development with panel decisions being overturned on appeal; d) Failure to attract S106 and CIL (from April 2015 government regs restricted the use of s106 agreements and CIL will become the principle means of collecting financial contributions from new development); e) Local infrastructure not planning to cope with or take advantage of local development possibilities as part of Maidenhead regeneration including Crossrail. f) Failing to meet statutory responsibility to provide educational places for all borough residents. g) Challenge to the BLP, major planning enquiries including the 4 joint ventures taking place in Maidenhead. It is also important to note that the longer the process takes, the greater the risk events will impact on the process which then requires additional time and resource to consider.	Russell O'Keefe	01/10/2019
6	HSG0005	**Delayed hospital discharge** Under the Care Act hospitals have the right to fine their local social services if a patient's transfer is delayed for social-care related reasons. With an ageing population, medical advances and changing public expectations, the number of older people delayed from leaving hospital and transferring to residential care can accelerate very rapidly into increased costs on the council. People are living longer, typically remaining physically stronger for longer. More people are now becoming frail with dementia in the last 3 years of life which is when care is most needed. A certain amount of outstanding cases will always exist because of limited specialist placements for people with challenging conditions but this should not skew the risk assessment judgement.	Hilary Hall	30/09/2019
6	HSG0007	**Adult social care** Growth in number of older people with disabilities, children's services transitions and long term conditions leads to costs increasing beyond the capacity of council and the inability to meet critical needs in the long term. Wealth depleters constitute a significant risk to the council. New contract for domiciliary care is due to be let in August 2020 - there will inevitably be some volatility associated.	Hilary Hall	19/10/2019
6	PPS0012	**Flooding reslience** The borough has an inherent vulnerability to flooding. There is a risk that we have insufficient resilience to reduce the chance of an extensive and damaging flooding event which could otherwise lead to excessive and unnecessary disruption. The cause of this is not delivering the right schemes from the right level of investment. Caution should be used before withdrawing capital funding should no serious floods occur over an extended period of time. RBWM is the lead local flood risk authority.	Ben Smith	01/10/2019

Detailed Risk Information

Current Risk Rating	Risk Ref	Summary	Assigned To	Next review date
6	TECHAN0001	**IT infrastructure** If there is an IT infrastructure failure i.e. data storage infrastructure, systems access or total loss of council data centre then this could affect the ability of RBWM to function normally. Details are within the ICT risk register of which this is a summary. Causes: External cyber threats e.g. DDOS attacks. Loss/damage/denial of access to primary, secondary or hosted data centres. Accidental or deliberate loss of data or physical/logical failure to disk drive. Lapse of accreditation to Public Services Network. Physical or virtual server corruption or failure. This could lead to: - increased costs of downtime in the event of insufficient back up - expensive emergency service to rectify at short notice.	Andy Jeffs	22/11/2019
4	HE0010	**Flooding response** The borough has an inherent vulnerability to flooding. Localised flooding can result in disruption to residents. Sewer flooding is a particular problem in Cookham and Ascot. The EA indicate that the ground water levels are presently relatively low, so the risk of flooding is lower than if the ground water level was higher. What is less clear is how long it would take for the aquafers to fill so that the ground could not tolerate intensive rain.	David Scott	21/11/2019
4	HOF0006	**MTFP** RBWM may not be able to deal with any expenditure volatility because of a lack of a mid/long term strategy that successfully encompasses finance options/mitigations to match service demands and central government funding reduction i.e. MTFP fails.	Rob Stubbs	23/10/2019
4	HSG0008	**Adult safeguarding** Failure to ensure appropriate measures to meet safeguarding adult requirements leads to significant and preventable harm/death to vulnerable people.	Optalis – monitor by Hilary Hall	30/10/2019
4	SCHOOL0007	**School buildings** Failure to comply with legislation around and provide a service for monitoring and managing school building related risks such as fire, legionella and asbestos. As well as greater exposure to related hazards, without the correct certification around compliance, the chance of a DfE visit increases.	Kevin McDaniel	31/07/2019
4	SCHOOL0008	**School improvement** Schools are not improving at the rate required to remain in or achieve the top quartile performance. Schools are judged as below "Good" by Ofsted. The schools attainment rates are insufficient to make them competitive with their peers. Families choose to not use borough schools because of underperformance, resulting in smaller schools with a higher probability of further performance decline.	Kevin McDaniel	31/10/2019

Detailed Risk Information

Current Risk Rating	Risk Ref	Summary	Assigned To	Next review date
4	SCP0004	**Commissioned services** Council owned companies or major contractors delivering statutory and discretionary services on behalf of the council fail and/or go out of business as a result of increased demand or poor performance. Leads to: - Statutory services for children and adults not delivered. - Resident facing community services, such as highways or waste collection, not delivered. - Reputational damage to the council. - Potential risks to public health. - Vulnerable adults and children may be left more at risk. - Problems in maintaining the streetscene to a safe level leading to highways injuries/claims against the statutory highway authority.	Hilary Hall	30/09/2019
3	CUSTMA0009	**Council tax billing process** is not delivered accurately or on time causing reputation damage and potentially unenforceable debts. Failure, including that for any incorrectly presented precept, could lead to a rebilling exercise. We can only commence the final process once CTax is formally agreed, the police and fire precepts are set (and parish council precept if applicable). The bill must be correct to be enforceable. The presentation style of the numbers used on the bill is subject to legislative requirements and this can lead to explanatory notes being necessary e.g. rounding issues. Capita provide the software to generate the annual billing outputs but this is heavily reliant on RBWM providing and checking the data and presentation at various stages. The parameters are extensive for both CTax and benefits. An external print company is used to generate the bills. The head of service is the project manager and owner of the annual billing process.	Louise Freeth	21/09/2019
3	HPLAND0015	**S106 monies** Failure to identify and approve projects for the expenditure of S106 monies indicates lack of a clear strategy for the most resource effective use of the funding and will not bring benefits. Failure to identify the s106 monies will also affect the progress of the CIL Parishes will be getting a proportion of this money in future which means less revenue to support council schemes. The council is successful at claiming monies and there's an agreed list of spending. The risk is whether we are spending appropriately in accordance with the relevant legal agreement. Whilst there has been little challenge so far there is an exposure to having to repay the money.	Jenifer Jackson	30/09/2019

Risk Ref Headline Details	Implemented or Ongoing Controls	Current Rating & Risk Appetite Target	Controls not Fully Developed	Changes made at Last Review	Lead Member & Assigned to
RBWM00 15 **Brexit implications on the local authority.** This Brexit risk focuses on the ability of the council services to prepare for the UK departure from the EU originally scheduled by the government for 29/03/19, then for 12/04/19 with an emergency EU summit then making the deadline 31 October 2019. As at 12/09/19, it is not known what the exit deal will look like and despite what parliament have indicated, the government are stating the prospect of a no deal scenario remains real. In such a situation consumers, businesses and public bodies would have to respond immediately to changes as result of leaving the EU. The publication in the Sunday Times of the Government's own document on potential effects, 'Operation Yellowhammer', suggests a rational awareness of what could happen. Potential impacts depending on the nature of the negotiations at the deadline include: - Inflation, increased regulation and uncertainty could affect the council's tenders i.e. less bidders or rising costs for services. - Impact on our supply chains, both with direct tier suppliers and their sub-contractor network potentially increasing cost and reprioritisation of resources. There is a risk that a complete failure in supply e.g. Carillion from key suppliers could be felt. - Resilience of contracted services / workforce. With 46 care homes, if providers struggle with workforce resilience there could be higher demands on statutory services. - Any post-Brexit arrangement that results in greater friction around data transfers between the UK and the EU could present problems. Office 365 and Microsoft Azure presently host data for us in Europe. Our IT Helpdesk is hosted in Germany. - SMEs will likely be the least resilient in the event of any economic downturn which could increase the take up of revenue and benefits services, housing advice, financial assistance if this impacts families/individuals. RBWM is unaware of any big business relocations/loss of business rates. - In the event of higher demands on public services, front facing services in particular may find difficulty in providing the quality and speed of customer provision based on current resource levels.	1. Horizon scan future contracts expected to tender in 2019 and review the council's procurement strategy. 2. Guidance around the government's preparations for a no deal scenario stood down (May 19) although much remains valid. 3. Optalis maintain regular contract monitoring with care providers. None are currently reporting any risks associated with Brexit. 4. Specific awareness campaign for registered EU voters on arrangements in May 2019. 5. Vigilance through partner agencies. Community wardens and One Borough to be alert to resident/community concerns. 6. Data t/f -Microsoft etc confirm that this is part of their global platform so no issues with the physical access to data. 7. JV partners have assessments and mitigations in place. Some mitigations secured through RBWM contract terms on delays/costs.	12 High 6 - Medium Low	1. Work with front facing services to see if any increased cross-skilling can add resilience to teams e.g. CSC, Revs+Bens, Housing. 2. Brexit preparedness working group set up to meet weekly and RAG rate council position on key themes e.g. statutory services, regulatory services, supply chains, data handling.	Reviewed at CLT 07/08/19. No material changes.	CLT

Risk Ref Headline Details	Implemented or Ongoing Controls	Current Rating & Risk Appetite Target	Controls not Fully Developed	Changes made at Last Review	Lead Member & Assigned to
- Transition period instability could result in increased need for signposting; e.g. elections/voting information/issues around settled status. - Increases in anti-social behaviour e.g. if the government were to compromise on the question of EU citizens' access to the UK labour market in order to secure a trade deal, there is potential for a voter backlash on immigration, with worrying implications for community cohesion. - There could be a risk to delay in the projected timetable of regeneration if there is a skills/workforce shortage in the construction industry.					
CMT0040 **Fail to protect residents should an emergency incident occur** Insufficient local community resilience which could lead to residents being without the necessary assistance and increased financial impact on RBWM should a critical event occur. Underdeveloped and untested business continuity planning may reduce the ability of the council to provide critical functions in the event of emergency situation. Avoid single officer point of failure to fulfil duties under Civil Contingencies Act.	1. BCPs are continually updated to reflect BCP situations. Training sessions are set for the autumn with nominated officer leads. 2. Inter authority agreement in relation to joint emergency planning unit (JEPU) in place between RBWM, WBDC and BFBC. 3. There is an emergency planning out of hours rota of officers who have relevant roles and responsibilities. Held by control room. 4. Shared service for emergency planning. 5. Waste suppliers have confirmed their processes and arrangements in the event of severe weather. 6. Ensure sufficient resilience for IT systems/back ups in emergencies for the 24/7 control room or EOC. 7. Residential care homes have temporary alternative accommodation plans for vulnerable adults for use in emergency situations. 8. The need for contractors to have BCPs in place is part of the commissioning and contracting process (but no testing process).	9 Medium/High 6 - Medium Low	1. Engage specific service managers to cater for emergency response to all key risks e.g. flood, disease, major civic emergency. 2. Each service is responsible for developing BCP and the process is being embedded within the resilience framework under each HoS. 3. Provide appropriate training to CLT. 4. Test BCP's - both our own and those of our key contractors. 5. Develop and support community based emergency plans in conjunction with parish councils. 6. Ensure BCPs contain an information cascading mechanism so staff are notified of actions in the event of an emergency. 7. Identify and co-ordinate individuals for operational command for the EOC and ensure appropriate training and development. 8. New generator in Tinkers control room by November 2019. Enabling works commence 01/06/19.	Reviewed by DVS at CLT 07/08/19. Amended controls to reflect forthcoming BCP project work.	David Scott

Risk Ref Headline Details	Implemented or Ongoing Controls	Current Rating & Risk Appetite Target	Controls not Fully Developed	Changes made at Last Review	Lead Member & Assigned to
CMT0039 **Security** The UK is facing threats and not just from groups inspired by al Qaida e.g, far right extremists, disenfranchised groups. There is the risk of security and community problems putting residents and visitors at risk of personal injury arising from the actions and behaviour of such groups, particularly in the area around Windsor. This is due to the high volume of visitors, the military and ceremonial links to the town centre and castle as well as being under the flight path. Clause 26 of the Counter Terrorism and Security Act requires LAs to establish panels (in RBWM's case, the Channel Panel) to assess the extent to which identified individuals are 'vulnerable to being drawn into terrorism'.	1. Temporary HVM measures deployed in 2017 replaced by integrated permanent measures in 2019/20 (see controls in development). 2. Evacuation plan for Windsor in place. 3. Community safety partnership strategy and action plan in place, updated annually. 4. Close partnership working with police and military to share intelligence and ensure risks are reduced. 5. TOR for Channel Panel, (administered and chaired by RBWM) who assess risk and decide on support packages, refreshed in 18/19. 6. RBWM works closely with the One Borough group to build and maintain public inter-faith confidence in preventing all extremism.	8 Medium 8 - Medium	1. Permanent, integrated hostile vehicle mitigation measures in Windsor to ensure the safety of residents. Phase 1 in Sept 19. 2. Update reports from DVS to the CLT on Channel Panel and the Prevent strategy in 19/20 so there's annual visibility of these.	Added new controls to be developed.	Cllr Cannon with Cllr S Rayner for Prevent strategy where applicable Andy Jeffs
SCP0004 **Failure of commissioned service provision** Council owned companies or major contractors delivering statutory and discretionary services on behalf of the council fail and/or go out of business as a result of increased demand or poor performance. Leads to: - Statutory services for children and adults not delivered. - Resident facing community services, such as highways or waste collection, not delivered. - Reputational damage to the council. - Potential risks to public health. - Vulnerable adults and children may be left more at risk. - Problems in maintaining the streetscene to a safe level leading to highways injuries/claims against the statutory highway authority.	1. Robust governance arrangements at Member and officer levels in place and operating. 2. Make Highways Maintenance Mgt Plan risk based as per 2018 Code of Practice to show our rationale in case of legal challenge. 3. Identified contract managers in place. 4. Revised HMMP approved by Cabinet December 2015. 5. Change control mechanisms in place across all contracts. 6. Tight contract monitoring - quarterly and monthly contract meetings.	4 Low 4 - Low	1. Road categorisation project woven into HMMP.	Reviewed by HH 09/05/19. Minor changes around controls. Lead members amended.	Cllr Carroll Cllr S Rayner Cllr Johnson Cllr Clarke Hilary Hall

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Risk Ref Headline Details	Implemented or Ongoing Controls	Current Rating & Risk Appetite Target	Controls not Fully Developed	Changes made at Last Review	Lead Member & Assigned to
	7. Exit clauses/strategies negotiated and in place across all contracts. 8. Clear vision and business plans for all companies, aligned to the Council Plan. 9. Performance dashboard of key service and financial indicators - reviewed monthly and quarterly.				
HOF0006 **Expenditure volatility causes a significant departure from the financial plans.** RBWM may not be able to deal with any expenditure volatility because of a lack of a mid/long term strategy that successfully encompasses finance options/mitigations to match service demands and central government funding reduction i.e. MTFP fails.	1. Review of base budget annually involving managers. 2. Forward Plan as part of the budget setting process. 3. Head of finance's annual assessment of the need to retain reserves. 4. All service monitoring reports require budget managers to bring spending into line. 5. Respond to economic and emerging policy signals as an annual process with monthly monitoring of targeted against actual income. 6. Increased focus on monitoring debt recovery programme. 7. Monitor Govt/LGA statements and impact on local government. 8. Build business rate refund assumptions into MTFP based on historical data 9. Ensure sufficient reserves to accommodate spikes in demand. Head of finance makes an assessment of the need to hold balances.	4 Low 4 - Low	1. Finance processes in the "Induction for Managers" will be reviewed, including budget training.	Reviewed by RS - no material changes.	Cllr Hilton Rob Stubbs

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Risk Ref Headline Details	Implemented or Ongoing Controls	Current Rating & Risk Appetite Target	Controls not Fully Developed	Changes made at Last Review	Lead Member & Assigned to
TECHAN0 001 **IT Infrastructure failure** If there is an IT infrastructure failure i.e. data storage infrastructure, systems access or total loss of council data centre then this could affect the ability of RBWM to function normally. Details are within the ICT risk register of which this is a summary. Causes: External cyber threats e.g. DDOS attacks. Loss/damage/denial of access to primary, secondary or hosted data centres. Accidental or deliberate loss of data or physical/logical failure to disk drive. Lapse of accreditation to Public Services Network. Physical or virtual server corruption or failure. This could lead to: - increased costs of downtime in the event of insufficient back up - expensive emergency service to rectify at short notice.	1. Multiple data centres provides increased resilience. 2. Line of business systems hosted either on local servers or on remote cloud-hosted servers. 3. Council networks are protected by multiple security layers using firewall and other control technologies. 4. Physical Infrastructure controls - access controls, remote access capability, environmental monitoring, generator and UPS. 5. DDOS protection in place. 6. Council external website is hosted in the Cloud. 7. Disk drives are configured to use RAID technology. 8. Switch replacement and diversely routed networks. External network links supplied and supported by tier one UK network suppliers	**6** Medium/Low **4 - Low**	1. Business Continuity/Disaster Recovery 2. £600k investment in desktop replacements. Pilot in Sept with rollout proposed for the winter. Systems are linked to desktops.	Reviewed at CLT 07/08/19. Current rating to 6 from 3 due to new controls not fully developed at this time.	Cllr Shelim Andy Jeffs

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Risk Ref Headline Details	Implemented or Ongoing Controls	Current Rating & Risk Appetite Target	Controls not Fully Developed	Changes made at Last Review	Lead Member & Assigned to
FOI0006 **Data breach** Statutory breach arising from non-compliance with the Data Protection Act 2018 leads to fines of up to €20m plus legal action costs following judicial remedies. Non-compliance can only be identified if a breach actually occurs. The type of information breach is key - only if significant harm is likely to arise from the breach are fines expected to be punitive. Regulators can also issue temporary or permanent bans on processing. Confidence level in accuracy of current risk assessment: medium.	1. Maintain a corporate register of processing activities as per article 30 of GDPR. 2. Adapt privacy notices to include the 6 GDPR principles. Ensure all policies align to the Data Protection Act 2018. 3. Reviewed information assets. Continuing development of the information asset register and updating entries by info asset owners 4. Historic children's data (and other files) securely stored in Waldeck House rationalised and moved to Iron Mountain as necessary 5. Security induction and annual training procedure embedded in HR procedures and the appraisal process. 6. Run annual training sessions for officers, members and parish councils. 7. Optalis and AfC data sharing and handling arrangements in place and part of contract management. 8. All RBWM-issued mobile devices are controlled by our mobile device management solution, Microsoft InTune. 9. Enrol non-RBWM devices into InTune platform. This enables deployment of the MS Outlook app onto each device. 10. Review all partnership agreements and determine the information sharing arrangements, updating as necessary. 11. Reporting of any data breaches is a regular reporting item to the monthly meetings of the operational commissioning board. 12. There is an information governance working group meeting monthly to identify and drive associated good practice in this area. 13. Appointed a data protection officer (DPO). Updated DP Policy to include DPO as a mandatory role.	6 Medium/Low 6 - Medium Low	1. Services to ensure they have complete registers of their held data at Iron Mountain guided by applicable retention schedule. 2. Determine how well the council's document retention policy is being applied. 3. Central government is developing a email blueprint to enable secure communications with local authority email accounts. 4. Establish how the categorisation of files held at Iron Mountain can be improved so that data is not being held unnecessarily. 5. GDPR – a full risk register is being prepared by the DPO.	Reviewed at CLT 07/08/19 - progress on Waldeck House and Iron Mountain storage but unclear over application of document retention policy overall.	Cllr Shelim Elaine Browne

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Risk Ref Headline Details	Implemented or Ongoing Controls	Current Rating & Risk Appetite Target	Controls not Fully Developed	Changes made at Last Review	Lead Member & Assigned to
CORP0002 **Maidenhead regeneration programme fails to deliver expected benefits.** 1. There is a risk that we do not get the capital receipts we are anticipating to fund the various schemes we are using borrowing to initially progress. 2. Changes in the economy could affect the benefits that can be realised e.g. a loss of consumer confidence and rising build costs would affect the financial viability of schemes and could result in stalled development. 3. Ensuring effective join up of sites and infrastructure delivery.	1. Summary details of the Prop Co's risk register go into a half yearly update to cabinet on their performance. 2. Prop co's risk register is specific to all risk associated with regeneration and capital development programme projects.	6 Medium/Low 8 - Medium	None	Reviewed CLT 07/08/19 - added capital receipts risk to the threat wording.	Cllr Johnson Russell O'Keefe
FOI0003 **Data security** (a) Serious external security breaches, (b) data loss or damage to data caused by inadequate information security leads to delays and errors in business processes.	1. Security awareness of officers and external service providers who use our IT. 2. Secure remote working with computers, encrypted area for sensitive laptop data. 3. Develop, publish and communicate information security policies. 4. Audit use of all Council laptops and obtain management authorisation for their use. 5. Create a security induction and training procedure and embed in HR procedures and the appraisal process. 6. Information governance manager to check and take action when inappropriate external transmissions of data are reported. 7. All security breaches are investigated. Intel shared with organisational development team to weave into future learning.	6 Medium/Low 8 - Medium	1. Implement a robust exit strategy with accountabilities when staff leave the organisation or return surplus IT equipment..	Reviewed by AJ - no changes.	Cllr Shelim Andy Jeffs

Risk Ref Headline Details	Implemented or Ongoing Controls	Current Rating & Risk Appetite Target	Controls not Fully Developed	Changes made at Last Review	Lead Member & Assigned to
	8. Disposal of confidential waste papers. Specific bins are in place to ensure such waste is locked and secure at all times. 9. Exchange of data and information with other organisations. Policies, procedures and declarations available to increase security.				
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WORK PROGRAMME - CORPORATE OVERVIEW AND SCRUTINY PANEL

DIRECTORS	• Duncan Sharkey (Managing Director) • Russell O'Keefe (Executive Director) • Andy Jeffs (Executive Director)
LINK OFFICERS & HEADS OF SERVICES	• Elaine Browne, (Interim Head of Law & Governance) • Nikki Craig, (Head of HR and Corporate Projects) • Catherine Hickman, (Lead Specialist Audit and Investigation) • Barbara Richardson, (Managing Director RBWM Property Co) • Rob Stubbs, (Deputy Director & Head of Finance) • Head of IT Services (TBC)

MEETING: Special Meeting- 22nd October

ITEM	RESPONSIBLE OFFICER
Final Statement of Accounts	**Julian Reeve & Jonathan Gooding**, *Deloitte*; **Rob Stubbs,** *Deputy Director & Head of Finance*
External Audit IAS260	**Auditors**; **Rob Stubbs**, *Deputy Director & Head of Finance*
Annual Governance Statement	**Elaine Browne,** *Head of Legal*
LGA Peer Review	**Duncan Sharkey,** *Managing Director*
Work Programme	Panel clerk
TASK AND FINISH	
TBC	

MEETING: Special Meeting- November (TBC)

ITEM	RESPONSIBLE OFFICER
Review of Contracting Process	**Duncan Sharkey,** *Managing Director*
Annual Governance Statement; progress report on GDPR compliance	**Karen Shepherd,** *Service Lead-Governance*
Work Programme	Clerk
TASK AND FINISH	
TBC	

MEETING: 4th FEBRUARY 2020

ITEM	RESPONSIBLE OFFICER
Performance Q3 Report	**Anna Robinson,** *Strategy and Performance Manager*
Budget Report	**Lead Officers & Finance**
Annual Trusts Report	**Karen Shepherd;** *Service Lead-Governance*
2019/20 Interim Audit and Investigation Report	**Catherine Hickman**, *Lead Specialist Audit and Investigation*
Annual Scrutiny Report (Draft)	Chairman & Lead Officers
Work Programme	Panel clerk
TASK AND FINISH	
TBC	

MEETING: 22nd APRIL 2020

ITEM	RESPONSIBLE OFFICER
Annual Scrutiny Report (Final version for approval and submission for Full Council)	Chairman & Lead Officers
Key Risk Report (Bi-Annual)	**Steve Mappley,** *Insurance and Risk Manager*
Annual Governance Statement; Progress report- Health and Safety Update	**Nikki Craig,** *Head of HR & Corporate Projects*
Annual Governance Statement; Progress report- Business Continuity Plans	**David Scott;** *Head of Communities, Enforcement and Partnerships*
Work Programme	Panel clerk
TASK AND FINISH	
TBC	

ITEMS SUGGESTED BUT NOT YET PROGRAMMED

ITEM	RESPONSIBLE OFFICER