



RHONDDA CYNON TAF COUNCIL GOVERNANCE AND AUDIT COMMITTEE

Minutes of the virtual meeting of the Governance and Audit Committee held on Monday, 7 February 2022 at 5.00 pm.

County Borough Councillors:

Councillor K Jones	Councillor M Adams
Councillor J Cullwick	Councillor G Davies
Councillor J Edwards	Councillor M Griffiths
Councillor M Norris	Councillor D Owen-Jones
Councillor S Rees	Councillor S Trask
Councillor E Webster	Councillor R Williams

Lay Member: Mr C Jones

Officers in attendance

Mr Paul Griffiths, Service Director - Finance and Improvement Services
Ms Jayne Thomas – Complaints and Quality Assurance Manager
Ms Louise Evans - Data Protection and Information Officer
Mr Tim Jones, Service Director – ICT and Digital Services
Ms Lisa Cumpston, Audit Manager
Mr Andrew Wilkins – Legal Officer
Mr Martin Gibson - Audit Wales

40 Welcome and Apologies

The Chair welcomed the attendees to the virtual meeting of the Governance and Audit Committee. No apologies of absence were received.

41 Declaration of Interest

In accordance with the Council's Code of Conduct, there were no declarations made pertaining to the agenda.

42 Minutes

It was **RESOLVED** to approve the minutes of the 6th December 2021 as an accurate reflection of the meeting.

43 MATTERS ARISING

Agenda Item no.32: The Service Director – Finance and Improvement Services confirmed that Audit Wales have provided feedback to the Chair and relevant Member around the national case review of Children Services in England, indicating that Audit Wales see no direct implications for its work as a result of this review.

44 **AUDIT WALES WORK PROGRAMME AND TIMETABLE**

Mr M Gibson, Audit Wales provided Members with a brief overview of the report. He advised that as part of the Local Government and Elections (Wales) Act 2021, the Auditor General is required to produce a timetable for each Local Authority that also covers both Care Inspectorate Wales and Estyn. To discharge this duty, a single collective timetable is provided each quarter and the Audit Wales Officer referred Members to the quarter 3 update to 31st December 2021.

A Member requested further information around timescales for issuing Audit Wales local reports in respect of Rhondda Cynon Taf Council. Mr M Gibson, Audit Wales, indicated the quarter 3 update provides the current position statement for each study with completion timescales dependent on clearance, publishing and translation processes.

One Member sought further information regarding whether follow-up work is required from the previous year. Mr M Gibson, Audit Wales, advised that the review relating to the Cwm Taf Morgannwg Health Partnership is a study from the 2020/21 work programme that is being delivered during the 2021/22 financial year.

Following discussion, it was **RESOLVED:**

- To note the content of the report.

45 **STRATEGIC RISK REGISTER UPDATE: INFORMATION MANAGEMENT**

The Service Director - Finance and Improvement Services provided a brief introduction on the purpose of the presentation to be delivered by the Data Protection and Improvement Officer. The Service Director noted the role of the Committee in overseeing the Council's risk management arrangements, one aspect of which is the on-going review of the Strategic Risk Register that includes Information Management. The Service Director added that the presentation will provide Members with an overview of the area of Information Management together with key risks and arrangements in place to manage and mitigate these.

The presentation was delivered under the following key headlines: -

- Strategic Risk Register- Information Management
- The Role of the Information Management Team
- Information Management Team – Who we support
- Legal Drivers
- ICO 'GDPR Accountability Framework'
- How we comply
- Key priorities for 2022-23

The Data Protection and Improvement Officer provided context by informing Members of the significance of managing personal data in accordance with legislation to avoid financial penalties and sanctions, and support the overall effective delivery of services by the Council.

The Data Protection and Improvement Officer outlined to Members the role of the Information Management Team which focuses on the Council and Service Level Agreements in place with external bodies to ensure compliance with data protection legislation. Members were provided with an overview in relation to supported organisations under the Information Management team and included: all Council Services, 113 Schools, Elected Members (Ward Cllr & Representative), Central South Consortium Joint Education Service, South Wales Central Area Coroner's Services, South East Wales Corporate Joint Committee and the public (citizens, service users, visitors).

In relation to Legal Drivers, the Data Protection and Improvement Officer highlighted to Members the changes made in relation to the data protection legislation over recent years. Members were made aware that based on the introduction of the EU GDPR legislation on the 25th May 2018, this resulted in greater obligations on organisations, along with enhanced mandatory requirements in addition to those which were in place under the Data Protection Act 1998.

The Data Protection and Improvement Officer highlighted the significant increase in the monetary penalty notices from £500,000 under the Data Protection Act 1998 to a maximum of £17.5 Million for large organisations under UK GDPR & Data Protection Act 2018 and issued by the Information Commissioner's Office (ICO). The Data Protection and Improvement Officer informed Members of the ICO introduction of the GDPR Accountability Framework and Members were made aware that under the new legislation, compliance is significant and demonstration of compliance is vital. The accountability framework is an opportunity for Local Authorities to assess compliance of an organisation in line with the requirements of GDPR and the Data Protection and Improvement Officer informed Members of the 10 key categories for accountability, as set out in the accountability framework.

The Data Protection and Improvement Officer continued by highlighting to Members how compliance is achieved surrounding the 10 key categories of accountability.

To ensure compliance with the GDPR transparency requirements Members were informed of the Council's use of the Website, forms and applications to inform the public of their information rights and how their personal data is processed and the Council has in excess of 90 service specific privacy notices published on its website. The Data Protection and Improvement Officer informed Members that one of the key information requests exercised the most within the Council is the right of access, whereby individuals request a copy of their personal data. In 2020/21, 157 requests were received, of which 104 were validated. From the requests, 78% were responded to within the statutory timeframe (1 month). In comparison to 2021-22 (April-December 2021), 204 requests were received, with 138 validated and 83% of the requests were responded to within the statutory timeframe.

The Data Protection and Improvement Officer informed Members of the Council's well-established incident response procedure for information security incidents and events and personal data. In line with legal requirements, records of data breaches must be stored regardless of the severity. Due to increases in the number of phishing and cyber incidents, specific procedures have been implemented to handle those breaches and Members were provided with an

overview of data breaches between 2020 and 2022 (April-Dec2021). It was noted that 7 breaches were reported to the ICO in 2021-2022, 5 resulted in no further action and 2 are awaiting the outcome / feedback from the ICO.

To conclude the Data Protection and Improvement Officer provided Members with an overview of the key priorities to be implemented for 2022-23. These covered the delivery of key services under Service Level Agreements; deploying new mandatory data protection e-learning training to staff, all schools and Members; supporting the governance arrangements for Phase 2 of the South East Wales Corporate Joint Committee; and support the delivery of the Council's Digital Strategy 2022-26 (the Strategy being subject to approval).

The Chair noted the comprehensive presentation provided and recognised the complexities faced by the team and provided the opportunity for Members of the Committee to ask questions.

One Member questioned the ease of access of information on the Council's website and if more could be done to make the information more accessible, and also if there were lessons learnt by the team in relation to data breaches and what could be done in the future to further reduce data breaches.

In response, the Data Protection and Improvement Officer advised of the transparency and openness of the Council in ensuring individuals can easily access information and noted the use of Data Protection Logos on the website which transfer individuals to the data protection page. The Data Protection and Improvement Officer confirmed there is on-going collaborative working with other departments within the Council to implement simpler, easy to understand data protection guidelines for vulnerable adults and children, and advised on the potential of working alongside schools to encourage and raise awareness of young adults and children's information rights. With regard to lessons learned, the Data Protection and Improvement Officer advised that thorough investigations are undertaken concerning any data breaches within the Council to prevent them from reoccurring and based on the investigations undertaken, action plans are compiled and monitored in order to mitigate the risk of reoccurrence. The Data Protection and Improvement Officer also noted that it is recognised the potential risks involved in processing personal data as a result of human error

One Member inquired on the possibility of a national cyber attack on Council systems. The Data Protection and Improvement Officer advised that there is always a risk due to the increase in sophisticated scams; however, the Officer advised that the Council has implemented more technical and robust measures to prevent, as far as possible, such attacks. The Service Director - ICT and Digital Services acknowledged the heightened risks involved due to the growth of the digital world; however he concurred with the Data Protection and Improvement Officer's response by reassuring Members of the on-going monitoring arrangements in place to ensure cyber resilience and security are implemented across the Council. The Service Director - ICT and Digital Services also advised of collaborative networks utilised such as UK Government's National Cyber Centre which provides intelligence on potential risks to be aware of.

Following discussions, the Governance and Audit Committee **RESOLVED:**

- To note the content of the presentation

LEARNING AND DEVELOPMENT: AN OVERVIEW OF THE COUNCIL'S ARRANGEMENTS FOR DEALING WITH COMPLAINTS EFFECTIVELY

The Service Director – Finance and Improvement Services provided a brief introduction on the content of the presentation and Members were reminded that in line with the Local Government Elections (Wales) Act 2021, the responsibility of the Governance and Audit Committees is to evaluate and assess the Local Authority's ability to review and handle complaints effectively and to make recommendations on the same. The Service Director added that the presentation will aim to update Members on the Council's complaints handling arrangements in readiness for the Committee's responsibilities under the Local Government Elections (Wales) Act 2021.

The presentation was delivered under the following key headlines: -

- Customer Feedback & Engagement Team
- Legislative Requirements
- Principals of an effective complaint handling process
- How are complaints regulated
- How well are we doing?
- Priorities for 2022/23

To begin the Complaints and Quality Assurance Manager provided a brief overview of the roles and responsibilities of the team that cover overseeing the management of complaint handling across the Council; dealing with complaints that are crosscutting two or more service areas; providing training and good practice guidance on complaints management; processing subject access requests and all external information requests; facilitating Social Services Survey; advising on the management of unreasonable customers; facilitating complaint network groups at a local and national level; and supporting Adult Services and Children's Services with their legislative duties to provide advocacy services.

It was highlighted to Members the requirement for local authorities to establish procedures for dealing with complaints regarding Social Services functions including the representations relating to children. These requirements are set out in the Representation Procedure (Wales) regulations 2014 in relation to children and in the Social Services Complaints Procedure (Wales) regulations 2014 for adults.

The Complaints and Quality Assurance Manager informed Members of new powers afforded to the Public Service Ombudsman Wales (PSOW) which requires local authorities to operate complaint handling procedures in compliance with PSOW statement of principles and their model complaints handling policy. Based on the powers adopted, the PSOW introduced the Complaints Standards Authority (CSA) which monitors compliance based on the principles of effective complaints handling. The Complaints and Quality Assurance Manager also informed Members of an approved complaints handling policy issued by the Ombudsman as a result of meeting requirements.

The Complaints and Quality Assurance Manager referenced the principles of effective complaint handling processes set by the PSOW. These ensure complaints are compliant focused (flexible & addressing need), simple (2 Stages), fair, objective, timely, effective, accountable (clear & honest) and

committed to continuous improvement (analysis & improvements). It was highlighted to Members that the overall priority is to ensure a good outcome for the person making the complaint, where possible.

The Complaints and Quality Assurance Manager provided insight into the two complaints handling processes within RCT, these being Statutory Social Services Complaints (SSSC) and Customer Feedback Scheme (CFS). The Statutory Social Services process is a legislative requirement that deals with all Social Services complaints functions which fall under the Social Services Well-being Act (2014). It was noted to Members that the Director of Children Services is accountable for these processes. The Customer Feedback Scheme involves the wider complaints scheme for all services provided by the Council and it was noted that complaints can be received via different communication channels such as social media, telephone and website.

The Complaints and Quality Assurance Manager provided performance information in relation to CFS and SSSC between April 2021- December 2021. For CFS, 407 complaints (67.4%), 159 compliments (26.4%) and 38 comments (6.2%) were received. With regard to SSSC, Members were advised of the significant decrease in complaints for Social Services as a result of the pandemic and overall, 82 complaints were received representing 25% of all team contacts and 130 compliments were received representing 39.5% of contacts. Between April and December 2021 5% of complaints received from the CFS were referred to the PSOW and all were either closed or resolved with no Ombudsman investigations. In relation to SSSC process, 10% of the complaints were referred to the PSOW, all but 3 which are ongoing have been resolved. 49% of Social Care complaints were resolved in the Statutory timescale of 15 working days.

To conclude, the Complaints and Quality Assurance Manager provided the Committee with an overview of the priorities set for 2022/23 that included improving engagement with customers to better capture customer feedback and suggestions for improvements; improve the use of data from all existing processes including CFS; to develop mechanism for two way communication with the public detailing where improvements and service developments have been undertaken as a direct result of feedback received; set targets to drive improvements on timeliness of complaints handling from receipt to closure; ensure that the new system for recording customer feedback is fit for purpose and that it meets the requirements of frontline services; and continue working with other service areas to ensure all feedback is captured and recorded.

The Chair was pleased with comprehensive and detailed presentation provided and referred to Members for questions.

Based on the complaints figures provided, one Member queried the volume of Social Service complaints across Wales and the impact of the pandemic on complaints received. In response the Complaints and Quality Assurance Manager commended the hard work undertaken by frontline services in Rhondda Cynon Taf Council as they managed to deliver, maintain and adapt services in order to meet public expectations. Based on the 1st Quarter of the PSOW report, it was advised that across Wales over 4,300 complaints were received, of which 119 were in respect of Rhondda Cynon Taf Council. The Complaints and Quality Assurance Manager informed Members that this position is the lowest compared to neighbouring Councils and supports the effective work being undertaken by frontline services within Rhondda Cynon Taf.

One Member raised a query concerning the Customer Feedback Scheme in respect of the controls in place to ensure that information received is accurate and reported correctly. In response, the Complaints and Quality Assurance Manager fed back that a new customer management system for the contact centre has been introduced that will help to further enhance the existing controls in place.

Lastly, a Member sought clarification on the process followed when a complaint is received that covers both the Health Service and the Council's Social Services. In response, the Complaints and Quality Assurance Manager advised that discussions take place between the designated officers within the Council and Health Service, and depending on the nature of the complaint, agreement is reached in terms of the coordination and formulation of the response.

Following discussions, the Governance and Audit Committee **RESOLVED:**

- To receive and note the content of the presentation

This meeting closed at 6.35 pm

**Mr Christopher Jones
Chairman.**