

# Minutes

## *REGULATORY AND AUDIT COMMITTEE*

**MINUTES OF THE MEETING OF THE REGULATORY AND AUDIT COMMITTEE HELD ON THURSDAY 13 NOVEMBER 2014 IN LARGE DINING ROOM, JUDGES LODGINGS, AYLESBURY, COMMENCING AT 9.00 AM AND CONCLUDING AT TIME NOT SPECIFIED.**

### **MEMBERS PRESENT**

Mr W Chapple OBE  
Mr D Martin  
Mr Z Mohammed (Chairman)  
Mr R Scott  
Mr A Stevens  
Mr W Whyte

### **OTHERS IN ATTENDANCE**

Mr R Ambrose, Service Director, Finance and Commercial Services, Service Director, Finance and Commercial Services  
Mr T Boyd, Strategic Director, Adults and Family Wellbeing, Acting Strategic Director for Children's Services  
Mr J Chilver  
Mr I Dyson, Chief Internal Auditor  
Ms J Edwards, Pensions and Investments Manager  
Mr L Femandel, Service Manager, Safeguarding, Adults and Family Wellbeing, Consultant Manager - safeguarding Adults  
Ms M Gibb, Risk and Insurance Manager  
Mr P Grady, Grant Thornton  
Mr D Johnston, Managing Director: Children's Social Care and Learning, Service Director, Child and Family Service  
Ms M King, Statutory Complaints Officer  
Ms M Moore, Statutory Complaints Officer  
Mr I Murray, Manager - Assurance, Grant Thornton, Grant Thornton  
Ms R Murray, Team Manager, AFW, Service Provision  
Ms A Poole, Trading Standards Manager  
Ms K Reed, Centralised Complaints Programme Manager, BCC  
Mr R Schmidt, Assistant Service Director (Strategic Finance), Assistant Service Director (Strategic Finance)  
Ms C Scholes, Complaints Officer (Legal & Democratic Services)  
Ms H Wailing, Democratic Services Officer



INVESTOR IN PEOPLE



Mr C Williams, Chief Executive

## **1 APOLOGIES FOR ABSENCE / CHANGES IN MEMBERSHIP**

Apologies for absence were received from Timothy Butcher and Raj Khan.

## **2 DECLARATIONS OF INTEREST**

There were no declarations of interest.

## **3 MINUTES**

The Minutes of the meeting held on 23 September 2014 were agreed and signed as a correct record, with the following amendment:

- Page 3 – Richard Schmidt to be shown as in attendance

### **Matters arising**

Page 8 – Constitutional changes – the word ‘sound’ had been replaced with the word ‘robust.’

Page 8 – caps on borrowing – The Chairman reported that this had been explored but that officers and Members were satisfied with the caps as they were.

Page 8 – Reporting from Business Units to be strengthened in the Operating Framework – this had been discussed but members were happy that it should stay as it was currently.

Page 9 – Richard Ambrose had circulated a paper about the incentive percentage of 25%.

Page 9 – B8.2.1 – the wording had been amended as agreed.

Page 9 – contract extensions – members had discussed this but had been happy with the wording as it was.

The Chairman had taken the decision to include the EU procurement rules in the Constitution now and then to make minor tweaks as necessary later on.

## **4 TREASURY MANAGEMENT UPDATE**

John Chilver, Deputy Cabinet Member for Finance and Resources, was welcomed to the meeting.

John Chilver updated members as follows:

- The Treasury Management activity was fully compliant with the CIPFA code.
- One investment had been made which had resulted in a breach of the investment strategy. On discovering the breach, the investment had been repaid with interest to the Council.
- The average rate of return to date was 0.76%, which exceeded the weighted average LIBID benchmark rate of 0.49% by 0.27%. The projected revenue of £1.75m for investment income was expected to exceed the budget of £1.62m by £130 000.
- The forecast outturn for interest payments on external debt was on target compared to the budget of £11.6m.
- There had been no long term borrowing during the six months to 30 September 2014.
- In regard to municipal bonds, 40 Council had now joined the scheme. The Council was not participating at this stage, as they would be required to underwrite any defaulting authorities (jointly and severally) across all the local authorities.

A member asked if the Council could insure against the liability on municipal bonds if they decided to join the scheme. John Chilver said that they could do this, and that there was a potential of lower rates.

A member asked if the Council was exploring the issuance of its own bonds. John Chilver said that it was not. It had been discussed with an adviser, who had said that it would have to be on a certain scale to make it viable.

A member referred to Page 9, and asked about the figure shown for the estimated capital financing requirement. John Chilver said that this related to the Energy from Waste (EfW) plant. The revised estimate would include the work in progress with the EfW plant.

A member asked about the Council's cash balance. Julie Edwards said that it was approximately £250m, but that this figure fluctuated.

## **Resolved**

**The Committee noted the treasury and investment borrowing performance and the monitoring against the Prudential Indicators.**

## **5 STATUTORY OFFICER REPORTS**

The Chief Internal Auditor, referred members to the report in the agenda papers.

At the meeting of the Committee on 23 September 2014, members had referenced a letter sent from the Director for Children's Services to the Chief Executive, and had questioned the process for the escalation of issues and concerns raised by officers who hold statutory positions; and, whether they should be received by the Regulatory and Audit Committee.

The Chief Internal Auditor told members that there were six statutory officers at Buckinghamshire County Council:

- Head of Paid Service (Chief Executive)
- Monitoring Officer (Service Director – Legal)
- Chief Finance Officer (Service Director – Finance and Commercial Services)
- Director of Children's Services
- Director of Adult Social Care
- Director of Public Health

Of these six statutory officers, only two had a requirement to report concerns to the Council and Cabinet as part of their statutory responsibilities. These were the Monitoring Officer and the Chief Finance Officer.

For the other four statutory officers, their roles were not regulatory, and the statute referred to the reporting lines within the organisation, for example in the case of a Director of Children's Services, they should report to the Chief Executive. There was nothing in the statute that required these officers to escalate any concerns over the operation of their role through a statutory notice.

The letter written in January 2014 from the Director of Children's Services to the Chief Executive was therefore not a statutory letter, but part of normal management processes.

In terms of the risk management process and the role of the Regulatory and Audit Committee, the strategic risk register was regularly presented to the Risk Management Group. The risk register had consistently highlighted children's social care as high risk, due to the nature of the risks in that Service.

However the risk register did not currently show the movement of risk. This had been discussed with COMT and would be addressed within the new risk management strategy to be implemented as part of the Future Shape Programme.

A member asked if the risk register had indicator arrows to show which way the risks were going. The member also said that three categories of risk were not enough, and that another category was needed above 'high' risk.

The Chief Internal Auditor said that they had looked at the visibility of the escalation process. Scorings were used to show the significance of each risk. If a risk was high, this did not mean it was not being managed. The use of arrows could be considered.

A member said that there were two issues to be considered with a risk. These were the level of increase and the severity of the score.

The Chief Internal Auditor said that the level had to be considered in the context of other factors as well, e.g. performance

The Chief Executive said that the whole risk management process had been officer-driven until recently. Only recently had a separate risk register for Cabinet Members been set up. The intention was that this risk register would be public and would come to the Regulatory and Audit Committee.

A member said that the Constitution needed to be amended to ensure there was a better notification process, and said that a letter of that importance should have gone to the Leader. The Chairman said that this was something for inclusion in the Operating Framework rather than the Constitution.

The Chief Executive said that in his 14 years as Chief Executive of the Council, there had never been a statutory letter. If there was one, the two statutory officers involved would report to the Chief Executive, and then they would jointly report to the whole Council.

The letter from the Director of Children's Services in January 2014 was part of the normal management process. When the Chief Executive had next met with the Director of Children's Services, they had taken specific management action, including bringing in Skylake, asking Legal Services to carry out training for Social Workers for Court reports and asking the Head of Service to address some additional issues. The Chief Executive said that he had notes of the next three meetings he had had with the Director of Children's Services. He had also mentioned the issues to the Leader.

All this was happening at the same time as the Cabinet Task and Finish Group Review looking at Children's Services.

The Council had been trying to get itself as best prepared as it could for an Ofsted inspection.

The Chairman said that he was satisfied that the letter sent in January 2014 was not a statutory letter. However it was a serious letter, and there was a question about whether it should have been sent to the Leader.

A member said that it was strange that a written letter would form part of a normal management system and not something more specific. The member asked why the letter had not come to the Regulatory and Audit Committee.

The member also referred to an agenda item on safeguarding which had been due to come to the Regulatory and Audit Committee in June 2014 but had been deferred. Due to the item being deferred, the Regulatory and Audit Committee had not been made aware of the concerns until Ofsted came in. How could this be prevented from happening again? The member said that they were surprised that a senior member of staff had allowed the item to be deferred when it was very important.

The Chief Executive said that changing the way the risk registers worked might address these issues.

The Chief Internal Auditor asked what Regulatory and Audit Committee would have done with the information if they had been made aware.

A member said that their point was that clearly the risk had not been managed in an open manner, as the Strategic Director had allowed the agenda item to be deferred. *{post meeting note: The Ofsted inspection took place from 3-25 June 2014. The Regulatory & Audit Committee was on 25 June 2014 and agenda stated that the item on children's safeguarding update had been deferred to the next Risk Management Group meeting (17 July 2014) due to the Ofsted inspection.}*

The Chief Internal Auditor said that the Director of Children's Services had subsequently reported to the Risk Management Group.

The Chairman said that he understood that the reason for the agenda item having been deferred was due to pressures of work leading up to the Ofsted inspection.

A member said that this had been a very serious situation and that therefore lessons must be learnt. The member said that other members he had spoken to had been surprised that they had not been aware of the issues and concerns earlier. In future members needed to be involved earlier so that they could rectify the issues.

The Chief Internal Auditor said that the risk register was a management process. The risk register needed to be improved.

Communication of the primary issues was a different matter, and Cabinet Members reported to Council and public meetings.

The Chief Executive said that all members had been made aware of the issues when the Cabinet Member for Children's Services had spoken at Council (she had a chronology of the times she had spoken) and that the concerns raised by the Director of Children's Services were being managed.

## **6 CHILDREN AND YOUNG PEOPLE SAFEGUARDING UPDATE**

The Chairman welcomed Trevor Boyd and David Johnston. Trevor Boyd was Acting Strategic Director for Children's Services, and David Johnston would be taking over this post from 1 December 2014.

Trevor Boyd said that the most recent update to the Committee had been in June 2014.

David Johnston told members the following:

- That afternoon the Council would be submitting its Ofsted Improvement Plan.
- Ofsted had identified a number of risks which had also been found by the internal audit carried out.
- Six work streams had been developed with sponsors. These included Leadership, Governance and Partnership; Quality of Social Work Practice; and Strength and capacity of workforce.
- They had put in a number of governance arrangements and had developed a quality assurance framework. They were able to drill down to teams and individuals, and to offer support to those under pressure.
- A final letter would be published the following evening, and would be circulated to members – **Action: DJ**

### **Actions which had been taken**

- Appointment of new Director of Children's Services (David Johnston).

- Appointment of new Buckinghamshire Safeguarding Children's Board (BSCB) Chairman (Frances Gosling-Thomas).
- Detailed discussions with Health services to identify the reasons for increased referrals.
- Leader and Cabinet Member for Children's Services had met with the regional Crime Commissioner to discuss Police activity.
- Funding for BSCB reviewed as it was not proportionate.
- Multi Agency Safeguarding Hub (MASH) established.
- Initial seminar held on corporate parenting.
- Children's Services budgets reviewed. The base budget had been increased by £4.8m and another £1m in year had been found from reserves.
- An Improvement Adviser (Ann Goldsmith) had been engaged to challenge and identify weaknesses.
- Five Practice Improvement Managers had been introduced to support the Heads of Services.
- A retention and recruitment payment had been introduced for Social Workers and Managers in critical areas. Agency staff cost 30% more than internal staff. The Council needed to be as competitive as possible to attract Social Workers.
- Reviewed and agreed changes to the First Response Service. It had been agreed that the number of Social Workers needed had been under-estimated, and the figure was increased to more than twice the number.
- A Resource Panel had been established to risk manage a number of situations to support staff.
- Responsibility for completing Child Permanency Reports transferred to Children in Care Units.
- All Foster Carers reviewed annually.
- Completed health check on Integrated Children's System to make it more effective and efficient.
- Introduced new Performance Management Framework. Case work data was being used to measure performance standards.

A member asked if Ofsted would come back after they had received the letter. David Johnston said that Ofsted would review the Plan and feed back on whether it was sufficiently robust. Ofsted would probably want to re-inspect in approximately 12 months. They would want updates from the Council to show progress over the year.

The Department for Education would appoint a Social Work Adviser to work with the Council and to sit on the Improvement Board (which was chaired by the Chief Executive, and made up of key partners, including representatives of other local authorities).

David Simons from the Local Government Association had already given some insight.

A member referred to the letter going out that week, and asked if an aide memoir would be sent to members for guidance.

David Johnston said that part of the reason for the timing of the letter was that Ofsted had given them that date. The letter could be shared with members that day, together with the Action Plan. Work had been carried out with Cabinet to look at the budgets for the work streams.

David Johnston said that he could compile some frequently asked questions – **Action: DJ**

The Chairman thanked David Johnston and Trevor Boyd.

Ian Dyson noted that the Ofsted outcomes were due in January 2015. Any outstanding matters could go to the Risk Management Group in February 2015.

A member said that if a response was received from Ofsted in the interim, this should be communicated to members. **Action: DJ**

## **7 EXCLUSION OF THE PRESS AND PUBLIC**

### **RESOLVED**

**That the press and public be excluded for the following item which is exempt by virtue of Paragraph 3 of Part 1 of Schedule 12a of the Local Government Act 1972 because it contains information relating to the financial or business affairs of any particular person (including the authority holding that information)**

## **8 UPDATE ON ADULTS SAFEGUARDING AUDIT**

An update on the Adults Safeguarding Audit was given at the meeting.

## **9 INCLUSION OF THE PRESS AND PUBLIC**

## **10 ANNUAL ENFORCEMENT OF THE CHILDREN AND YOUNG PERSONS (PROTECTION FROM TOBACCO) ACT UPDATE**

Amanda Poole, Trading Standards Manager, was welcomed to the meeting.

Amanda Poole referred members to her report and said the following:

- There was a statutory requirement to consider enforcement activity to prevent underage sales of cigarettes, covering the period April 2015 to March 2016.
- Trading Standards were working closely with the Public Health Team on tackling tobacco use.
- The joint Trading Standards which was proposed with Surrey County Council would not affect this work, as they would respond locally on tackling underage sales of tobacco.
- National data showed that habitual smokers began around the age of 14. Intelligence locally showed that young people under the age of 18 continued to buy their own cigarettes, facilitated by a minority of Buckinghamshire traders who were willing to sell them.

A member referred to page 16, where it referred to consideration of using powers in Section 143 of the Criminal Justice and Immigration Act 2008, and asked if this was strong enough. Amanda Poole said that they would always consider all circumstances which surrounded an issue.

A member suggested that Trading Standards could say that it was their normal procedure to consider prosecution. Amanda Poole said that not being able to sell tobacco was an effective sanction to traders.

A member asked if they had ever taken a case to the magistrates' court. Amanda Poole said that they had not done so in respect of tobacco sales.

The member asked if there were repeat offenders. Amanda Poole said that this was not their recent experience, but that they worked closely with communities where problems seemed to arise.

A member referred to page 17 and asked about the number of traders prepared to sell tobacco to underage young people. Amanda Poole said that there had been 27 instances where people had complained in the last year, and that Trading Standards encouraged complaints. However the figure of 27 did not show the total picture.

The member asked if mystery shoppers had picked up any traders who were doing this. Amanda Poole said that they had not.

A member referred to the Council's success in tackling fly-tipping, and said that this was partly due to media coverage. The member suggested that underage tobacco sales should be covered in the media. Amanda Poole said that this was a fair point and that Trading Standards had a very good relationship with the Council's Communications Team.

Amanda Poole also said that the Better Regulation Delivery Office now had a code of practice on underage sales, and had restricted the ability of Trading Standards to carry out test purchases. To carry out a test purchase they now had to show an intelligence picture, e.g. multiple complaints and sturdy intelligence.

A member asked if it was correct that no test purchases had been carried out in the previous year. Amanda Poole said that this was correct.

Trading Standards was now looking at the profile of all complaints coming in, and would also look proactively for evidence.

A member asked if Trading Standards was able to look at a shop's CCTV tape if they had received a complaint of underage sales. Amanda Poole said that she would have to check this, but that they did go and speak to the staff. CCTV cameras no longer used videos, and were digital, with short-lived records.

Ian Dyson asked if schools and health services could act as sources of intelligence. Amanda Poole said that the challenge was in targeting intelligence. In the case of alcohol sales, for instance, they could target areas where anti-social behaviour was occurring. Amanda Poole said that she would speak to the Public Health Team about whether there was intelligence from schools regarding underage sales of tobacco.

A member said that they would not know who to contact if they had a complaint or concern. Amanda Poole said that they should contact Trading Standards or a Citizens' Advice Bureau.

## **RESOLVED**

**The Regulatory and Audit Committee noted and agreed the report as a reflection of activity over the financial year 2013-2014 and agreed the programme of enforcement activities to be undertaken in 2015 -2016 as detailed below:**

- Help people to live healthy lifestyles, make healthy choices and reduce health inequalities by ensuring that our work supports the delivery of the Public Health improvement outcomes and responsibilities that relate to the use of tobacco.

This work may include:-

- Establishing the prevalence of sales of illegal tobacco and intervening appropriately with regulatory partners to reduce this
- Use local, regional and national intelligence to ensure we target our resources appropriately.
- Promote the use of the Challenge 25 Training Pack to help prevent under-age sales by local retailers
- Ensure statutory warning notices are displayed in premises where tobacco is sold and advise traders about the legislation.
- Ensure that the restrictions on tobacco advertising in retail premises are adhered to.
- Ensure that the restrictions on selling from tobacco vending machines are adhered to.
- If robust intelligence is received, and it is appropriate to do so: conduct test purchases or explore alternative means of detecting sales other than by test purchases; and consider appropriate enforcement action against traders who sell to underage children



having regard to the Better Regulation Delivery Office Code of Practice for Regulatory Delivery on Age Restricted Products and Services.

- Continue to participate in the Public Health Agenda and other new projects and initiatives that fit within our enforcement activities outlined above together with our own initiatives when they are felt necessary.
- Should we discover persistent sales of tobacco to under 18s (2 or more occasions within a two year period) we will consider using powers contained in Section 143 of the Criminal Justice and Immigration Act 2008 to make a complaint to a Magistrate for an order either to prohibit tobacco sales from the premises or prohibit a specific person from selling tobacco products. This order is for a period of up to 12 months.

## **11 ANNUAL REPORT ON FEEDBACK AND COMPLAINTS PROCEDURE**

Carolyn Scholes, Complaints Officer, was welcomed to the meeting.

Carolyn Scholes referred members to her report and said that in the previous year members had asked for more detail to be provided, and that she hoped that this year's report had gone some way to doing that.

The Customer Complaints and Information Team (CCIT) had continued to do an excellent job in providing a very clear and accessible complaints procedure. The CCIT had assisted teams in collecting meaningful data, which had enabled them to directly improve services via organisational learning.

For example, section 4.5 on page 23 noted the organisational learning which had come out of the Arla-funded road improvement scheme, which had generated a number of complaints.

Carolyn Scholes said that she was aware of the current consultation for the future shape programme and that hopefully any changes made to the Team would not impede its continued evolutionary success. The Team added value to their customers and to the Council, and this needed to be developed further.

Stage 3 complaint numbers had significantly increased, from 34 to 56 in 2013/14. This was most likely due to a knock on effect of the introduction of the CCIT in 2012/13, where more complaints were correctly identified, processed and rights of escalation offered. Complaints should not be seen as a bad thing – the Council needed to listen to customers in order to be able to improve services and customer service.

Carolyn Scholes had done some analysis of the escalation of complaints (in section 4.12 on page 24) where it clearly showed that the vast majority of complaints did get successfully resolved at Stage 1 of the procedure.

With regard to Local Government Ombudsman (LGO) complaints, once again the figures the Council had been given were rather strange. The LGO had refused to give the Council any details, which had necessitated the Council having to make an FOI request in order to get a list of the cases.

As predicted in the previous year, the number of LGO complaints about school admissions and appeals had dramatically reduced, as complaints about 11+ appeals were now against the grammar school academies and not the Council, and were now investigated by the Education Funding Agency. There had been, however, a large increase in LGO complaints about pothole damage and the state of the roads. However the LGO could not investigate this type of complaint as it fell outside their statutory jurisdiction (there was a remedy available via the courts which the LGO considered it reasonable for people to pursue).

A member referred to complaints from residents about the speed of the Transport for Buckinghamshire (TfB) complaints process, and asked how the Council could monitor Stage 1 complaints being handled by contractors.

Kate Reed, Centralised Complaints Programme Manager, said that all Stage 1 complaints were recorded centrally. They were meeting with all contract managers to arrange that Stage 1 complaints were stored centrally.

A member asked what contractual mechanisms they had to enforce this. Carolyn Scholes said that there should be a clause in every contract. Newer contracts contained key performance indicators.

A member thanked Carolyn Scholes for a very comprehensive report, and asked if she had more information about why the number of Stage 3 complaints was increasing annually. Carolyn Scholes said that due to the new Team, the number of Stage 1 complaints had increased, and the numbers of Stage 3 complaints currently were a 'knock-on' from these. Numbers of complaints were also topical (e.g. in regard to potholes). Society was also becoming more litigious.

Kate Reed said that they asked complainants to come back to them if they were not happy, which could cause an increase in complaints.

A member said that they sat on the Arla Liaison Committee, and asked if complaints were passed to the Liaison Committee, or to District Councils (e.g. for complaints regarding planning).

Kate Reed said that they usually signposted complainants to other organisations such as District Councils. They had spoken to colleagues at District Councils to ensure that their approaches were joined up. They also recorded these types of complaints as they could learn from them, even if the complaints were not in regard to the County Council.

The member asked if they had seen an increase in complaints since Aylesbury had not had a Local Plan. Kate Reed said they had not.

A member said that the report was very commendable and that the numbers of complaints were low, considering the complexity of the Council.

**The Regulatory and Audit Committee noted the Report.**

## **12 HEARING THE CUSTOMER'S VIEW ANNUAL REPORT - CHILDREN AND YOUNG PEOPLE'S SOCIAL CARE**

Maxine Moore, Statutory Complaints Officer, was welcomed to the meeting.

Maxine Moore told members that:

- This was the Annual Report of the Children and Young People's Social Care Statutory Complaints Procedure, 'Hearing the Customer's View,' and covered the period between 1 April 2013 and 31 March 2014.
- The new team structure had been brought in in April 2013. Overall responsibility lay with the Complaints Team Manager.
- In the year covered by the report, 101 compliments had been received, which was a steady increase on the previous year.
- 61 formal complaints had been received and managed through Stage 1 of the Statutory Complaints procedure. This was a lower figure than in previous years. A possible reason for this was the better management and understanding of what constituted a complaint within the Regulations.

- 10 complaints had been managed through to Stage 2. Children and Young People's Social Care work inevitably attracted some complex complaints, which could be difficult to resolve. Four complaints had gone to Stage 3 Panels. There were an additional two complaints which returned to the Team after Stage 2, but these had been resolved without going to Panel.
- Since April 2013, Children's Services had tasked an officer within the Quality Standards and Performance (QSP) Team with overseeing any recommendations made and ensuring that there was due consideration given by the relevant services. The QSP officer also reported back to the Complaints Team with an updated matrix within three months of the complaint closing, with details of what recommendations may have been put in place and what learning had been shared with the Service.
- There had been a few examples of where learning had been cascaded within the Service, but this had not been consistently approached. Teams appeared to be operating with a 'silo' mentality.
- In the following year, officers would be exploring alternative ways of conducting Stage 2 investigations in addition to making enquiries about whether Alternative Dispute Resolution would be an option for resolution.
- They would also continue to offer training to Social Workers. The First Response Team had already received training and they were planning to roll this out across the whole Service.

A member said that the Alternative Dispute Resolution route would be useful to address complaints early on and to reduce cost.

A member thanked Maxine Moore for adding a section in the report about compliments, and said that this was very good for staff.

A member referred to page 47 and said that the figures did not tie in with the criticisms received from Ofsted. Maxine Moore said that in the previous year the First Response Team had come under the Children in Need Service.

The member said that the figures for complaints seemed low and asked if they benchmarked with other Local Authorities. Maxine Moore said that they did, and that they were part of the Eastern region. The figures for the Council were average for the size of the authority. They had looked at this to ensure that they were capturing all complaints, and this was why Maxine Moore wanted to work closer with NYAS. It was important that they were making people more aware of where and how to complain. The member said that they commended that.

### **| The Regulatory and Audit Committee noted the Report.**

## **13 MAKING EXPERIENCES COUNT ANNUAL REPORT - ADULT AND FAMILY WELLBEING SOCIAL CARE COMPLAINTS**

Michelle King, Statutory Complaints Officer, was welcomed, and said the following:

- The Report was the Annual Report of the Adults and Family Wellbeing Social Care Statutory Complaints Procedure, 'Making Experiences Count.' The Report covered the period between 1 April 2013 and 31 March 2014.
- The statutory adult social care complaints procedure was a one stage process.
- 54 compliments had been received during the period covered by the Report.
- There were 101 formal complaints investigated in 2013/14. This was a reduction from previous years.
- There had been a significant spike in complaints during the second quarter of the year. This could have been due to some training which had been carried out which could have raised awareness among colleagues about the management of complaints.

- In addition to the complaints, there had also been 56 contacts received by the Complaints and Information Team, which had been resolved to the satisfaction of the customers within 48 hours.

A member referred to paragraph 9.1 and asked why enquiries from Members of Parliament were not recorded as complaints. Michelle King said that the current system involved personal assistants working with MPs, and that the Team received the enquiries retrospectively. They had proposed that the Team take on the management of these enquiries so that they could be recorded like other complaints.

A member asked if the actual time taken to deal with each complaint included backlog and workload. Michelle King said that the time covered the period from when the Team received the complaint until it ended. In 2009 the Regulations had changed so that the procedure had become a one-stage process, followed by the option to go to the Local Government Ombudsman. The legislative time frame was six months.

156 days had been noted as unacceptable, and they had introduced a new process internally. This had resulted in a dramatic improvement in timescales. They wanted to look at more of a triage approach to enable complaints to be responded to more quickly.

A member asked about the longest timescale for a complaint. Michelle King said that one complaint had taken 316 days. It had gone to independent investigation, and had covered six years of issues. It probably took longer than it should have, but it had been a complex complaint.

A member referred to paragraph 7.3 and asked when the triage approach would start. Michelle King said that it would start in April 2015.

A member asked if the recording of characteristics of complaints was a legal requirement. Michelle King said that it was not a legal requirement but that they followed the same process as the Council used for Children's Social Care complaints, through Swift. Michelle King had taken a report to the Leadership Team the previous week, and following this she had added some qualitative data. The ethnicity breakdown of complainants matched the ethnicity of the users of services. Michelle King said that she would like to continue to receive this data so that they would know if there was a particular group they were not reaching.

**| The Regulatory and Audit Committee noted the Report.**

## **14 RISK MANAGEMENT GROUP UPDATE REPORT**

Maggie Gibb, Risk and Insurance Manager, referred members to her report, which summarised the discussions at the Risk Management Group (RMG) meeting on 31 October 2014.

Jonathan Noble (Future Shape Team) had attended the meeting to update on the Future Shape Programme and the management of risks within the Programme. Due to tight timescales, the Managing Directors of both the Shared Services Business Unit and the Transport, Environment and Economy Business Unit would be attending the next RMG meetings to discuss their implementation plans and the management of risks, in preparation for the 'go live' date in April 2015.

Gill Harding (Director, Place Service) had also attended the meeting and had presented the Transport Risk Register. However the Register had not been complete, and all the risks in it had been rated as 'green,' which was not an accurate reflection of the risks faced by the Service. The RMG had therefore requested that the Risk Register be reviewed and updated as a matter of urgency. This would be presented to the RMG in January 2015.

Ian Dyson said that the RMG had raised some issues regarding the Legal Alternative Business Structure (ABS) and had proposed that the 'go live' date for the ABS be delayed. However when Ian Dyson had spoken to Anne Davies, it became clear that there was further information.

Anne Davies gave her apologies for not having attended the RMG meeting. She explained that the Legal Service was employed under the Solicitors' Code. As the Council had changed, the Code had made it harder for the Legal Service to work for clients. The only way around this had been the ABS. The Solicitors' Regulation Authority (SRA) had given its authorisation for the ABS, which had taken nine months. If they did not go live with the ABS on 24 November 2014, they would have to go back to the SRA for a revised authorisation date. In preparation for the ABS the Service had covered every process they could think of. The Legal Service had been a traded service for 20 years.

Anne Davies said that the ABS would target smaller local authorities and charities, and would offer prices 70% lower than others. The costs to run the ABS were minimal. If all staff in the Legal Service worked for the ABS for 1/3 of their time, the ABS would make £700k profit per year.

A member if there was enough work available for staff to put 1/3 of their time into the ABS. Anne Davies said that they had made sure that staff were efficient, and said that she was more concerned about there being too much work. The ABS would build profit for the Council.

**The Regulatory and Audit Committee noted the Report.**

## **15 ANNUAL AUDIT LETTER FOR BUCKINGHAMSHIRE COUNTY COUNCIL - GRANT THORNTON**

Paul Grady (Grant Thornton) referred members to the Annual Audit Letter. The Letter was a summary of the work undertaken throughout the year, and also summarised the key findings.

Paul Grady told members that Iain Murray had been promoted to lead another audit.

A member asked about Recommendation 2 on page 85. Iain Murray said that they had used a computer tool to drill down. Seven journals had been found to relate to the same officer, but this had been a housekeeping point, and was not material.

A member referred to page 86, Recommendation 5, in regard to bank reconciliations, and asked for a report back on this at a future meeting. **Action: RS**

**The Regulatory and Audit Committee noted the Annual Audit Letter.**

## **16 FORWARD PLAN - STANDING ITEM**

Members noted the Forward Plan.

## **17 DATE AND TIME OF NEXT MEETING**

28 January 2015, 9am, Mezzanine Room 2, County Hall, Aylesbury

**CHAIRMAN**