

Meeting

Governance, AUDIT, RISK MANAGEMENT AND STANDARDS COMMITTEE (GARMS)

Date and time

Monday 16TH OCTOBER, 2023

At 7.00 PM

Venue

Hendon TOWN HALL, THE BURROUGHS, LONDON NW4 4BQ

To: Members of Governance, AUDIT, RISK MANAGEMENT AND STANDARDS COMMITTEE (GARMS) (quorum 3)

Chair: Councillor Arjun Mittra
Vice Chair: Councillor Ella Rose

Simon Radford
Rohit Grover

Humayune Khalick
Peter Zinkin

Richard Harbord
(Independent Member)

Jack Chan (Independent
Member)

Substitute Members

Shuey Gordon

Geof Cooke
Edith David

Alex Prager
Laithe Jajeh

In line with the Constitution's Public Participation and Engagement Rules, requests to submit public questions or comments must be submitted by 10AM on the third working day before the date of the committee meeting. Therefore, the deadline for this meeting is 11 October 2023 at 10AM. Requests must be submitted to Farah Hussain Andrew.Charlwood@Barnet.gov.uk 020 8359 2014

You are requested to attend the above meeting for which an agenda is attached.

Andrew Charlwood – Head of Governance

Governance Service contact: Andrew Charlwood Andrew.Charlwood@Barnet.gov.uk 020 8359 2014

Media Relations Contact: Tristan Garrick 020 8359 2454 Tristan.Garrick@Barnet.gov.uk

Assurance Group

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Minutes of the Governance, Audit, Risk Management and Standards Committee (GARMS)

24 July 2023

Members Present:-

AGENDA ITEM 2

Councillor Arjun Mittra (Chair)

Councillor Emma Whysall	Councillor Geof Cooke (Substitute for
Councillor Rohit Grover	Councillor Giulia Monasterio)
Councillor Humayune Khalick	Jack Chan (Independent Member)
Councillor Peter Zinkin	Richard Harbord (Independent Member)

Apologies for Absence:

Councillor Giulia Monasterio

The Chair welcomed the Jack Chan and Richard Harbord as the recently appointed Independent Members of the Committee following a recent recruitment process.

The Chair thanked the retiring Independent Member, Geraldine Chadwick, for her service on the Audit Committee.

1. ABSENCE OF MEMBERS

An apology for absence had been received from Councillor Giulia Monasterio who had been substituted for by Councillor Geof Cooke.

2. DECLARATION OF MEMBERS' DISCLOSABLE PECUNIARY INTERESTS AND OTHER INTERESTS

Councillor Emma Whysall declared a non-pecuniary interest in the urgent late item Local Government and Social Care Ombudsman (LGSCO) Public Interest Report as her sister worked for the LGSCO.

3. DEPUTATIONS (IF ANY)

None.

4. PUBLIC QUESTIONS AND COMMENTS (IF ANY)

None.

5. LOCAL GOVERNMENT AND SOCIAL CARE OMBUDSMAN (LGSCO) PUBLIC INTEREST REPORT

The Committee considered a Public Interest Report issued by the Local Government and Social Care Ombudsman (LGSCO) regarding an upheld complaint relating to Council Tax. Sarah Wilson (Head of Legal) presented the report on behalf of the Monitoring Officer. It was explained that the complaint was investigated, and the Ombudsman made the decision to publish a Public Interest Report. Allan Clark (Head of Finance: Exchequer) and Liz Squires (Revenue Manager – Capita) were in attendance from the

service to answer questions from the Committee. It was noted that the Council had completed the recommendations made by the LGSCO in relation to this case, in accordance with the specified timescales.

In response to questions asked, it was noted that several steps had been taken to prevent future incidents including: a triaging of complaints received which are then subsequently escalated to senior officers; reviewing communication approach to ensure that it is appropriate for the service user; and a more agile approach.

RESOLVED that:

- 1) The LGSCO upheld complaint (Case ID 21017371) as detailed within the Ombudsman's report (Appendix A) be noted.**
- 2) The actions taken by the Council to remedy the issues and to prevent recurrence (Appendix B) be noted and agreed.**
- 3) Consideration would be given by officers to any further learning or recommendations arising from this matter.**

6. Q4 2022-23 CORPORATE RISK REGISTER

In the absence of Alaine Clarke (Head of Programmes, Performance and Risk), Andrew Charwood (Head of Governance) introduced the report. He explained that Strategic Risks were set out in Appendix A of the report and High Level (15+) risks were set out in Appendix B. It was noted that there were 223 open risks across the Directorate risk registers in Q4: 24 Strategic Risks and 199 Service Risks (which included joint risks with contractors including Capita, Barnet Education and Learning Service and The Barnet Group).

The Committee questioned whether the TUPE transfer of RE (Regional Enterprise) from Capita should be reported as a strategic risk due to possible disruptions to business as usual, resourcing the change, etc. Clair Green (Executive Director of Assurance) and Anisa Darr (Executive Director of Strategy and Resources) informed the Committee that now that RE staff had transferred into the Council, each service area that has taken on a returned service will be considering their own operational risk, in relation to resourcing, vacancies, impact on service delivery, etc. which would be reported as part of the Quarter 1 2023/24 report.

It was noted that all risks categorised as Strategic Risks and Operational Risks with a score over 12 were considered by the Council Management Team (CMT).

RESOLVED that the Committee note the status of the Council's Strategic Risks and High Level (15+) risks, including the controls/mitigations in place to manage these risks.

7. REVIEW OF COMPLAINTS MANAGEMENT SYSTEM

Ali Saka (Head of Assurance and Business Development) and Andrew Cox (Improvement Lead Assurance) presented a report on the iCasework complaints management system and how it is used to improve complaints management and oversight. It was noted that iCasework had been used for complaints since April 2022 and was a case management system which: supported officers in effective handling of

complaints in accordance with the Council policy; in carrying out root cause analysis; and in tracking remedial actions and improvements. In response to questions asked by the Committee, it was explained that Barnet Homes had its own complaints process, but there may be the opportunity for them to adopt the system for their own complaints in future.

RESOLVED that the Committee note the report describing work undertaken to embed the new complaints case management system which aims to improve the Council's complaints management process and the experiences of residents.

8. EXTERNAL AUDIT PLAN 2022/23 AND CLOSURE OF ACCOUNTS

Jyotika Dabasia (Assistant Director Finance) presented a report which provided the Committee with an update on the progress towards the sign off of the 2020/21 Statement of Accounts and proposals for the audit of the Council's 2021/22 and 2022/23 Statement of Accounts. It was reported that no material impacts had been found since the last update provided to Committee. Appendix A provided an audit status and timelines report from BDO.

The council's audit partner from BDO (Lisa Blake) and Audit Manager (Michael Asare Bediako) gave an executive summary of the status of the various audits and presented their completion plan. BDO also explained the recent preliminary proposals from the Department for Levelling Up, Housing and Communities to address the significant backlog in local authority audits in England. It was explained that for 2022/23, BDO would be the Council's appointed external auditors with Grant Thornton UK LLP taking over for a period of for five years from 2023/24 to 2027/28.

Ajay K Jha, the Audit Manager for Grant Thornton (who will be taking over the council's external audits from 2023/24), introduced himself to the Committee.

RESOLVED that:

- 1) The Committee notes the progress towards the sign off of the Council's 2020/21 Statement of Accounts.**
- 2) The Committee notes BDO's proposals for the audit of the Council's 2021/22 and 2022/23 Statement of Accounts.**

9. INTERNAL AUDIT ANNUAL OPINION 2022/23

Caroline Glitre (Head of Internal Audit) presented the internal Audit Annual Opinion 2022/23 to the Committee.

It was explained that each year Internal Audit gives an overall opinion on the system of internal control and corporate governance within the Council which is a requirement of the Public Sector Internal Audit Standards (PSIAs). The Opinion covers the internal audit work completed in delivering the 2022/23 audit plan to 31 March 2023. The four possible ratings that can be given are: No Assurance; Limited Assurance; Reasonable Assurance; and Substantial Assurance. In 2022/23, the annual opinion overall was: Reasonable Assurance which was consistent with the rating for 2021/22.

In response to questions, the Head of Internal Audit confirmed that the Director of Operations in Capita would attend a future meeting and would be able give the

Committee a more detailed explanation on the transition of Capita services back into the Council.

RESOLVED that the Committee note the contents of the Annual Internal Audit Opinion 2022/23.

10. ANNUAL REPORT OF THE AUDIT COMMITTEE 2022/23

Clair Green (Executive Director of Assurance) presented the Annual Report of the Audit Committee and explained that in accordance with the Constitution the Committee was required to prepare a report to Full Council on annual basis on its activity and effectiveness. It was noted that due to timing issues, the report had already been presented to Full Council on 11 July 2023.

RESOLVED that the Committee note and approve the Annual Report of the Audit Committee 2022/23 as an accurate record of the outcomes and work programme for the year.

11. INTERNAL AUDIT EXCEPTION RECOMMENDATIONS AND PROGRESS REPORT Q1 - 1ST APRIL - 30TH JUNE 2023

Caroline Glitre (Head of Internal Audit) presented the Internal Audit Exception Recommendations Report and Q1 Progress Report (1 April to 30 June 2023). She explained that 15 reviews had been completed in the period and to date had delivered 35% of the 2023/24 annual Internal Audit programme of work. This was above the Quarter 1 target of 24%.

It was noted that there were two Limited Assurance reports issued during the quarter which were summarised in the report relating to: Building Control; and Pardes House Primary School. The background scope and review findings were noted by the Committee. Actions had been agreed with the service and School and follow-up audits would be undertaken.

RESOLVED that Committee:

- 1. Note the general work completed to date on the Internal Audit Q1 Report (1 April to 30 June 2023).**
- 2. Note the work completed to date on Schools within the Internal Audit Q1 Report (1 April to 30 June 2023).**
- 3. Approve the revised Internal Audit Charter.**

12. MEMBER DEVELOPMENT PROGRAMME

Andrew Charlwood (Head of Governance) presented a report which provided an update on the Member Development Programme and progress towards assessment for the Local Government Association Charter+ (Plus) status.

The Committee were requested to consider the mandatory designation of the Adults Safeguarding and Children's Safeguarding training for the reasons detailed in section 1.9 – 1.11 of the report. Following debate, the Committee agreed that it was important that the mandatory designation of the Adults Safeguarding and Children's Safeguarding

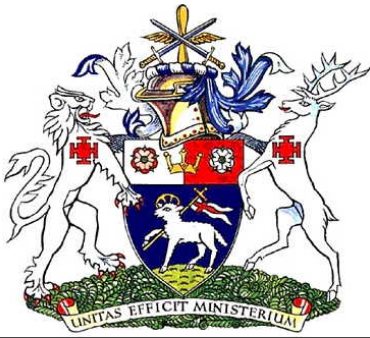
training. It was suggested that officers should review the format of the sessions to see whether there were alternative formats which may encourage attendance.

RESOLVED that the Committee:

- 1. Note the sessions delivered since January 2023 as set out in Appendix A.**
- 2. Agree the forward plan of Member Development sessions as set out in Appendix B.**
- 3. Note the progress towards assessment for Charter+ (Plus) status (Appendix C) and the progress of Personal Development Plans for Councillors (Appendix D).**
- 4. Agree that the mandatory designation of the Adults Safeguarding and Children's Safeguarding training should be retained and request that officers review the format of the sessions to see whether there are alternative formats which may encourage attendance.**

The meeting finished at 9.05 pm

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AGENDA ITEM 7 Governance, Audit, Risk Management and Standards (GARMS) Committee

Title	Status of the 2020/21 audit and plans for 2021/22 and 2022/23 audit delivery
Date of meeting	16 October 2023
Report of	Executive Director of Strategy and Resources
Wards	All
Status	Public
Urgent	No
Appendices	Appendix: Report from Grant Thornton on: LB Barnet Audit Progress Report and Sector Update
Officer Contact Details	<p>Anisa Darr – Executive Director of Strategy and Resources Anisa.Darr@Barnet.gov.uk 020 8359 7634</p> <p>Jyotika Dabasia – Assistant Director Finance Jyotika.Dabasia@Barnet.gov.uk 020 8359 4673</p>

Summary

2020/21 External Audit

The external audit of the Council's Statement of Account is undertaken by BDO.

BDO were presented with the draft financial statements (including the Pension Fund accounts) on 30th July 2021 and the draft accounts were published by the end of July 2021 in line with the Accounts and Audit Regulations 2015.

The 2015 Regulations require that the final approved accounts are published no later than 30th September of the financial year immediately following the end of the financial year to which the statement relates.

2021/22 and 2022/23 External Audit

BDO LLP (the council's appointed external auditors) are required to produce an audit planning report to highlight the key elements of their external audit strategy for the Council for the years 2021/22 and 2022/23.

The council's draft accounts for 2021/22 were published by the end of July 2022 and draft accounts for 2022/23 were published by the end of May 2023 in line with the Accounts and Audit Regulations 2015 and The Accounts and Audit (Amendment) Regulations 2022.

BDO will give a verbal update on DLUHC's proposed backstop solutions for completing 2021/22 and 2022/23 audits.

BDO has advised that a whistle blower complaint has been brought to their attention. At this stage they are not sure whether or not this will impact on the ongoing 2021 audit.

Recommendations

- 1. That the Committee notes the progress towards the sign off of the Council's 2020/21 Statement of Accounts.**
- 2. That the Committee notes BDO's verbal update on DHLUC's (Department for Levelling Up Housing & Communities) proposed backstop solutions for completing 2021/22 and 2022/23 audits.**

1. Reasons for the Recommendations

- 1.1 BDO advised Audit Committee in July 2021 that they were not able to commence the audit until September, it was therefore not possible for them to conclude their audit in line with the statutory deadline. BDO presented a draft completion report to Committee in December 2021 and again in February 2022.
- 1.2 Audit Committee in February 2022:
 - Approved, subject to there being no material amendments, the Statement of Accounts for 2020/21 and recommended that they be signed by the Chairman and the Executive Director of Resources (Statutory 151 Officer) on behalf of the Council.
 - Delegated to the Executive Director of Resources (Statutory 151 officer) the ability to make necessary amendments to the statement of accounts, in so far as there is no material impact on the General Fund, based on any subsequent findings of the External Auditor.
- 1.3 For 2020/21 audit, no material impacts have been found since the last update provided to Committee the final Statement of Accounts, including the Pension Fund accounts, will be published on the council's website once BDO have provided their Audit Opinion for inclusion in the Statement of Accounts.
- 1.4 Under Section 151 of the Local Government Act 1972- "...every local authority shall make arrangements for the proper administration of their financial affairs". Additionally, in accordance with International Standard on Auditing (ISA) 260, the external auditor is required to issue detailed reports on matters arising from the audit of the council's accounts and pension fund accounts.

1.5	In July 2023, DHLUC issued a statement outlining proposals to address the significant backlog in local authority audits in England. BDO will give a verbal update to committee on these proposals. A link to the statement is included in section 9.1 in the background papers to this report.
2.	Alternative Options Considered and Not Recommended
2.1	None in the context of this report.
3.	Post Decision Implementation
3.1	None in the context of this report.
4.	Corporate Priorities, Performance and Other Considerations
	<p>Corporate Plan</p> <p>4.1 This supports the council’s corporate priorities as expressed through Our Plan for Barnet which sets out our vision and strategy for the borough. This includes the outcomes we want to achieve for the borough, the priorities we will focus limited resources on and, our approach for how we will deliver this.</p> <p>4.2 The Annual Statement of Accounts are the primary means by which the Council is held to account for the stewardship of its resources.</p> <p>4.3 The audits for 2021/22, 2021/22 and 2022/23 will assess fundamental aspects of financial standing and performance management in Barnet that relate to underlying principal of being financially responsible now and into the future.</p> <p>Corporate Performance / Outcome Measures</p> <p>4.4 None in the context of this report.</p> <p>Sustainability</p> <p>4.5 None in the context of this report.</p> <p>Corporate Parenting</p> <p>4.6 None in the context of this report.</p> <p>Risk Management</p> <p>4.7 A positive external audit opinion on the council’s Statement of Accounts plays an essential and key role in providing assurance that Barnet’s financial risks are managed in an environment of sound stewardship and control.</p> <p>4.8 There are no key risks relating to the production, audit or publishing of the Statement of Accounts identified in the Council’s risk register however, delays to the completion of audits does create a risk in that any issues identified cannot be addressed and resolved in a timely manner.</p> <p>Insight</p> <p>4.9 None in the context of this report.</p> <p>Social Value</p> <p>4.10 None in the context of this report.</p>

5. Resource Implications (Finance and Value for Money, Procurement, Staffing, IT and Property)
5.1 The Statement of Accounts shows the financial position of the council as at 31 March 2021.
6. Legal Implications and Constitution References
6.1 Section 151 of the Local Government Act 1972 requires that “...every local authority shall make arrangements for the proper administration of their financial affairs”.
6.2 The Council is a public authority that is subject to the audit of its annual accounts by an external auditor. The Local Audit and Accountability Act 2014, Part 5 specifies the conduct of local audit.
6.3 Part 3, Regulation 9 of the Accounts and Audit Regulations 2015 requires that the statement of accounts must be considered by a committee or full council and approved by a resolution of that body. The accounts must then be signed by the person presiding at the meeting. The Section 151 officer must then reconfirm on behalf of the authority that they are satisfied that the statement of accounts presents a true and fair view of the financial position of the authority and its income and expenditure for that year.
6.4 The 2015 Regulations require that the final approved accounts are published not later than 30th September of the financial year immediately following the end of the financial year to which the statement relates. The audit did not commence until September 2021 and it was therefore not possible for it to be concluded in line with the statutory deadline.
6.5 International Standard on Auditing (UK and Ireland) 260 deals with the auditor’s responsibility to communicate with those charged with governance in an audit of financial statements. A link to the website containing ISA 260 can be found in the background papers to this report.
6.6 Under the Council’s Constitution, Part 2B, Terms of Reference and Delegation of Duties to Committees and Sub-Committees, section 2 sets out the terms of reference of the Governance, Audit, Risk Management and Standards Committee which includes in section 2.4.13 which includes “To review and approve the annual statement of accounts and consider the external auditor’s report to those charged with governance on issues arising from the audit of the accounts”.
7. Consultation
7.1 None in the context of this report.
8. Equalities and Diversity
8.1 Accurate financial reporting is important to ensure the management of resources to enable the equitable delivery of services to all members of the community, to reduce the differential impact of the services received by all of Barnet’s diverse communities and to ensure compliance with the council’s duties under the 2010 Equality Act.
9. Background Papers
9.1 DHLUC Statement: Local Audit Delays – Cross-System Statement On Proposals To Clear The Backlog And Embed Timely Audits
9.2 committees.parliament.uk/publications/40932/documents/199432/default/

- 9.3 Governance, Audit, Risk Management and Standards Committee – July 2023: Item 8 [Agenda for Governance, Audit, Risk Management and Standards Committee \(GARMS\) on Monday 24th July, 2023, 7.00 pm \(moderngov.co.uk\)](#)
- 9.4 Audit Committee – April 2023: Item 7 [Agenda for Audit Committee on Wednesday 26th April, 2023, 7.00 pm \(moderngov.co.uk\)](#)
- 9.5 Audit Committee – January 2023: Item 7 [Agenda for Audit Committee on Monday 16th January, 2023, 7.00 pm \(moderngov.co.uk\)](#)

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London Borough Of Barnet Audit Progress Report and Sector Update

September 2023



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The contents of this report relate only to the matters which have come to our attention, which we believe need to be reported to you as part of our audit planning process. It is not a comprehensive record of all the relevant matters, which may be subject to change, and in particular we cannot be held responsible to you for reporting all of the risks which may affect the Authority or all weaknesses in your internal controls. This report has been prepared solely for your benefit and should not be quoted in whole or in part without our prior written consent. We do not accept any responsibility for any loss occasioned to any third party acting, or refraining from acting on the basis of the content of this report, as this report was not prepared for, nor intended for, any other purpose.

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Introduction

Your key Grant Thornton team members are:

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Key Audit Partner

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Ajay Jha

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This paper provides the Governance, Audit, Risk Management and Standards Committee (GARMS) with a report on progress in delivering our responsibilities as your external auditors.

The paper also includes:

- a summary of emerging national issues and developments that may be relevant to you as a local authority; and
- includes a number of challenge questions in respect of these emerging issues which the Committee may wish to consider (these are a tool to use, if helpful, rather than formal questions requiring responses for audit purposes)

Members of GARMS can find further useful material on our website, where we have a section dedicated to our work in the public sector. Here you can download copies of our publications <https://www.grantthornton.co.uk/en/services/public-sector-services/>

If you would like further information on any items in this briefing, or would like to register with Grant Thornton to receive regular email updates on issues that are of interest to you, please contact either your Engagement Lead or Engagement Manager.

Progress at September 2023

Auditors Appointment

Grant Thornton have been appointed your auditor for years 23-24 onwards. This is a five-year contract. The 2023/24 audits are the first in the second five-year appointing period specified by PSAA. New contracts for this appointing period were awarded in 2022 to six audit firms, following a challenging and protracted procurement. The procurement demonstrated clearly the limited audit capacity available to meet the demand and requirements of the sector.

Scale fee

PSAA are required under local audit regulations to consult on and set the 2023/24 fee scale before 1 December 2023. Proposals to address the backlog are still under consideration and any changes affecting fees are still to be confirmed, so PSAA cannot reflect them in the fee scale yet. PSAA will need to assess the impact on audit fees once changes are confirmed, and at that point PSAA will write to opted-in bodies to set out how we will update fees. We understand PSAA has recently written to all Councils with proposed fees for 23/24.

Financial Statements Audit and value for money

In the previous GARMS, we introduced the audit team for 23-24 audit. In the current environment of Local government audit delays, we remain committed to start the 23-24 audit in 2024 and have already commenced with value for money risk assessment and some early work on contracting and procurement under the requirements of the NAO Audit Code of Practice.

Audit Backlog proposals

DLUHC have written to all councils outlining a framework for clearing the backlog of audits.

Meetings

We met with Finance Officers in July as part of our quarterly liaison meetings and continue to be in discussions with finance staff regarding emerging developments and to ensure the audit process is smooth and effective.

Sector Update

Authorities continue to try to achieve greater efficiency in the delivery of public services, whilst facing challenges to address rising demand, ongoing budget pressures and social inequality.

Our sector update provides you with an up to date summary of emerging national issues and developments to support you. We cover areas which may have an impact on your organisation, the wider local government sector and the public sector as a whole. Links are provided to the detailed report/briefing to allow you to delve further and find out more.

Our public sector team at Grant Thornton also undertake research on service and technical issues. We will bring you the latest research publications in this update. We also include areas of potential interest to start conversations within the organisation and with audit committee members, as well as any accounting and regulatory updates.

- [Grant Thornton Publications](#)
- [Insights from local government sector specialists](#)
- [Reports of interest](#)
- [Accounting and regulatory updates](#)

More information can be found on our dedicated public sector and local government sections on the Grant Thornton website by clicking on the logos below:

A teal rectangular button with the text "Public Sector" in white, centered.A purple rectangular button with the text "Local government" in white, centered.

Exploring the reasons for delayed publication of audited local authority accounts in England – Grant Thornton

Recent performance against target publication dates for audited local authority accounts in England has been poor. There are some reasons for optimism that there will be an improvement in the timeliness of publication of audited accounts as foundations are being laid for the future.

In this report we explore the requirements for publication of draft and audited accounts and look at some of the reasons for the decline in performance against these requirements over time. Only 12% of audited accounts for 2021/22 were published by the target date of 30 November 2022. There is no single cause for the delays in completing local authority audits, and unfortunately there is no quick solution in a complicated system involving multiple parties. We consider a variety of factors contributing to delays, note the measures which have already been taken to support the local audit system and make recommendations for further improvement.

There are some reasons for cautious optimism that the system will begin to recover and there will be a gradual return to better compliance with publication targets. However, we consider that these are outweighed by a number of risk factors and that the September deadline for audited accounts set by DHLUC is not achievable in the short term and also not achievable until there is further significant change in local audit and local government.

We note the following matters that are yet to be tackled:

- clarity over the purpose of local audit
- the complexity of local government financial statements
- agreement on the focus of financial statements audit work
- an improvement in the quality of financial statements and working papers

an agreed approach to dealing with the backlog of local government audits

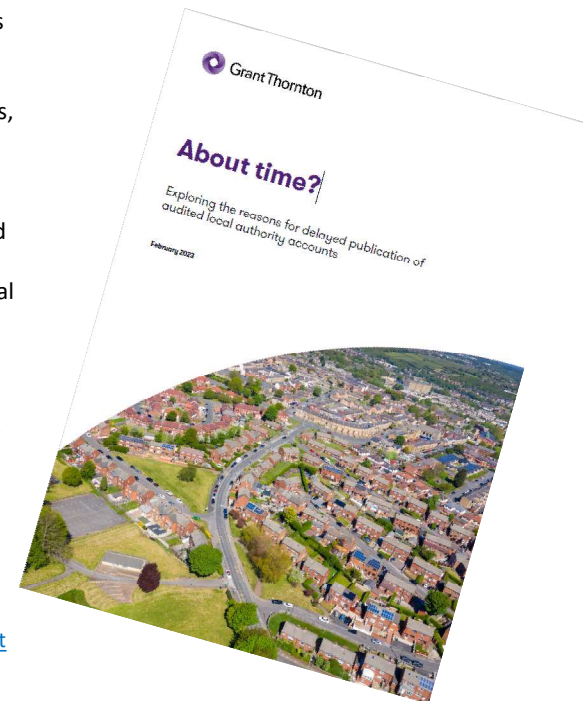
Government intervention where there are significant failures in financial reporting processes

All key stakeholders including local audited bodies, the audit firms, the Department for Levelling Up Housing and Communities, PSAA, the NAO, the FRC and its successor ARGA, CIPFA and the Institute of Chartered Accountants in England and Wales will need to continue their efforts to support a coherent and sustainable system of local audit, acknowledging that it will take time to get things back on track.

We make recommendations in our report for various stakeholders, including Audit Committees and auditors, and include a checklist for consideration by management and Audit Committees within an Appendix to the report.

[Report: key challenges in local audit accounting | Grant Thornton](#)

Read the full report here:



Current local audit deadline ‘unachievable’- Grant Thornton

Low capacity in council finance teams and the failure to deal with historic accounting issues mean the current September audit deadline is unlikely to be met.

The firm said the changes in recent years to council investment strategies have seen annual accounts become increasingly complex.

In evidence to a Public Accounts Committee inquiry, Grant Thornton said the increased workload and pressure on resources have complicated recruitment and compounded delays.

The auditors said it is unlikely firms will be able to meet the 30 September deadline for publishing opinions on 2022-23 financial statements, because they are still working on previous years’ accounts.

The firm said one of the key issues causing delays is the lack of consensus over areas of audit focus, specifically over how land and buildings are audited.

“Too much audit resource is absorbed in dealing with longstanding financial reporting issues at poorly performing bodies,” the firm said.

In certain instances, audits are open as far back as 2017-18.

“Perhaps more importantly, there has not been enough debate with the sector on the purpose of local audit and the enhanced audit scrutiny it faces.

“This is particularly the case with the audit of property. Until these matters are resolved we do not consider that the September deadline is achievable.”



Current local audit deadline ‘unachievable’- Grant Thornton(cont.)

Grant Thornton said that while audit firms can be sanctioned by the Financial Reporting Council for failing to comply with regulations, there are currently no punishments for public bodies that fail to meet requirements.

It said there should be interventions for audited bodies that show “significant failures in financial reporting and an unwillingness to improve”.

In its evidence the firm blamed a lack of council funding to bolster finance teams for a reduction in the quality of reporting, causing further delays.

“Unfortunately, the quality of too many financial statements and working papers are not adequate,” Grant Thornton said.

“Improvement in accounts preparation, and recruitment and investment in finance teams is essential if local government is to prepare consistently high-quality draft accounts and respond to the challenges presented by an enhanced audit regime.”

In December, local audit procurement body Public Sector Audit Appointments revealed that only 12% of local government audits for 2021-22 were completed by the 30 November deadline.

PSAA said that an 630 opinions were outstanding from both 2021-22 and previous years, and the level of opinions completed on time has declined significantly from 45% in 2019-20.

Read the full report here

committees.parliament.uk/writtenevidence/118580/pdf/



DLUHC to implement its new proposals to clear audit backlog by March 2024

A range of proposals and actions to address the backlog of local audits in England has been set out by the Department for Levelling Up, Housing and Communities (DLUHC).

These include setting statutory deadlines and issuing qualifications and disclaimers of opinion in the short term.

The proposals have been agreed in principle with key partners across the local audit system, DLUHC said. The National Audit Office (NAO) is considering whether to develop a replacement Code of Audit Practice to give effect to the changes, the department added.

In addition, DLUHC is considering whether legislative change is needed to set new statutory deadlines for local bodies to publish accounts to mirror the proposed changes to the Code of Audit Practice.

Legislative change may also be needed to address any knock-on effects of the proposals which may impact the audit of opening balances within the accounts for future years, the department said.

Under these proposals, section 151 officers will be expected to work with Audit Committee members (or equivalent) to approve the final accounts by the statutory deadline in order for the audit opinion to be issued at the same time.

Read the full proposal here

committees.parliament.uk/publications/40932/documents/199432/default/



Call for sanctions for late accounts amid fears of ‘more Wokings - public accounts committee (PAC)

The Commons’ public accounts committee (PAC) published a report, Timeliness of local auditor reporting, which highlights problems caused by the delays to local audit.

Just 12% of local government bodies received their audit opinions in time to publish their 2021-22 accounts by the extended deadline. The committee warned that the problem is likely to get worse before it gets better.

The report points out that there are no sanctions for failing to produce accounts on time, for either auditors or councils.

The PAC and others have been concerned about the implications of audit delays and Sir Geoffrey Clifton-Brown said cases like that of Thurrock Council and Woking Borough Council demonstrate why this issue needs to be addressed. Both councils had years of unaudited accounts when they declared themselves effectively bankrupt due to excessive levels of debt.



Around 700,000 children are studying in schools that require major rebuilding or refurbishment works - NAO

The Department for Education has published guidance on school buildings which were constructed using reinforced autoclaved aerated concrete [#RAAC](#) – a lightweight form of concrete prone to failure.

<https://educationhub.blog.gov.uk/2023/09/04/new-guidance-on-raac-in-education-settings/>

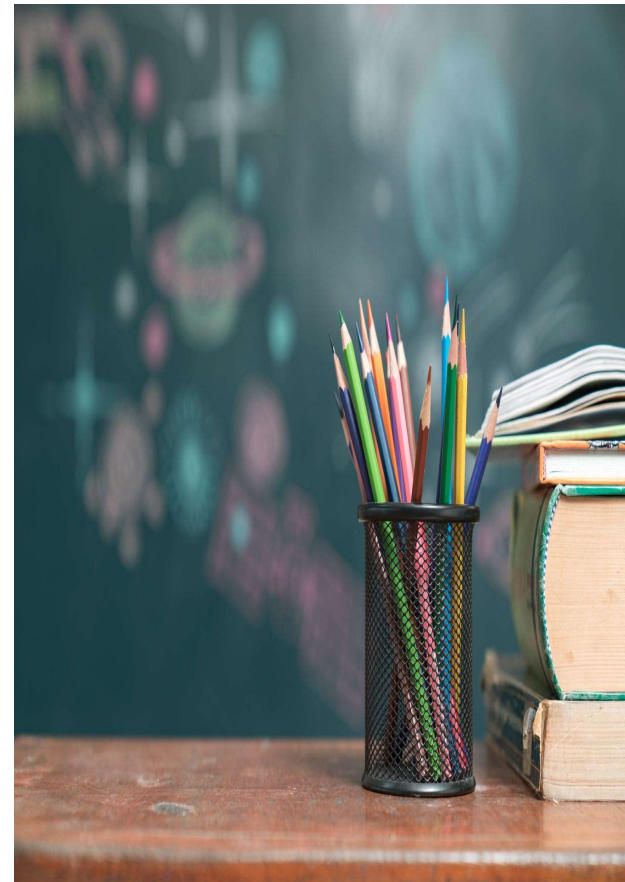
The NAO also published a report this summer about the declining condition of The school estate. The UK's independent public spending watchdog's report found that more than a third (24,000) of English school buildings are past their estimated initial design life. These buildings can normally continue to be used, but are generally more expensive to maintain and, on average, have poorer energy efficiency leading to higher running costs.

In recent years, there has been a significant funding shortfall contributing to deterioration across the school estate. The department for Education (DfE) has reported £7 billion a year as the best practice level of capital funding to repair and rebuild the school estate.

The report says DfE has assessed the possibility of a building collapse or failure causing death or injury as a 'critical and very likely' risk since summer 2021. The report highlighted ongoing concerns with the use of reinforced autoclaved aerated concrete (RAAC) – used between the 1950s and mid-1990s. DfE has been considering the potential risk posed by RAAC since late 2018, following a school roof collapse.

Read The full report here

<https://www.nao.org.uk/press-releases/condition-of-school-buildings-and-dfe-sustainability-overview/>



LGPS valuation gives “cause for optimism – Hymans Robertson”

Many Local Government Pension Schemes are in a stronger position than three years ago to meet future member benefits, pension advisors have said following the most recent valuations.

Despite market instability brought on by Covid-19 and exacerbated by Russia’s invasion of Ukraine, the overall funding level rose to 107% of past service in March 2022, compared to 98.5% in 2019, Hymans Robertson said in a [report](#).

Analysts reviewed the triennial valuations of 73 of the 86 LGPS funds, and said that on average fund asset values rose by 27.5% up to March 2022.

Hymans Robertson said the better-than-expected funding outlook has prompted a reduction in employer contributions, from 21.9% of pay in 2019 to 20.8% 2022.

Robert Bilton, head of LGPS valuations at Hymans Robertson, said: “Our analysis gives cause for optimism that the outlook for the long-term funding sustainability of the LGPS is robust, not least due to the hard work that has taken place across all funds over the last decade and longer.

“While the good news is welcome, the hard work doesn’t stop, and it is important that funds use the next two years to continue to systematically review their risks to keep them in the best place possible ahead of the valuations in 2025.”

The report said funding levels rose by the most for schemes that were already better-funded in 2019, but balances increased “across the board” in all funds that were reviewed.

Researchers said higher asset values mean funds will only need to deliver real investment returns of about 1.5% per year over the next 20 years to ensure they are fully funded.

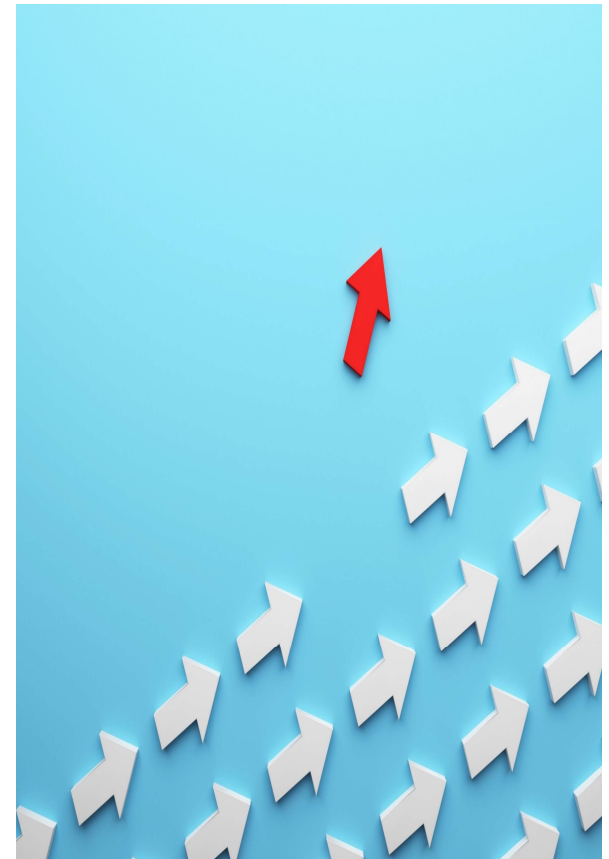
Hymans said it expects more than three-quarter (77%) of funds to be able meet the annual level of investment returns by 2040.

“This is a very positive funding position for the LGPS, Considering that, not so long ago, the Scheme Advisory Board had set up a ‘deficit working group’ and the significant market events that the LGPS has had to navigate in recent years.”

“Being in such a strong position is a testament to the diligent and hard work of administering authorities over the last decade.”

Read the full report here

[LGPS 2022 Valuation - the big picture.pdf \(hymans.co.uk\)](#)



Sustainability reporting in the public sector - CIPFA

CIPFA said, Sustainability reporting in the public sector is in its infancy, and there is an evolutionary journey to be embarked upon – sooner rather than later.

Sustainability reporting is the recording and disclosure of an organisation’s environmental impact caused by its activities. It has been widely adopted in the private sector, but in the public sector it is not the same story.

Having a clear understanding of the overall carbon footprint of the public sector is vital if we are to tackle climate change, find solutions and encourage sustainable development, said CIPFA.

Public sector sustainability reporting: time to step it up provides answers and positive steps to addressing the most pressing challenges around public sector sustainability questions. The current patchwork of public sector sustainability reporting frameworks are inconsistent and confusing. The report draws on already existing standards and frameworks that are relevant and useful to the public sector, rather than trying to reinvent the wheel, said CIPFA.

Alignment to financial reporting

The report recommends an approach that aligns sustainability reporting with the wider practice of financial reporting. The four key areas in this approach are governance, the management approach, performance and targets, and strategy. ‘Public sector sustainability reporting: time to step it up’ provides public finance professionals with a good understanding of what information needs to be disclosed and the process in producing a high quality report.

Read full report from CIPFA here

[Sustainability Reporting \(cipfa.org\)](https://www.cipfa.org)



SEND deficits kept off budgets for another three years

The government has allowed councils to keep deficits on spending for children with special educational needs and disabilities off their balance sheets for a further three years.

The government's local government finance policy statement published on 12th December 2022 says that the statutory override for the Dedicated Schools Grant (DSG) will be extended for the next three years, from 2023-24 to 2025-26.

Councils use the high needs funding block of the DSG to fund Send provision. But for many authorities, the cost of this has been outstripping the amounts provided by tens of millions of pounds, leading to a total deficit estimated at more than £2bn.

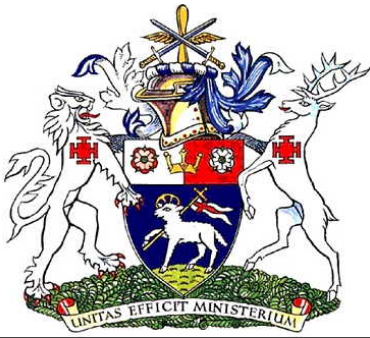
The statutory override means that any DSG deficits are not included in council's main revenue budgets. Before the announcement, it had been due to expire in 2023. Last year, Matt Dunkley, chair of the Association of Directors of Children's Services' resources and sustainability policy committee, said: "We think the cumulative high needs block deficits of local authorities are approximately £2.3bn."

In June, the government launched the £85m Delivering Better Value in Send programme, that involves specialist advisors probing 55 councils' financial data to try and cut their DSG deficits. The Chartered Institute of Public Finance and Accountancy, a partner in the programme, said the scheme would provide "project management, change management and financial modelling capacity".

The programme is running alongside the Department for Education's 'safety valve' support scheme that offers bailouts for the councils with the largest Send spending deficits, in return for them implementing stringent reforms.

About 40 councils are expected to receive safety valve funding, meaning that the two programmes together will include about two thirds of councils with responsibility for Send. Also in June, the then children's minister Will Quince wrote a letter to council chief executives warning that a "significant number of councils are "running services that are not sustainable, and instead jeopardise the longevity of that crucial support".





AGENDA ITEM 8

Governance, Audit, Risk Management and Standards Committee

Title	2022/2023 - Corporate Complaints and Local Government and Social Care Ombudsman (LGSCO) Annual Report
Date of meeting	16 October 2023
Report of	Jessica Farmer, Monitoring Officer
Wards	All
Status	Public
Urgent	No
Appendices	Appendix A – 2022/23 Corporate Complaints and Local Government and Social Care Ombudsman Annual Report Appendix B – Local Government and Social Care Ombudsman Annual Letter Appendix C – Summary of LGSCO upheld decisions
Officer Contact Details	Clair Green , Executive Director of Assurance Clair.green@barnet.gov.uk Emily Bowler , Assistant Director of Assurance emily.bowler@barnet.gov.uk Ali Saka , Head of Assurance and Business Development ali.saka@barnet.gov.uk
Summary	
<ul style="list-style-type: none"> This report presents a summary of the Council’s performance in relation to corporate complaints and LGSCO investigations for the period 1 April 2022 to 31 March 2023. The report includes reference to the LGSCO’s annual letter for the same period and their findings and recommendations. 	
Recommendation	
That Committee:	

1. To note and consider the 2022/2023 Corporate Complaints and Local Government and Social Care Ombudsman Annual Report (Appendix A).
2. To note and consider the LGSCO's annual letter and relevant lessons and actions (Appendix B).
3. To note and agree the actions taken by the Council to remedy the issues and to prevent recurrence.

1. Reasons for the Recommendations

- 1.1 The Council is required to report its corporate complaints performance and the LGSCO complaints to the GARMS Committee which has an assurance oversight role with regards to these complaints.
- 1.2 This report covers the reporting period 1 April 2022 - 31 March 2023 and includes a summary of the Council's performance in relation to Corporate Complaints and LGSCO complaints.
- 1.3 Complaints are a valuable source of information and insight to enable the Council to focus on improvements to our processes and service delivery. The Council operates a two-stage corporate complaints procedure.
- 1.4 Stage 1 - Complaints are investigated and responded to by the relevant service manager or equivalent of which the complaint concerns.
- 1.5 Stage 2 - Where the complainant remains unhappy with their stage 1 response, they may escalate their complaint, which is investigated further and responded to by the relevant senior manager.
- 1.6 If the complainant remains dissatisfied after going through the Council's corporate complaints procedure, they may escalate the matter to the Local Government and Social Care Ombudsman (LGSCO). Where the matter relates to complaints about social housing then it is under the jurisdiction of the Housing Ombudsman rather than LGSCO.
- 1.7 There are separate statutory processes in relation to social care complaints for Adult's and Children's services (termed 'statutory social care complaints'). Once the statutory procedure is exhausted the complainant has the right of recourse to the LGSCO.
- 1.8 The LGSCO reserves the right to accept and investigate a complaint even if it has not been through either our corporate or the statutory complaints procedures. This can occur when there are urgent issues (such as imminent homelessness), vulnerability, or if the complainant shows that they have complained to the Council but have not received a response.
- 1.9 Every July the LGSCO writes an annual review letter to every local authority which outlines the complaints and enquiries they have dealt with during the previous financial year. The annual letter received by the London Borough of Barnet for 2022-2023 can be found in Appendix B.
- 1.10 Key trends included within the annual corporate complaints report and the LGSCO letter include:
 - Higher number of complaints received during 2022/2023. The Council's corporate complaints procedures ensure complaints are resolved as early as possible.
 - 4% more complaints are not upheld in Stages 1 and 2, indicating correct procedures were followed and service standards maintained.
 - The Council maintained high level of compliance with the complaints handling timescales.

- The increase in the number of complaints received is reflected in cases escalated to the LGSCO (166), escalation rate remained at 13.4%, demonstrating effectiveness of the Council’s complaints process.
- Upheld rate for LGSCO complaints increased in line with the changes made to the LGSCO investigation processes, which contributed to an increase in the average uphold rate across all complaints.
- There has been delays in dealing with some LGSCO cases; improvements have been implemented to address these issues.
- The annual cost of compensations varies each year, and it is impacted by individual cases that involve higher compensation payments as dictated by the LGSCO.
- Learning from each complaint is reviewed and utilised to improve services and experiences of customers. This is in addition to corrective actions and remedies concerning the specific case.
- The Council has carried out a comprehensive review of the corporate complaints and LGSCO complaints process and implemented improvements. The review included:
 - Reviewing and updating key policies and procedures to reflect customer focus and best practice.
 - Improving customer information and accessibility of the complaint process through multiple channels to improve customer engagement and feedback.
 - Continuous improvement driven through customer feedback, learning, and complaints insights
Review of Complaint Link Officer capacity and development, and clarification of expectations and accountability.
 - Fully embedding the functionalities of iCasework complaint management system using service-specific custom templates.
 - Revised approach to managing unreasonable customer behaviour which includes multidisciplinary approach to supporting customers and officers.
 - Improved reporting and proactive monitoring using the new case management system, including routine complaints trends and lessons reports and live performance data.

1.11 The corporate complaints review is overseen by the Assurance Management Team; progress updates will be included in future reports presented to the GARMS Committee.

1.12 Appendix A provides information regarding the Council’s complaints performance.

1.13 The LGSCO’s annual letter is included in Appendix B.

2. Alternative Options Considered and Not Recommended

2.1 The council could consider not to take on board the LGSCOs recommendations for each upheld complaint, but this would negatively impact both the complainant and the reputation of the Council.

2.2 The Council will continue to learn from complaints as part of its drive for continuous improvement of its services and experiences of its customers.

2.3 Officers have considered not to accept the decision of the LGSCO Case ID 21 017 371 (see Section 9 below for further information), but this option is not recommended. The LGSCO have independently investigated the matter and found fault with the council, making

recommendations to both compensate the complaint but also to help prevent the same problem reoccurring. It was therefore decided to accept the findings and recommendations made by the LGSCO.

3. Post Decision Implementation

- 3.1 We will implement the actions detailed in this report and include progress updates in future complaints reports.
- 3.2 Any future public interest reports will be brought by the Monitoring Officer to the next available GARMS Committee meeting.

4. Corporate Priorities, Performance and Other Considerations

Corporate Plan

- 4.1 An accessible, fair, and transparent complaints process helps to ensure services remain “engaged and effective” which support the delivery of the Council’s vision as set out in Our Plan for Barnet 2023-2026.

Corporate Performance / Outcome Measures

- 4.2 The Assurance Directorate Outcomes Framework is the means through which we provide assurance that the directorate works towards delivering the Council’s priorities as set out in Our Plan for Barnet. Continuous improvement of the corporate complaints process, and use of meaningful insights from complaints for service improvement are included in and monitored through the Assurance Outcomes Framework.

Sustainability

- 4.3 There are no sustainability implications arising from this report.

Corporate Parenting

- 4.4 There are no corporate parenting implications arising from this report.

Risk Management

- 4.5 Complaints are an essential means by which the Council receives feedback from customers and assures service quality. By reviewing complaints and taking improvement actions where necessary, the Council minimises the risk of non-compliance and poor customer experience.

Insight

- 4.6 Learning from complaints provides insight into service improvement opportunities, complementing quantitative service performance data.

Social Value

- 4.7 As contained in this report.

5. Resource Implications (Finance and Value for Money, Procurement, Staffing, IT and Property)

- 5.1 Payment of compensation is made on a case-by-case basis as determined by complaints investigators using the LGSCO’s Guidance on Remedies. This is funded through existing council budgets.

6. Legal Implications and Constitution References

- 6.1 Section 5 of the 1989 Local Government Act requires the Monitoring Officer to report maladministration or failure in relation to LGSCO complaints to members.
- 6.2 Under Part 2B of the Constitution (Terms of Reference and Delegation of Duties to Committees and Sub-Committees, section 2.4.17) the Governance, Audit, Risk Management and Standards Committee has the following powers and duties:
- “To have oversight of the Council’s ombudsman complaints and internal complaints performance (excluding complaints for Adults and Children’s complaints”.

7. Consultation

- 7.1 Engaging with customers through the complaints process is an important and valuable source of information and insight to enable the Council to focus on improvements to our processes and service delivery. Utilising complaints data effectively can support the Council to meet its best value duty to continuously improve its services.

8. Equalities and Diversity

- 8.1 Decision makers should have due regard to the Public Sector Equality Duty in making their decisions. The equalities duties are continuing duties and not duties to secure a particular outcome. Consideration of the duties should precede the decision. It is important that Cabinet has regard to the statutory grounds of the Public Sector Equality Duty, which are found at section 149 of the Equality Act 2010 and are as follows:

A public authority must, in the exercise of its functions, have due regard to the need to:

- Eliminate discrimination, harassment, victimisation, and any other conduct that is prohibited by or under this Act;
- Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;
- Foster good relations between persons who share a relevant protected characteristic and persons who do not share it;
- Having due regard to the need to advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it involves having due regard, in particular, to the need to:
 - remove or minimise disadvantages suffered by persons who share a relevant protected characteristic that are connected to that characteristic;
 - take steps to meet the needs of persons who share a relevant protected characteristic that are different from the needs of persons who do not share it;
- Encourage persons who share a relevant protected characteristic to participate in public life or in any other activity in which participation by such persons is disproportionately low.
- The steps involved in meeting the needs of disabled persons that are different from the needs of persons who are not disabled include, in particular, steps to take account of disabled persons’ disabilities.
- Having due regard to the need to foster good relations between persons who share a relevant protected characteristic and persons who do not share it involves having due regard, in particular, to the need to:

- Tackle prejudice, and
- Promote understanding.

8.2 Compliance with the duties in this section may involve treating some persons more favourably than others; but that is not to be taken as permitting conduct that would otherwise be prohibited by or under this Act. The relevant protected characteristics are:

- Age
- Disability
- Gender reassignment
- Pregnancy and maternity
- Race
- Religion or belief
- Sex
- Sexual orientation
- Marriage and Civil partnership

An equality impact assessment has not been completed for this matter. However, the Council has considered the equality implications of its communications systems, including the need to ensure that communication meets the need of a wider range of the public, including those with disabilities or neurodiversity, as well as those who may have a language barrier.

9. Background Papers

9.1 Please also see:

- [The Local Government and Social Care Ombudsman website](#)
- LGSCO case ID 21 017 371 was presented to the Council's [Governance, Audit, Risk Management and Standards Committee](#) held on [24 July 2023 \(Agenda Item 5\)](#)
- [Local Government & Social Care Ombudsman \(LGSCO\) Summary of Upheld Complaints Report \(2021-2022\)](#) was presented to the Constitution and General Purposes Committee on 6 October 2022

Appendix A:

Corporate Complaints and Local Government and Social Care Ombudsman (LGSCO)

Annual Report 2022/2023

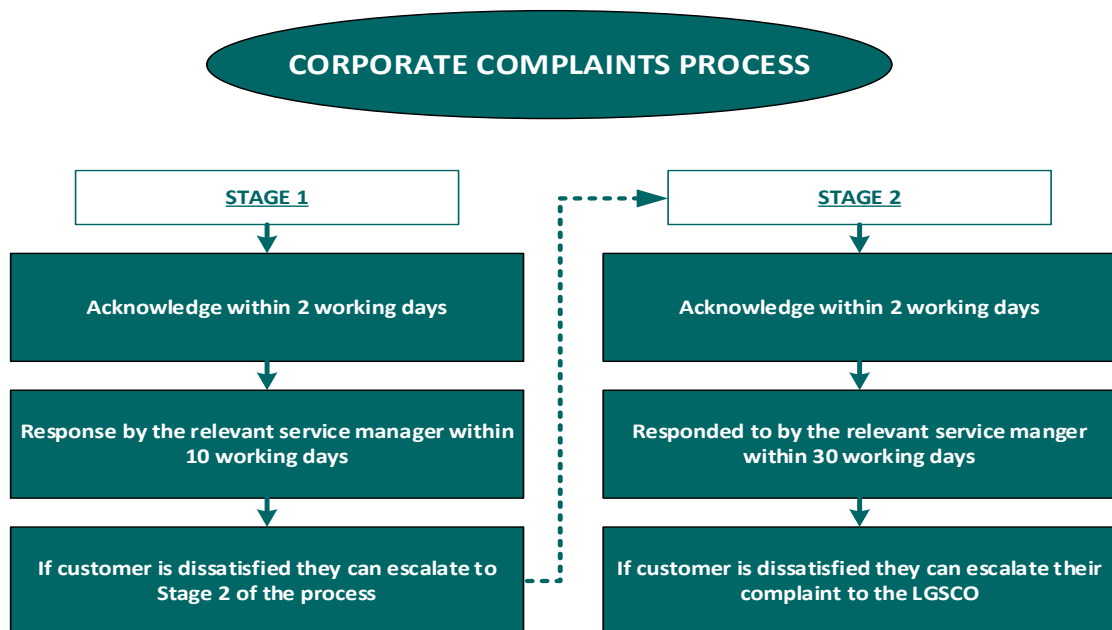
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1. Background and introduction

- 1.1 This annual report presents a summary of the Council's performance in relation to corporate complaints and Local Government and Social Care Ombudsman (LGSCO) investigations for the period 1 April 2022 - 31 March 2023. This report, along with the Ombudsman's annual letter (Appendix B), forms part of the Council's management and oversight of the corporate complaints processes which also includes ongoing oversight of complaints through routine management reports and live performance dashboards. The Council utilises complaints as a valuable source of insight to improve services and the experiences of customers.
- 1.2 The Council operates a two-stage corporate complaints procedure (Figure 1):
- **Stage 1** - Complaints are investigated and responded to by the relevant service manager or equivalent of which the complaint concerns.
 - **Stage 2** - Where the complainant remains unhappy with their stage 1 response, they may escalate their complaint, which is investigated further and responded to by the relevant senior manager.

Figure 1: Corporate complaints process



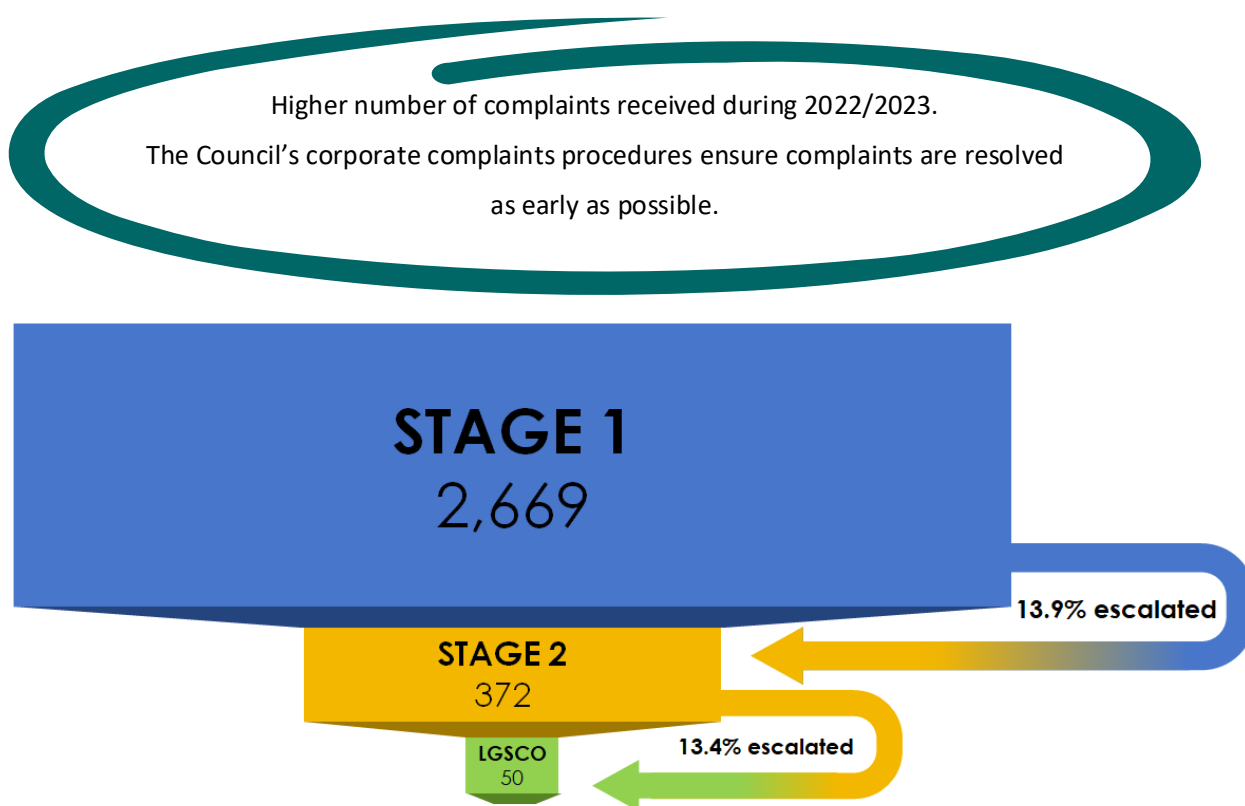
- 1.3 If the complainant remains dissatisfied after going through the Council's complaints procedure, they can escalate the matter to the LGSCO.
- 1.4 The Council aims to resolve customers' issues as quickly and professionally as possible, preferably without the need to escalate through stages of the complaints process and to the Ombudsman. This not only delivers better customer service and increases customer satisfaction, it also reduces the pressure on council resources that are required to administer complaints at later stages of the complaints process. We recognise, however, that the Council cannot resolve every issue to the complainants' full satisfaction, and it is not possible to eliminate all complaints.
- 1.5 There are separate statutory processes in relation to Social Care complaints for both Adult's and Children's Services. As per corporate complaints, once the statutory procedure is exhausted, the complainant has the right of escalation to the LGSCO.

1.6 An overview of the Council's complaints performance is presented in Section 2 of this report; more detailed information is provided in subsequent sections.

2. Executive summary

- 2.1 The Council values complaints feedback and monitors corporate complaints trends and performance through routine reports, and produces an annual corporate complaints report to be considered by the GARMS Committee.
- 2.2 In July each year the LGSCO writes an annual review letter to every local authority which outlines the complaints and enquiries they have dealt with during the previous financial year. The annual letter received by the London Borough of Barnet for 2022-2023 can be found in Appendix B.
- 2.3 The summary of the Council's performance, key trends, and relevant actions in relation to corporate complaints and LGSCO complaints for the fiscal year 2022-2023 include:

2.4 Corporate complaints numbers and escalation rates



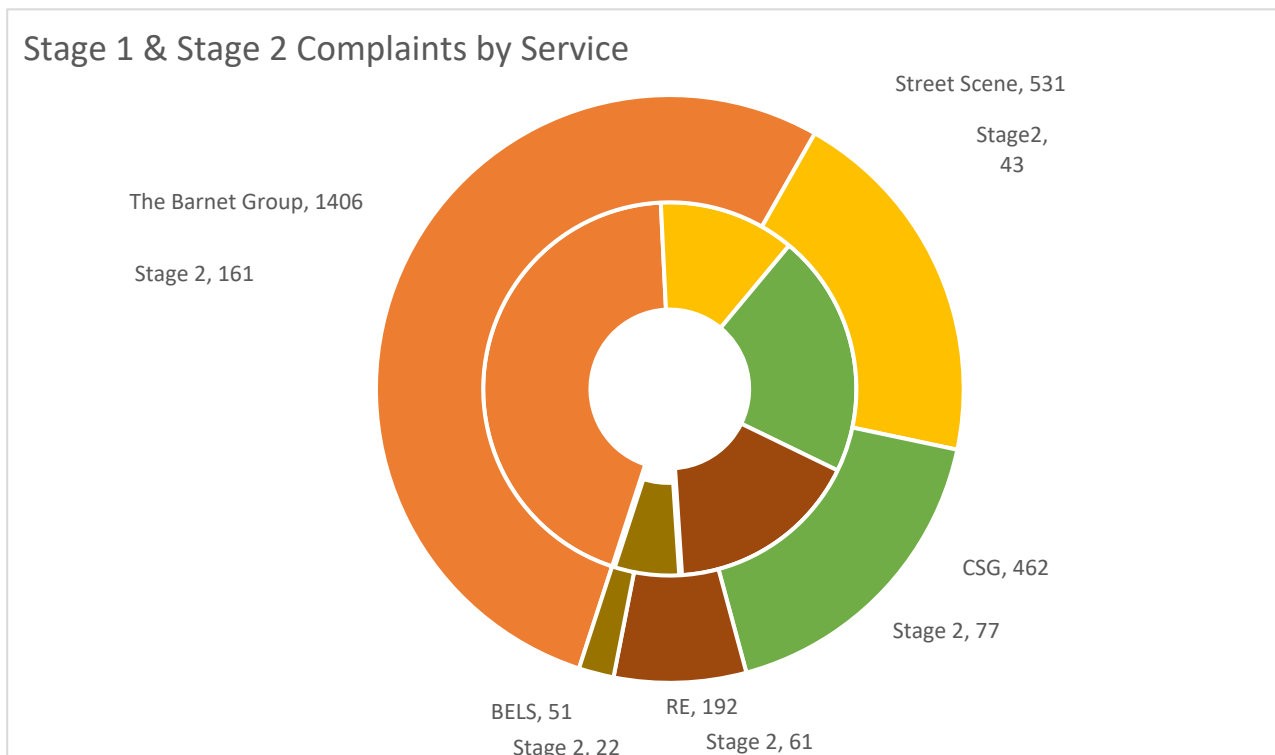
- 2.4.1 A total of 3,041 complaints received between 1 April 2022 and 31 March 2023. This is an increase of 14.4% compared with the previous year. Whilst complaints provide evidence of resident dissatisfaction this could also be seen as evidence of resident engagement with the complaints process and that the Council is more effectively identifying and processing complaints.
- 2.4.2 Escalation rates were as follows:
 - The Council received 2,669 Stage 1 corporate complaints. 13.9% were escalated to Stage 2.
 - The Council received 372 Stage 2 corporate complaints. 13.4% were escalated which led to an LGSCO investigation.

2.4.3 The Council aims to resolve all complaints as early as possible, and have taken steps to reduce escalation rates including:

- Updating templates to improve adherence to best practice.
- Stage 2 responses reviewed by the Corporate Complaints Team for quality assurance and consistency.
- The Corporate Complaints Team meet with services where LGSCO have upheld a complaint to identify any missed opportunities to rectify issues earlier in the process and to implement appropriate corrective measures.
- Effective Complaints Handling courses delivered by the LGSCO to officers and managers responding to complaints.
- In-house training is to be complemented by the introduction of a more accessible e-learning training option.

2.5 Corporate complaints by service area

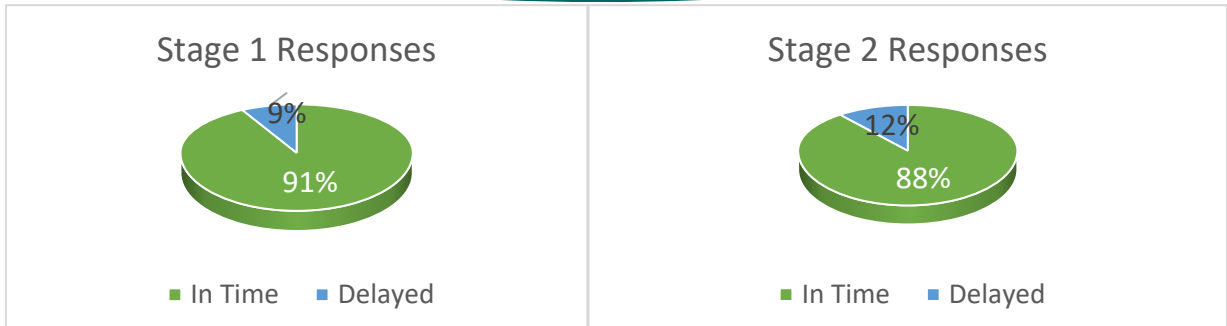
Ongoing trend of larger proportion of complaints concerning the Barnet Group, Street Scene and CSG service
(this is to be expected considering the nature of these services)



Further detail is provided in Sections 2, 3, and 4 below.

2.6 Corporate Complaints Response Timescales

The Council maintained high level of compliance with the complaints handling timescales.



- 2.6.1 For Stage 1 and Stage 2 complaints The Council aims to respond within, respectively, 10 and 30 working days. We have an internal target of responding to 90% of complaints within these timescales, which accounts for some complaints being complex and cross-cutting and it may be beneficial to take time to give a comprehensive and well-considered response. For Stage 1 and Stage 2 respectively, 91% and 88% of complaints were responded to within timescales.
- 2.6.2 Main reasons for delays at Stage 2 were staff being absent or unavailable (33% of stage 2 complaint delays) and complex cases (27% of stage 2 complaint delays). This information enabled us to ensure there are nominated deputies for key staff to reduce the impact of key staff being absent. We are currently in the process of revising our Effective Complaints Management Guidance to assist complaints handlers with complex cases, including those which are cross cutting.

2.7 Corrective Actions Implemented

Complaints are acted upon by implementing appropriate remedies, and lessons are used to improve services.

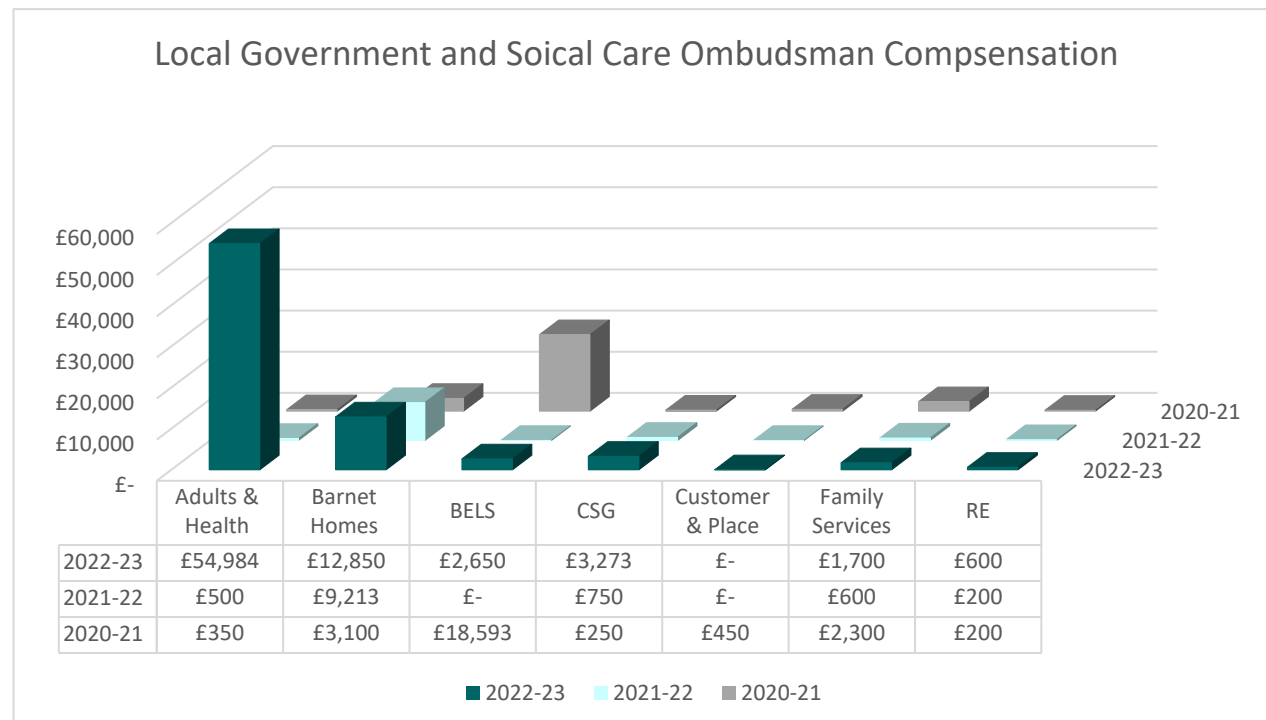
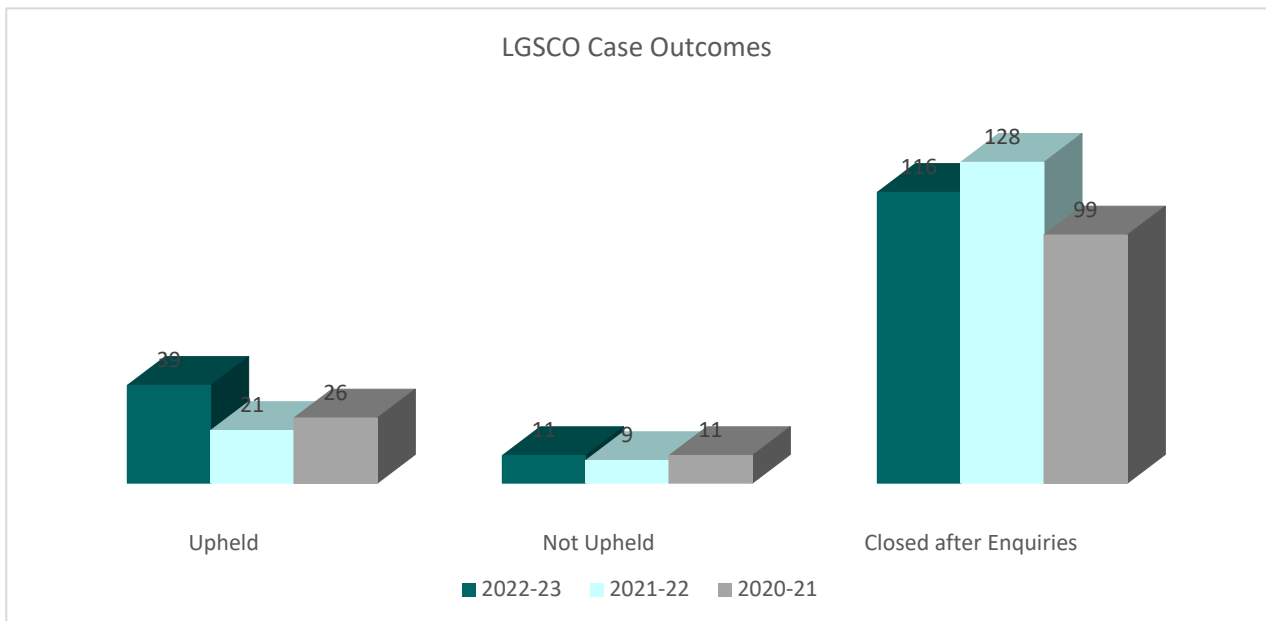


2.7.1 The Council has implemented 815 corrective actions resulting from complaints, with the greatest number of remedies defined as:

- arrange inspection (249 cases)
- arrange staff training or guidance (223 cases)
- issue a letter of apology (157 cases)

2.8 **LGSCO complaints**

Increase in the number of complaints is reflected in cases escalated to the LGSCO (166), escalation rate remained at 13.4%, demonstrating effectiveness of the Council's complaints process. Upheld rate increased in line with the revised LGSCO approach. There has been delays in dealing with some LGSCO cases (improvements implemented)

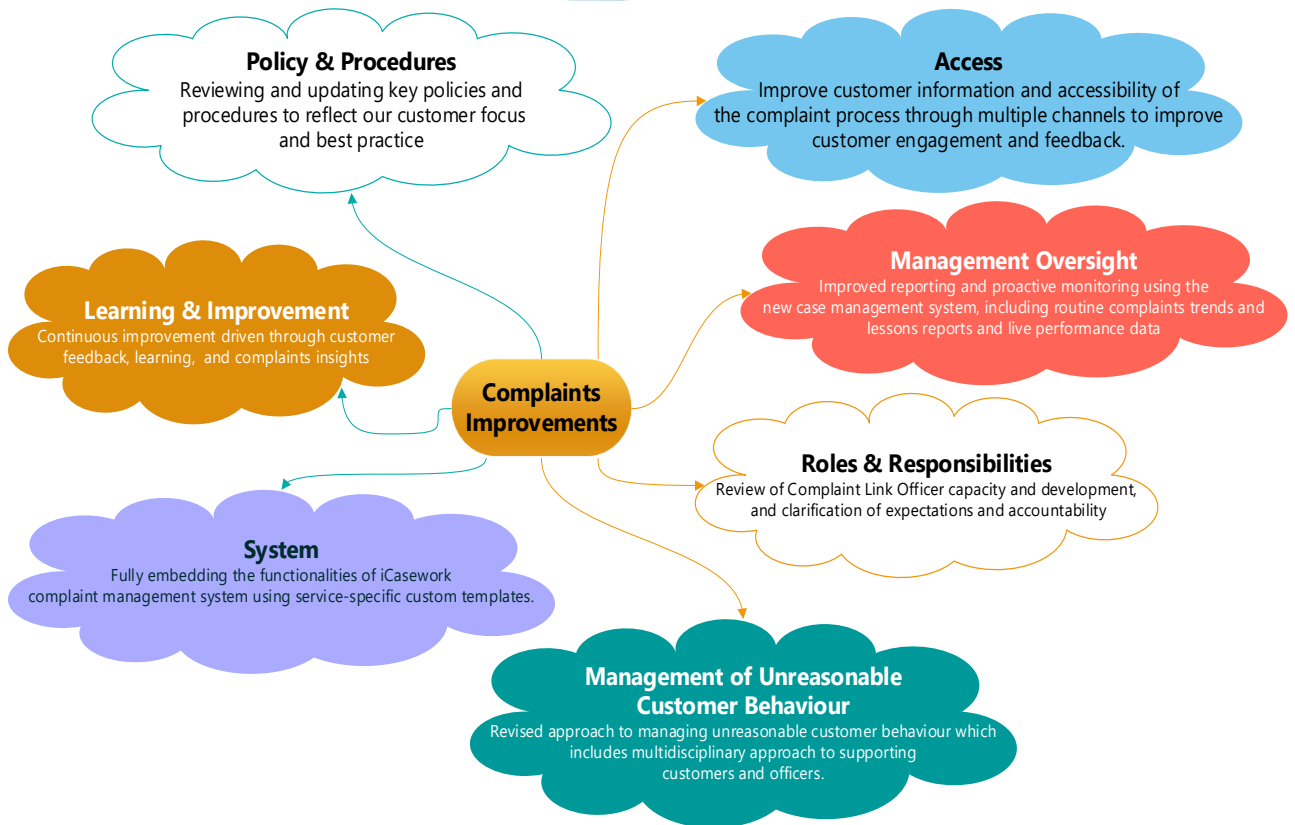


2.8.1 The LGSCO received 166 complaints during 2022/23 of which 50 proceeded to an investigation and 39 (78%) of these were upheld (77% in similar authorities).

- 2.8.2 The LGSCO advised that “In 2022-23 we changed our investigation processes, contributing towards an increase in the average uphold rate across all complaints. Consider comparing individual council uphold rates against the average rate rather than against previous years.”
- 2.8.3 The service with the most upheld complaints was Council Tax which has 12 upheld complaints, one of which led to a public report being issued (this was presented the GARMS Committee in July 2023). The rise in the number of council tax complaints relate to historic debt collection, which was put on hold during COVID, and has since recommenced.
- 2.8.4 The Council accepted all remedies proposed by the LGSCO in relation to the LGSCO upheld complaints; 100% of remedies have been actioned (99% for similar authorities).
- 2.8.5 During 2021/22 the Council paid a total of £11,563 in compensation as a result of complaints upheld by the LGSCO. The value in 2022-23 has increased to £76,057.
- 2.8.6 This year Adults & Health (Adult Social Care) paid out both the largest amount overall as well as for a single case (£49,084.28). This case related to failure to provide a care assessment for two years, therefore resulting in the resident having to pay for care directly themselves until the Council was able to provide support.
- 2.8.7 Within its annual review letter, the LGSCO noted concerns about the timeliness of the Council’s responses to the LGSCO’s enquiries and in completing remedies (22% of cases had late remedies compared to a national picture of 19%). 28 of the 39 cases upheld involved a delay during the investigation stage. The Council Management Team have considered these concerns and met with the LGSCO to discuss the issues outlined within the LGSCO’s annual letter.
- 2.8.8 The Council has reviewed the root causes of the delays and devised an action plan to prevent reoccurrence (Please see Section 7).

2.9 Comprehensive review of complaints processes

Comprehensive review of the corporate complaints and LGSCO complaints process is delivering improved performance, service offer and customer experience with themes as per the diagram below.



2.9.1 Assisted by the insight gathered from iCasework case management system we have undertaken a comprehensive review of the Corporate Complaints function, which focussed on customer care and learning and included the below workstreams:

- **Policy & Procedures** - Reviewing and updating key policies and procedures to reflect customer focus and best practice.
- **Access** - Improve customer information and accessibility of the complaint process through multiple channels to improve customer engagement and feedback.
- **Learning & Improvement** - Continuous improvement driven through customer feedback, learning, and complaints insights
- **Roles & Responsibilities** - Review of Complaint Link Officer capacity and development, and clarification of expectations and accountability.
- **System** - Fully embedding the functionalities of iCasework complaint management system using service-specific custom templates.

- **Management of Unreasonable Customer Behaviour** - Revised approach to managing unreasonable customer behaviour which includes multidisciplinary approach to supporting customers and officers.
- **Management Oversight** - Improved reporting and proactive monitoring using the new case management system, including routine complaints trends and lessons reports and live performance data.

2.9.2 The corporate complaints review is overseen by the Assurance Management Team; progress updates will be included in future reports presented to the GARMS Committee.

3. Stage 1 Corporate Complaints

3.1 Table 1 gives a high-level summary of complaints performance at the Council

Table 1: Overview of corporate complaints received

	2021/22	2022/23
Total number of complaints	2658	3041 (↑14%)
Statutory Complaints	81	139 (↑72%)
Not Upheld	1117	1345 (↓44%)
Upheld	960	1191 (↑40%)
Partially Upheld	581	505 (↓16%)
Total number of LGSCO outcomes	158	166 (↑5%)
• of which were closed after initial enquiries/no further action	128	116 (↓9%)
• of which were investigated and upheld	21	39 (↑86%)
• of which were investigated and were not upheld	9	11 (↑22%)

3.2 The council received 2,669 Stage 1 complaints between the period of 1st April 2022 to 31st March 2023, which is an increase of 17% compared with the previous reporting year (2,279).

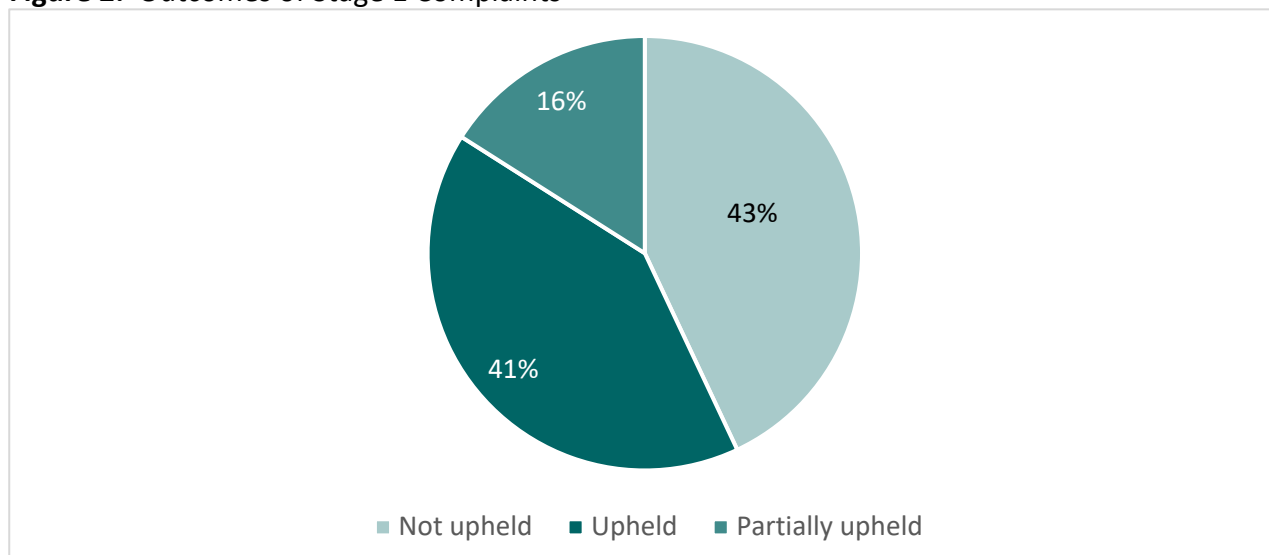
3.3 Whilst the Council aims to ensure all customers are satisfied with Council services and do not have cause to complain, all forms of feedback is indicative of resident engagement.

3.4 Over the last year, the council has worked to make the complaints process more accessible – making it easier for residents to make a complaint. This includes updating website content and the ability for customers to register their complaints directly with the service; using a webform, customers can self-define their complaint. This could be a contributing factor for the increase in number of complaints received during the reporting period. This gives the Council improved oversight of complaints using live data, as cases are created and updated on iCasework directly through the webform rather than requiring manual data entry.

3.5 Of these 2669 complaints, 43% were not upheld which indicates that, investigations of these complaints concluded that the Council has acted in accordance with its policies and standards in these cases (Figure 2).

3.6 41% of Stage 1 complaints were upheld and 16% were partially upheld, they offer valuable feedback and learning towards continuous improvement.

Figure 2: Outcomes of Stage 1 Complaints



3.7 The below Table 2 provides a breakdown by service area of Stage 1 complaints received along with the upheld rate (%).

Table 2: Stage 1 Complaints by Service Area

Service Area	Upheld		Partially upheld		Not upheld	
	Number	%	Number	%	Number	%
CSG	63	14%	44	10%	352	77%
BELS	11	22%	14	27%	26	51%
Assurance	3	33%	3	33%	3	33%
Adults & Health (Green Spaces)	1	17%	3	50%	2	33%
Adult Social Care	0	0%	0	0%	6	100%
Customer and Place	2	40%	0	0%	3	60%

3.8 Under Stage 1 of the complaints process, target timescales for responding to complaints is within 10 working days.

3.9 91% of complaints were responded to within 10 working days. Considering that services have received higher number of complaints during the reporting period, this shows that they are efficient in investigating and responding to complaints.

3.10 The introduction of the new complaints management system, iCasework, has allowed departments to easily track complaints through automated reminders and live dashboards, as well as facilitating learning from each case.

3.11 The 3 main reasons for the delays in responding to the remaining 9% of complaints were due to workload pressures at the time, complex nature of cases, and staff being absent or unavailable (Table 3).

Table 3: Top 3 Causes of Delays

Stage 1 Delay Reasons	Number of Complaints (%)	Explanation
Workload	34 (25%)	The workload of the investigator or colleagues involved was high and therefore caused delays in the investigation.
Complex Case	25 (19%)	The case involved multiple service areas or was complex in nature and required longer than the stipulated timescale to investigate.
Staff Absent or Unavailable	13 (10%)	The staff required as part of the investigation of the complaint were unavailable or absent causing delays.

3.12 The Council has improved resilience within services to deal with complaints within timescales by ensuring there is nominated and trained officers to act as deputies for Complaint Link Officers to reduce the risk of reliance on single officers.

3.13 Of the 9% of stage 1 complaints answered outside of the timescales, 52% concerned council tax, and 19% related to housing benefits. The Corporate Complaints team has implemented regular meetings with key colleagues from these services to monitor late responses.

4. Stage 2 Corporate Complaints

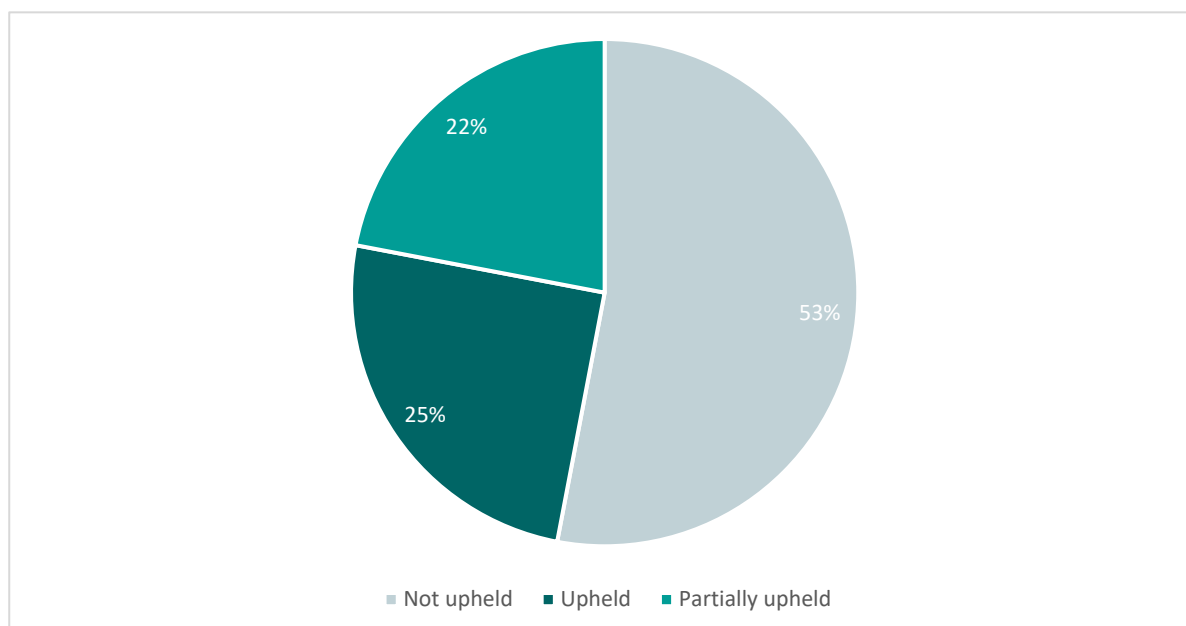
4.1 A total of 372 Stage 2 complaints were received between 1st April 2022 and 31st March 2023.

4.2 Of these Stage 2 complaints, 53% (199) were not upheld, which gives assurance that in most cases services have followed the correct processes in accordance with the Council's service standards (Figure 3).

4.3 25% of the complaints escalated were upheld and 22% were partially upheld. This indicates that at Stage 2 of the process, investigating Senior Managers are thoroughly investigating complaints and admitting fault as appropriate.

4.4 An upheld complaint at Stage 2 represents a missed opportunity to resolve complaints at Stage 1 (See Section 5 for more details about escalation rates). We are currently revising our guidance on Effective Complaints Management and developing an on-line training module to further support officers involved in investigating and responding to complaints. This is in addition to the core complaints handling training (in-house and by the LGSCO), and ongoing Link Officer development.

Figure 3: Stage 2 Complaints Outcomes



4.5 The below Table 4 provide breakdowns by service area of stage 2 complaints received along with the upheld rate (%).

Table 4: Stage 2 Complaints by Service Area

Service Area	Upheld		Partially upheld		Not upheld	
	Number	%	Number	%	Number	%
CSG	10	13%	8	10%	59	77%
BELS	5	23%	4	18%	13	59%
Assurance	0	0%	2	50%	2	50%
Adults & Health (Green Spaces)	1	50%	0	0%	1	50%
Adult Social Care	0	0%	0	0%	6	100%
Customer and Place	0	0%	1	33%	2	67%

4.6 Under Stage 2 of the complaints process, the timescale set out to respond to complaints is within 30 working days. We had set ourselves a target of responding to 90% of complaints within this time frame. This year we achieved 88%, which fell short of our target by 2%.

4.7 The 3 main reasons for the delays were staff being absent or unavailable, workload and complex nature of cases. Table 5 provides a further explanation for the delays.

Table 5: Breakdown of top 3 categories for Stage 2 complaint delays

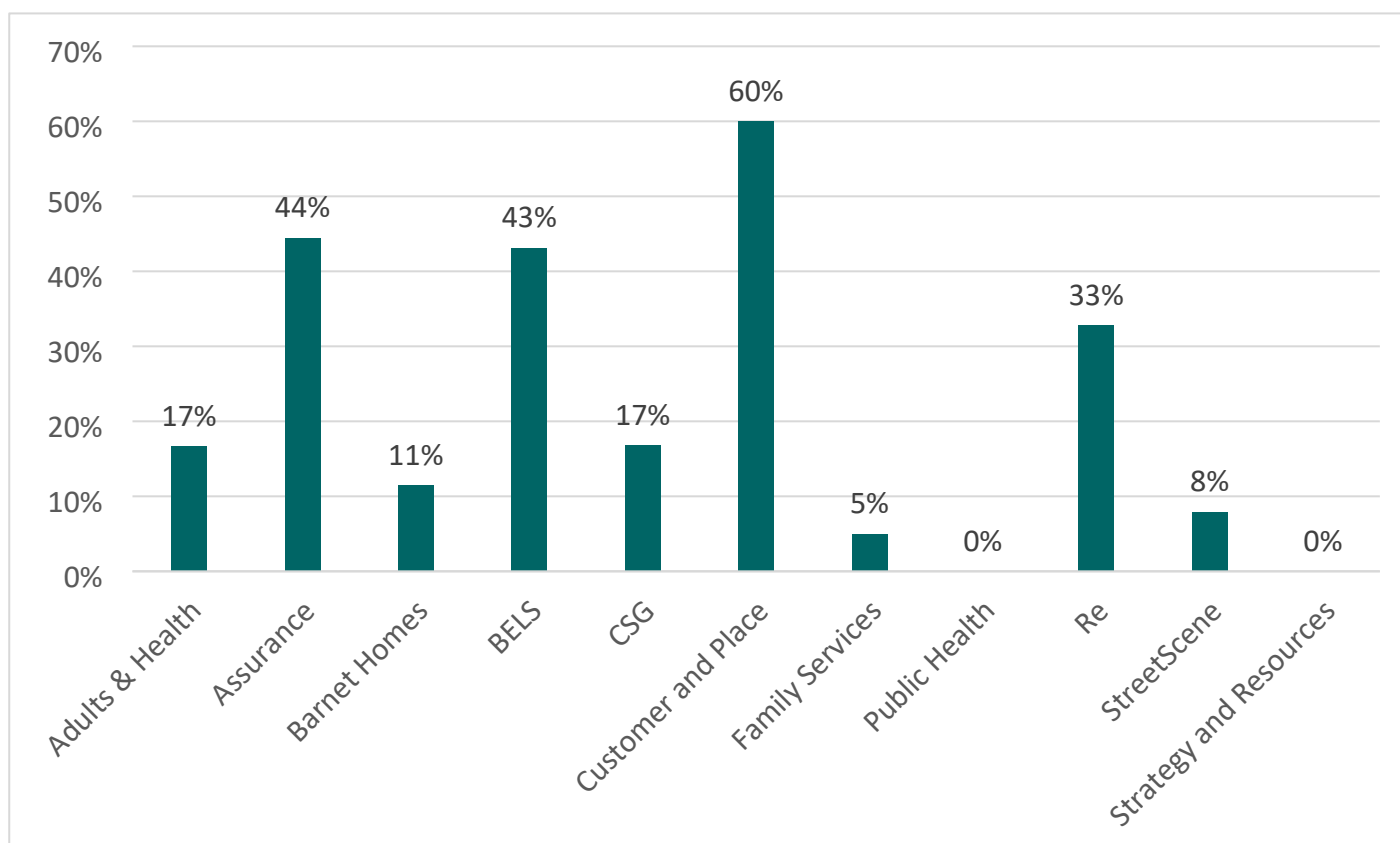
Stage 2 Delay Reasons	Number of Complaints (%)	Explanation
Staff Absent or Unavailable	10 (33%)	The staff required as part of the investigation of the complaint were unavailable or absent causing delays.
Complex Case	8 (27%)	The case involved numerous service areas or was complex in nature and required longer than the stipulated timescale to investigate.
Workload	2 (7%)	The workload of the investigator or colleagues involved was high and therefore caused delays in the investigation.

4.8 Using this information, we have explored options with services to nominate deputies for key staff to reduce the impact of key staff being absent. We are currently in the process of revising our Effective Complaints Management Guidance to assist complaints handlers with complex cases, including those which are cross cutting. We are building upon our Link Officers network to foster collaboration and sharing of learning between services.

5. Escalation Rates

- 5.1 The council received 2,669 Stage 1 corporate complaints in 2022/2023 of which 13.9% (372) were escalated to Stage 2.
- 5.2 Of the 166 cases escalated to the LGSCO, 50 cases were investigated, which is an escalation rate of 13.4%. This demonstrates the effectiveness of the Council’s complaints process in resolving majority of the complaints at earlier stages of the process.
- 5.3 The Council aims to resolve all complaints at Stage 1. If a case is escalated to Stage 2 of the process, or subsequently to the LGSCO, this results in delays residents’ issues being resolved and causes them further dissatisfaction, time, and trouble. Not resolving complaints at Stage 1 requires the Council to allocate further resources to investigate the matter at Stage 2.
- 5.4 Figure 4 shows escalation rates of complaints from Stage 1 to Stage 2 for each service area. The service areas with the highest escalation rates are Customer and Place (60%), Assurance (44%) and BELS (43%). Customer and Place and Assurance receive lower number of complaints (0.5% of total complaints received by the Council). Complaints received about BELS is often complex and challenging; the LGSCO commented in their Review of Local Government Complaints 2022-23 that all authorities face challenges in providing for Special Education Needs and Education. Re has an overall escalation rate of 33% (Planning: 54%, Highways: 18% and Environmental Health: 16%. These services have returned to the Council from Regional Enterprise (Capita) on 1 April 2023.

Figure 4: Escalation rates by service area



- 5.5 We have taken steps to reduce escalation rates, including updating the corporate complaints process and templates to ensuring adherence with current best practice. The Corporate Complaints Team now review all Stage 2 responses to ensure robustness of the process. The Corporate Complaint team meet with services where LGSCO have upheld a complaint; these meetings are utilised to identify any missed opportunities to rectify issues earlier in the process and to implement improvements.
- 5.6 At the end of 2022/2023 the LGSCO delivered two Effective Complaints Handling courses to officers and managers responding to complaints, and we are devising an e-learning training to support more effective complaints management across the organisation.
- 5.7 We are currently liaising with other London Boroughs to benchmark escalation rates for services which will allow us to set challenging escalation rates targets to continuously improve our performance.

6. Root Causes

- 6.1 Regardless of a complaint’s outcome, we review the root causes of every complaint (the main reason for the complaint).
- 6.2 For Corporate Complaints (excluding Barnet Homes) the most commonly identified root cause was “failure to do something” (167 cases). This is in relation to failure to deliver standard services or failure to carry out an action as promised. The Corporate Complaints Team are working with services to ensure that actions promised through the complaints process are tracked and completed to prevent reoccurrence or an escalation of the issue.

- 6.3 The second identified root cause relates to charges and enforcement actions (147 cases) followed by “delay in doing something” (96 cases). Upon further investigation, we found that these complaints can arise from a lack of understanding and setting expectations regarding delays in doing something. We are ensuring service information is clear and accessible.
- 6.4 Root causes are specific to individual departments, based on the services they provide. As part of the new complaints health check process, the Corporate Complaints team will explore with services the root causes of their complaints, trends and resulting improvements.
- 6.5 Further information about learning and improvements is included in sections 9 and 10 below.

7. Local Government and Social Care Ombudsman Complaints

- 7.1 The council received a total of 166 enquiries from the LGSCO of which 50 progressed to a full investigation (Figure 5). In 2022/23 we dealt with more LGSCO enquires than the previous reporting period (158).

Figure 5: Outcome of complaints received by the LGSCO in 2021-2022 and 2022-2023



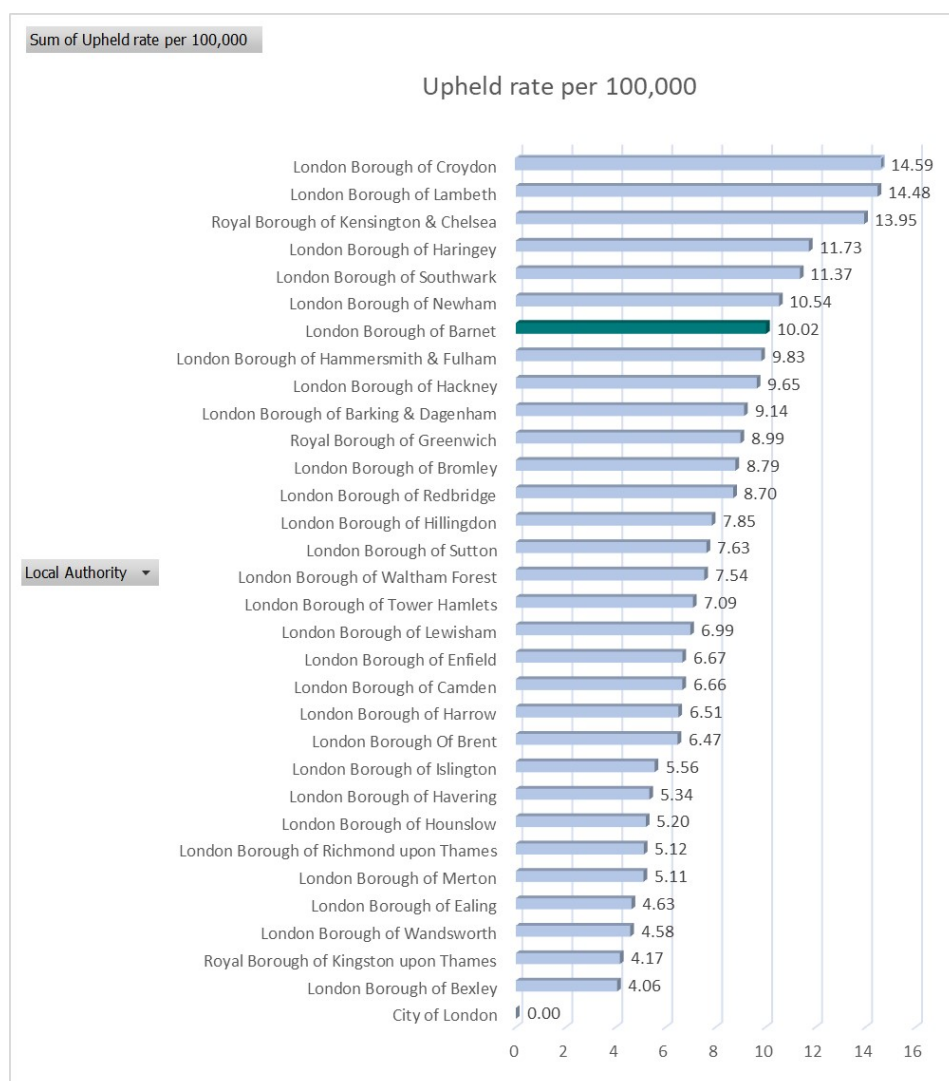
- 7.2 Whilst we have included previous years’ data for comparison, this year the LGSCO have announced they have taken a stricter approach when deciding whether to investigate complaints, choosing to only investigate complaints they believe they will find fault in. This therefore has increased the upheld rate in comparison to previous years. They advised:

“In 2022-23 we changed our investigation processes, contributing towards an increase in the average uphold rate across all complaints. Consider comparing individual council uphold rates against the average rate rather than against previous years.”

- 7.3 In the vast majority of LGSCO enquiries the LGSCO have stated there was no further action (116 cases, 70% of the total) and the Ombudsman ruled not to take the matter to a full investigation.

- 7.4 We had a total of 50 (13% escalation) cases investigated with 39 (78%) upheld. This upheld rate is compared to an average of 77% in similar authorities. In three of these cases the council had already upheld the complaint at Stage 2 and in six cases partially upheld the complaint.
- 7.5 There was a compliance rate of 100% with remedial measures compared to an average of 99% across similar authorities (see Appendix B for comparative data).
- 7.6 Of the 39 Complaints that were upheld, 3 (8%) cases had reached a satisfactory outcome before being investigated by the LGSCO.
- 7.7 Figure 6 shows number of upheld complaints per 100,000 residents in each London borough. The Council continues to use complaints insights to improve its services and customer satisfaction.

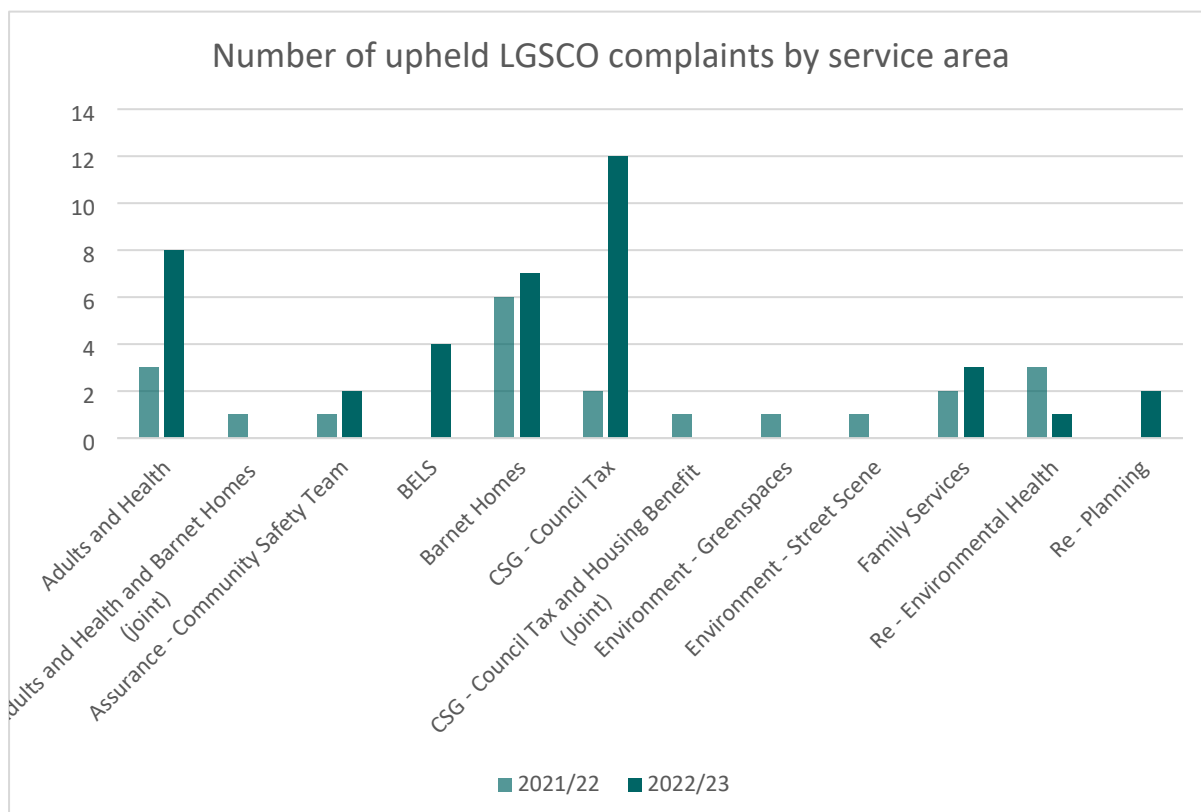
Figure 6: Benchmarking table



7.8 Figure 7 below shows breakdown of LGSCO complaints per directorate and includes the number of upheld complaints for the previous year (see Appendix C for more detail). The service with the most upheld complaints was Council Tax which has 12 upheld complaints. The rise in the number of these complaints relate to historic debt collection which was put on hold during COVID. Officers have been trained on effective complaints management and the service has introduced more quality checks of Stage 1 responses to compliment the quality reviews by the Corporate Complaints team at Stage 2. The service has updated their

procedures regarding historic debt collection to minimise risk of errors. The Corporate Complaints Team are regularly meeting with Customer Support Group and Strategy and Resources colleagues to discuss complaints performance, trends, and learning.

Figure 7: Breakdown of LGSCO upheld complaints for 2021/22 and 2022/23

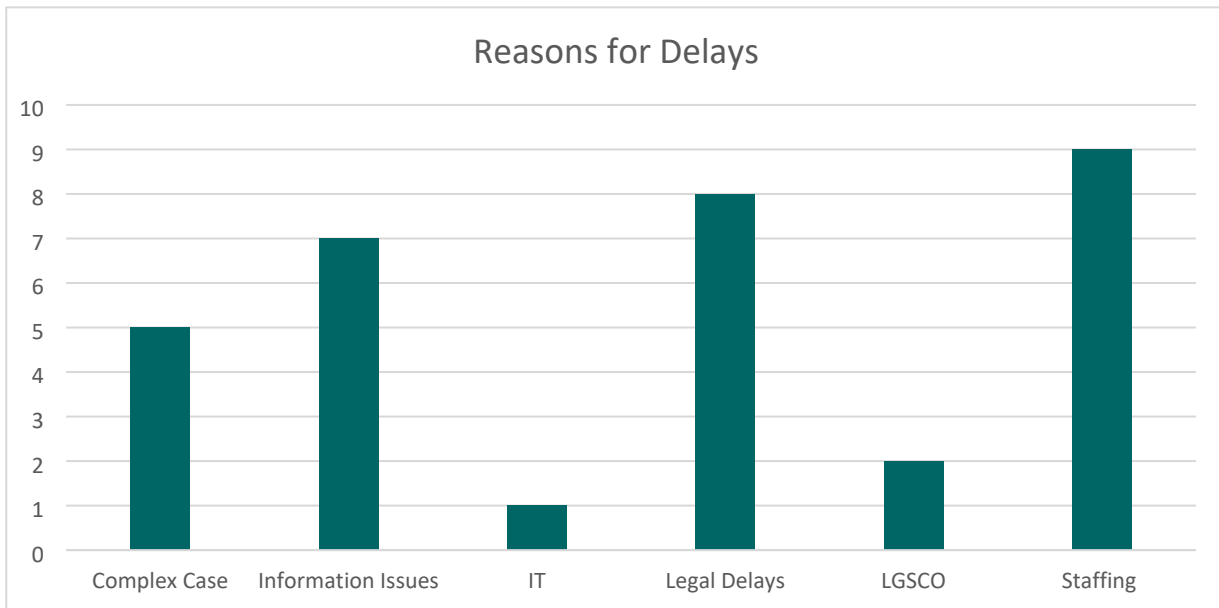


7.9 During the reporting period, the LGSCO issued a “Public Interest Report” for one case relating to Council Tax. This happens in cases when the fault (maladministration) identified is significant.

7.10 The Ombudsman highlighted failings throughout the complaints process along with service failures at points of contact with the resident. The council recognised and accepted these findings and has since completed the remedies recommended to put the complainant back in their original position. The Council has also implemented measures to prevent recurrence, including improvements made to the way the Council communicates with residents. This case costs the council £334 in compensation. LGSCO case ID 21 017 371 was presented to the Council’s Governance, Audit, Risk Management and Standards Committee held on 24 July 2023 (Agenda Item 5)

7.11 Within its annual review letter, the LGSCO noted concerns about the timeliness of the Council’s responses to the LGSCO’s enquiries and in completing remedies (22% of cases had late remedies compared to a national picture of 19%). 28 of the 39 cases upheld involved a delay during the investigation stage (Table 7). A breakdown is provided below in Figure 8.

Figure 8: Delays in responding to the LGSCO enquiries



7.12 Having reviewed the root causes for the delays we have devised an action plan to prevent recurrence of these issues (Table 3). This includes flagging response dates to senior managers including to Directors and where responses are late ensuring services review the root causes to prevent recurrence. The Council Management Team have considered these concerns and met with the LGSCO to discuss the issues outlined within the LGSCO’s annual letter.

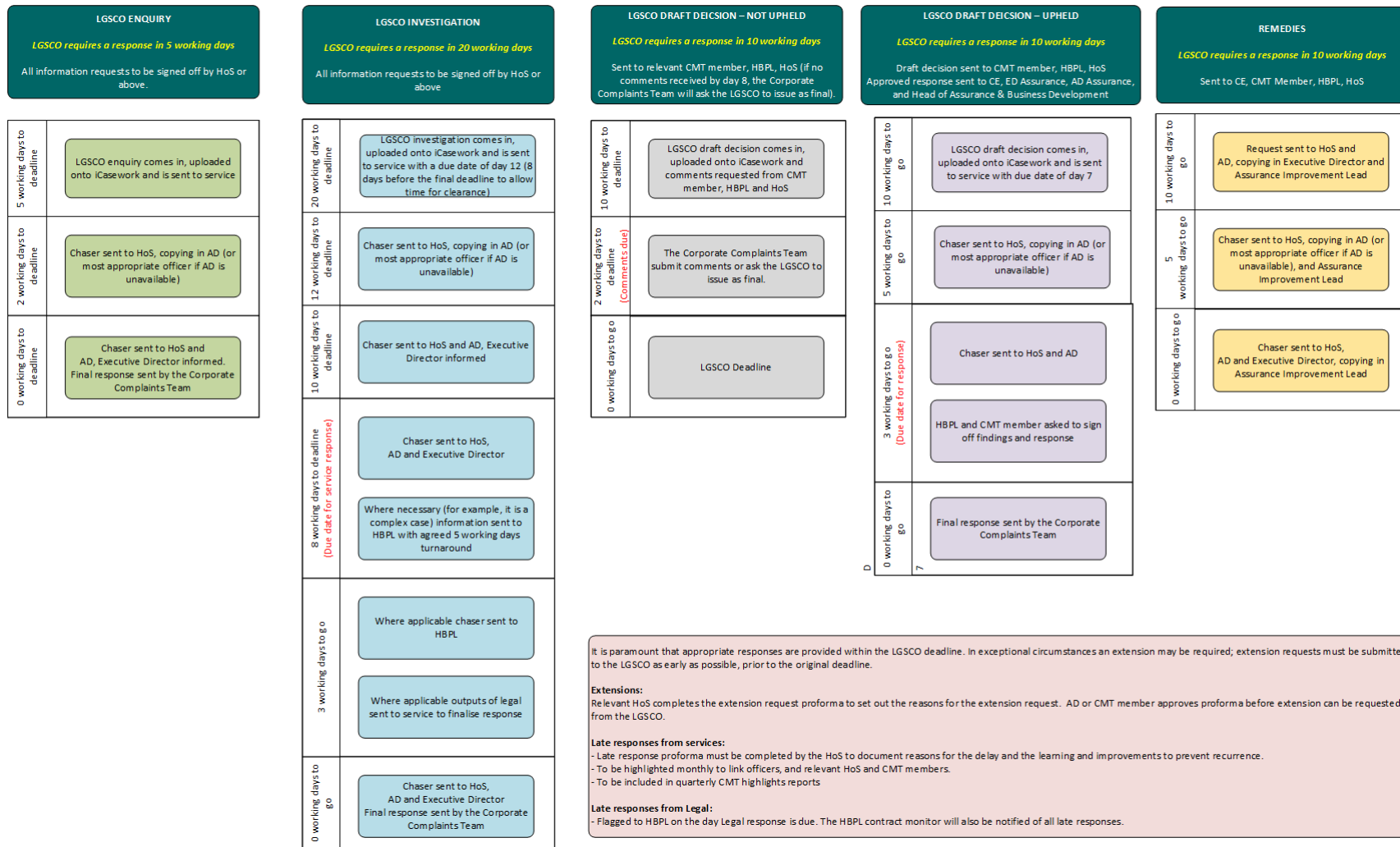
Table 7: Prevention Action Plan

Issue identified by Ombudsman	Prevention Actions
<p>Late responses to Ombudsman communications and remedy implementation</p> <p>Recommendations made in 7 out of 32 cases were not completed within the agreed timescales.</p> <p>Investigations were delayed on 28 occasions due to the council's failure to respond in a timely way to requests for information. Either no request to extend the deadline or the council failed to meet the requested extension of time.</p> <p>Response only received to enquiries after a threat of a witness summons was issued</p>	<ul style="list-style-type: none"> • Detailed investigations and remedies due per week are sent to relevant Senior Managers (Assistant Director or above) by the Corporate Complaints Team. • Actions due on a particular day are chased and relevant member(s) of Council Management Team are informed. • Ombudsman to be made aware that there may be a delay in responding. • If late, Service must complete pro-forma as to why the action/remedy was delayed and further action to be taken to ensure there is no recurrence. • Quarterly Council Management Team to highlight report to include list of delayed investigations/actions with outcome of pro-forma. • Corporate Complaints Team to hold weekly meetings with a standing agenda item to discuss upcoming LGSCO deadlines and remedies for the next two weeks ahead. • See Figure 8 for the Proposed Process Chart

Issue identified by Ombudsman	Prevention Actions
<p>Incorrect advice given.</p> <p>Cases where complainants have been incorrectly advised about the correct complaints' procedure (not being advised of escalation routes) to follow.</p>	<ul style="list-style-type: none"> • Corporate Complaints Manager to sample check a proportion of stage 1 and stage 2 complaints to ensure complaints are fully responded to and complainants have been informed of the correct escalation routes. • Corporate Complaints Manager now reviews all Stage 2 responses prior to release to ensure complaints have been appropriately investigated and responded to. • Outcome of sample reviews to be shared with services and CMT as part of quarterly highlight reports.
<p>Incomplete responses</p> <p>Incomplete responses recorded in 6 cases, attributed to council not having correct processes in place to ensure responses are checked before they are sent out (see below for more details).</p>	<ul style="list-style-type: none"> • All responses to be signed off by relevant Head of Service. • All responses to be checked by Corporate Complaints Team before release.

7.13 The aim for the current year is to reduce the number of investigated and upheld complaints. We have taken steps to do achieve this, including the comprehensive review of the complaints service. This includes reviewing key policies and guidance, information available to customers to make a complaint, reviewing complaints handling capacity in services, staff training, and full utilisation of the management reporting functions of the new complaints case management system. The process map below incorporates the improvements to prevent recurrence of issues mentioned in the LGSCO's annual letter (Figure 9).

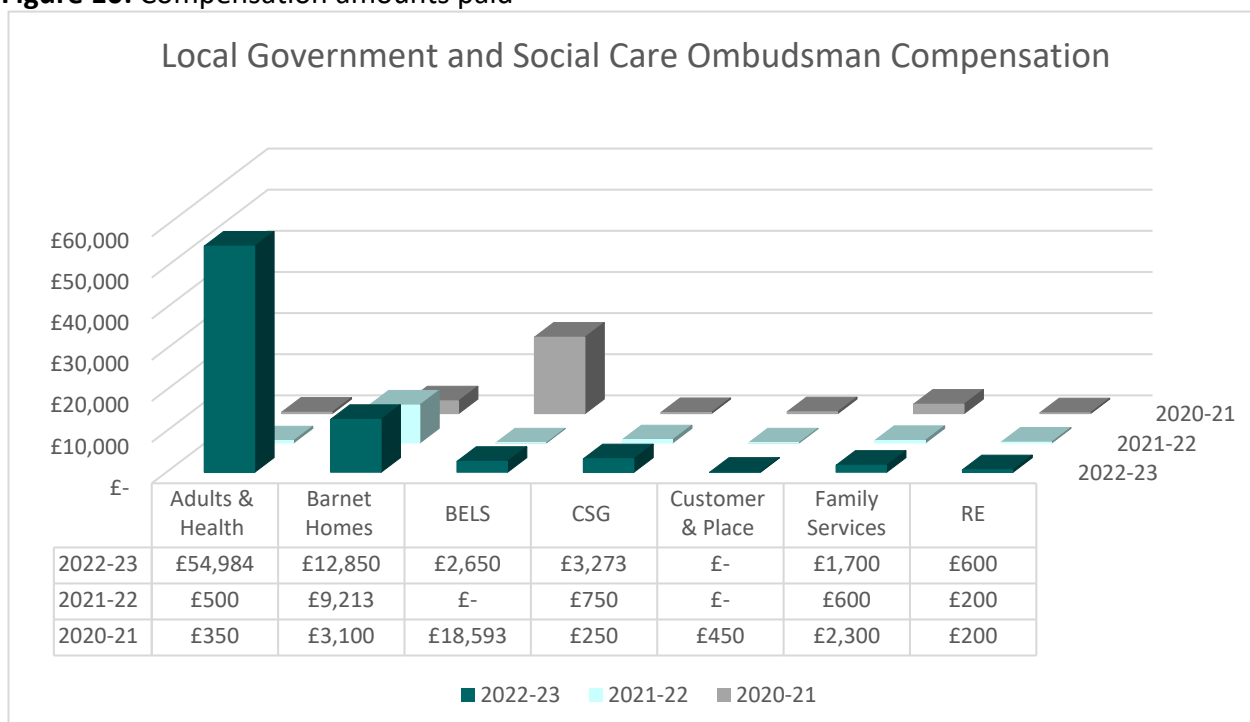
Figure 9: Process map for LGSCO cases



8. LGSCO Compensation

- 8.1 The annual cost of compensations varies each year, and it is usually impacted by individual cases that involve higher compensation payments as dictated by the LGSCO.
- 8.2 During 2021/2022 the Council paid a total of £11,563 in compensation as a result of complaints upheld by the LGSCO. The value in 2022-2023 has increased to £76,057 (Figure 10). This is in addition to £3,340 paid out as part of the corporate complaints process at Stage 1 and Stage 2. This information is now being collected within the complaints case management system and we can therefore present trends regarding complaints compensation in future reports.

Figure 10: Compensation amounts paid



- 8.3 This year Adults & Health (Adult Social Care) paid out both the largest amount overall as well as for a single case (£49,084.28). This case related to failure to provide a care assessment for two years, therefore resulting in the resident having to pay for care directly themselves until the Council was able to provide support.
- 8.4 These figures illustrate the importance of ensuring complaints are dealt with correctly throughout the complaints process, implementing corrective actions and ensuring lessons are learned from previous complaints to avoid recurrence, reduce pressure on human and financial resources.

9 Learning from complaints and making improvements

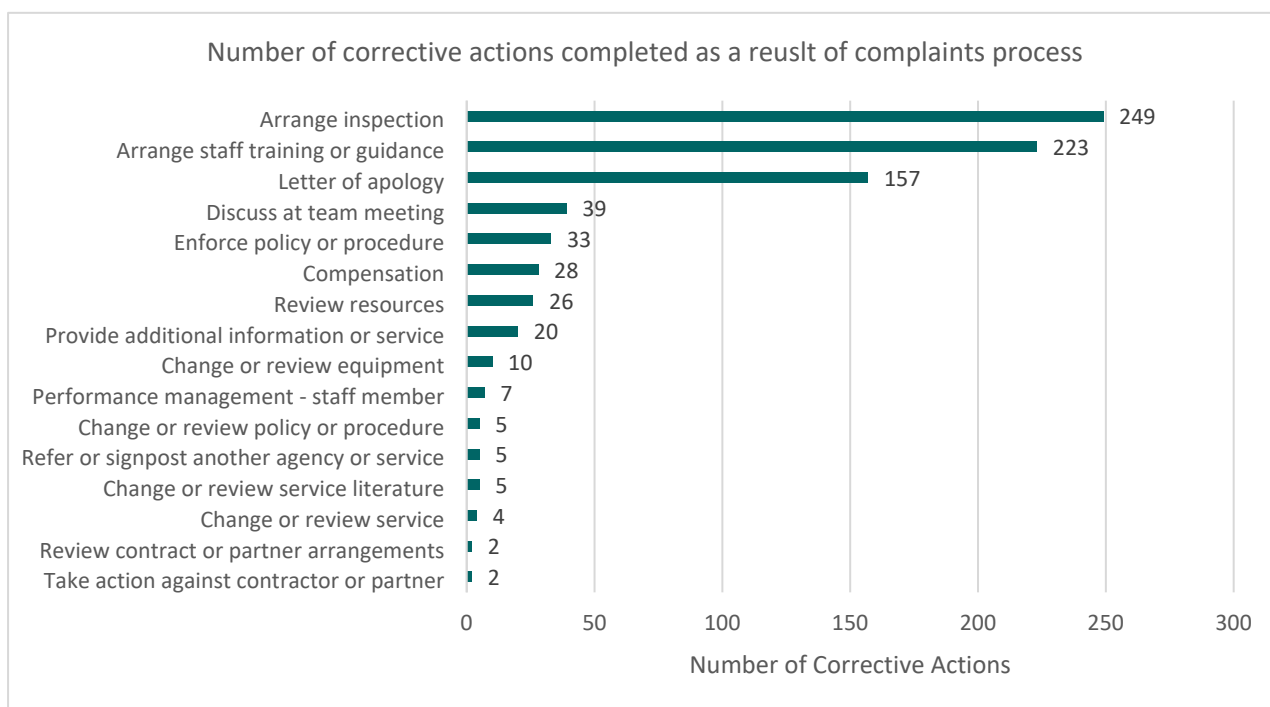
- 9.1 Learning is an imperative part of the complaints process and offers the opportunity to improve council services. Throughout the reporting year every complaint is used to identify learning opportunities to improve services and experiences of customers. Circumstances concerning each complaint and experiences of the customers complaining are often unique, however, general themes have been noted, for example ensuring customers are able to access services if they do not have access to the internet or email. We have delivered an awareness session to Complaints Link Officers, discussing key points from the LGSCOs Focus Report - *Equal access: Getting it right for people with disabilities*. Our Resident Support Team now support

vulnerable and digitally excluded residents. Residents who are unable or prefer not to use digital channels of communication, can request to meet with a member of staff, face to face, who will help with their enquiry. Where relevant we share complaints outcomes with the Resident Experience Team so they can feed outcomes of complaints into resident journey design processes.

9.2 Our case management system shows that we implemented 815 corrective actions resulting complaints (Figure 11), with the greatest number of remedies being:

- arranging inspection (249 incidents)
- arranging staff training or guidance (233 incidents)
- offering a letter of apology (157 incidents).

Figure 11: Corrective actions completed.



9.3 One learning opportunity resulted from an LGSCO case, where they upheld a resident’s complaint as the Council had not made the resident aware of the Community Trigger process. In addition to actioning all LGSCO recommendations, the service has also designed a Community Trigger email signature to ensure residents are made aware of the process and provided a link to the relevant pages of the Council’s website (Figure 12).

Figure 12: Community trigger e-mail signature



9.4 The Street Scene service area took the opportunity when reviewing their complaints to make changes when they have noticed several complaints relating to damaged bins and

responsibility for cost of replacement bins. They updated the website to ensure expectations regarding paying for replacement damaged bins is clear for residents. They have also encouraged refuse collectors to immediately report where bins have been damaged by collectors so that replacements can be ordered in a timely manner.

- 9.5 Barnet, Education and Learning Service received a complaint where not all relevant documentation was sent to a resident. As a result, they have arranged staff training with caseworkers to ensure expectations were made clear and to prevent recurrence of the issues.
- 9.6 Council Tax received a case concerning the status of a live-in carer, with regard to calculation of council tax liabilities. The services provided further training to staff about how to treat live-in carers in this process.
- 9.7 The Contact Centre upheld a complaint regarding a telephone enquiry about Council Tax. The Customer Service Team considered there was learning beyond a discussion with the advisor and provided guidance for all advisors to remind them of recovery process and requested that the Training Team incorporated this into learning materials.
- 9.8 As a result of one complaint, Assisted Travel service has reviewed a case with a provider and clarified timeframes for blue badge and disabled freedom pass assessments.

10 Improvement Plan

- 10.1 In order to ensure that we are continually improving our service, we have made improvements to the corporate complaints service.
- 10.2 These aim to ensure customer satisfaction and resolution of complaints at the earliest opportunity. They focus on:
 - clarifying procedures for staff and for customers
 - updating our guidance and providing training to officers involved in complaints management. This will include e-learning training and developing an onboarding system when new complaints link officers join the council.
 - making information and process of complaining/giving feedback easier and more accessible
 - ensuring good customer service and clear and timely communication with all parties
 - quality checking against complaints best practice
 - ensuring complaints are investigated and responded in accordance with the Council's policy and expected timescales.
 - Lessons are identified and shared.
 - Improvements and remedies are implemented to prevent recurrence of issues.
 - Utilising technology to effectively track progress of cases.
 - Management oversight of complaints at all appropriate levels
- 10.3 The complaints review is overseen by the Assurance management team; progress updates will be included in future reports presented to the GARMS Committee.

11 Conclusion

11.1 This report documents the performance of corporate complaints management at the London Borough of Barnet and the steps which will be taken to improve complaints management and increase resident experience going forward. The GARMS committee will be updated on progress via future reports.

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19 July 2023

By email

Mr Hooton
Chief Executive
London Borough of Barnet

Dear Mr Hooton

Annual Review letter 2022-23

I write to you with your annual summary of complaint statistics from the Local Government and Social Care Ombudsman for the year ending 31 March 2023. The information offers valuable insight about your organisation's approach to complaints. As always, I would encourage you to consider it as part of your corporate governance processes. As such, I have sought to share this letter with the Leader of your Council and Chair of the appropriate Scrutiny Committee, to encourage effective ownership and oversight of complaint outcomes, which offer such valuable opportunities to learn and improve.

The end of the reporting year, saw the retirement of Michael King, drawing his tenure as Local Government Ombudsman to a close. I was delighted to be appointed to the role of Interim Ombudsman in April and look forward to working with you and colleagues across the local government sector in the coming months. I will be building on the strong foundations already in place and will continue to focus on promoting improvement through our work.

Complaint statistics

Our statistics focus on three key areas that help to assess your organisation's commitment to putting things right when they go wrong:

Complaints upheld - We uphold complaints when we find fault in an organisation's actions, including where the organisation accepted fault before we investigated. We include the total number of investigations completed to provide important context for the statistic.

Over the past two years, we have reviewed our processes to ensure we do the most we can with the resources we have. One outcome is that we are more selective about the complaints we look at in detail, prioritising where it is in the public interest to investigate. While providing a more sustainable way for us to work, it has meant that changes in uphold rates this year are not solely down to the nature of the cases coming to us. We are less likely to carry out investigations on 'borderline' issues, so we are naturally finding a higher proportion of fault overall.

Our average uphold rate for all investigations has increased this year and you may find that your organisation's uphold rate is higher than previous years. This means that comparing uphold rates with previous years carries a note of caution. Therefore, I recommend comparing this statistic with

that of similar organisations, rather than previous years, to better understand your organisation's performance.

Compliance with recommendations - We recommend ways for organisations to put things right when faults have caused injustice and monitor their compliance with our recommendations. Failure to comply is rare and a compliance rate below 100% is a cause for concern.

Satisfactory remedy provided by the authority - In these cases, the organisation upheld the complaint and we were satisfied with how it offered to put things right. We encourage the early resolution of complaints and credit organisations that accept fault and find appropriate ways to put things right.

Finally, we compare the three key annual statistics for your organisation with similar authorities to provide an average marker of performance. We do this for County Councils, District Councils, Metropolitan Boroughs, Unitary Councils, and London Boroughs.

Your annual data, and a copy of this letter, will be uploaded to our interactive map, [Your council's performance](#), on 26 July 2023. This useful tool places all our data and information about councils in one place. You can find the detail of the decisions we have made about your Council, read the public reports we have issued, and view the service improvements your Council has agreed to make as a result of our investigations, as well as previous annual review letters.

Your organisation's performance

During the year, we [issued one public report](#) about your Council's poor administration of a person's council tax account. Our investigation found the Council took three years to clarify to the complainant how much she owed on a council tax account. It sent her 20 bills in the space of ten months and incorrectly told her on several occasions that she had a credit on the account. It also insisted on communicating with the complainant by email even though she had no access to an email account and always corresponded by post.

The Council agreed to apologise, make a payment equivalent to the outstanding council tax balance and correspond by letter in future. We also asked it to review the content of its council tax bills to include clearer information on credits and refunds, and to review its communication policy to ensure those people who cannot or do not want to communicate by digital means, are able to access Council services. I am pleased the Council has agreed to implement these measures.

Overall, your Council agreed to, and implemented, the recommendations we made in 32 cases during the year. However, it is disappointing that in seven of these cases remedies were not completed within the agreed timescales. For the third time in four years we have had to highlight this as an area of concern. In many instances, the delays were relatively short but in two cases, the Council delayed by 51 and 76 days.

The agreed remedy in one of these cases was relatively straightforward yet required several emails from the investigator that were not responded to and had to be referred to my Assistant Ombudsman. In the other significantly delayed case, the Council stated it was unable to comply with the agreed remedy until government guidance was issued. We had already allowed a generous six-month timeframe for compliance to allow the policy to be reviewed by the relevant Council committee, so it is disappointing that we had to contact you with a view to issuing a public report in order to progress the matter.

We have also noted 28 occasions during the year that our investigations were delayed by your Council's failure to respond in a timely way to our requests for information. In several instances, we received no request to extend the deadline. In other instances, the Council requested an extension of time and then failed to meet it. There have also been several cases where complainants have been incorrectly advised about the correct complaints procedure to follow.

In two cases, despite the investigator agreeing to requests for an extension of time in which to respond to our enquiries, the Council's response was only sent once we had threatened to issue a witness summons. It is disappointing to note that in one of these cases, this late response was then incomplete and required further input by the investigator.

Incomplete responses were recorded in six cases. Again, this involved additional work for my staff and could easily be avoided if the Council had processes in place to ensure responses are checked before they are sent out. I understand the delays may be partly attributable to staff shortages and excessive workloads within the Council, but I hope we will see an improvement this year.

Given the ongoing issues I have outlined, I would welcome an opportunity to meet to discuss the measures the Council intends to take to improve in the year ahead. This will also provide an opportunity to consider any support my office can provide to help the situation.

Supporting complaint and service improvement

I know that complaints offer organisations a rich source of intelligence and insight that has the potential to be transformational. These insights can indicate a problem with a specific area of service delivery or, more broadly, provide a perspective on an organisation's culture and ability to learn. To realise the potential complaints have to support service improvements, organisations need to have the fundamentals of complaint handling in place. To support you to do so, we have continued our work with the Housing Ombudsman Service to develop a joint complaint handling code that will provide a standard for organisations to work to. We will consult on the code and its implications prior to launch and will be in touch with further details.

In addition, our successful training programme includes practical interactive workshops that help participants develop their complaint handling skills. We can also offer tailored support and bespoke training to target specific issues your organisation might have identified. We delivered 105 online workshops during the year, reaching more than 1350 people. To find out more visit www.lgo.org.uk/training or get in touch at training@lgo.org.uk.

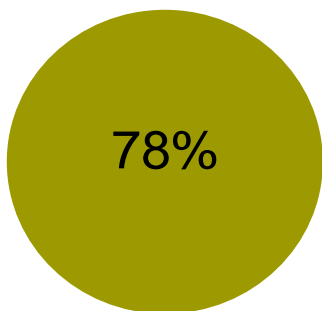
We were pleased to deliver two online complaint handling courses to your staff during the year. I welcome your Council's investment in good complaint handling training and trust the courses were useful to you.

Yours sincerely,



Paul Najsarek
Interim Local Government and Social Care Ombudsman
Interim Chair, Commission for Local Administration in England

Complaints upheld



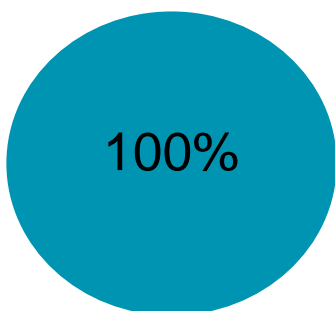
78% of complaints we investigated were upheld.

This compares to an average of **77%** in similar organisations.

39
upheld decisions

Statistics are based on a total of **50** investigations for the period between 1 April 2022 to 31 March 2023

Compliance with Ombudsman recommendations



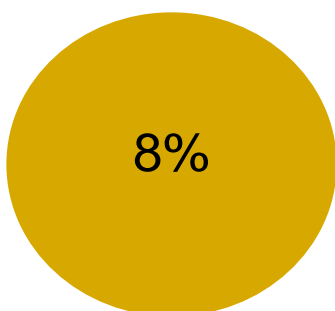
In **100%** of cases we were satisfied the organisation had successfully implemented our recommendations.

This compares to an average of **99%** in similar organisations.

Statistics are based on a total of **33** compliance outcomes for the period between 1 April 2022 to 31 March 2023

- Failure to comply with our recommendations is rare. An organisation with a compliance rate below 100% should scrutinise those complaints where it failed to comply and identify any learning.

Satisfactory remedy provided by the organisation



In **8%** of upheld cases we found the organisation had provided a satisfactory remedy before the complaint reached the Ombudsman.

This compares to an average of **15%** in similar organisations.

3
satisfactory remedy decisions

Statistics are based on a total of **39** upheld decisions for the period between 1 April 2022 to 31 March 2023

Appendix C – Summary of upheld decisions by the Local Government and Social Care Ombudsman (LGSCO) and Housing Ombudsman during 2022-2023.

Adults and Health – Total of 8		
Summary of Decision	Findings	Compensation Reason and Amount
<p>21 002 824 – Delay and miscommunication in relation to an Occupational Therapy assessment and subsequent handling of complaint</p>	<p>Finding: Fault and injustice</p> <p>Remedy:</p> <ul style="list-style-type: none"> • Provide apology letter • Compensation payment of £200 • Complete assessment considering any relevant reasonable adjustments <p>Compliant: Yes</p> <p>Timescale: In time</p>	<p>Compensation: £200</p> <p>Reason Compensation Paid: Distress</p> <p>Learnings:</p> <ul style="list-style-type: none"> • Review complaint handling when complaint covers multiple areas • Improve signposting to relevant complaint procedures
<p>21 018 785 – Delay in assessing a resident’s care and support needs</p>	<p>Finding: Fault and injustice</p> <p>Remedy:</p> <ul style="list-style-type: none"> • Provide a letter of apology • Pay £5,500 compensation <p>Compliant: Yes</p> <p>Timescale: Late</p>	<p>Compensation: £5,500</p> <p>Reason Compensation Paid:</p> <ul style="list-style-type: none"> • £5000 Distress and risk of harm £ • 500 Distress and Time and trouble <p>Learnings:</p> <ul style="list-style-type: none"> • Share various staff reminders on complaint handling.
<p>21 016 847 - A care provider did not administer a resident’s medication safely, there was poor record keeping which has caused uncertainty and complaint was handled poorly. The faults did not cause the resident any harm.</p>	<p>Finding: Fault and injustice</p> <p>Remedy:</p> <ul style="list-style-type: none"> • Provide apology letter • Pay £200 compensation. <p>Compliant: Yes</p> <p>Timescale: In time</p>	<p>Compensation: £200</p> <p>Reason Compensation Paid: Frustration and Distress</p> <p>Learnings:</p> <ul style="list-style-type: none"> • Hold quality assurance meeting with provider • Staff Training
<p>21 018 130 Delays in assessing a resident's care needs</p>	<p>Finding: Fault and injustice</p> <p>Remedy:</p> <ul style="list-style-type: none"> • Provide apology letter 	<p>Compensation: £49,084.57</p> <p>Reason compensation paid:</p>

Adults and Health – Total of 8		
Summary of Decision	Findings	Compensation Reason and Amount
	<ul style="list-style-type: none"> • Pay £49,084. • Review processes • Staff training <p>Compliant: Yes</p> <p>Timescale: In time</p>	<ul style="list-style-type: none"> • £48,484.28 to remedy financial injustice • £600 Harm, undue stress, anxiety and time and trouble. <p>Learnings:</p> <ul style="list-style-type: none"> • Review processes • Introduce staff training on Autism
<p>22 000 355 - The resident complained about the way the Council dealt with concerns its care provider was not meeting their family member’s communication needs, and how the Council dealt with a safeguarding concern</p>	<p>Finding: Fault and injustice</p> <p>Remedy:</p> <ul style="list-style-type: none"> • Provide an apology letter. • Pay £200 compensation. • Review the safeguarding process <p>Compliant: Yes</p> <p>Timescale: In time</p>	<p>Compensation: £200</p> <p>Reason compensation paid: Uncertainty, time and trouble.</p> <p>Learnings:</p> <ul style="list-style-type: none"> • Review of procedure
<p>21 011 467 - Delays in assessing a resident's care and support needs.</p>	<p>Finding: Fault and injustice</p> <p>Remedy:</p> <ul style="list-style-type: none"> • Provide apology letter • Pay £500 compensation • Review of processes regarding requests for urgent or emergency additional care <p>Compliant: Yes</p> <p>Timescale: In time</p>	<p>Compensation: £500</p> <p>Reason compensation paid: Distress and uncertainty</p> <p>Learnings:</p> <ul style="list-style-type: none"> • Review relevant policy
<p>22 002 246 – The council failed to consider emergency support needs following a fall</p>	<p>Finding: Fault and injustice</p> <p>Remedy:</p> <ul style="list-style-type: none"> • Staff reminder <p>Compliant: Yes</p> <p>Timescale: In time</p>	<p>Compensation: £0</p> <p>Reason compensation paid: N/A</p> <p>Learnings:</p> <ul style="list-style-type: none"> • Staff reminder of policy

Adults and Health – Total of 8		
Summary of Decision	Findings	Compensation Reason and Amount
<p>21 014 435 - A resident complained about the way the Council carried out a financial assessment for their relative, who lacked capacity to understand the process.</p>	<p>Finding: Fault and injustice</p> <p>Remedy:</p> <ul style="list-style-type: none"> • Write off the outstanding debt for care fees between April and July 2021 • Pay £200 compensation <p>Compliant: Yes</p> <p>Timescale: In time</p>	<p>Compensation: £200</p> <p>Reason compensation paid: Time and Trouble</p> <p>Learnings:</p> <ul style="list-style-type: none"> • Provide staff training on payments

Assurance – Total of 2		
Summary of Decision	Findings	Compensation Reason and Amount
<p>21 004 857 – Failing to respond to emails and keep the resident informed of progress as well as not signposting the resident to the Community Trigger mechanism.</p>	<p>Finding: Fault and injustice</p> <p>Remedy:</p> <ul style="list-style-type: none"> • Provide apology letter • Pay £250 compensation • Amend communications • Staff reminder <p>Compliant: Yes</p> <p>Timescale: In time</p>	<p>Compensation: £250</p> <p>Reason Compensation Paid: Distress and uncertainty.</p> <p>Learnings:</p> <ul style="list-style-type: none"> • Staff training and reminder on the update of the website and policy
<p>21 008 272 - Failing to signpost the resident to the Community Trigger mechanism and not completing a formal risk assessment.</p>	<p>Finding: Fault and injustice</p> <p>Remedy:</p> <ul style="list-style-type: none"> • Provide guidance for relevant staff on the importance of conducting risk assessments • Provide apology letter • Staff reminder. <p>Compliant: Yes</p> <p>Timescale: In time</p>	<p>Compensation: £ 0</p> <p>Reason Compensation Paid: N/A</p> <p>Learnings:</p> <ul style="list-style-type: none"> • Ensure staff guidance is circulated and referred to

Barnet Education, Learning and Skills – Total of 4		
Summary of Decision	Findings	Compensation Reason and Amount
21 009 394 – Clerk’s notes of school appeal panel did not properly record the panel’s decision making	<p>Finding: Fault, no injustice</p> <p>Remedy:</p> <ul style="list-style-type: none"> • None <p>Compliance: N/A</p>	<p>Compensation: £ 0</p> <p>Reason Compensation Paid: N/A</p> <p>Learnings:</p> <ul style="list-style-type: none"> • Improve record keeping
22 001 954 – Not delivering specialist services outlined in an Education, Health and Care Plan.	<p>Finding: Fault and injustice</p> <p>Remedy:</p> <ul style="list-style-type: none"> • Provide apology letter • Pay £1200 compensation • Provide service to resident <p>Compliant: Yes</p> <p>Timescale: In time</p>	<p>Compensation: £1200</p> <p>Reason Compensation Paid: £200 Time and trouble £1000 Acknowledge failure of service.</p> <p>Learnings:</p> <ul style="list-style-type: none"> • Review policy
22 008 421 – Delay in issuing an Education, Health and Care Plan	<p>Finding: Upheld, no further action</p> <p>Remedy:</p> <ul style="list-style-type: none"> • Satisfactory remedy offered by the Council <p>Compliant: Yes</p> <p>Timescale: In time</p>	<p>Compensation: £ 0</p> <p>Reason compensation paid: N/A</p> <p>Learnings: N/A</p>
21 012 867 - Issues with the structure of an Education, Health and Care Plan, failure to make appropriate provision as well as delays in the process and communication failures.	<p>Finding: Fault and injustice</p> <p>Remedy:</p> <ul style="list-style-type: none"> • Provide apology letter • Pay £1450 compensation <p>Compliant: Yes</p> <p>Timescale: In time</p>	<p>Compensation: £1450</p> <p>Reason Compensation Paid: £250 for delay leading to loss of chance to appeal £1200 for missed education</p> <p>Learnings:</p> <ul style="list-style-type: none"> • Review policy and procedures to improve compliance

Barnet Homes – Total of 9 (7 LGSCO and 2 Housing Ombudsman)		
Summary of Decision	Findings	Compensation Reason and Amount
<p>Housing Ombudsman Reference: 202109585 – Handling of multiple residents’ complaints</p>	<p>Finding: Severe Maladministration</p> <p>Remedy:</p> <ul style="list-style-type: none"> • Pay £2914.30 compensation • Issue apology <p>Compliance: Yes.</p> <p>Timescale: On time</p>	<p>Compensation: £2914.30</p> <p>Reason Compensation Paid: £2114.30 For handling of the Noise nuisance and ASB £800 for failing in the decant process</p> <p>Learnings:</p> <ul style="list-style-type: none"> • Staff training • Improve record keeping
<p>Housing Ombudsman Reference: 202122014 - Handling of concerns about being included on the verbally abusive residents (VAR) list.</p>	<p>Finding: Maladministration</p> <p>Remedy:</p> <ul style="list-style-type: none"> • Pay £450 compensation • Issue apology <p>Compliant: Yes</p> <p>Timescale: On time</p>	<p>Compensation: £450</p> <p>Reason Compensation Paid: Distress and inconvenience</p> <p>Learnings: Improve processes</p>
<p>21 003 556 – Failure to address the resident correctly using their preferred pronoun and delay in reviewing an application</p>	<p>Finding: Maladministration, no injustice</p> <p>Remedy:</p> <ul style="list-style-type: none"> • None <p>Compliance: N/A</p>	<p>Compensation: £ 0</p> <p>Reason compensation paid: N/A</p> <p>Learnings: Staff learning and awareness</p>
<p>21 009 575 –Processing of a housing application</p>	<p>Finding: Maladministration and injustice</p> <p>Remedy:</p> <ul style="list-style-type: none"> • Issue apology • Pay £600 compensation • Policy review • Staff reminder <p>Compliant: Yes</p> <p>Timescale:</p>	<p>Compensation: £600</p> <p>Reason compensation paid: Uncertainty</p> <p>Learnings: Staff training</p>

Barnet Homes – Total of 9 (7 LGSCO and 2 Housing Ombudsman)		
Summary of Decision	Findings	Compensation Reason and Amount
	In time	
<p>22 000 443 – Handling of a homelessness application which caused delays in a suitable property being found.</p>	<p>Finding: Fault and injustice</p> <p>Remedy:</p> <ul style="list-style-type: none"> • Pay £10,500 compensation • Provide offer of accommodation <p>Compliant: Yes</p> <p>Timescale: In time</p>	<p>Compensation: £10,500</p> <p>Reason compensation paid: £500 Distress £10,000 Time spent in Temporary accommodation</p> <p>Learnings:</p> <ul style="list-style-type: none"> • Review policy • Share information with staff
<p>22 004 030 – Ending homelessness duty</p>	<p>Findings: Upheld, no further action</p> <p>Remedy:</p> <ul style="list-style-type: none"> • Satisfactory remedy offered by the Council <p>Compliance: N/A</p>	<p>Compensation: £750</p> <p>Reason compensation paid: Distress and uncertainty</p> <p>Learnings: Review procedures</p>
<p>22 004 199 - Delays in processing housing application, providing access to the housing portal, and notifying about the outcome of a medical assessment</p>	<p>Findings: Fault and injustice</p> <p>Remedy:</p> <ul style="list-style-type: none"> • Communication decision making to resident • Pay £250 compensation <p>Compliant: Yes</p> <p>Timescale: In time</p>	<p>Compensation: £250</p> <p>Reason Compensation paid: Frustration, time and trouble</p> <p>Learnings:</p> <ul style="list-style-type: none"> • Issue staff reminder
<p>22 005 839 - In developing and reviewing its allocations scheme, the Council failed to consider the impact on homeless applicants to whom it accepted a main duty before November 2012 of its policy to award households in long-term temporary accommodation the lowest priority for housing. As a result, the Council has created a situation in which it is unable to</p>	<p>Findings: Fault and injustice</p> <p>Remedy:</p> <ul style="list-style-type: none"> • Review policy and record decision making. <p>Compliant: Yes</p> <p>Timescale: In time</p>	<p>Compensation: £0</p> <p>Reason compensation paid: N/A</p> <p>Learnings:</p> <ul style="list-style-type: none"> • Review Policy

Barnet Homes – Total of 9 (7 LGSCO and 2 Housing Ombudsman)		
Summary of Decision	Findings	Compensation Reason and Amount
end its duty to over 900 people, who instead have remained in temporary accommodation for almost a decade.		
22 010 708 – Incorrect information given to a resident on the affordability of a private rented accommodation sourced by the council	<p>Findings: Fault and injustice</p> <p>Remedy:</p> <ul style="list-style-type: none"> • Issue apology letter • Pay £500 compensation <p>Compliant: Yes</p> <p>Timescale: In time</p>	<p>Compensation: £500</p> <p>Reason compensation paid: Injustice</p> <p>Learnings:</p> <ul style="list-style-type: none"> • Staff training

Customer Support Group – Council Tax – Total of 12		
Summary of Decision	Findings	Compensation Reason and Amount
22 009 273 – Incorrect process followed when calculating a resident’s historic council tax liability	<p>Finding: Fault and injustice</p> <p>Remedy:</p> <ul style="list-style-type: none"> • Issue apology letter • Pay £300 compensation • Review case <p>Compliant: Yes</p> <p>Timescale: In time</p>	<p>Compensation: £300</p> <p>Reason Compensation Paid: Stress and financial pressure</p> <p>Learnings:</p> <ul style="list-style-type: none"> • Staff training on debt collection
21 014 395 – Failure to put in place reasonable adjustments to assist a resident in accessing and paying Council Tax	<p>Finding: Fault and injustice</p> <p>Remedy:</p> <ul style="list-style-type: none"> • Review case • Write-off Council Tax balance of £270.29 <p>Compliant: Yes</p> <p>Timescale: In time</p>	<p>Compensation: £270.29</p> <p>Reason Compensation Paid: Inconvenience, frustration and distress</p> <p>Learnings:</p> <ul style="list-style-type: none"> • Provide staff training on reasonable adjustments

<p>21 018 559 – Calculation of council tax bill</p>	<p>Finding: Fault and injustice</p> <p>Remedy:</p> <ul style="list-style-type: none"> • Issue apology letter • Pay £150 compensation <p>Compliant: Yes</p> <p>Timescale: In time</p>	<p>Compensation: £150</p> <p>Reason Compensation Paid: Distress and uncertainty</p> <p>Learnings:</p> <ul style="list-style-type: none"> • Provide staff training on manual processes
<p>21 016 885 – Pursuing a resident for historic council tax and rent arrears when they had applied for discretionary payments to clear the outstanding amounts</p>	<p>Finding: Fault and injustice</p> <p>Remedy:</p> <ul style="list-style-type: none"> • Issue apology letter • Pay £2,218.57 compensation • Review policy <p>Compliant: Yes</p> <p>Timescale: In time</p>	<p>Compensation: £2,218.57</p> <p>Reason compensation paid: £300 Distress and uncertainty £1,918.57 Discretionary Housing Payment</p> <p>Learnings:</p> <ul style="list-style-type: none"> • Review policy and procedures around DHP
<p>22 001 582 - Calculation of council tax bill</p>	<p>Finding: Fault and injustice</p> <p>Remedy:</p> <ul style="list-style-type: none"> • Pay £150 compensation • Issue apology letter • Staff reminder <p>Compliant: Yes</p> <p>Timescale: Late</p>	<p>Compensation: £150</p> <p>Reason compensation paid: Distress, frustration, time and trouble</p> <p>Learnings:</p> <ul style="list-style-type: none"> • Issue Staff Training
<p>22 002 067 - Calculation of council tax bill. (<i>The Ombudsman discontinued their investigation as the Council remedied the matter.</i>)</p>	<p>Finding: Upheld, no further action</p> <p>Remedy: Satisfactory remedy provided by the Council</p> <p>Compliance: N/A</p>	<p>Compensation: £0</p> <p>Reason compensation paid: N/A</p> <p>Learnings: N/A</p>

<p>22 002 602 - Calculation of a historic council tax liability. (<i>The Ombudsman discontinued their investigation as the Council remedied the matter</i>)</p>	<p>Finding: Upheld, no further action</p> <p>Remedy: Satisfactory remedy provided by the Council</p> <p>Compliance: N/A</p>	<p>Compensation: £0</p> <p>Reason compensation paid: N/A</p> <p>Learnings: N/A</p>
<p>22 004 733 – Pursuing a historic council tax debt. (<i>The Ombudsman’s discontinued their investigation as the Council remedied the matter</i>)</p>	<p>Findings: Upheld, no further action already remedied</p> <p>Remedy: Satisfactory remedy provided by the council</p> <p>Compliance: N/A</p>	<p>Compensation: £0</p> <p>Reason compensation paid: N/A</p> <p>Learnings: N/A</p>
<p>22 006 759 – Delays in pursuing an historic council tax debt</p>	<p>Findings: Fault and injustice</p> <p>Remedy: Satisfactory remedy offered by the Council</p> <p>Compliance: N/A</p>	<p>Compensation: £0</p> <p>Reason compensation paid: N/A</p> <p>Learnings: • Review policy and staff training</p>
<p>22 013 404 – Council tax liability on a house let to tenants by a private landlord. (<i>The Ombudsman’s discontinued their investigation as the Council remedied the matter</i>)</p>	<p>Findings: Upheld, no further action, already remedied</p> <p>Remedy: Satisfactory remedy provided by the council</p> <p>Compliance: N/A</p>	<p>Compensation: £0</p> <p>Reason compensation paid: N/A</p> <p>Learnings: N/A</p>
<p>21 017 371 – Administrative errors when calculating a council tax bill and referral for recovery action</p>	<p>Findings: Public interest report</p> <p>Remedy:</p> <ul style="list-style-type: none"> • Pay compensation £334 • Review communication methos with resident • Review communications • Review Policy • Staff training <p>Compliant: Yes</p> <p>Timescale: In time</p>	<p>Compensation: £334</p> <p>Reason compensation paid: Clear outstanding debt</p> <p>Learnings:</p> <ul style="list-style-type: none"> • Review communication policy and Staff training

<p>22 003 425 - Poor communication and failure to provide additional support when dealing with a council tax account. (<i>The Ombudsman's discontinued their investigation as the Council remedied the matter</i>)</p>	<p>Findings: Fault and injustice, no further action, already remedied</p> <p>Remedy: Satisfactory remedy provided by the Council</p> <p>Compliant: Yes</p> <p>Timescale: In time</p>	<p>Compensation: £0</p> <p>Reason compensation paid: N/A</p> <p>Learnings: N/A</p>
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Family Services – Total of 3		
Summary of Decision	Findings	Compensation Reason and Amount
<p>21 013 529 – Issues with children's safeguarding referral and subsequent complaint</p>	<p>Finding: Fault and injustice</p> <p>Remedy:</p> <ul style="list-style-type: none"> • Complete any outstanding agreed actions from panel hearing • Pay compensation of £500 • Offer additional service. <p>Compliant: Yes</p> <p>Timescale: Late</p>	<p>Compensation: £500</p> <p>Reason compensation paid:</p> <ul style="list-style-type: none"> • Recognition of the delay
<p>22 006 173 - Failing to signpost a complainant to the Ombudsman.</p>	<p>Finding: Fault, no injustice</p> <p>Remedy:</p> <ul style="list-style-type: none"> • Staff reminder <p>Compliant: Yes</p> <p>Timescale: In time</p>	<p>Compensation: £0</p> <p>Reason compensation paid: N/A</p> <p>Learnings:</p> <ul style="list-style-type: none"> • Staff reminder
<p>22 003 773 – Not providing full information in relation to a foster child who was placed in a resident's care</p>	<p>Finding: Fault and injustice</p> <p>Remedy:</p> <ul style="list-style-type: none"> • Issue apology • Pay £600 compensation • Staff reminder 	<p>Compensation: £600</p> <p>Reason compensation paid: Injustice</p> <p>Learnings:</p> <ul style="list-style-type: none"> • Review policy

Family Services – Total of 3		
Summary of Decision	Findings	Compensation Reason and Amount
	Compliant: Yes Timescale: In time	<ul style="list-style-type: none"> • Written reminders to staff

Re – Total of 3		
Summary of Decision	Findings	Compensation Reason and Amount
21 006 089 - A complaint regarding the handling of a noise nuisance issue that breached planning conditions	Finding: Maladministration and injustice Remedy: <ul style="list-style-type: none"> • Issue apology Compliant: Yes Timescale: In time	Compensation: £0 Reason Compensation Paid: N/A Learnings: <ul style="list-style-type: none"> • Review procedure
21 016 170 – Delays in taking planning enforcement action and poor communication	Finding: Fault and injustice Remedy: <ul style="list-style-type: none"> • Issue an apology and update complainant on actions • Write to the complainant detailing actions taken and provide updates Compliant: Yes Timescale: In time	Compensation: £ 0 Reason compensation paid: N/A Learnings: <ul style="list-style-type: none"> • Review policy
22 008 407 – Poor record keeping and delays in a planning enforcement matter	Findings: Fault and injustice Remedy: <ul style="list-style-type: none"> • Pay £600 compensation Compliant: Yes Timescale: In time	Compensation: £600 Reason compensation paid: Injustice Learnings: <ul style="list-style-type: none"> • Improve record keeping



Governance, Audit, Risk Management and Standards (GARMS) Committee

Title	Quarterly risk report (Q1 2023/24)
Date of meeting	16 October 2023
Report of	Chief Executive
Wards	All
Status	Public
Urgent	No
Appendices	Appendix A – Strategic risks Appendix B – High level (15+) risks
Officer Contact Details	Alaine Clarke, Head of Programmes, Performance and Risk alaine.clarke@barnet.gov.uk

Summary

This report provides an overview of risk for the latest quarter, focusing on the council’s strategic risks and high level (15+) risks. These risks were reviewed in Quarter 1 (Q1) 2023/24 by risk owners/managers and the Directorates Senior Leadership Teams before undergoing a “check and challenge” by the corporate risk team and final review by the Council Management Team. They are presented here for noting.

Recommendations

1. That the Committee note the status of the council’s strategic risks and high level (15+) risks, including the controls/mitigations in place to manage these risks.

1. Reasons for the Recommendations

Background

- 1.1 The council has an established approach to risk management, which is set out in the Risk Management Framework. All strategic risks and service risks (which include joint risks with our strategic contractors Capita, The Barnet Group (TBG) and Barnet Education and Learning Service (BELS)) are reviewed on a quarterly basis (as a minimum) to ensure they remain relevant and the controls/mitigations in place to manage the risks remain effective.

- 1.2 This report provides an overview of risk for the latest quarter, focusing on the council’s strategic risks and high level (15+) risks. The risks were reviewed in Quarter 1 (Q1) 2023/24 by risk owners/managers and the Directorates Senior Leadership Teams before undergoing a “check and challenge” by the corporate risk team and final review by the Council Management Team (CMT). They are presented here for noting.¹

Actions from last meeting

- 1.3 At the last meeting of GARMS on 24 July 2023, the committee asked whether CMT should consider if there needs to be a strategic risk on returning services from Capita. This was discussed at CMT on 1 August 2023 and it was agreed that any risk relating to returning services (resourcing, vacancies, impact on service delivery etc) should be considered at service level. As such, a new risk relating to the Enforcement teams was identified on the Assurance risk register (see extract below) for Q1:

<i>Risk ID and title</i>	ASS026 - Statutory duties not fully completed by Barnet Enforcement Teams
<i>Description</i>	The Enforcement teams that transferred back to Barnet on 1 April 2023 not fully complying with all statutory duties could lead to Barnet failing to fully protect citizens against a range of public health, safety and wellbeing risks resulting in incidents or environments that adversely affect the health, safety and wellbeing of residents, reputational and financial damage to the council.
<i>Residual score</i>	12 (Medium/high)
<i>Controls/ mitigations</i>	1. The range of Enforcement teams that have transferred into Assurance from RE continue to administer their work across the borough, utilising current resources and operating models. 2. Management and oversight of the teams is now provided by Assurance Directorate hierarchy (and in particular the AD for Enforcement and Community Safety). 3. Ongoing review of all current resources, processes, policies and daily operations to identify and act upon strengths, weaknesses, opportunities and threats. 4. Service managers that have transferred in with the teams are transitioning service documentation and planning to align with those in use across Assurance and Barnet.
<i>Treatment actions</i>	A review is now underway and the outputs from this will identify any required or desired changes to the enforcement teams. The review will assess current resources and processes and produce recommendations that will be brought forward by the Executive Director for Assurance in due course.
<i>Review summary</i>	Teams transferred into Assurance on 1 April 2023. Work has been scoped and initiated on the review to fully embed the new teams into the Assurance Group. An interim Head of Service in Regulatory Services has been contracted to oversee work to review and assess current effectiveness of Enforcement teams.

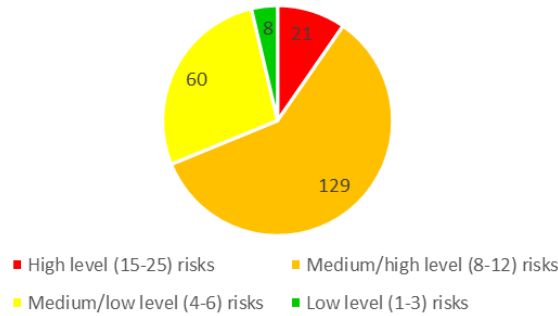
- 1.4 No emerging risks to service delivery were identified in Customer & Place from the returning RE services (or subsequently CSG Estates which returned on 1 September 2023). Any additional financial risk in Q1 was captured at strategic level as part of the overall financial sustainability risk (STR017). This risk was scored at a 12 in Q1, but has since been revised to a 16 following further review in Q2. The Q2 risk review is due to be completed in October 2023 and will be reported to GARMS on 27 November 2023.

Overview of risks (Q1)

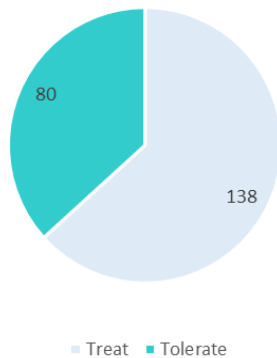
- 1.5 There were 218 open risks across the Directorate risk registers in Q1 (five less than in Q4; 14 risks were closed and nine new risks were identified). The open risks comprised of 24 strategic risks and 194 service risks (which included joint risks with our strategic contractors Capita, TBG and BELS). An overview of the open risks can be seen in the following pie charts.

¹ The internal process of “check and challenge” and review by the Council Management Team inevitably creates a “time lag” before the risks can be reported to Committee.

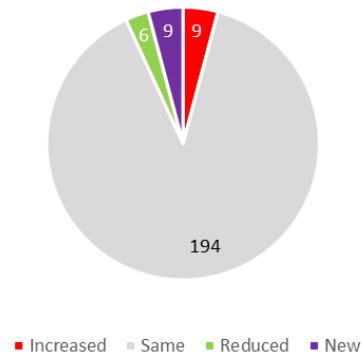
Risks by Residual Score (Q1)



Risks by Response Option (Q1)



Risks by Direction of Travel (Q1)



1.6 The Directorate risk registers vary in size, with Customer and Place showing a much larger number of risks. This is due to incorporation of the former Environment risk register (covering services such as Street Scene, Highways and Parking) and joint risks with Capita and TBG. The Children’s risk register is also larger as it includes joint risks with BELS.

Table 1: Risks by Directorate (Q1)

Directorate	No. of strategic risks	No. of service risks	Total no. of open risks
Adults	3	26 (2 closed)	29
Assurance	2	19 (5 closed; 2 new)	21
Children’s	2	45 (2 new)	47
Customer & Place	5	82 (4 closed; 2 new)	87
Public Health	2	3 (1 new) ²	5
Strategy & Resources	10 (1 closed; 1 new)	19	29
Total	24	194	218

1.7 In accordance with the Risk Management Framework, risks were assigned to one of six categories (see table 2) and assessed for likelihood (of occurring within the next five years) and impact (based on criteria relating to the assigned category). The likelihood and impact were each scored from one to five, and the overall risk score was calculated by multiplying the two values.

Table 2: Risk categories

Category	Example
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² One service risk was counted as open in Q4 that should have been marked as closed (PH001)

Business continuity	i.e. risk of disruption to service or conduct of council business
Statutory duty	i.e. risk of breach of legal obligations
Finance	i.e. risk of financial loss or non-delivery of a saving
Health and safety	i.e. risk of injury
Information governance	i.e. risk of sensitive or personal data not being adequately controlled
Staffing and culture	i.e. risk to staffing level, morale, competence or training

1.8 Risks were assessed on three levels:

- Inherent (worst case) - assessment based on the assumption that controls and/or mitigations currently in place do not exist. This assessment determines the reasonably foreseeable worst case scenario for the risk, which is the most adverse set of plausible circumstances and consequences for the risk described if no controls or mitigations are in place.
- Residual (current) - assessment based on how the risk is currently being managed. It considers how well the controls and/or mitigations in place are working.
- Target (where you can get to) - determination of the desired likelihood and impact levels for the risk, based on the amount of exposure the organisation is comfortable in accepting for the benefits it derives from taking the risk, and the feasibility and cost of further treatment activities. It is the position that the risk will get to once the additional actions have been completed.

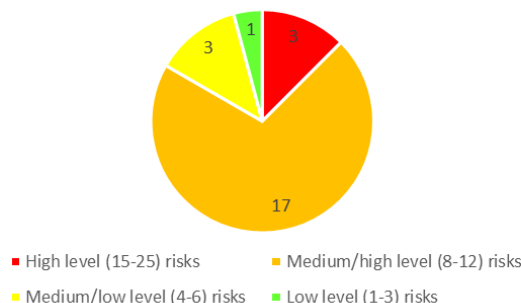
1.9 Risks with a residual score of 15+ were marked as high level (RAG rated Red). This is the level of residual risk the council is prepared to tolerate before action is considered necessary to reduce it (known as the “risk appetite”).

1.10 All risks should be managed towards the target score. These risks were marked as “Treat” under Response Option and had additional actions in place to manage the risks going forward. All high level (15+) risks had Treatment Actions in place. If the target score had been reached, the risks were set to “Tolerate” and were managed with the existing controls/mitigations in place.

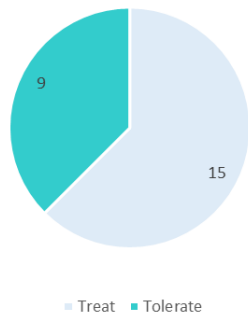
Strategic risks (Q1)

1.11 There were 24 strategic risks in Q1 (same as Q4), which can be viewed in Appendix A. An overview of the strategic risks can be seen in the following pie charts.

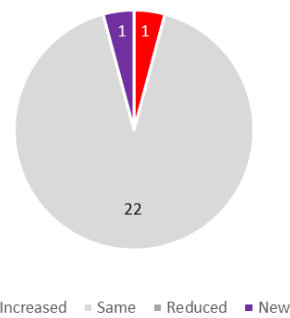
Strategic Risks by Residual Score (Q1)



Strategic Risks by Response Option (Q1)



Strategic Risks by Direction of Travel (Q1)



1.12 Most strategic risks were assigned to the Statutory duty or Finance category.

Table 3: Strategic risks

Category	Total no. of open risks	No. of strategic risks	No. of high level (15+) strategic risks
Business continuity	35	5	1
Statutory duty	79	8	0
Finance	73	7	1
Health and safety	13	1	0
Information governance	6	0	0
Staffing and culture	12	3	1
Total	218	24	3

1.13 Summary information on the three high level (15+) **strategic risks** (by category) is provided below.

Business continuity

1.14 A cyber attack (STR013) could lead to the council being unable to operate resulting in widescale disruption and financial cost. The controls/mitigations include regular meetings to manage the contract/relationship with Capita; mandatory training for staff on information management/ cyber security; audits on remote working; and business continuity plans. In Q1, the IT service continued to add additional controls via training, technical and processes. This included using a suite of PowerBI reports monitoring and flagging worldwide activity of Barnet users and rogue actors, as well as communications to staff around registering working from abroad.

Finance

1.15 Affordability of the capital programme (STR028) continued to be challenged by economic conditions. The controls/mitigations include project cost plans assuming a high rate of inflation; gateway checks on continued project viability; using methods of construction with reduced likelihood of cost inflation; monitoring CIL receipts through CIL/S106 Board; and building risk allowance into CIL allocations. In Q1, the risk was increased back up to 20 (from 16) due to there being less projected capital available to deliver the council's ambitions. In addition, costs and labour shortages remained issues.

1.16 Revenue overspend (STR017) was scored at 12 in Q1 (reviewed on 20 June 2023) but has since been increased to 16 in the Q2 review (1 September 2023) as the council is forecasting a revenue overspend of £23m for 2023/24. Rising demand for services continues to be a financial challenge for the authority, against a backdrop of rising costs faced by care sector providers. Officers are focusing on the key financial risks via the monthly monitoring process

and the introduction of a Financial Sustainability Board. Opportunities for additional income realisation and cost mitigation are also being explored, alongside possible efficiencies identified via the Transformation Strategy. The controls/mitigations include monthly budget monitoring for both capital and revenue expenditure, a robust budget setting process validating savings, income generation and forecast pressures, engaging with colleagues across London and nationally, sectoral experts and keeping informed from media and annual scenario planning as part of the MTFs and identification of the key variables, both nationally (such as market fragility for adults and children's placements) and locally (such as delivery of housing numbers to meet modelled increases in Council Tax base).

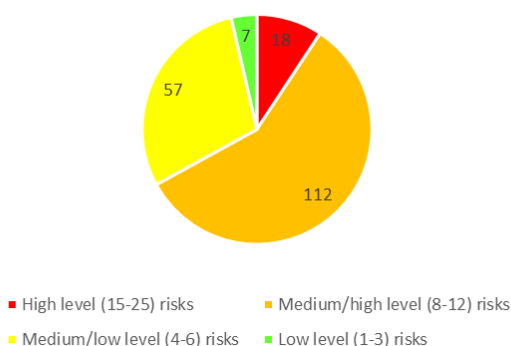
Staffing and culture

1.17 Difficulties recruiting/retaining staff in specialist areas (STR023) continued to be mitigated through improved recruitment processes; flexible working patterns; use of recruitment and retention payments for hard to fill posts; and focused recruitment campaigns e.g. for Children's social care workers. In Q1, the Leave Purchase Scheme continued to be embedded.

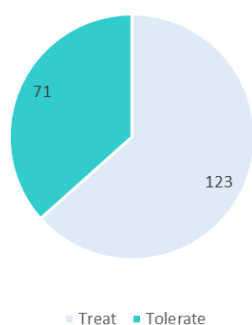
Service risks (Q1)

1.18 There were 194 service risks in Q1 (five less than Q4). An overview of the service risks can be seen in the following pie charts.

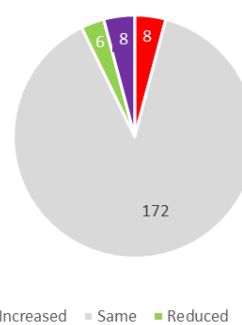
Service Risks by Residual Score (Q1)



Service Risks by Response Option (Q1)



Service Risks by Direction of Travel (Q1)



High level service risks (Q1)

1.19 In addition to the three high level (15+) strategic risks, there were 18 high level (15+) service risks (two less than Q4). All the high level (15+) risks can be found in Appendix B.

Table 4: Service risks

Category	Total no. of open risks	No. of service risks	No. of high level (15+) service risks
Business continuity	35	30	3
Statutory duty	79	71	9
Finance	73	66	4
Health and safety	13	12	0
Information governance	6	6	1
Staffing and culture	12	9	1
Total	218	194	18

1.20 Summary information on the 18 high level (15+) **service risks** (by category) is provided below.

Business continuity

- 1.21 In Street Scene, confirmation was received from Harrow that the salt storage requirement (C&P055) would be in place for the coming winter season.
- 1.22 In Commercial, it had been recommended that HR Core Admin return to the council from Capita by August 2023 to ensure the implementation timescales for Oracle remained on track (C&P082). The matter was raised at the Oracle Programme Steering Board to progress. The latest position is for this risk to be closed, as the Oracle Programme is now driving commercial decisions. The timeline for the Oracle Programme will determine the timing for the transfer of HR Core Admin rather than the other way round. Fortnightly meetings regarding the transfer of services are being held with Capita.
- 1.23 In IT, cyber security mitigations (CSG003) continued with the implementation of website monitoring (Imperva), the ongoing implementation of complex security controls as recommended by Microsoft through the E5 license security stack, a suite of PowerBI reports monitoring worldwide activity of Barnet users and rogue actors and implementation of the Microsoft Sentinel event monitoring tool.

Statutory duty / Information governance

- 1.23 In Adult Social Care, pressures on the health and social care system and social care market continued to create budget challenges (AD001). A range of actions were in place to manage spend, including senior sign off of high cost packages, negotiation of rates (including block contracts), quick reviews of people following discharge from hospital to ensure a proportionate level of care as people recover, use of equipment and technology wherever suitable and maximising the benefits of enablement services. A new provider was appointed for community equipment (AD017). However, a backlog of existing referrals meant a challenging transition.
- 1.24 In Children's Services, the reduced demand for school reception places in September 2023 along with longer-term projections for 600 reception pupils less by 2026 (20 forms of entry) increased the risk on school budget pressures (ES025), which could impact funds for school effectiveness and improvement. The team will be looking at the longer-term strategy going forward to mitigate the impact. The potential strain on SEN transport (ES033) continued to be monitored. The new Transport User Group will be co-producing a new SEND transport policy for consultation when the new Department for Education home school transport guidance is published.

- 1.25 In Highways, selective vegetation was cleared and water filled barriers installed at Barnet Hill - A1000 (C&P096) to prevent vehicle overrun. The council's design engineers were commissioned to develop an interim drainage solution to deflect water from discharging straight down the bank whilst a more detailed longer-term solution was developed. In addition, vibration surveys were received ahead of targeted design work being developed for Barnet's roads (C&P097). In the interim, targeted patching and selective resurfacing was being completed.
- 1.26 In Housing, the high-rise sprinkler retro-fit programme was completed, with works on the medium and low-rise programme commencing (TBG002). This included investigation of specific types of timber framed houses following a significant fire involving a terrace of four houses in Finchley in June 2023. Consultation with residents on options for the Large Panel Systems (LPS) schemes commenced and a business case will be presented to Cabinet in November 2023. Good progress was being made against the Damp and Mould Action Plan as reported to Cabinet in June 2023. In the private rented sector (C&P086), resources continued to be focused on the highest risk cases. Resource gaps due to staff departures/retirements were being filled on an interim basis whilst permanent recruitment will be undertaken as part of service re-organisation in November 2023.
- 1.27 In Assurance, work was completed on the audit actions due for completion in Q4 (ASS018). 63% of actions due by 31 March 2023 were confirmed as implemented. The target of 90% was not achieved in any of the quarters in 2022/23. Although performance in the final quarter did improve compared to the previous quarters. Further reminders were sent to staff to complete mandatory training (ASS004) to comply with data protection legislation and the submission for the Annual Data Security and Protection Toolkit Assessment was completed ahead of the extended deadline of June 2023.

Staffing and culture

- 1.28 In Highways, recruitment to vacant posts (C&P089) continued with some success. A new Design Manager started and offers were accepted for the Highways Manager and Member Liaison Officer posts. The service continued to actively recruit for engineering and other technical roles.

Finance

- 1.29 The Barnet Group continued to see an increase in demand for temporary accommodation (TBG001) compounded by the cost of living crisis; along with the continued reduction in available supply of Private Rental Sector (PRS) properties, this has created challenges in finding suitable affordable accommodation for those who need it. The purchase of 249 homes at Colindale Gardens (approved by Cabinet in June 2023) will provide additional affordable housing supply at social rents to alleviate homelessness cost pressures in 2023/24. High build cost inflation and interest rate increases continued to place pressure on contractors delivering new build schemes on fixed cost design and build contracts (TBG006), increasing the risk of contractors failing or additional cost claims; as a result, the frequency of contractor financial checks was increased to annual.
- 1.30 At Brent Cross, agreement was reached with the station contractor on a settlement agreement that brings more cost certainty to the station final outturn (C&P002). Commercial discussions remained ongoing with Network Rail on disputed items for the rail systems account; and with the Department for Transport and train operating company, Govia

Thameslink Railway, on amending the station maintenance responsibilities to simplify the funding arrangement.

- 4.31 In Parking, budget implications continued to be monitored; whilst new base income forecasting tools were being developed by Finance (C&P038).

2 Alternative Options Considered and Not Recommended

- 2.1 None

3 Post Decision Implementation

- 3.1 None

4 Corporate Priorities, Performance and Other Considerations

Corporate Plan

- 4.1 The overarching aims of the Risk Management Framework are to improve the organisation's ability to deliver its strategic objectives by managing risk; creating a risk culture that adds value to operational activities; and achieving sustained benefit across the portfolio of activities.
- 4.2 The Risk Management Framework supports the organisation's strategic objectives in Our Plan for Barnet 2023-26 to Care for People, Our Places and the Planet and to be an Engaged and Effective council.

Corporate Performance / Outcome Measures

- 4.3 Relevant high level (15+) risks were reported to Overview and Scrutiny Committee and Cabinet as part of the Quarter 1 (Q1) 2023/24 report on the Delivery and Outcomes Framework for Our Plan for Barnet. The Delivery and Outcomes Framework is the means through which we provide assurance that the council's strategic objectives are being delivered as planned and highlight any potential areas of concern.

Sustainability

- 4.4 There are no direct impacts on sustainability from noting the recommendations.

Corporate Parenting

- 4.5 In line with Children and Social Work Act 2017, the council has a duty to consider Corporate Parenting Principles in decision-making across the council. There are no implications for Corporate Parenting in relation to this report.

Risk Management

- 4.6 The council has an established approach to risk management, which is set out in the Risk Management Framework. All strategic and service risks (including joint risks with our strategic contractors Capita, TBG and BELS) are reviewed on a quarterly basis (as a minimum) to ensure they remain relevant and the controls/mitigations in place to manage the risks remain effective. The strategic risks, along with any high level (15+) service risks, are reported to this Committee.

Insight

- 4.7 Horizon scanning is undertaken periodically and as part of quarterly risk reviews to ensure the risks remain relevant and are framed in the current context.

4.8	An internal audit is carried out annually to check compliance with the Risk Management Framework, with the last audit (reported in December 2022) concluding that: “Overall, it is clear that the service areas we reviewed are operating in compliance with the Risk Management Framework. This indicates that there is a strong risk management culture in place at Barnet Council in which risk owners and champions understand and fulfil their responsibilities relating to risk management”.
Social Value	
4.9	The Public Services (Social Value) Act 2013 requires people who commission public services to think about how they can also secure wider social, economic and environmental benefits.
5 Resource Implications (Finance and Value for Money, Procurement, Staffing, IT and Property)	
5.1	This report includes strategic risks and high level (15+) service risks assigned to the “Finance” and “Staffing and culture” categories.
5.2	<u>Finance - Strategic risks</u> <ul style="list-style-type: none"> • STR009 Unmet customer expectations (12) • STR017 Revenue overspend (12) • STR018 Funding uncertainty due to reduction in local taxation income (12) • STR019 Internal controls (6) • STR020 New burdens (9) • STR021 Increase in the North London Waste Authority (NLWA) levy (6) • STR028 Affordability of Capital Programme (20, increased from 15)
5.3	<u>Finance - High level (15+) service risks</u> <ul style="list-style-type: none"> • TBG001 Increased demand for temporary accommodation (16) • TBG006 New build and development (16, increased from 12) • C&P002 Affordability of BXC (15) • C&P038 Variations to budget for parking (16)
5.4	<u>Staffing and culture – Strategic risks</u> <ul style="list-style-type: none"> • STR016 Staff wellbeing and mental health (9) • STR023 Recruitment and retention (16) • STR026 Embedding the new administration's priorities (3)
5.5	<u>Staffing and culture – High level (15+) service risks</u> <ul style="list-style-type: none"> • RE006 People attrition (15)
6 Legal Implications and Constitution References	
6.1	Part 2B & Part 2C of the Constitution outline the “Terms of reference and delegation of duties to Committees and Joint arrangements”, including for the Governance, Audit, Risk Management and Standards (GARMS) Committee which specify the following powers and duties relating to risk management: To monitor the effective development and operation of risk management in the council.
7 Consultation	
7.1	None

8 Equalities and Diversity

- 8.1 The Equality Act 2010 requires organisations exercising public functions to demonstrate that due regard has been given to:
- a) Eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under this Act
 - b) Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it
 - c) Foster good relations between persons who share a relevant protected characteristic and persons who do not share it.
- 8.2 The Equality Act 2010 identifies the following protected characteristics: age; disability; gender reassignment; marriage and civil partnership, pregnancy and maternity; race; religion or belief; sex and sexual orientation.
- 8.3 In order to assist in meeting the Public Sector Equality Duty the council will:
- Try to understand the diversity of our customers to improve our services.
 - Consider the impact of our decisions on different groups.
- 8.4 This is set out in the council's Equalities Policy, which can be found on the website at: <https://www.barnet.gov.uk/your-council/policies-plans-and-performance/equality-and-diversity>

9 Background Papers

- 9.1 None

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New Risk ID	Risk Level	Directorate	Risk Title	Risk Description	Risk Owner Job Title	Primary Risk Category	Controls and Mitigations in Place	Residual Risk - Total	Response Option	Treatment Actions	Treatment Actions Delivery	Direction of Travel (from)	Current Quarter Review Summary
STR001	Strategic	Adults	Adults safeguarding	Council services and partners not effectively managing their relevant safeguarding risks could lead to a safeguarding incident resulting in potential harm to individuals and/or families, potential legal challenge, resident dissatisfaction and public scrutiny.	Executive Director - Adults and Health	Statutory Duty	<ol style="list-style-type: none"> Barnet council and partners have signed up to the multi-London agency procedures safeguarding policies and procedures and adopted across London in Q1 19/20. These were updated in 20/21, and represent best practice. The council has a comprehensive Learning and Development programme for social care practitioners to support high quality safeguarding practice. A quality assurance framework is in place which includes independent case audit programme, supervision audits and direct observations of staff and self-audits to provide reassurance that practice quality is high and identify areas for improvement. A quality board meets monthly to review the findings from mechanisms in the quality assurance framework and track any improvement against actions agreed. Performance monitoring of safeguarding, happens monthly and quarterly by the adult social care management team and the performance sub-group of Barnet's safeguarding adults board. Monthly reporting to executive director along with ad hoc reporting when necessary with clear roles and responsibilities are in place. The adult MASH has been in place since June 2019 to more effectively bring partners together in safeguarding work. Professional lead for safeguarding and clear responsibilities for those carrying out safeguarding inquiries through line management and Safeguarding Adults Manager (SAM). 	12	Tolerate	There are no further actions at this time. The risk has reached its target score and is being tolerated with the existing controls and mitigations in place.	N/A	Same	Work continues with the Learning and Development programme, quality assurance framework, performance monitoring and adherence to London procedures. The new safeguarding workflow in Mosaic has been embedded and this has improved the recording of safeguarding work.
STR002	Strategic	Adults	Market capacity	Decreases in the capacity of the social care market (private or voluntary) due to recruitment challenges, quality concerns, closure or staff leaving the sector could impact service delivery resulting in a failure to meet statutory duties and add additional pressure on staffing and finances.	Executive Director - Adults and Health	Statutory Duty	<ol style="list-style-type: none"> For all contracted services due diligence is undertaken at the start of each contract to ensure quality and sustainability of providers. Regular contract monitoring is undertaken with providers, with more visits to higher risk providers. There is also a clear provider failure/closure approach to manage closure of homes and safe transition of service users if required. More streamlined and better focus on quality. Working across North Central London to share ideas/learning on quality improvement programmes, including collaborative work with Enfield, Haringey, Camden and Islington councils on residential and nursing care supply, commissioning and quality assurance. Ongoing work to monitor the sustainability of the sector and explore best use of council resources to support this (including the awarding of inflationary uplifts) Specific support offer has been in place to support providers with Covid-19; support continues to be made available to care providers. Regular reviews of provider business continuity plans. Recruitment campaign to support sector with recruitment challenges. 	9	Treat	<ol style="list-style-type: none"> Intensive management of provider concerns to lift suspensions when safe to do so. Regular reviews of market availability and assessment of DTOC Work alongside the NCL programme on a range of measures to address market gaps Continuing to incorporate sustainability 'health checks' into regular QA discussions with providers. 	30/09/2023	Same	Market capacity remains pressured but concerns are not particularly acute. Longer term work around market sufficiency is being picked up locally and sub-regionally to address known capacity gaps which are not unique to Barnet within North Central London (NCL) (e.g. bed-based solutions for adults with complex needs). One supported living service pending closure but limited impact on overall market sufficiency.
STR003	Strategic	Adults	Relationship with healthcare providers and partner organisations	Ineffective relationships with healthcare providers and partner organisations such as the NHS could lead to an inability to manage demand resulting in a failure to meet statutory duties and safeguarding of vulnerable residents.	Executive Director - Adults and Health	Statutory Duty	<ol style="list-style-type: none"> Joint planning and co-ordination work takes place through the Joint Health and Wellbeing Strategy and other Health and Wellbeing Board work, and at North Central London level through the Integrated Care System. At the borough level, there is close working through the borough partnership, the joint commissioning unit, the health and wellbeing executive group and the urgent and emergency care board which actively manage plans to control demand pressures in the system. ASC operational managers work with the NHS on the daily basis, to manage demand and pressures. Active monitoring of referral and activity data and discussing any concerns with health partners. Working as an integral part of the integrated discharge team and closely monitoring discharge data. 	12	Treat	<ol style="list-style-type: none"> Joint work across NHS and councils in NCL to improve hospital discharge processes and ensure financial sustainability. Strategic engagement in development of NCL Integrated Care System. Through the borough-focused Integrated Care Partnership work with health partners to help shape how the health and care system develops and improves locally. Shared priority setting and joint work through Joint Commissioning workplan and objectives. 	<ol style="list-style-type: none"> 31/03/2024 31/03/2024 31/03/2024 31/03/2024 	Same	Current development work underway includes implementation of recommendations following last year's external advisory report; development of an enhanced approach to Mental Health rehabilitation; and work on a joint approach to neighbourhood working.
STR004	Strategic	Assurance	Response to emergency or incident	Insufficient resilience management (e.g. Business Continuity, Emergency BC Planning, Health & Safety) could lead to the council being unable to respond effectively to an emergency or incident resulting in disruption to services; harm to staff and/or the public; and legal challenge.	Executive Director - Assurance	Business Continuity	<ol style="list-style-type: none"> Current Business Continuity (BC) arrangements including strategy, exercises, training and resources Corporate BC Strategy and Plan in place. Maintenance of BC leads network Identification of Priority1 staff Corporate Health and Safety Management system in place including Health and Safety Policy, risk assessment and review, training, monitoring and reporting performance. Professional advice and support provided by Head of SHaW (statutory H&S officer) and H&S BP's. 	8	Tolerate	There are no further actions at this time. The risk has reached its target score and is being tolerated with the existing controls and mitigations in place.	N/A	Same	Staffing levels of emergency responder roles are being constantly reviewed and recruitment process will take place if necessary. However there are sufficient controls and mitigations in place.
STR005	Strategic	Assurance	Safety from anti-social behaviour and crime (including violence and abuse)	Anti-social behaviour and crime (including hate crime) could lead to unsafe environments and perceptions of safety resulting in harm to individuals, community tension and increased demand for services.	Executive Director - Assurance	Statutory Duty	<ol style="list-style-type: none"> Working with Barnet Safer Community Partnership, including to deliver the knife crime action plan Working in partnership with the police, including to monitor tensions and local issues and response Environmental enforcement (e.g. litter and flyposting), including with Regulatory Services and Barnet Homes (e.g. noise and pests) and joint action across Estates Effective use of CCTV across the borough. Working with the Barnet Multi Faith Forum (BMFF) and Community Together Network to increase engagement with the community Delivering initiatives to encourage and celebrate cohesion . 	8	Tolerate	There are no further actions at this time. The risk has reached its target score and is being tolerated with the existing controls and mitigations in place.	N/A	Same	The risk has reached its target score and is being tolerated with the existing controls and mitigations in place. There are no further treatment actions and due to the mitigations in place with Barnet Safer Community Partnership Board and processes remain in place. The Community Safety MARAC and TAFG processes remain in place.
STR006	Strategic	Children's	Strengthening Children's safeguarding	Insufficient safeguarding arrangements across the council could lead to children/young people suffering significant harm resulting in serious consequences to the child/young person and the council failing to meet its statutory duties.	Executive Director - Children's Services	Statutory Duty	<ol style="list-style-type: none"> Delivery of robust delivery plan to take recommendations forward. Monitoring of impact of delivery plan on outputs and outcomes for children, young people and families, and taking action if outcomes don't improve as expected. Refresh of the Barnet Multiagency Safeguarding Arrangements (MASA) membership and work programme. Leadership from the Chief Executive, Borough Commander and Lead Officer in the CCG to drive forward action plan, and galvanise resources from across the council and partners to support further improvement (including support services) Strong communication/engagement plan at all levels of the partnership and organisation, to keep the focus, energy and momentum at all levels. Annual scrutiny report by red Quadrant Annual LSCP report and business plan 	12	Tolerate	There are no further actions at this time. The risk has reached its target score and is being tolerated with the existing controls and mitigations in place.	N/A	Same	The Healthy Child Programme (HCP) provider has been inspected by CQC with some recommendations for improvement. This is being monitored and overseen by the safeguarding partnership.
STR007	Strategic	Children's	Neglecting corporate parenting duty	The council and its partners neglecting to fulfil their duty as Corporate Parents could lead to poorer outcomes for children in care and care leavers across key areas including education, health and placements resulting in an increased gap between children in care/care leavers and their peers in the shorter term and poorer outcomes in the longer term.	Executive Director - Children's Services	Statutory Duty	<ol style="list-style-type: none"> A joint motion by councillors to the Full Council in November 2015 resulted in the Barnet's Pledge for Children in Care and Care Leavers. The Children in Care Council has been refreshed and the advocacy service is active across Family Services. A Children's Services Improvement Action Plan is being implemented. The Virtual School has invested in a strong structure and resources are targeted to improve outcomes, through the Personal Education Plan (PEP) process. The 'Onwards and Upwards' care-leaving service is located in a town centre, where care leavers can access support and a broad range of multi-agency services. Strategic links have been developed with key partners. A multi-agency forum, Corporate Parenting Officers Group, has been established to track and monitor planning for children in care and care leavers. Members at Full Council agreed new arrangements for the Corporate Parenting Advisory Group at its meeting on 6 March 2018. 	9	Treat	<ol style="list-style-type: none"> Implement Corporate Parenting Strategy. Monitor Implementation of Delivery plan. Corporate Parenting Officer's Group Action Plan to include health assessments. Training for all Members on Corporate Parenting undertaken. Embedded training for members of the council. Deliver the new corporate parenting pledge. Ongoing auditing of practice. 	31/12/2023	Same	No change from Q3; Presentation to CMT, co-chairing of strategic groups and training provided to members has increased awareness of corporate parenting role and responsibilities. Improved engagement from partners, corporate colleagues and members..
STR009	Strategic	Customer & Place	Unmet customer expectations	Lack of joined up systems and processes across the council and strategic partners, skilled staff or training could lead to customer expectations not being met resulting in a poor customer experience or quality of service.	Deputy Chief Executive	Finance	<ol style="list-style-type: none"> Demand reduction initiatives with high volume services and CSG agreed with timelines for delivery. Customer Experience programme delivering a range of online improvements which should limit the need for customers to contact the council. Safeguards in place to protect service areas that are used by the most vulnerable residents and those that cannot get online. Monthly web performance group meetings are held. Accessibility reports are run to address shortcomings in accessing content for customers with accessibility needs. Resident Experience Programme (REP) in place to mitigate this risk Rolled out Amazon Web Service platform to help manage customer services calls. 	12	Treat	<ol style="list-style-type: none"> Continue with the Residents Experience Programme (REP) Implement REP business case Redesign of front door for vulnerable and complex needs residents 	1-3 30/09/2023	Same	Going out to soft market testing for a resident experience platform [end of June 2023]. Resident Experience programme is now part of the wider Transformation Programme. As part of that we are doing a targeted piece of work around cross-cutting service interactions with residents.
STR013	Strategic	Customer & Place	Cyber security	A cyber attack could lead to the council being unable to operate resulting in widescale disruption and financial cost.	Deputy Chief Executive	Business Continuity	<ol style="list-style-type: none"> Monthly contract management meetings in place to manage the contract and relationship with CSG Monthly Partnership Operations Board for escalation of any issues identified Joint risk being managed by CSG - IT with controls/mitigations in place Learning portal - mandatory training on Information Management/cyber security for staff Remote working audit completed Regular audits undertaken PCI (payment card industry) accreditation Management and oversight of the actions being carried out by CSG on the council's behalf (captured in the joint risk register). BC leads have provided plans in case of a cyber security event. Remote working audit - implemented recommendations working abroad policy and external websites. Simulated phish went to all staff, and recommendations will be produced off the back of findings. 	15	Treat	<ol style="list-style-type: none"> Spend money on training Implement website health recommendations M365 health check Promote information and security training Implement with business continuity lead action plan. Implement recommendations from simulated phish campaign 	1-6 31/07/2023	Same	The service continues to add additional controls via training, technical and processes. This includes but is not limited to using a suite of PowerBI reports monitoring and flagging worldwide activity of Barnet users and rogue actors, as well as communications to staff around registering working from abroad. There is continued executive sponsorship and support. We are continually updating our technical mitigations and enhancing our protection.

New Risk ID	Risk Level	Directorate	Risk Title	Risk Description	Risk Owner Job Title	Primary Risk Category	Controls and Mitigations in Place	Residual Risk - Total	Response Option	Treatment Actions	Treatment Actions Delivery	Direction of Travel (from)	Current Quarter Review Summary
STR014	Strategic	Customer & Place	Building safety	Lack of a robust process to quality assure building contractors could lead to a breach of statutory compliance, health and safety issues resulting in reputational damage to the council, risk of harm or death, delays to delivery of outcomes and financial implications.	Deputy Chief Executive	Health & Safety	1. Health and Safety/quality prioritised as part of scoring during procurement/tender processes. Includes additional background checks, previous performance, exchange of risk information and consideration of proposals to manage risk where necessary. 2. Health and Safety/quality forms a key element of the council's project delivery gateway process, from initiation all the way through to delivery and handover. 3. Additional assurance as and when necessary, through independent assurance i.e., technical team. 4. During construction process on larger schemes the technical team will include a New Engineering Contract (NEC) Supervisor to ensure Health and Safety is being managed appropriately on site and reported correctly. 5. On smaller schemes Construction Design Management and method statements are requested prior to the start of works.	8	Treat	1. Construction Design Management awareness and LBB project H&S Requirements module to be incorporated into the POD for project managers who resigned Development projects.	01/09/2023	Same	The standard model of delivering significant size Capital projects is to ensure that an appropriately qualified set of technical advisors are part of the project team to assure quality and health and safety requirements. This is checked at regular intervals, including project board meetings and project gateways. Work is ongoing to introduce additional training to staff where required.
STR028	Strategic	Customer & Place	Affordability of Capital Programme	Economic outlook and supply chain issues (rising labour and material costs, labour and material availability issues, fuel price) could lead to project delays and/or increases in project cost. Increase cost and supply chain issues may impact the viability of projects and the timely delivery of outcomes.	Director - Growth	Finance	1. Capital budget to factor in contingency percentage assuming high rate of inflation. 2. Projects to review and update cost plan in liaison with FBP to reassure viability. 3. Identify and maximise cost savings opportunities including methods of construction, areas for value engineering, etc.	20	Treat	1. Where shortages are reported, check in with contractors to establish if there is any impact. 2. Schemes of high sensitivity or high value are carrying out additional cost planned reviews at a higher frequency. 3. Exploit all available opportunities for addition funding across the capital programme, including the teams that already have funding resources identified. 4. Quarterly update to Capital Strategy Board on current inflationary impacts to the construction industry and external funding position. 5. Identify ranked list of priority projects so that opportunity to address economic issues are understood.	20/07/2023	Increased	The likelihood of this risk remains high. However, mitigations and controls can reduce the impact. Current position is for the short to medium term. There is less rejected Capital available to deliver the council's ambitions. In addition, costs and labour shortages remain issues.
STR008	Strategic	Customer & Place	Environmental sustainability	Climate change could lead to negative long-term consequences to the local environment (such as flooding) resulting in statutory environmental duties and targets not being met, financial consequences and not protecting the environment for future generations.	Deputy Chief Executive	Statutory Duty	Continue to implement the schemes highlighted in the Sustainability Strategy Framework, under the five themes of delivery: 1. Built Environment & Energy; 2. Transport; 3. Council Operations; 4. Employment and Skills; 5. Waste and Natural Environment.	12	Treat	1. Deliver initiatives through the Reduction and Recycling Plan 2. Continue to implement the proposals included in the Sustainability Strategy Framework 3. Continued rollout of electric vehicle charging points. 4. Refresh the Air Quality Action Plan, including developing longer term air quality strategy around schools and other hotspots	1. 31/12/2023 2. 31/12/2023 3. 31/12/2023 4. 31/12/2023	Same	Citizens' Assembly recommendations have been produced with focus on reduction in carbon emissions and enhancing biodiversity. Recommendations relevant to climate resilience include: retrofit council properties and provide grants/subsidies for people in private housing to make buildings net zero; incorporate green and sustainable design processes in all new builds/infrastructure; commit to planting more trees in existing and new green spaces to promote biodiversity and wildlife. A framework for supporting and delivering these recommendations is being designed and will be launched autumn/winter 2023. A working group to develop a Climate Resilience and Adaptation plan with partners across the borough is being established. This will be done jointly with the Emergency Planning Team, using guidance from the Climate Change Committee.
STR015	Strategic	Public Health	Pandemic type disease outbreak	Another wave of Covid-19 infections or the declaration of another pandemic (such as influenza) could lead to severe resource and capacity issues for the council and partner agencies resulting in disruption to service delivery and the health and wellbeing of residents.	Chief Executive	Statutory Duty	1. All service areas have a robust response system in place and regularly updated. 2. Performing pandemic preparedness exercise across the council and its partners. 3. Providing PH leadership and professional advice for the council's pandemic response.	10	Tolerate	There are no further actions at this time. The risk has reached its target score and is being tolerated with the existing controls and mitigations in place.	N/A	Same	The World Health Organisation has ended the emergency status of Covid-19. However, the council continues to work to prepare for future pandemics. This is done through routine Health Protection work, working with UK Health Security Agency and others to monitor evolving situations and make preparations; and through actions and information for employees provided by the SHaW team (e.g. advice on not coming in when ill; flu vaccinations for staff).
STR016	Strategic	Public Health	Staff wellbeing and mental health	Changes to staff working arrangements (such as hybrid working) and the psychological effects of the Covid-19 pandemic could lead to a staff disconnect with the organisation and a breakdown of relationships between managers and staff resulting in poor job satisfaction, presenteeism, sickness absence (mental health illness) and staff turnover.	Chief Executive	Staffing & Culture	Prevention 1. Regular information and guidance to staff on working practices such as regular breaks, regular contact and communication, physical exercise, via internal comms and through wellbeing hub 2. Employee Assistance Programme (EAP) provides advice and guidance on healthy lifestyles including mental health. 3. Wellbeing and mental health training for staff and managers via Organisational Development team. Intervention 4. EAP provides confidential support and counselling for staff 5. Able Futures is a government scheme providing support on mental health 6. Mental Health First Aiders provide support to staff and signposting to support 7. Development of new Workplace Health, Safety and Wellbeing Strategy and action plans	9	Treat	1. Ongoing regular review of People policies and processes. 2. Organisational development plan, together with a training and development strategy, to enable managers and employees to work within the new cultural framework of the organisation 3. Regular engagement with employees through surveys and focus groups 4. Continuous review of current support offer and resources including mental health services and EAP provision. This includes additional and timely support to managers and staff to enable quicker interventions to resolve issues before they develop.	31/03/2024	Same	A report was presented to CMT on containing feedback from staff engagement and data from Occupational Health and Employee Assistance Programme as well as sickness absence. Subsequent identification of risks and recommendations were made. Next steps are to engage with operational directors to find more bespoke solutions to work related issues that may be impacting staff mental wellbeing. A Workplace Wellbeing Coordinator is being appointed to progress work on the Workplace Wellbeing Strategy and action plan.
STR024	Strategic	Strategy & Resources	Dependency on staff to manage urgent issues	A lack of capacity/capability, shared skills/knowledge or succession planning in the workforce could lead to dependency on a small number of staff to deal with urgent issues resulting in pressure points across the organisation and potential service failure.	Chief Executive	Business Continuity	1. Learning and development opportunities, including opportunities via Apprenticeship Levy 2. Workforce/succession planning 3. Work with Directorates on contingency plans and workforce/succession planning.	6	Tolerate	There are no further actions at this time. The risk has reached its target score and is being tolerated with the existing controls and mitigations in place.	N/A	Same	New performance management approach is in place, apprenticeship levy is being allocated better, there is an interim Head of Organisational Development in place with plans to recruit a permanent one.
STR029	Strategic	Strategy & Resources	Industrial action disruption	A failure of collective bargaining negotiations at national level could lead to trade unions balloting their members for industrial action resulting in service disruption locally.	Chief Executive	Business Continuity	1. Business continuity arrangements - service areas across the council have updated plans for disaster recovery etc. 2. Industrial relations legislation imposes requirements on trade unions to give employers notice of intended industrial action, allowing for some time to plan.	8	Treat	1. Communications and engagement on multiple levels to ensure stakeholders understand the process and make appropriate plans e.g. HR with LGA and London Councils, HR with management, management and HR with trade unions.	31/03/2024	New	This is a new risk for Q1. Engagement is taking place on multiple levels. The Union ballot has failed to meet the participation threshold and the GMB process is likely to take a few more months; however it is unlikely that GMB will actually proceed on its own with industrial action at Barnet, as Unison has a larger number of members.
STR020	Strategic	Strategy & Resources	New burdens	New burdens, additional demand and/or inadequate funding for additional services could lead to additional and unforeseen budget pressures, resulting in the need to increase or divert resource, reduction in service quality, ability to deliver key services effectively and / or having to use reserves.	Executive Director - Resources	Finance	1. Engaging with colleagues across London and nationally to form lobbying positions. 2. Engaging with sectoral experts and keeping informed from media. 3. Monthly monitoring of budgets and scrutiny of any overspend / increase in demand. 4. Providing evidence of unintended consequences of policy and statute to Central Government to support lobbying positions around new burdens.	9	Treat	1. Lobbying and pressing government for clarity on the outlook to allow sufficient time to plan how we manage the impact. 2. Responding to all consultations both individually and collectively through London Councils / Society of London Treasurers	1. 30/06/2023	Same	Lobbying continues through the sector. Responded to London Councils survey on financial pressures.
STR017	Strategic	Strategy & Resources	Revenue overspend	Central government funding for the council being adversely affected by changes in government policy or budget pressures being higher than anticipated could lead to non-achievement of budget targets and an overspend on the revenue budget resulting in an impact on service provision and / or quality and financial consequences for the council.	Executive Director - Resources	Finance	1. Strategically move the funding base of the council from being supported by Government Grants to the more stable base of Council Tax income 2. Monthly budget monitoring for both capital and revenue expenditure. Risks and threats are identified early and management implement mitigating actions to offset emerging pressures. 3. Budget setting process validating savings, income generation and forecast pressures at multiple times through a cycle. 4. Engaging with colleagues across London and nationally, sectoral experts and keeping informed from media 5. Annual scenario planning as part of the MTFS and identification of the key variables, both nationally (e.g. market fragility for adults and children's placements) and locally (e.g. delivery of housing numbers to meet modelled increases in Council Tax base).	12	Treat	1. Ensure robustness of savings proposals and readiness of the services to be able to deliver them 2. Lobbying Government 3. Increase use of insight and modelling and analytics to support budget setting and monitoring against plans.	1 - 3. 31/03/2024	Same	This is an ongoing risk, as the funding landscape does not move rapidly and has remained challenging for local government for the past 12 years. The Provisional Local Government Finance Settlement announced in December 2022 gave funding figures for 2023/24 – the fifth single year funding settlement in a row since 2019/20. This means there are still uncertainties over funding for 2024/25 which hinder the council's ability to plan effectively over the medium-term and strategically invest in services. The budget for 2023/24 is balanced position with no use of reserves and a review of proposals and future plans is being presented to Cabinet on 18 July. A Financial Sustainability Board has been created to identify financial risks and savings and income generation opportunities to address MTFS pressures.
STR018	Strategic	Strategy & Resources	Funding uncertainty due to reduction in local taxation income	Residents experiencing financial hardship could lead to financial pressures due to a large proportion of council funding coming from council tax and business rates income resulting in a reduction in service quality, non-delivery of the MTFS and use of reserves.	Executive Director - Resources	Finance	1. Analysis of monthly collection performance; analysis of Housing Benefit and Council Tax Support awards and claims to provide early warning signs of pressures 2. Maintaining a specified level of balance within the council's resilience reserve in addition to appropriate contingency balances to mitigate any in year pressures; 3. Undertake forward planning, regularly updating budget assumptions and monitoring the Government's fiscal announcements. However, also maintain flexibility within existing plans to stem expenditure in non-frontline services whilst long term plans are being put into place; maintain good contacts with Government to remain as informed as possible. 4. Investment being made with local businesses and working with the community to raise awareness of and increase support available.	12	Treat	1. Impacts on Council Tax and Business Rates being closely monitored with Capita colleagues. 2. Forecast impacts included in reporting to CMT and Cabinet. 3. Impacts on bad debt being closely monitored and reported. 4. Setting of a financial strategy which incorporates the intelligence from the above actions and sets an MTFS which lives within the organisation's anticipated income levels 5. Resident Support Fund in place alongside extended Household Support Fund to support through financial vulnerability during Cost of Living Crisis. The impact of this will be monitored throughout the financial year.	1 - 5. 31/03/2024	Same	Impacts of local taxation and bad debt continue to be monitored and reported as planned. The MTFS for 2024/25 onwards is being compiled and a review of proposals and future plans will be brought to Cabinet in 2023/24. The financial strategy is set as part of the MTFS process.
STR011	Strategic	Strategy & Resources	Reduction in capacity of VCS	Funding and sustainability challenges facing the Voluntary and Community Sector (VCS) could lead to a reduction in capacity and growth of preventative services resulting in difficulties accessing services and demand for more complex support, especially for residents in hardship.	Executive Director - Resources	Business Continuity	1. Ongoing funding identified for an enhanced Barnet Together Voluntary Community Sector (VCS) infrastructure alliance to enable greater support for frontline VCS organisations. 2. A new Memorandum of Understanding is to be developed and deliverables for 2023/24 are to be agreed for the Barnet Together Alliance. 3. Quarterly meetings to be established with Cabinet lead. 4. We will look to commission a provider to help with capacity-building of sector.	8	Treat	We are developing a MOU, establishing regular meetings with Cabinet lead and looking to commission a provider to help build capacity within the VCFSE.	06/10/2023	Same	A meeting took place in April to discuss forward planning of the Barnet Together Alliance. It was agreed that a Memorandum Of Understanding should be developed to outline deliverables for the next year.
STR021	Strategic	Strategy & Resources	Increase in the North London Waste Authority (NLWA) levy	The expected replacement of the NLWA Energy from Waste (EFW) facility (expected 2026) could lead to an increase in the NLWA waste disposal/treatment levy of potentially up to £9 million per annum and any additional financial cost relating to delays in the construction of the EFW resulting in an increased financial pressure on the council.	Executive Director - Resources	Finance	1. Active engagement through officers and NLWA Members. 2. Development of long-term financial strategy. 3. Ongoing analysis of waste data flows.	6	Tolerate	There are no further actions at this time. The risk has reached its target score and is being tolerated with the existing controls and mitigations in place.	N/A	Same	Work is progressing at the Eco Park Site. Members and officers are provided with regular updates on the project progress.
STR026	Strategic	Strategy & Resources	Embedding the new administration's priorities	Changing priorities due to the new administration could lead to the council being unprepared or slow to deliver intended objectives resulting in poorer outcomes for residents.	Chief Executive	Staffing & Culture	1. Our Plan was agreed in March 2023 alongside a Transformation Programme and regular Transformation Steering Group meetings. 2. A Cabinet structure has been set up which allows for more cross-cutting work, oversight and in turn reduces administrative burden 3. The delivery of the mobilisation programme is ongoing.	3	Tolerate	There are no further actions at this time. The risk has reached its target score and is being tolerated with the existing controls and mitigations in place.	N/A	Same	The council has moved to a Cabinet structure, allowing for more oversight of priorities and outcomes of the new administration. Transformation Steering Group (TSG) meetings are happening regularly and any concerns are raised there or in subsequent meetings.

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STR019	Strategic	Strategy & Resources	Internal controls	Ineffective financial management and control could lead to the council not ensuring appropriate administration of public funds resulting in possible financial losses.	Executive Director - Resources	Finance	<ol style="list-style-type: none"> 1. A review of financial forecasts, and challenges where necessary, occurs on a monthly basis by Finance Business Partners 2. Regular, in depth reporting is considered by Council Management Team, Cabinet and Governance, Audit, Risk Management and Standards Committee (GARMS) . 3. Mitigating actions to contain overspends are identified, implemented and tracked for delivery. 4. Achievement of savings tracked and alternative actions identified where not achievable alongside review of reasons for non-achievement and whether it is a delay or non-delivery. 5. Budget holder training is available through the LMS as an additional offer beyond that found on the intranet. 6. Finance Business Partners constantly upskill budget holders to deliver sound Financial Management and understand that their budgets reflect their plans in £ format. 7. An annual, at minimum, review against the CIPFA Financial Management Code and CIPFA Financial Resilience Index is undertaken and reported to GARMS in line with the Annual Governance Statement. 8. Additional internal controls have been implemented and audit reports found increased assurance and improvements in Finance from 2019 to date. 9. A contingency budget is held centrally for any unmanageable, unforeseen pressures. 	6	Tolerate	There are no further actions at this time. The risk has reached its target score and is being tolerated with the existing controls and mitigations in place. However, keeping a watching brief by: 1. Reviewing impact of savings not achieved (currently we are delivering above 85%); 2. Reviewing budget forecast on a monthly basis and review effectiveness of engagement with services.	N/A	Same	Additional controls have been introduced to support financial management and the monitoring process, including a full assessment against the CIPFA FM Code. Forecasting and monitoring continues, with the council as a whole managing the budget as agreed at Council in March 2022. Service areas are articulating risks and pressures early and there are particular pressures in Adult Social Care being reviewed as to the longer-term impact to financial sustainability and the MTFs. A Financial Sustainability Board has been set up to review/help mitigate 2023/24 pressures being reported through Q1.
STR023	Strategic	Strategy & Resources	Recruitment to and retention of roles in key sectors	National and local difficulties in recruiting to key roles could lead to local recruitment and retention issues resulting in a failure to meet statutory duties, council priorities and workforce and financial pressures.	Chief Executive	Staffing & Culture	<ol style="list-style-type: none"> 1. Improved staff engagement 2. Continued promotion of flexible workstyles 3. Development of stronger employer brand, promoting benefits of working for Barnet 4. Effective recruitment processes 5. Increased capacity in Recruitment Team 6. Tailored campaign to recruit and retain children's social workers 7. Targeted campaigns to fill technical roles in Customer and Place 8. Use of Recruitment & Retention payments where appropriate 9. Unified Reward revision 10. EDI Action plan 	16	Treat	<ol style="list-style-type: none"> 1. Development of employer brand to ensure the council is an employer of choice 2. Review of recruitment processes to facilitate successful hiring of good candidates 3. Changes to pay structure to allow council to better match external market 4. Agreement with Vivup on new employee benefits scheme/platform. 4. Development of recruitment system 5. Promotion of EDI agenda to ensure that all talent can progress through the organisation 6. New recruitment agency framework for permanent recruitment 7. Targeted recruitment campaigns 8. HR/Recruitment engagement with Capita and incoming staff to identify vacancies being transferred over and priority areas for recruitment and retention interventions. 	31/03/2024	Same	The council continues to face significant risks in terms of recruitment and retention. However the labour market does appear to be somewhat less tight than in previous quarters. Employment benefits offer has been strengthened with the introduction of a facility for staff to purchase annual leave.

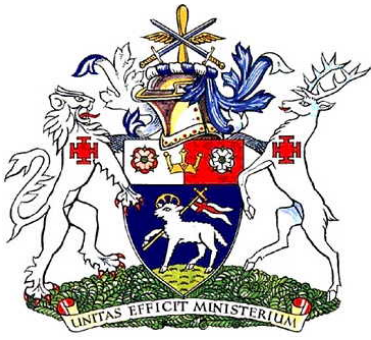
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AD017	Retained	Adults	Shortage of community equipment	Nationwide delays in equipment supply caused by Covid-19 pressures and Brexit uncertainties could lead to shortages of frequently used items and delays in discharging people from hospital or people receiving prescribed equipment resulting in negative impacts to their health and wellbeing and financial implications to the council.	Head of Care Quality	Statutory Duty	1. The council is working very closely with contractor to monitor and mitigate risk, including: - Increased focus on collections where appropriate to recycle/reuse equipment which is unused. - Prescribers are advised to inform contractor if they are aware of any unused items in the community. - Contractor is driving a collection campaign via social media posters and focus phone calls to existing customers. - Additional driver allocation to increase collections of Out of Stock (OOS) items. - Reviewing and triangulating data on number of people, length of time waiting and assessing risk. 2. Out of stock list is shared with prescribers to explore suitable alternatives and to encourage prescribers and authorizers to not place/ authorize orders for products that are out of stock - OOS list updated daily on Online ordering system. - OOS list shared with prescribers via regular emails, prescriber meetings and newsletters. 3. Contractor/council contract officer review OOS list 2x weekly; council officer challenge and encourage provider securer products asap. - Close Technical Equivalents (CTEs) are explored and authorised in the interim without delay. - Contractor continue to explore alternative suppliers, explore stock availability in their other depots. - Contractor/council officer in regular contact with neighbouring LA/health authorities to ascertain supply issues/explore opportunities for joint working to resolve stock issues e.g. NCL CCG/LAs. 4. Occupational Therapy (OT) lead (Equipment) working with prescribers to risk assess and consider any of the available standard stock products (as an alternative) as a temporary solution to safely meet people's needs. OT managers are advised to explore same approach in the interim when discussing cases with OT teams. 5. Increased communication to A&H team leads, SMT to brief OOS issues; to manage expectation on both prescriber/ end user; and to encourage joint working to use available equipment efficiently .	16	Treat	1. Work with partners e.g. NCL leads to share intelligence / knowledge and to explore opportunities for joint work to resolve Out of Stock (OOS) issues. 2. Review and ensure that alternative options are considered to keep people safe/ to avoid delays in hospital discharges due to OOS equipment. 3. Explore alternative ways to meet needs of the residents as an interim/ temporary measure such as needs being met either through delaying hospital discharge, additional care or alternative equipment. Agreed regular OT and Health prescriber catch up group to review OOS frequently and to risk rate/mitigate. 4. Working with the incumbent provider on a clear transition plan with enhanced monitoring arrangements to maintain service continuity.	31/03/2024	Same	Since the last update we have appointed a new provider and transition planning is on-going. There remain operational challenges which mean the new provider will face a challenging transition including a backlog of existing referrals. We are working with the incoming provider, plus operational teams who order equipment to plan for the transition.
AD001	Retained	Adults	Increased overspend to meet statutory duties	Uncertainty about future demand for services, increasing complexity and cost of care packages, the availability of hospital discharge funding streams and support, and legislative changes could lead to a worsening budget overspend for the service resulting in insufficient resources to meet statutory obligations and a deterioration in the council's overall financial position.	Executive Director - Adults and Health	Statutory Duty	1. The council's budget management process (MTFS) forecasts demographic growth and pressures over a multi-year period. 2. Budget and performance monitoring and management controls are used throughout the year. 3. The MTFS to 2024 is set and adult social care will continue to undertake initiatives focused on reducing and managing future demand.	20	Treat	1. Changing residents behaviours to be more self-sufficient and resilient, strengths based practice 2. Increased focus on wellbeing and maximising the use of existing prevention services 3. Securing funding (financial settlement) at a national level and allocating funds to criteria/areas of demand. 4. Ongoing work with the Association of Directors of Adults Social Services (ADASS) to challenge use of resources and understand best models for managing and delivering care, annual participation and completion of ADASS budget survey 5. Regular analysis to be carried out to identify priority areas of demand 6. Additional winter funding to help meet pressures from hospital discharges and/or continued application of hospital discharge scheme, if available. 7. In-year recovery planning as required	31/03/2024	Same	The service continues to do all it can to manage the budget whilst meeting statutory duties. There is an increasingly pressured health and social care system and social care market. Actions include senior sign-off of all high-cost packages, the negotiation of rates (including block contracts) and an annual uplifts process which is particularly challenging with the cost of living crisis, quick reviews of people following discharge from hospital to ensure a proportionate level of care as people recover, the use of equipment and technology wherever suitable and maximising the benefits of enablement services. Pressures have been modelled for 23/24 and remain high and one-off pots of money are no longer available.
ASS004	Retained	Assurance	Non-compliance with data protection legislation including GDPR	Council staff and partners failing to follow GDPR legislation, including the organisation's policy and processes, could lead to data protection breaches resulting in enforcement action and monetary fines, complaints, adverse impact on individuals and claims for compensation.	Head of Assurance and Business Development	Information Governance	1. Information Management's framework of policies, and a specific data protection toolkit controls is published and regularly reviewed 2. All staff receive e-learning (including at induction) and follow up training offered in more sensitive areas 3. There is effective incident management, and Information Management Governance Groups 4. Council wide Security Board meets quarterly, chair by the SIRO and Security Operations Forum, meets monthly, chaired by the deputy SIRO 5. Key contacts within the council have been receiving guidance 6. Ongoing communications to council staff on information management guidance 7. E-learning reminder to all staff, included in initial induction pack for new starters 8. 6-monthly reporting to CMT for discussion and review.	16	Treat	1. Refresh of records and information management policy suite 2. Further communications and engagement with services to ensure the completion of the mandatory e-learning modules.	31/09/2023	Same	A number of service based reminders have been sent again and the risk of non-completions remains. Annual Data Security and Protection Toolkit Assessment was due for submission in March but this could not take place as a result of training statistics not meeting the required threshold. The final submission deadline is June 2023. Services continue to receive chasers in the remaining few weeks. If completion rates do not increase we will be unable to submit our DSP Toolkit assessment and in effect fail to prove we have appropriate security assurances in place. A failure to complete the toolkit assessment could result in the council losing access to NHS patient information, thereby impacting their ability to deliver services.
ASS018	Retained	Assurance	Audit actions not implemented	Audit advice and/or agreed actions not being implemented could lead to a deterioration in the council's control environment resulting in the Head of Internal Audit providing a Limited Assurance Annual Opinion.	Head of Internal Audit	Statutory Duty	1. Audit actions are agreed with auditees (as opposed to audit recommendations with management responses) to improve clarity over what is expected in order for audit to assess as implemented 2. Auditees are emailed asking for updates/evidence in advance of quarterly reporting to GARMS Committee 3. Officers are asked for updates against their actions at monthly Internal Controls Board (ICB) and challenged if progress has not been made, with attendance required at GARMS Committee if not implemented 4. Proactive advice is given to services to ensure control environment is not weakened 5. Retrospective monitoring of activity and transactions.	16	Treat	Increased engagement with Capita Operations Director to ensure that relevant CSG actions are implemented prior to transfer of the associated services back to LBB on 1 October 2023 (for CSG Estates) and at planned dates in future for other CSG services.	30/09/2023	Same	Work has been completed on the audit actions due for completion in Q4. 63% of actions due by 31 March were confirmed as implemented. The target of 90% was not achieved in any of the quarters in 2022/23. Although performance in the final quarter did improve compared to the previous quarters, until a higher % implementation rate is achieved and this is sustained over a period of time the risk rating will remain at 16.
ES025	Joint	Children's	School budget pressures	Falling rolls could lead to schools facing additional budget pressures resulting in an impact on the quality of education.	Assistant Director - Education, Strategy and Partnerships/ BELS Chief Executive	Statutory Duty	1. Annual pupil projections; regular school organisation and place planning reviews. 2. Support schools to reduce planned admissions where appropriate. 3. Provide advice and training to schools on management of budgets, including staff restructuring to reduce salary costs. 4. Explore new governance and organisation options.	16	Treat	1. Review schools census data.	30/09/2023	Increased	Increased risk score since last quarter due to budgetary information for 22/23 and 23/24. Demand for Reception places remain down for September 2023 and the long term projections are that we will be 600 Reception pupils down by 2026 (20 forms of entry). This is already having an impact on school budgets meaning that there is not adequate resource in some schools to fund support for school effectiveness and improvement. Will need to start to look at longer term strategy going forward inc the possible closure/merger of some schools if necessary.
ES033	Joint	Children's	Strain on SEN transport	An increase in the number of borough ECHPs could lead to increased demand on SEN Transport resulting in additional resource requirements to meet additional demand.	Assistant Director - Education, Strategy and Partnerships/ BELS Chief Executive	Statutory Duty	1. Meeting with Head of Service (Transport Brokerage and Contract Management) regularly 2. Promoting Personal Budgets and Independent Travel Training 3. Including SEN Transport considerations in discussions about increased specialist provision.	16	Treat	1. Look at ways to reduce SEN Transport requirements and demands on SEN Transport budget. 2. Meet with the council to discuss increased demands.	31/12/2023	Same	Transport User group established. They will need to co-produce a new SEND transport policy for consultation when the new DfE home school transport guidance is published. Continue review of placements to identify Key stages at which CYP could come back into Borough.
C&P096	Retained	Customer & Place	Barnet Hill - A1000	Instability and/or failure of the Transport for London (TfL) owned bank above High Barnet Underground Station could lead to closure of the A1000 and High Barnet Underground Station resulting in significant disruption to the highways network.	Director - Highways and Transportation	Statutory Duty	1. Detailed assessment by Geotechnical consultants 2. Regular monitoring of inclinometers by Geotechnical company 3. Review of vehicle types and flows to determine appropriate vehicle management resulting in blocking abnormal loads 4. Interim design solutions to reduce water flow from the A1000 onto the bank 5. Development of longer term solutions to maintain the stability of the bank.	15	Treat	1. Monitoring and reporting of changes in bank through geotechnical assessment 2. Development and implementation of short term measures including carriageway edge protection, displacement of water from discharging down the bank and vehicle load management 3. Longer term solution to maintain the stability of the bank with TfL 4. Restriction on abnormal loads above 44 tonnes.	1. 31/03/24 2. 31/12/23 3. 31/03/24 4. Complete	Same	The identified selective vegetation clearance has been undertaken coupled with the subsequent installation of water filled barriers to prevent vehicle overrun. In addition, the council's design engineers have been commissioned to develop an interim solution that addresses localised drainage solutions to deflect water from discharging straight down the bank whilst more detailed longer-term solutions are developed.
C&P097	Retained	Customer & Place	LB Barnet road condition	Surface and Subbase failure could lead to impact on movement of the carriageway, cracking and drainage system failure, resulting in disruption to the highways network in the location affected and financial loss due to an increase in insurance claims.	Director - Highways and Transportation	Statutory Duty	1. Detailed geotechnical survey received update report going to strategic commissioning board. 2. Targeted patching and selective resurfacing being done while long term solution is developed.	16	Treat	1. Undertaking of further research and detailed costed design. 2. Identification of funding and delivery of long term treatment solution.	1. 30/09/23 2. 31/03/24	Same	Vibration surveys have been received and are subject to review. Once these have been analysed further research will be conducted and targeted design work developed. Targeted patching and selective resurfacing is being done in the interim and a design and reconstruction approach will be developed subject to identification of suitable funding.
TBG006	Joint	Customer & Place	New build and development	Unforeseen events in the development process such as cost increases, significant delays on site, health and safety, building regulation changes and contractor insolvency could significantly impact the development programme resulting in adverse financial impact to the council.	Head of Housing and Regeneration	Finance	1. Design & build contracts seek to fix costs as far as possible in advance. 2. Financial checks on all contractors pre contract. 3. Payment in arrears based on certificated work completion. 4. Site surveys and constraints reports to identify anomalies and ground risks. 5. Three stage business case sign off pre construction, including committee approval. 6. LBB/TBG monthly project boards to oversee scheme progress. 7. Scheme level risk registers. 8. Experienced Employers Agent and construction specialists deployed on all schemes including design, H&S and CDM specialists.	16	Treat	1. Review contingency allowances within contracts that continue to be viable 2. Continue to work closely with Employers Agents and Cost Consultants in respect of market intelligence 3. Engage with GLA and other grant bodies to maximise subsidy 4. Annual financial resilience checks of developer/contractors	1-3. 30/09/2023 4. 01/06/2024	Increased	High build cost inflation and interest rate increases is placing increasing pressure on contractors delivering new build schemes on fixed cost design and build contracts. This is placing increased risk of contractors failing or additional cost claims. As a result the frequency of contractor financial checks have been increased to annual.
TBG001	Joint	Customer & Place	Increased demand for temporary accommodation	Failure to prevent households becoming homeless and a lack of suitable affordable accommodation options could lead to an increased demand for expensive temporary accommodation resulting in increased budget pressures in the General Fund.	Head of Housing and Regeneration	Finance	Deliver Homelessness and Rough Sleeping Strategy Objectives of Increase Prevention Activity and Reducing Temporary Accommodation Use by: 1. Ongoing project to look at further ways of reducing homelessness. 2. Regular performance indicators and financial monitoring. 3. Horizon scanning of legislation changes and lobbying for more funding from government. 4. In house lettings agency for procurement of PRS properties. 5. Improve insight and intelligence through housing Supply and demand modelling. 6. Links to Housing, Homelessness and Growth Strategies outcomes. 7. Increase affordable housing supply through new build and acquisitions programmes. 8. Tracking ongoing impact of Homelessness Reduction Act & Covid related economic factors. 9. Covid impacts mitigation plan developed and incorporated into budget reporting & setting process 10. Delivered plans to rehouse rough sleepers into more permanent accommodation and purchase homes into Opendoor Homes for use of rough sleepers	16	Treat	1. TBG to deliver Private Sector Rented proposals; - To acquire 500 homes over 5 years into Opendoor Homes - To complete tranche 3 Opendoor Homes new build programme of 350 homes - To complete HRA funded delivery of 250 new council homes 2. Deliver targeted homelessness prevention, households placed into the PRS and overall number of households in TA outcomes by April 2023 3. Close monitoring of demand to ensure mitigations deployed effectively	1. Part complete for 500 homes 31/12/2023. Due to complete August 2023 for building 350 homes. 2. 31/03/2024 3. 30/09/2023	Same	The purchase of 249 homes at Colindale Gardens (approved by Cabinet in June 2023) will provide additional affordable housing supply at social rents to alleviate homelessness cost pressures in 2023/24. The rough sleeper acquisitions programme, through grant funding from the GLA was successfully completed in Q4 2022/23. We are looking at options for other preventative measures and will hold a workshop in Q2 2023/24. Overall households in temporary accommodation remained well ahead of target for 2022/23, however homelessness demand increased significantly in the second half of the year and is expected to be sustained throughout 2023/24.

New Risk ID	Risk Level	Directorate	Risk Title	Risk Description	Risk Owner Job Title	Primary Risk Category	Controls and Mitigations in Place	Residual Risk - Total	Response Option	Treatment Actions	Treatment Actions Delivery	Direction of Travel (from)	Current Quarter Review Summary
TBG002	Joint	Customer & Place	Health, safety and compliance issues	Barnet Homes' failure to achieve regulatory requirements for the housing stock could lead to health, safety and compliance issues resulting in harm to residents, staff and public, legal challenges and financial costs.	Head of Housing and Regeneration	Statutory Duty	<ol style="list-style-type: none"> 1. Policies and procedures include H&S management system; training; induction for new staff; management structures for contract management 2. Supplier contracts/agreements for Temporary Accommodation providers include risk assessment 3. Violent and Abusive register and Vulnerable Tenant password scheme 4. Internal specialist HS&C function 5. Senior officer, Audit and Risk Committee, Resident Board and TBG Board oversight of HS&C 6. Comprehensive schedule of internal audit by Mazars 7. Policies and internal Exec/SMT leads for safeguarding 8. Third party expert advisors 9. Involvement on London Councils and MHCLG Directors Fire Safety forums 10. Completion of ES2m programme of fire safety works to higher risk blocks 11. Completed sprinkler installation programme 	15	Treat	<ol style="list-style-type: none"> 1. Develop long term plans for LPS blocks not on existing regeneration estates 2. Deliver action plan agreed by Housing and Growth committee in January 2023, in relation to mould and damp concerns 	<ol style="list-style-type: none"> 1. 31/11/2023 2. 30/09/2023 	Same	The high-rise sprinkler retro-fit programme was completed in Q1 2023/24, with works on the medium and low-rise programme commencing. This includes investigation of specific types of timber framed houses following a significant fire involving a terrace of four houses in Finchley in June 2023. Consultation with residents on options for the Large Panel Systems (LPS) schemes will commence in Q2 2023/24, and a business case is scheduled to be presented to Cabinet in November 2023. Good progress is being made against the Damp and Mould Action Plan as reported to Cabinet in June 2023.
C&P086	Retained	Customer & Place	Unsafe/unhealthy living accommodation in private rented sector	A backlog of HMO licensing casework built up during the pandemic and work on the Homes for Ukraine project, plus staffing issues across the Private Sector Housing Team, could lead to slow response to service requests and identification of issues and delays to proactive activity to search for unlicensed properties resulting in residents being exposed to unsafe/unhealthy living conditions and elongated licensing processing timescales.	Director - Growth	Statutory Duty	<ol style="list-style-type: none"> 1. Sustain resources on highest risk cases, resource gaps due to staff departures/retirements are being filled interim basis. 2. Continuous recruitment underway and levelling up exercise to be completed for transferred staff 3. Final stages of introducing online licensing which should reduce the pressure in the Licensing Technical Support Team. 	16	Treat	<ol style="list-style-type: none"> 1. Recruitment of temporary HMO licensing and enforcement officers is ongoing; permanent recruitment should be possible after levelling up exercise being implemented as part of the re-organisation. 	<ol style="list-style-type: none"> 1. 01/11/2023 	Same	Sustain resources on highest risk cases, resource gaps due to staff departures/retirements are being filled on an interim basis but this is challenging. Permanent recruitment should be possible after levelling up exercise being implemented as part of the re-organisation in November 2023.
CSG003	Joint	Customer & Place	IT cyber security	A cyber attack could lead to the council being unable to operate resulting in widescale disruption and financial cost.	Assistant Director - Resident Experience and Digital	Business Continuity	<ol style="list-style-type: none"> 1. There are multiple-layer firewalls to protect the environment. 2. Annual Security Health Check (Public Sector Network (PSN) Standard). 3. PCI Accreditation. 4. Annual review of over 100 cyber security controls, aligned with ISO 27001. 5. Anti-virus on the server estate. 6. Subscribe to National Cyber Security Centre (NCSC) early warning system and web check. 7. Receive weekly updates from NCSC to confirm vulnerability status. 8. Receive weekly and critical updates from Microsoft/ Capita. 9. Annual Cyber Security training and awareness for staff. 10. 24hr Emergency Response 11. Microsoft E5 security - including: advanced threat protection (ATP), advanced threat endpoint protection ATEP 12. Safelinks - email URL scanning to protect access to malicious links that are used in phishing and other attacks. 13. Additional cyber security audit with PwC completed, action plan created. 14. Worked with Business Continuity leads to improve plans to manage impact. 15. Applied for and received funding from DLUHC, with action plan linked to funding. 16. The implementation of an online web protection application (Imperva) preventing DDOS attacks specifically for the Barnet websites 	15	Treat	<ol style="list-style-type: none"> 1. Develop additional scenario based training to roll out to senior staff (funding provided by London Councils) 2. Implement action plan from PwC audit to be completed. 3. Implement action plan from BC review 4. Implement action plan tied to DLUHC funding 	<ol style="list-style-type: none"> 1-3. 31/07/2023 4. 30/09/2023 	Same	There has been a great deal of focus on cyber security mitigations, with the implementation of website monitoring (Imperva), the ongoing implementation of complex security controls as recommended by Microsoft through the E5 license security stack, a suite of PowerBI reports monitoring and flagging worldwide activity of Barnet users and rogue actors and a current implementation of the Microsoft Sentinel event monitoring tool.
C&P002	Retained	Customer & Place	Affordability of BXC (Brent Cross West and associated Critical Infrastructure project)	Ineffective management of the Brent Cross budget, adverse macro-economic conditions or delays caused by third parties and external events could lead to pressure within the government grant funding budget resulting in increased costs to the council.	Deputy Chief Executive	Finance	<ol style="list-style-type: none"> 1. The Governance Board has oversight of the project budget and programme, monthly Client Review meetings are in place to review these. 2. Dedicated finance resource provides a direct liaison between the council's finance team and the project. 3. Ensuring mitigation plans are regularly reviewed and pursued to alleviate budget pressures (both cash flow and total cost) through robust project management and governance. 4. Quarterly updates are provided to Cabinet, to provide an update on mitigations strategy and to inform next steps as required. 5. The Station funding and finance strategy was approved in late 2022 and is being reviewed as the station project moves towards close out. 6. Proactive reprogramming to reflect the impacts of external events e.g. strike action on the construction schedule and project costs. 7. Strategy in place to recoup costs arising as a result of third parties including Network Rail. 	15	Treat	<ol style="list-style-type: none"> 1. Continue to secure and progress the efficiencies identified in respect of the mitigation strategy, responding to the budget pressures. 2. Monitor and report these on a monthly basis. 3. Proactive development and agreement of a financial strategy for Brent Cross West that does not put pressure on the General Fund. 4. Implement options for efficiency savings and commercial recovery from third parties. 5. Escalation to government sponsoring departments as required by the programme and in the interests of the council 	<ol style="list-style-type: none"> 1-2. Ongoing 	Same	Agreement has been reached with the station contractor on a settlement agreement which brings more cost certainty to the station final outturn. Commercial discussions remain ongoing with Network Rail on disputed items for the rail systems account. Ongoing discussions with Department for Transport (DfT) and the train operating company, Govia Thameslink Railway (GTR) on amending the station maintenance responsibilities to simplify the funding arrangement. Cost estimate for delivery the waste transfer station has increased due to market conditions. Continued review through delivery with the contractor.
STR013	Strategic	Customer & Place	Cyber security	A cyber attack could lead to the council being unable to operate resulting in widescale disruption and financial cost.	Deputy Chief Executive	Business Continuity	<ol style="list-style-type: none"> 1. Monthly contract management meetings in place to manage the contract and relationship with CSG 2. Monthly Partnership Operations Board for escalation of any issues identified 3. Joint risk being managed by CSG - IT with controls/mitigations in place 4. Learning portal - mandatory training on Information Management/cyber security for staff 5. Remote working audit completed 6. Regular audits undertaken 7. PCI (payment card industry) accreditation 8. Management and oversight of the actions being carried out by CSG on the council's behalf (captured in the joint risk register). 9. BC leads have provided plans in case of a cyber security event. 10. Remote working audit - implemented recommendations working abroad policy and external websites. 11. Simulated phish went to all staff, and recommendations will be produced off the back of findings. 	15	Treat	<ol style="list-style-type: none"> 1. Spend money on training 2. Implement website health recommendations 3. M365 health check 4. Promote information and security training 5. Implement with business continuity lead action plan. 6. Implement recommendations from simulated phish campaign 	<ol style="list-style-type: none"> 1-6. 31/07/2023 	Same	The service continues to add additional controls via training, technical and processes. This includes but is not limited to using a suite of PowerBI reports monitoring and flagging worldwide activity of Barnet users and rogue actors, as well as communications to staff around registering working from abroad. There is continued executive sponsorship and support. We are continually updating our technical mitigations and enhancing our protection.
C&P055	Retained	Customer & Place	Winter service depot	The winter service lease agreement with Harrow coming to an end could lead to the council being unable to find an alternative location for winter service provision resulting in business continuity implications if the service cannot be provided and a breach of statutory duties.	Director - Street Scene	Business Continuity	<ol style="list-style-type: none"> 1. There is a Depot Board in place to review strategic requirements for the services provided at Barnet depots. 2. Board to agree an interim arrangement for when we vacate Harrow Depot until the permanent salt barn and plant storage has been finalised. 	15	Treat	<ol style="list-style-type: none"> 1. Depot Board to agree the strategy for winter maintenance depot location 2. Deliver a new permanent salt barn facility at Oakleigh depot 3. Extend arrangement at Harrow depot for bulky storage of salt for one further season 	<ol style="list-style-type: none"> 1. Complete 2. 31/10/2023 3. Complete 	Same	Street Scene confirmation from Harrow for salt storage requirement will be in place for the coming winter season.
C&P038	Retained	Customer & Place	Variations to budget for parking	Changes in car usage or behaviour change as a result of external forces (e.g. new working arrangements following the pandemic, new policies/legislation, economic situation, etc) could lead to an unplanned reduction in income resulting in pressure on the general fund and the ability to fund other projects.	Interim Senior Parking Lead	Finance	<ol style="list-style-type: none"> 1. Budget setting/monitoring process - monthly reporting 2. Tracking income levels regularly 3. Medium term financial models to be widely shared and understood 4. Strong activity linking to all budget monitoring and close contract management. 	16	Treat	<ol style="list-style-type: none"> 1. Monitor through monthly forecasting with detailed data sets and narrative supplied to corporate finance. 	<ol style="list-style-type: none"> 1. 30/06/2023 	Same	New base income forecasting tools being developed by Finance. Controlled Parking Zones (CPZ) programme income implications to be informed by revised programme and emerging data from implemented scheme (BON).
STR028	Strategic	Customer & Place	Affordability of Capital Programme	Economic outlook and supply chain issues (rising labour and material costs, labour and material availability issues, fuel price) could lead to project delays and/or increases in project cost. Increase cost and supply chain issues may impact the viability of projects and the timely delivery of outcomes.	Director - Growth	Finance	<ol style="list-style-type: none"> 1. Capital budget to factor in contingency percentage assuming high rate of inflation. 2. Projects to review and update cost plan in liaison with FBP to reassure viability. 3. Identify and maximise cost savings opportunities including methods of construction, areas for value engineering, etc. 	20	Treat	<ol style="list-style-type: none"> 1. Where shortages are reported, check in with contractors to establish if there is any impact. 2. Schemes of high sensitivity or high value are carrying out additional cost planned reviews at a higher frequency. 3. Exploit all available opportunities for addition funding across the capital programme, including the teams that already have funding resources identified. 4. Quarterly update to Capital Strategy Board on current inflationary impacts to the construction industry and external funding position. 5. Identify ranked list of priority projects so that opportunity to address economic issues are understood. 	<ol style="list-style-type: none"> 20/07/2023 	Increased	The likelihood of this risk remains high. However, mitigations and controls can reduce the impact. Current position is for the short to medium term. There is less rejected Capital available to deliver the council's ambitions. In addition, costs and labour shortages remain issues.
C&P082	Retained	Customer & Place	Contract transition (CSG) - HRCore impact on Oracle Programme	A council decision to bring the HR Core Admin service back in house earlier than originally planned by August 2023 (as recommended as part of the Oracle Programme) could lead to the transition of service happening under a tight timeline, resulting in poor service delivery, financial loss, breach of statutory obligations and reputational damage.	Interim Assistant Director - Commercial and Procurement	Business continuity	<ol style="list-style-type: none"> 1. Joint board for the returning services 2. Individual service project teams managing the exit arrangements for returning services 3. Close monitoring of performance and service delivery through Performance Review Meetings and monthly Partnership Operations Board 4. Regular review of Joint Service risks at Partnership Operations Board 5. Capita Transition Group meeting (CMT members) established, fortnightly meetings to oversee the process 6. Post transfer transformation work being picked up by Transformation Project Team 7. Transition groups established and meetings conducted. 	16	Treat	<ol style="list-style-type: none"> 1. Ensure transition plan is in place for each affected service including: (i) Review third party contracts (held by Capita/Re) (ii) Review of IT platforms 2. Exit and transition process are being developed with Capita. 3. Monitor for decision by council 	<ol style="list-style-type: none"> 1-3 30/09/2023 	Same	The Oracle Programme workstream have recommended that HR Core Admin returns to the council by August 2023. We are waiting a formal decision on this in order to issue a formal notice to Capita. Delaying the decision will add to risk of the transition not occurring smoothly. If transition is to be later than August 2023 then there will be delays to the Oracle Programme. The matter has now been raised at Oracle Programme Steering Board to progress.
C&P089	Retained	Customer & Place	People attrition	Difficulties recruiting and retaining experienced and qualified staff could lead to negative impacts on service delivery resulting in business continuity and statutory duty implications to the council.	Director - Highways and Transportation	Staffing & Culture	<ol style="list-style-type: none"> 1. Ongoing recruitment for vacant roles including fixed term contract positions where appropriate 2. Targeted campaigns to fill technical roles 	15	Treat	<ol style="list-style-type: none"> 1. Refreshed recruitment and retention strategy with support from LBB with a focus on attracting and retaining the right candidates to the roles to populate the approved structure 2. Continuation of the Training, Leadership Development and Career Path planning for all staff to enable them to fulfil their roles and responsibilities and develop their Career Path 3. Align the recruitment and retention strategy with the Procurement Strategy to provide additional capacity to support staff through the peaks and troughs of Business as Usual (BAU) and Project delivery. 	<ol style="list-style-type: none"> 1. 30/09/2023 2. 01/09/2023 3. 01/09/2023 	Same	Continue to progress recruitment to fill the high number of vacancies in the service. Design Manager started. Offers accepted for Highways Manager and Member Liaison Officer with July start dates. Actively recruiting for engineering and other technical roles.

New Risk ID	Risk Level	Directorate	Risk Title	Risk Description	Risk Owner Job Title	Primary Risk Category	Controls and Mitigations in Place	Residual Risk - Total	Response Option	Treatment Actions	Treatment Actions Delivery	Direction of Travel (from)	Current Quarter Review Summary
STR023	Strategic	Strategy & Resources	Recruitment to and retention of roles in key sectors	National and local difficulties in recruiting to key roles could lead to local recruitment and retention issues resulting in a failure to meet statutory duties, council priorities and workforce and financial pressures.	Chief Executive	Staffing & Culture	<ol style="list-style-type: none"> 1. Improved staff engagement 2. Continued promotion of flexible workstyles 3. Development of stronger employer brand, promoting benefits of working for Barnet 4. Effective recruitment processes 5. Increased capacity in Recruitment Team 6. Tailored campaign to recruit and retain children's social workers 7. Targeted campaigns to fill technical roles in Customer and Place 8. Use of Recruitment & Retention payments where appropriate 9. Unified Reward revision 10. EDI Action plan 	16	Treat	<ol style="list-style-type: none"> 1. Development of employer brand to ensure the council is an employer of choice 2. Review of recruitment processes to facilitate successful hiring of good candidates 3. Changes to pay structure to allow council to better match external market 4. Agreement with Vivup on new employee benefits scheme/platform. 4. Development of recruitment system 5. Promotion of EDI agenda to ensure that all talent can progress through the organisation 6. New recruitment agency framework for permanent recruitment 7. Targeted recruitment campaigns 8. HR/Recruitment engagement with Capita and incoming staff to identify vacancies being transferred over and priority areas for recruitment and retention interventions. 	31/03/2024	Same	The council continues to face significant risks in terms of recruitment and retention. However the labour market does appear to be somewhat less tight than in previous quarters. Employment benefits offer has been strengthened with the introduction of a facility for staff to purchase annual leave.

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Governance, Audit, Risk Management and Standards Committee (GARMS)

Title	Internal Audit Exception Recommendations Report and Q2 Progress Report 1 st July to 30 th September 2023
Date of meeting	16 October 2023
Report of	Executive Director of Assurance Head of Internal Audit
Wards	N/A
Status	Public with an Exempt Appendix
Urgent	No
Appendices	Appendix A - Internal Audit Q2 progress report (1st July to 30th September 2023) Appendix B – EXEMPT. ‘Cyber Security - Third Party Security and Awareness’ audit. Not for publication by virtue of paragraph 7 of Schedule 12A of the Local Government Act 1972 as amended
Officer Contact Details	Caroline Glitre, Head of Internal Audit caroline.glitre@barnet.gov.uk 020 8359 3721

Summary

The GARMS Committee are requested to note the progress against internal audit recommendations and work completed to date on the Internal Audit Plan 2023-24 and high and medium priority internal audit recommendations.

The Audit Committee approved the Internal Audit Plan for 2023-24 on 26th April 2023.

During Q2, the service completed 14 reviews and at the end of Q2 had delivered 48% of our annual internal audit programme for 2023/24, against a target of 49% for Quarter 2.

There was 1 Limited Assurance report issued this quarter which is summarised in the report:

- **Starters, Leavers and Movers (SLaM)**

During Q2, follow-up work was undertaken on the 'Cyber Security - Third Party Security and Awareness' audit. It is the view of the Head of Internal Audit that it is in the public interest to make this (Appendix B) exempt.

Recommendations

- 1. That the Governance, Audit, Risk Management and Standards Committee note the general work completed to date on the internal audit Q2 report – 1st July to 30th September 2023.**
- 2. That the Governance, Audit, Risk Management and Standards Committee note the work completed to date on Schools within the internal audit Q2 report – 1st July to 30th September 2023.**
- 3. That the Governance, Audit, Risk Management and Standards Committee note the work completed on 'Cyber Security – Third Party Security and Awareness'.**

Reasons for the Recommendations

- 1.1 The GARMS Committee's role in receiving this report is to note the overall progress made against the 2023-24 Internal Audit Plan and the high and medium priority recommendations made. In addition, the Audit Committee can inquire of Directors and Assistants Directors as to their progress against recommendations.
- 1.2 The Audit Committee approved the Internal Audit Plan 2023-24 in April 2023 and this report notes the progress against that plan and progress against high and medium priority recommendations.
- 1.3 Compliance with the Public Sector Internal Audit Standards.

Alternative Options Considered and Not Recommended

2.1 Not Relevant

Post Decision Implementation

3.1 The remaining work on the Internal Audit 2023-24 Plan will be delivered and progress against the plan reported to the GARMS Committee at future meetings throughout the year.

Corporate Priorities, Performance and Other Considerations

Corporate Plan

4.1 Our Plan for Barnet (the corporate plan 2023 -2026) was adopted in March 2023.

4.2 All internal audit planned activity in 2023-24 is aligned with the Council's objectives set out in the Corporate Plan 2023-2026, and thus supports the delivery of those objectives by giving an auditor judgement on the effectiveness of the management of the risks associated with delivery of the service.

Corporate Performance / Outcome Measures

4.3 A comprehensive Internal Audit Plan is essential to giving an annual Internal Audit Opinion on the internal control environment (ICE) which is fundamental for the achievement of all of the Council's objectives. This opinion forms an integral element of the Annual Governance Statement.

4.4 The Council has a responsibility to protect the public purse through proper administration and control of the public funds and assets to which it has been entrusted.

Sustainability

4.5 None in the context of this decision.

Corporate Parenting

4.6 None in the context of this decision.

Risk Management

4.7 All Internal Audit activity is directed toward giving assurance about risk management within the areas examined. By so doing the aim is to help maximise the achievement of the Council's objectives. Internal Audit does this by identifying areas for improvement and agreeing actions to address the weaknesses.

4.8 Internal Audit work contributes to increasing awareness and understanding of risk and controls amongst managers and thus leads to improving management processes for securing more effective risk management.

Insight

4.9 None in the context of this decision

Social Value

4.10 None in the context of this decision

Resource Implications (Finance and Value for Money, Procurement, Staffing, IT and Property)

5.1 When internal audit findings are analysed alongside finance and performance information it can provide management with the ability to assess value for money.

5.2 In addition, the follow-up of audit recommendations will ensure that a positive culture of internal control is achieved.

<p>5.3 The delivery of the Internal Audit plan is being achieved from Internal Audit’s current budget.</p>
<p>Legal Implications and Constitution References</p>
<p>6.1 The Council’s Constitution (Part 2B) sets out the terms of reference for Committees. The responsibilities for the Governance, Audit, Risk Management and Standards (GARMS) Committee include providing “independent assurance to the members of the adequacy of Barnet Council’s governance, risk management and control frameworks and oversees the financial reporting and annual governance processes. It oversees internal audit and external audit, helping to ensure efficient and effective assurance arrangements are in place”.</p> <p>6.2 The Council also has a duty under section 3 of the Local Government Act 1999 to make arrangements to secure continuous improvement in the way in which its functions are exercised, having regard to a combination of economy, efficiency and effectiveness. Regulation 3 of the Accounts and Audit Regulations 2015 requires the Council to ensure that it has a sound system of internal control which:</p> <ul style="list-style-type: none"> • Facilitates the effective exercise of its function and the achievement of its aims and objectives; • ensures that the financial and operational management of the authority is effective; and • includes effective arrangements for the management of risk. <p>6.3 Regulation 6(1)(a) of the Accounts and Audit Regulations 2015 requires ‘an authority to conduct a review at least once in a year of the effectiveness of its system of internal control.’</p>
<p>Consultation</p>
<p>7.1 N/A</p>
<p>Equalities and Diversity</p>
<p>8.1 Effective systems of audit, internal control and corporate governance provide assurance on the effective allocation of resources and quality of service provision for the benefit of the entire community. Individual audits assess, as appropriate, the differential aspects on different groups of individuals to ensure compliance with the Council’s duties under the 2010 Equality Act.</p>
<p>Background Papers</p>
<p>9.1 Audit Committee 11 March 2010 (Decision Item 11) - the Committee accepted that there would be progress reports to all future meetings of the Committee and, that for all “limited” or “no assurance” audits, there should be a brief explanation of the issues identified.</p>

<http://barnet.moderngov.co.uk/Data/Audit%20Committee/201003111900/Agenda/Document%208.pdf>

9.2 Audit Committee 21 September 2010 (Decision Item 7) – the Committee agreed that where an audit had limited assurance that greater detail be provided than previously.

<http://barnet.moderngov.co.uk/Data/Audit%20Committee/201009211900/Agenda/Document%203.pdf>

9.3 Audit Committee 17 February 2011 (Decision Item 7) – the Committee (i) agreed that a report would be prepared quarterly regarding those internal audit recommendations not implemented (ii) requested that the table of priority 1 recommendations should in future indicate what date recommendations were made to service areas and the implementation date.

<http://barnet.moderngov.co.uk/Data/Audit%20Committee/201102171900/Agenda/Document%204.pdf>

9.4 Audit Committee 26 April 23 (Decision Item 10) – the Audit committee approved the Internal Audit and Anti-Fraud Strategy and Annual Plan 2023-24.

<https://barnet.moderngov.co.uk/documents/s77692/Internal%20Audit%20CAFT%20Plan%20202324.pdf>

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Internal Audit – London Borough of Barnet

Appendix A



Internal Audit Q2 Progress Report 1 July – 30 September 2023



Cross Council Assurance Service

1.0 Summary

1.1 Purpose of this report

1.1.1 We are committed to keeping the Governance, Audit, Risk Management and Standards Committee (GARMS) up to date with Internal Audit progress and activity throughout the year. This summary has been prepared to update you on our activity since the last meeting in July (Q1) and to bring to your attention any other matters that are relevant to your responsibilities.

1.2 Progress against the 2023/24 internal audit plan

1.2.1 We have completed 14 reviews in this current period and to date have delivered 48% of our combined 2023/24 annual internal audit programme. This is slightly below the quarter two (Q2) target of 49% at the end of September.

Please see Appendix A for further narrative on our performance indicators (PIs).

1.2.2 There was one 'Limited' assurance report issued in this period and covered in this report:

- Starters, Leavers and Movers

1.3 Findings of our Follow Up Work

1.3.1 We have commenced follow up work on all **high priority actions** with an implementation date of 30 September 2023 or sooner. We have had discussions with management on the progress made in implementing actions falling due in this period and have sought evidence to support their response.

A total of 16 high priority actions have been followed up in Q2:

- 3 actions have been confirmed as implemented (19%); and
- 13 actions have been partially implemented (in Progress) (81%).

Critical and High priority actions: Follow-up Summary	Total	Implemented	In progress	Not Implemented
Total Number of Actions Tested	16	3	13	-

1.3.2 We also follow-up a sample of medium priority actions to confirm implementation.

A total of 28 medium priority actions have been followed up in Q2:

- 3 actions have been confirmed as implemented or closed (11%);
- 20 actions have been partially implemented (in Progress) (71%); and
- 5 actions have been marked as Not Implemented (18%).

Medium priority actions: Follow-up Summary	Total	Implemented	In progress	Not Implemented
Total Number of Actions Tested	28	3	20	5
Total actions followed up in Q2	44	6	33	5
%		14%	75%	11%

1.3.3 In total, only 14% of actions followed up in Q2 have been confirmed as implemented at this time, which is clearly below the target of 90%. A verbal update will be given to Governance, Audit, Risk Management and Standards Committee (GARMS) if any evidence of further progress is provided.

1.3.4 Until we have clear confirmation that the implementation of audit actions is at an appropriate level and that this is sustainable, we will maintain the risk rating as 16 against the following risk within the Assurance Group risk register:

ASS018 - Audit advice and/or agreed actions not being implemented could lead to a deterioration in the council's control environment resulting in the Head of Internal Audit providing a Limited Assurance Annual Opinion.

Progress against audit actions is summarised in more detail in Section 4.

1.4 Other Matters

1.4.1 Schools

There are a number of schools where it has not yet been possible to follow up actions previously agreed to be completed by September, due to summer holidays, the start of the new term and a number of religious holidays. These actions are therefore not included in the Q2 follow-up detail and statistics. A general update is provided below for the Committee.

Coppetts Wood (5 high priority actions)

A new Interim Executive Head Teacher has been appointed replacing the previous Interim Executive Head. There is no School Business Manager role at Coppetts Wood school per decision by the previous Interim Head Teacher. The new Head has to familiarise himself with all the audit actions. In the interim, the OFSTED report published in July 2023 has reported a "Requires Improvement" rating which will mean a focus on resolution of this area. A follow-up visit has been arranged for 2nd October to assess any progress and agree a revised date if required. A verbal update will be given to Committee and the follow-up work will be formally reported in the Q3 report.

Pardes House (3 high priority actions)

The school business manager confirmed in July that at that time, the school had no catering contract as the Kosher catering firm supplying Barnet Jewish schools closed suddenly in May 2023. The School Business Manager and Headteacher had been trying to source a new catering contract on behalf of several Jewish Barnet schools, which was their priority at the time. Pardes House school were contacted in April 2023 to request a recovery plan, but this was not received. The Council and BELS have initiated a 'Schools in Financial Difficulty' Panel, the first meeting of which is on 19th October.

Menorah Foundation School (11 high priority actions)

A follow-up visit to the school will be conducted on 30th October 2023.

Bell Lane (5 high priority actions)

Revised procedure documents have been requested from the school and these will be tested against at the follow-up visit which will enable confirmation that the new procedures have been consistently followed over at least a 3-month period.

1.4.2 Commercial Rents and Lease Renewals

The Estates service transferred back in-house from Capita in September 2023. As a result, the service is no longer operating on a contract basis, where performance indicators and financial penalties are tools to encourage efficient performance of the contract. The Head of Property and Portfolio Management is considering incorporating performance targets into staff objectives and will be looking to commence this from early in 2024.

The team are looking to follow a recruitment programme which will lead to them having improved capacity from the next financial year. The team have unresolved issues with capacity and have been unsuccessful in recruiting specialist resources to deal with statutory annual valuations, which has meant there has been pressure on 'business as usual'.

An extensive project is needed to facilitate reviewing the adequacy of insurance cover for all properties and collating accurate information on the Council's commercial property. The team are to a certain extent dependent on a new property database as they will need to interrogate every letting. The new database is yet to be procured and this decision on this is outside of the Teams scope of decision making.

There are 11 medium priority actions from this audit which are yet to be fully implemented; see section 3.2.3.

1.4.3 Cyber Security - Third Party Security and Awareness

As reported to the Audit Committee in April, an internal audit of 'Cyber Security - Third Party Security and Awareness' was conducted in March 2023. The associated Appendix 1 to the Committee report on 26th April was exempt from publication by virtue of paragraph 7 of Schedule 12A of the Local Government Act 1972 as amended: 'Information relating to any action taken or to be taken in connection with the prevention, investigation or prosecution of crime'. Cyber Security is a priority for the Council and the actions in the audit are about enhancing the supplier chain risk management.

There are 5 high priority and 9 medium priority actions from this audit which are yet to be fully implemented. Work is in progress to ensure all actions are complete and a revised plan is in place to finalise the work needed. This will be revisited by internal audit at the start of Q4 to be reported back to Committee in April.

1.4.4 New Cohort of Cross-Council Assurance Service (CCAS) Apprentices

- Barnet runs the Cross Council Assurance Service (CCAS).
- In response to a number of vacancies within the Councils who are part of the CCAS framework, last year CCAS developed the Internal Audit Pathway, undertaking a cross-borough recruitment of apprentices who are now undertaking the Internal Audit Practitioner apprenticeship. The ambition is to build a pool of talented individuals who are keen to develop a career in Public Sector Internal Audit.
- In September 2022, a total of nine apprentices were recruited across five authorities: Barnet, Barking & Dagenham, Lambeth, Lewisham and Waltham Forest. All nine apprentices have successfully completed the first year of their two-year apprenticeship.
- CCAS ran a second recruitment campaign over the summer this year, to appoint six apprentices across five authorities: Barking & Dagenham, Royal Borough of Greenwich, Royal Borough of Kensington & Chelsea, Lambeth and Southend-on-Sea.
- Following an anonymous recruitment campaign, 81 candidates were shortlisted, 35 were invited to Group Exercises and 13 were interviewed. This resulted in all six vacancies being filled and the successful candidates commenced work in their respective authorities on the 18th September 2023.
- The candidates will follow a programme of virtual/on-line study with the chosen apprenticeship training provider MBKB and the Institute of Internal Audit and will also take part in face-to-face workshops with teams from the other Boroughs, to be held at PwC offices and in their respective Boroughs.

1.5 Recommendations

- That the Governance, Audit, Risk Management and Standards Committee (GARMS) notes the progress made against our 2023/24 Internal Audit Plan.

2.0 Reports with significant impact issued since the previous meeting

2.1 Limited Assurance Reports

2.1.1 Starters, Leavers and Movers

Number of Recommendations by Risk Category		
High	Medium	Low
1	3	1

Introduction and Background

Prior to the commencement of the Starters, Movers and Leavers (SLaM) project in 2020, the London Borough of Barnet (“the Council”) operated a number of disparate processes to facilitate the onboarding, movement and offboarding of employees. These processes were manual and involved hiring managers completing up to six different forms when onboarding a new staff member. This resulted in a large amount of duplication and delays in granting and removing staff IT access.

In addition to the above, the Grant Thornton review of the Compulsory Purchase Order Fraud that took place in 2017 and a number of subsequent internal audits of the Integra, Mosaic and ConTROCC applications highlighted issues with the SLaM controls that were operating for these applications. These issues included starters not being granted the correct level of access and movers / leavers not having their access removed in a timely manner after leaving. As such, the Council initiated the SLaM project to address the weaknesses in the existing processes and streamline the completion of the documentation associated with the process.

By July 2022, the SLaM project board had closed with the new forms and processes having been launched as business-as-usual.

The objective of this review was to evaluate the design and operating effectiveness of the Council’s controls developed to ensure that user access to the applications in scope (ControCC - the application used primarily by social care services at the Council to make payments to service providers, Integra – the Council’s finance and accounting system, Mosaic – an adult social care case management system that is used to support social workers to focus on the service users and their outcomes and Office 365 – a cloud-based, subscription model version of Microsoft Office) is granted, managed, and removed appropriately, and that actions are implemented by appropriate officers, as per the new SLaM process developed. The review also considered whether the Council actively reviews the access of users on a periodic basis, and that roles and responsibilities for managing application access were defined and understood by all parties.

Summary of findings

In July 2022, new processes were in place to complete and submit SLaM forms, where the objective was to move away from the manual processes that were previously in place. Consequently, a portal was built, which was accessible through the Council’s intranet and made functional for business use. Through our

audit, we understood that the portal has met its objectives to remove the manual process but was not designed to capture the more granular details, which is required to grant access to a user with the correct permissions. Whilst application owners were involved in the user acceptance testing of the portal, they did not make a significant contribution to the portal's requirements, and hence the portal does not fully cater for the various intricacies of each application.

We understand that the Council is moving to the Oracle platform from 1 April 2024, which is an ongoing project. This will impact the SLaM process as Oracle will replace CoreHR and Integra. The Council currently runs the SLaM process through a SLaM Power App portal and 'Service Now' tickets are created for requests that are raised on the SLaM Portal (e.g., to = raise or remove an access request). As of next year, Oracle will replace the SLaM Power App portal and application owners will thereon use Oracle to raise new access requests or remove access requests for IT applications (including Mosaic, ControCC and O365 applications). This transformation will not only continue to cater for the submission of the forms but will add the required functionalities to make the processes more efficient. Whilst the issues raised in this report relate to the current processes, the Council should incorporate the recommendations raised in the project plan for the new platform.

This audit has identified one high, three medium and one low risk finding. We identified the following issues as part of the audit:

- **Removal of user accounts from applications in a timely manner (High)** - For all the applications in scope, instances were noted of access for user accounts of leavers and movers not being removed in a timely manner, due to the SLaM leavers or movers forms not being completed as required. As a result, access was not removed upon the employee leaving or moving within the Council. We noted that these applications are only accessible through the Council's network, where there is reliance on the Active Directory (AD) account being disabled in a timely manner, however this would only occur if IT was being notified of a leaver, which our testing identified was not always the case. In addition, we confirmed that access was removed as a result of the periodic system user inactiveness testing. Whilst the user inactiveness testing is a useful backup control, there is a risk that there could be up to 90 days (depending on the application) before inactivity is picked up and if IT has not been informed.
- **SLaM process documentation (Medium)** - There is no formal, detailed procedure document that details the SLaM process, outlining system procedures to be followed or when periodic reviews need to be performed, along with the roles and responsibilities for access management.
- **SLaM portal requires improvement to capture mandatory information (Medium)** - Due to the lack of mandatory fields in the SLaM portal, forms can be submitted with blank fields or errors, without flagging the issue to the submitter. In addition, it is understood that application owners do not hold an approved signatory list to check someone (i.e., a line manager) has the authority to request user set up.
- **Periodic review of user access to the Mosaic application (Medium)** - Periodic review of the Mosaic application should take place every quarter. It was noted that this review did not take place between June 2022 and February 2023 due to staffing constraints. In addition, a review was scheduled to take place in May 2023 however the outcome of this review was not available during the audit, and we were therefore unable to verify whether this had taken place.

Actions have been agreed with management to be implemented by 31st December 2023. A follow-up review will confirm implementation of the high priority actions in Q3.

3.0 Progress against plan

The table below represents a summary of the work that we have completed during the period 1st July 2023 to 30th September 2023 or that is currently underway.

Stage	Name of review	Report classification	Total findings	Ratings				
				Critical	High	Medium	Low	Advisory
Q2 – 1 July – 30 September 2023								
Complete	Starters, Leavers and Movers (SLaM)	Limited	5	-	1	3	1	-
Complete	Estates - Building Compliance	Reasonable	6	-	-	2	4	-
Complete	IT Disaster Recovery	Reasonable	2	-	-	2	-	-
Complete	Moss Hall Infant School	Reasonable	9	-	-	5	4	-
Complete	Courtland School	Substantial	4	-	-	-	4	-
Complete	All Saints CE School (N20)	Substantial	3	-	-	-	3	-
Complete	Brent Cross - Compliance with Grant conditions	N/A	0	-	-	-	-	-
Complete	Highways SPIRS - Advisory	N/A	0	-	-	-	-	-
Complete	Sustainability: Flood Prevention grants	N/A	0	-	-	-	-	-
Complete	Bus Subsidy Grant	N/A	0	-	-	-	-	-

Complete	Public Sector Decarbonisation - PSDS3 Independent Review – Response to SALIX report	N/A	0	-	-	-	-	-
Complete	Supporting Families – Payment By Results Q2 – July (including old scheme submissions)	N/A	1	-	-	-	1	-
Complete	Supporting Families – Payment By Results Q2 – September (new scheme submissions)	N/A	0	-	-	-	-	-
Complete	Dedicated Schools Grant (DSG) Advisory Review	N/A	0	-	-	-	-	-
Total findings in Q2			30	-	1	12	17	-
Draft Report	Disabled Facilities Grant – Risk Based Audit of Processes	TBC						
Draft Report	Prospect Ring – Advisory	TBC						
Draft Report	Business Continuity	TBC						
Draft Report	St Johns CE School (N20)	TBC						
Fieldwork	Parking Contract Monitoring	TBC						
Fieldwork	Schools Estates Project - Advisory	TBC						
Fieldwork	EDI action plan delivery	TBC						
Fieldwork	Care Homes	TBC						
Fieldwork	Sustainability: Electric Vehicle grants	TBC						
Fieldwork	Mandatory Training	TBC						

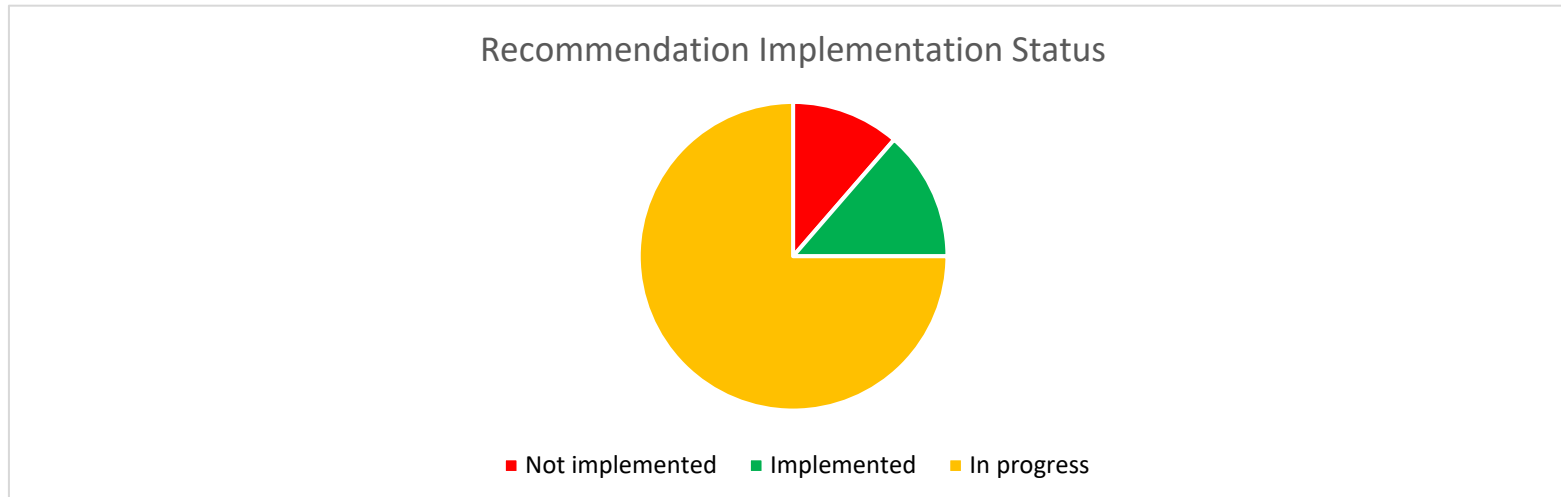
Fieldwork	Integra & HR Core Replacements (Oracle) – Advisory	TBC						
Fieldwork	Client Affairs	TBC						
Fieldwork	Payroll	TBC						
Fieldwork	Public Sector Decarbonisation - PSDS3 Independent Review – Further work	TBC						
Fieldwork	Social Care Reform - CQC Inspection Preparedness	TBC						
Fieldwork	Cyber Security – Third Party Security and awareness – Follow-up	TBC						
Fieldwork	Purchase Card Policy Compliance	TBC						
Planning	DLUHC Covid Champions Grant (Completion of Phase 2)	TBC						
Planning	Records Retention and Destruction	TBC						
Planning	Housing Benefits	TBC						
Planning	Children’s Direct Payments	TBC						
Planning	Direct Payments 18-25	TBC						

Planning	Treasury Management Strategy - Investment Compliance and Borrowing	TBC						
Planning	Private Sector Landlords - Licensing of HMOs	TBC						
Planning	Our Lady of Lourdes School	TBC						
Planning	Community Safety	TBC						
Planning	Procurement	TBC						
Changes to published plan								
Cancelled	Building Safety Act – preparedness Cancelled as audit scope areas covered by internal audit undertaken by The Barnet Group							
Cancelled	Substance Misuse Grant Cancelled as no longer a funding requirement for Internal Audit to review							

3.0 Follow Up

3.1 Summary

3.1.1 The wheel below demonstrates how many critical, high and medium priority actions due this period have been confirmed as being implemented, in progress, not implemented or have not yet been tested.



3.2 Outstanding actions

3.2.1 During this period we followed up 16 high priority and 28 medium priority actions due by 30 September 2023. 6 actions are confirmed as implemented or closed, whilst a further 33 are in progress. 5 were concluded as Not Implemented with the service.

* At the request of the Governance, Audit, Risk Management and Standards Committee (GARMS) a column has been added to show how many times the action has slipped i.e. not been implemented within the agreed timeframe. The colour key is as follows:

White = 1 (i.e. first-time non-implementation being reported)

Amber = 2 (i.e. second time non-implementation being reported)

Red = 3+ (i.e. at least third time non-implementation being reported)

3.2.2 Outstanding High priority actions

	Name of report and date issued	Agreed Action	Status (Not Implemented / In Progress / Due but not yet tested)	Owner	Due Date	Slippage*
Strategic Director: Executive Director Assurance						
1.	Premises, Licensing and Gambling May 2022	a) The team will produce an inspection timetable that will enable the council to ensure that licences are not misused, and clients who have not paid their invoices are not using their licences.	Partly Implemented Premises with licences are being risk rated by the service to ensure resources are targeted according to risk. Those premises defined as 'high risk' are defined as those with low level of compliance and non-payment of fees. The inspection programme will be completed by the end of the financial year. Revised Due Date: 31 March 2024	Regulatory Services Director	30/8/2022 then 30/11/22 then 30/6/23 then 30/9/23	4
Strategic Director: Executive Director of Strategy and Resources						
2.	Recruitment: Pre-employment checks March 2023	2b. We will create a listing of all DBS certificates currently active along with the status of these DBS certificates held and their expiry dates. This listing will be reviewed monthly by the Council to oversee and monitor the renewal process and status of DBS certificates.	Partly Implemented It was confirmed that listings are routinely provided by Capita HR and that Barnet HR chase responses where DBS Renewals have not been completed. However, testing found that not all aspects of the newly introduced DBS Renewals procedure are being routinely followed and in a small number of cases DBS	Capita HR and LBB HR	31/5/2023 then 15/9/23	2

			renewals remain overdue. This action will remain open until the procedure is operating as business as usual. Revised due date: 15/12/23			
Strategic Director: Deputy Chief Executive						
3.	Building Control May 2023	1a. Monitoring of Operational Compliance In light of the changes required by the Building Safety Act, we will revise the monitoring arrangements that need to be reported to senior officers within the Council in relation to Building Control operations/ activities	Partly Implemented Monitoring arrangements have been scoped. These have been shared with Performance and Risk Manager but have not been adopted as yet; dialogue is ongoing. The service anticipates that the monitoring arrangements could be adopted during October 2023. However, further guidance from the regulator is awaited. It is likely to be published this month. Revised due date: 30 November 2023	Building Control Manager	31 July 2023	1
4.	Building Control May 2023	1b. Monitoring of Operational Compliance We will report the outcomes of these monitoring arrangements to senior officers regularly (e.g., quarterly), so that we remain compliant with the Building Safety Act, and relevant officers have oversight over	Partly Implemented Much of the secondary legislation required to inform the reporting arrangements was only published in the last few weeks. An advert for the data analyst role goes live on the 25.09.23 and interviews proposed for October. There will therefore be no new live reports before this time.	Building Control Manager	31 July 2023	1

		operations/ activities of the Service	Revised due date: 30 November 2023			
5.	Building Control May 2023	<p>1c. Monitoring of Operational Compliance</p> <p>We will prepare for the Building Safety Regulator's annual audit by performing more regular (e.g., monthly) spot checks on a sample of applications and inspections and conduct bi-annual audits on a larger (e.g., 25) sample of applications and inspections based on the population. The basis of the sample selection should be documented and retained for audit purposes and the outcomes reported at the Council's equivalent of the Performance Management Board meetings (now that the service has transferred to the Council from Re) for better oversight and monitoring.</p>	<p>Partly Implemented</p> <p>The service has drafted an audit template and have started to undertake audits/sampling starting from August, with actions identified. Once this has been confirmed as a regular monthly activity this action will be considered implemented.</p> <p>Revised due date: 30 November 2023</p>	Building Control Manager	31 July 2023	1
6 - 10	Cyber Security - Third Party Security and Awareness March 2023	1a. – 1e.	<p>In Progress</p> <p>There are 5 high priority actions from this audit which are yet to be fully implemented. Work is in progress to ensure all actions are complete and a revised plan is in place to finalise the work needed. This will be</p>	Assistant Director, Resident Experience & Digital	31 August 2023	1

			revisited by internal audit at the start of Q4 to be reported back to Committee in April. Revised Due Date: 30 January 2024			
11.	Contract Management Toolkit Compliance November 2022	1a. Management will decide on whether the completion of the Contract Management Toolkit by contract managers is to be made mandatory/compulsory.	Partially Implemented The Interim Assistant Director Commercial and Procurement indicated that a decision on whether to make completion of the contract management toolkit compulsory was pending, following a review of the existing contract management tools and documents. The review of documents was planned for August to November 2023 as stated in the Sustainable Commercial Strategy & Delivery provided to us for review and endorsed by CMT. The Sustainable Commercial Strategy & Delivery defines the Commercial and Procurement team's approach and commitment to ensuring effective procurement and contract management across the Council. Revised Implementation date: 15 December 2023	Acting Interim Assistant Director (Commercial), Customer and Place Senior Business Partner, Commercial (Corporate Procurement)	1 September 2023	1
12.	Contract Management Toolkit Compliance November 2022	1b. Contract Managers will provide the missing information as requested in Appendix 5 (for the allocation of a contract manager, the provision	Partially Implemented 10/17 of the outstanding information requests have now been provided and these are resolved. Outstanding evidence has been chased	Contract managers as stated	31 August 2023	1

		of the contracts and the provision of evidence of performance monitoring for relevant contracts, where stated in Appendix 5)	and is being reviewed; a verbal update will be given to Committee if this action can be considered Implemented.			
13.	Contract Management Toolkit Compliance November 2022	1c. Arrangements to assess the Contract Management Toolkit training needs of identified contract managers across the Council will be undertaken. Related training will be offered and delivered where applicable.	Partially Implemented The Interim Assistant Director Commercial and Procurement provided the Sustainable Commercial Strategy & Delivery which was endorsed by CMT to us for review. The Strategy defines the Commercial and Procurement team's approach and commitment to ensuring effective procurement and contract management across the Council. The Strategy included a timeline for key deliverables which included the following for the contract management stream relating to training: - Design training Material - Jan 24 to March 24 - Develop Training Plan - April - May 24 - Deliver training - June 24 to August 24 Revised Implementation date: 15 August 2024	Acting Interim Assistant Director (Commercial), Customer and Place Senior Business Partner, Commercial (Corporate Procurement)	1 September 2023	1

3.2.3 Outstanding medium priority actions

	Audit Title	Audit Date	Ref	Finding	Action	Responsible officer	Due date	Progress report for GARMS end Q2
1.	Premises, Licensing and Gambling	30/05/2022	3d	Comprehensive Licensing – Data update	d) PLG management will confirm resourcing for the data cleanse and will consider giving higher priority to it i.e. sooner than within the planned 6 months, to ensure accuracy of the information and the invoicing process.	Regulatory Services Director	30/8/2022	In Progress Revised Due Date: 17 November 2023
2.	Premises, Licensing and Gambling	30/05/2022	5a	Policies and Procedures – Documentation and Version Control	a) The Group Manager will ensure that the Gambling process and procedure is updated and approved.	Group Manager: Regulatory Services	31/08/2022	In Progress Revised Due Date: 17 November 2023
3.	Premises, Licensing and Gambling	30/05/2022	5b	Policies and Procedures – Documentation and Version Control	b) Management will complete the review of all the procedures and update them accordingly.	Group Manager: Regulatory Services	31/08/2022	In Progress Revised Due Date: 17 November 2023
4.	Commercial Rents and Leases Renewal Audit	12/8/2022	1a	Lease and Letting Renewals: Rent Review:	a) An additional PI/measure will be introduced which sets out and monitors a deadline to complete rent reviews which have failed the initial PI.	Head of Property and Portfolio Management	30/12/2022	In Progress The contract arrangement is no longer in place as the service has come back in house. Therefore, there will no longer be the potential for a financial penalty, A performance objective is being considered for surveyors and the monitoring of performance will be built into individual appraisals, which will include achieving set deadlines.

								<p>Going forward, a two-stage deadline will be set in each case: three months for proposal to tenant; and six months for submission of finalised proposal to Head of Property and Portfolio Management.</p> <p>Revised Due Date: 30 January 2024</p>
5.	Commercial Rents and Leases Renewal Audit	August 2022	1b	Lease and Letting Renewals: Rent Review:	b) The Head of Property and Portfolio Management and the Head of Property Services and Valuation will set out and clearly document, what constitutes successful performance and consistently report on this monthly to CMM. This will take into consideration the circumstances around Covid and LBB's request to cease completing lease renewals and rent reviews in 2018.	Head of Property and Portfolio Management	30/12/2022	<p>In Progress</p> <p>Contract Monitoring meetings (CMMs) are no longer relevant. 'Successful performance' will now relate to personal achievements of surveyors and this will be monitored through performance appraisals. A standardised review process will be instigated for each lease renewal or rent review that doesn't meet the new standards (set out in item 1(a)). The intention was to build this into a new database however this is yet to be procured. This decision on this is outside of the Teams scope of decision making.</p> <p>Revised Due Date: 30 January 2024</p>
6.	Commercial Rents and Leases Renewal Audit	August 2022	1c	Lease and Letting Renewals: Rent Review:	c) In the meantime, the Head of Property Services and Valuation will ensure that the backlog of overdue reviews (in particular those that are more than one year overdue) are completed. Where necessary,	Head of Property and Portfolio Management	30/12/2022	<p>In Progress</p> <p>The team are a further two staff down from last year and are currently working on a programme for recruiting for new surveyors. New job</p>

					resource implications will be discussed and addressed with LBB.			specifications are needed before recruitment can begin due to the move in-house. Revised Due Date: 30 June 2024
7.	Commercial Rents and Leases Renewal Audit	August 2022	1d	Lease and Letting Renewals: Rent Review:	d) The Head of Property Services and Valuation will review the rent negotiation process to identify bottlenecks and review whether any measures can be put in place where possible to reduce these.	Head of Property and Portfolio Management	30/12/2022	In Progress The team sought to procure a specialist resource to deal with valuations so as to release staff to concentrate on BAU and reduce pressure; however not all requirements of the specialist resource became available. Still needed to utilise BAU resource. This has implications for BAU work. Annual valuations are statutory and this will be prioritised to meet the deadline of the end of April. Recruitment for this is being considered. Revised Due Date: 30 June 2024
8.	Commercial Rents and Leases Renewal Audit	August 2022	2c	Income Collection and Debt Recovery: Bad Debt Write-Off	c) The Head of Property Services and Valuation will liaise with the Accounts Receivable team to obtain the necessary approvals required to write-in the credit notification cases.	Head of Property and Portfolio Management	30/12/2022	Not completed The Head of Property Services and Valuation Will raise at monthly arrears review meeting, with a view to completing this action by the end of 2023. Revised Due Date: 15 December 2023

9.	Commercial Rents and Leases Renewal Audit	August 2022	4c	Lease and Letting Renewals: Leases Renewal	c) The Head of Property Services and Valuation will review the process to reduce the time taken in negotiating lease renewals.	Head of Property and Portfolio Management	30/12/2022	<p>In Progress</p> <p>See response to 1b. and 1d. above. To work on bringing about a reduction in time taken by tying performance to into personal objectives and adding a further resource, which is being addressed in the planned recruitment programme.</p> <p>Revised Due Date: 30 June 2024</p>
10.	Commercial Rents and Leases Renewal Audit	August 2022	4d	Lease and Letting Renewals: Leases Renewal	d) Property Services will consider undertaking a benchmarking exercise with other London Boroughs to ascertain comparative performance timelines and if improvements can reasonably be expected.	Head of Property and Portfolio Management	30/12/2022	<p>Not completed</p> <p>To look into membership of the Association of LA Chief surveyors to facilitate this.</p> <p>Revised Due Date: 1 March 2024</p>
11.	Commercial Rents and Leases Renewal Audit	August 2022	5b	Lease and Letting Renewals: Legacy Rents and Leases	b) Management will agree an indicative programme to work through all the overdue rent reviews and lease renewals with an aim that they are completed to a specified and agreed deadline, (this will be dependent on third party responsiveness and any further changes to the law).	Head of Property and Portfolio Management	30/12/2022	<p>In Progress</p> <p>This is dependent on resources. The Head of Property and Portfolio management will work with the Head of Property Services on the proposed recruitment programme to address the backlog.</p> <p>Revised Due Date: 30 June 2024</p>
12.	Commercial Rents and Leases Renewal Audit	August 2022	6b	Lease and Letting Renewals: Insurance of Property	b) Management will ensure that an updated and accurate report of the properties where insurance is to be provided by	Head of Property and Portfolio Management	30/12/2022	<p>Not Completed</p> <p>Dependent of new database as will need to interrogate every letting. The new</p>

					tenants is prepared and shared with the Insurance team.			database is yet to be procured. This decision on this is outside of the team's scope of decision making. Revised Due Date: 1 March 2024
13.	Commercial Rents and Leases Renewal Audit	August 2022	6c	Lease and Letting Renewals: Insurance of Property	c) The Property Services and Valuation team will confirm if all properties that require the tenant or lessees to insure are adequately insured.	Head of Property and Portfolio Management	30/12/2022	Not complete The team will discuss this to determine a way forward as there is some dependency on the proposed database. This requires an extensive project to get physical confirmation of how much properties are insured for from tenants and check whether this is adequate. This will need an insurance valuation to be undertaken for comparison. There is an obligation for tenants to ensure for an adequate amount included in their lease. Revised Due Date: 1 March 2024
14.	Commercial Rents and Leases Renewal Audit	August 2022	6d	Lease and Letting Renewals: Insurance of Property	d) The Property Services and Valuation team will proceed with the project to move to a new system to enable LBB to update and produce accurate information on all its commercial property.	Head of Property and Portfolio Management	30/12/2022	Not Complete The team will discuss this to determine a way forward as this relates to the procurement of the proposed new database. Revised Due Date: 15 December 2023

15.	Staff Conduct Standards Compliance	27/01/2023	3c	Training and development (Nolan Principles of Public Life and Barnet Corporate Induction event)	The Council's Code of Conduct should be referenced / included in mandatory training to ensure that all staff are aware of its requirements	OD Manager, Resources - HR and Organisational Development	01/04/2023	<p>In Progress</p> <p>Testing showed not all temp staff are being captured on the system, and therefore may not be exposed to the necessary training on the Code of conduct.</p> <p>Revised due date: 15 December 2023</p>
16.	Staff Conduct Standards Compliance	27/01/2023	4a	Code of conduct - Hospitality, gifts and sponsorship declaration form	The Code of Conduct requirement for declaring gifts, hospitality and sponsorships offered and the related process will be reported in the quarterly Governance Newsletter. Further initiatives, for example as part of presentations to remind Council staff of their responsibilities to declare and report gifts, hospitality and sponsorships will be investigated and implemented, for example, potentially: - development of a declaration of hospitality gifts and sponsorship webform, easily accessible on the Council's intranet - updating gifts and hospitality arrangements in Code of Conduct, including clarification of the form to be used/completed - including references to gift and hospitality arrangements in the Barnet Corporate Induction and/or Management induction training	Head of Governance	01/04/2023	<p>In Progress</p> <p>The appropriate form for declaring gifts and hospitality is on the intranet and requirements are covered in staff induction and in the code of conduct. The Governance Team are meeting with Comms to determine the best way to reach staff and update them on all governance issues including gifts and hospitality.</p> <p>Revised Due Date: 15 December 2023</p>

17 - 25	Cyber Security - Third Party Security and Awareness	30/03/2023	2a – 2d 3 4 5a – 5c	Various	Various	Assistant Director, Resident Experience & Digital	31/08/2023	In Progress There are 9 medium priority actions from this audit which are yet to be fully implemented. Work is in progress to ensure all actions are complete and a revised plan is in place to finalise the work needed. This will be revisited by internal audit at the start of Q4 to be reported back to Committee in April. Revised Due Date: 30 January 2024
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3.3 Completed actions

3.3.1 During this period we followed up 3 high priority and 3 medium priority actions which are deemed to have been implemented, superseded or closed. These are listed below:

3.3.2 Completed high priority actions

	Name of report	Agreed Action	Owner	Due Date
1.	Recruitment: Pre-employment checks March 2023	2a. We will create procedure documents, including an outline of roles and responsibilities, for the DBS renewals process, which will be shared with the relevant staff.	Strategic Recruitment Manager	30 April 2023
2.	Staff Conduct Standards Compliance January 2023	1a. As part of the onboarding process, all starters (permanent and agency) will complete the Code of Conduct for Employees - Declaration of Interest Form.	Head of Recruitment & Resourcing – Strategy & Resources	01 April 2023

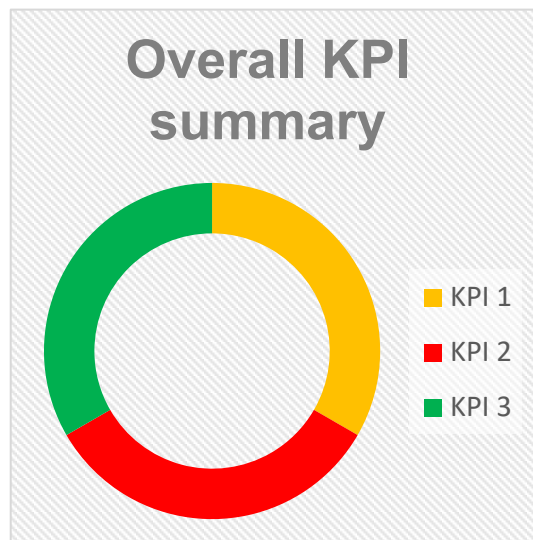
3.	Staff Conduct Standards Compliance January 2023	1b. As part of the onboarding process, all starters (permanent and agency) will be provided with the Council's full Code of Conduct booklet/document and will confirm by sign-off that they have read and understood the Code of Conduct content.	Head of Recruitment & Resourcing – Strategy & Resources	01 April 2023
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3.3.3 Completed medium priority actions

	Audit Title	Audit Date	Ref	Finding	Action	Responsible officer	Due date
1.	Staff Conduct Standards Compliance	27/01/2023	4b	Code of conduct - Hospitality, gifts and sponsorship declaration form	Officers in HPBL and Governance will be reminded to ensure that all declarations of gifts, hospitality and sponsorships will be reviewed, communicated and recorded in the Central Register of Gifts, Hospitality and Sponsorship, including potentially updating the escalation process by the relevant Line Manager	Monitoring Officer Head of Governance	1 April 2023
2.	Cyber Security - Third Party Security and Awareness	30/03/2023	5d	Improvements required to the council's cyber security awareness and training programme	We will identify specific cyber security training needs for the high-risk roles defined. We will implement delivery and monitoring of regular enhanced cyber security awareness training to high-risk individuals.	IT Client Operations Manager	30/09/2023
3.	Cyber Security - Third Party Security and Awareness	30/03/2023	6	Phishing exercises	We will carry out regular (e.g., quarterly) phishing tests for Council personnel to test cyber security awareness levels. The outcome of the tests can be utilised as one of the cyber risk indicators used for management reporting as well as for determining further actions that may need to be taken to further raise awareness levels.	IT Client Operations Manager	30/09/2023

Appendices

Appendix A: Key performance indicators (KPIs)



KEY:

Fully Achieved

Partially Achieved

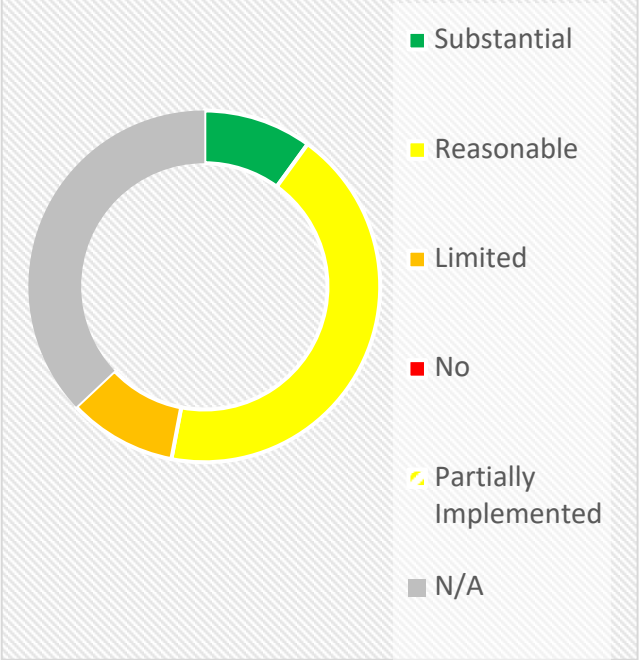
Not Achieved

N/A



KPI	Target	Results	Comment										
1. % of Plan delivered	Q2 to end of September 49%	48%	Work in progress is incorporated as follows: <table border="1" style="margin-left: 20px;"> <tr> <td>Not Started</td> <td>0%</td> </tr> <tr> <td>Planning</td> <td>20%</td> </tr> <tr> <td>Fieldwork</td> <td>50%</td> </tr> <tr> <td>Draft Report</td> <td>90%</td> </tr> <tr> <td>Complete</td> <td>100%</td> </tr> </table> Applying these %s to work in progress shows that we have delivered 48% of our plan for the year against a Q2 target to end of September of 49%. Up to 24% = Not Achieved 25-48% = Partially Achieved 49% = Fully Achieved	Not Started	0%	Planning	20%	Fieldwork	50%	Draft Report	90%	Complete	100%
Not Started	0%												
Planning	20%												
Fieldwork	50%												
Draft Report	90%												
Complete	100%												
2. Verification that at least 90% of Critical and High Risks have been mitigated by management at the time of follow up	90%	14%	0-49% = Not Achieved 50-89% = Partially Achieved 90% = Fully Achieved										
3. Average customer satisfaction score for year to meet or exceed acceptable level for at least 85% of completed surveys	85%	100%	0-49% = Not Achieved 50-84% = Partially Achieved 85% = Fully Achieved Q2: 4 surveys completed 3 Excellent 1 Good.										

Assurance Ratings



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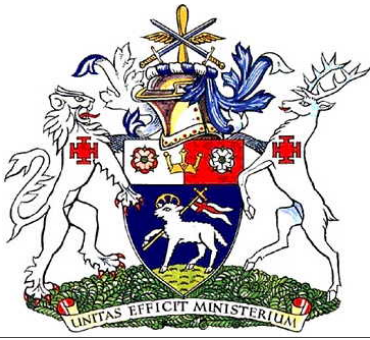
<p>4. % of reports year to date achieving:</p> <ul style="list-style-type: none"> •Substantial •Reasonable •Limited •No Assurance •Partially Implemented •Implemented •N/A 	<p>N/A</p>	<p>10% 43% 10% 0% 0% 0% 37%</p>	
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By virtue of paragraph(s) 7 of Part 1 of Schedule 12A
of the Local Government Act 1972.

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Governance, Audit, Risk Management and Standards Committee

Title	Governance Review Project Closedown
Date of meeting	16 October 2023
Report of	Executive Director Assurance
Wards	All
Status	Public
Urgent	No
Appendices	Appendix A – Governance Review Project Closure Report
Officer Contact Details	Andrew Charlwood, Head of Governance, andrew.charlwood@barnet.gov.uk , 020 8359 2014

Summary

A motion was passed at a Council meeting in July 2022 which requested officers to review the Council’s governance arrangements to:

- Move to an Executive system;
- Introduce an overview and scrutiny function; and
- Strengthen opportunities for public participation.

A resolution was passed on 2 May 2023 to move to the executive system. New governance arrangements were adopted and the new system went live on 23 May 2023.

Recommendation

That the Committee note and comment on the overview of the project set out below and the Governance Review Project Closure Report attached at Appendix A.

1. Reasons for the Recommendations

- 1.1 In May 2014, the Council changed its governance arrangements in accordance with the provisions of the [Localism Act 2011](#) (which amended the Local Government Act 2000) which permitted local authorities to move away from an Executive system and back to a Committee System. For eight years the council operated under a 'Committee System of Governance.'

- 1.2 On 26 July 2022, Council passed a motion instructing officers to undertake a review of the council's governance arrangements to:
 - Move to a Executive System
 - Introduce an Overview & Scrutiny function; and
 - Strengthen opportunities for public participation.
- 1.3 The motion resolved that a Cross-Party Member Working Group should be set up to facilitate the development of the proposals. It was noted in the motion that delivering the new Administration's significant transformation and change programme would require more regular, timely and efficient decision-making which may not be well-served by committee system where there can be long periods between committee cycles.
- 1.4 Following this motion, officers attended a meeting with Labour Members on 30 August 2022 setting out the available governance models and key features, some design principles, and the change process to move to a new governance arrangement. The session was co-delivered by the Head of Governance and Chief Executive of the Centre for Governance and Scrutiny (CfGS) to enable Members to gain relevant information on any formal changes to governance arrangements. The Opposition Group received a similar briefing on 12 December 2022.
- 1.5 After the resolution at Council in July, officers set up a Governance Review project to commence a review of the council's current formal governance arrangements and the steps required to make a legal change to a different governance system, comprising of an all-out change from one governance option to another under the Localism Act 2011. The Governance Review project had the following workstreams:
 - Decision-Making
 - Governance Staffing
 - Engagement
 - Culture

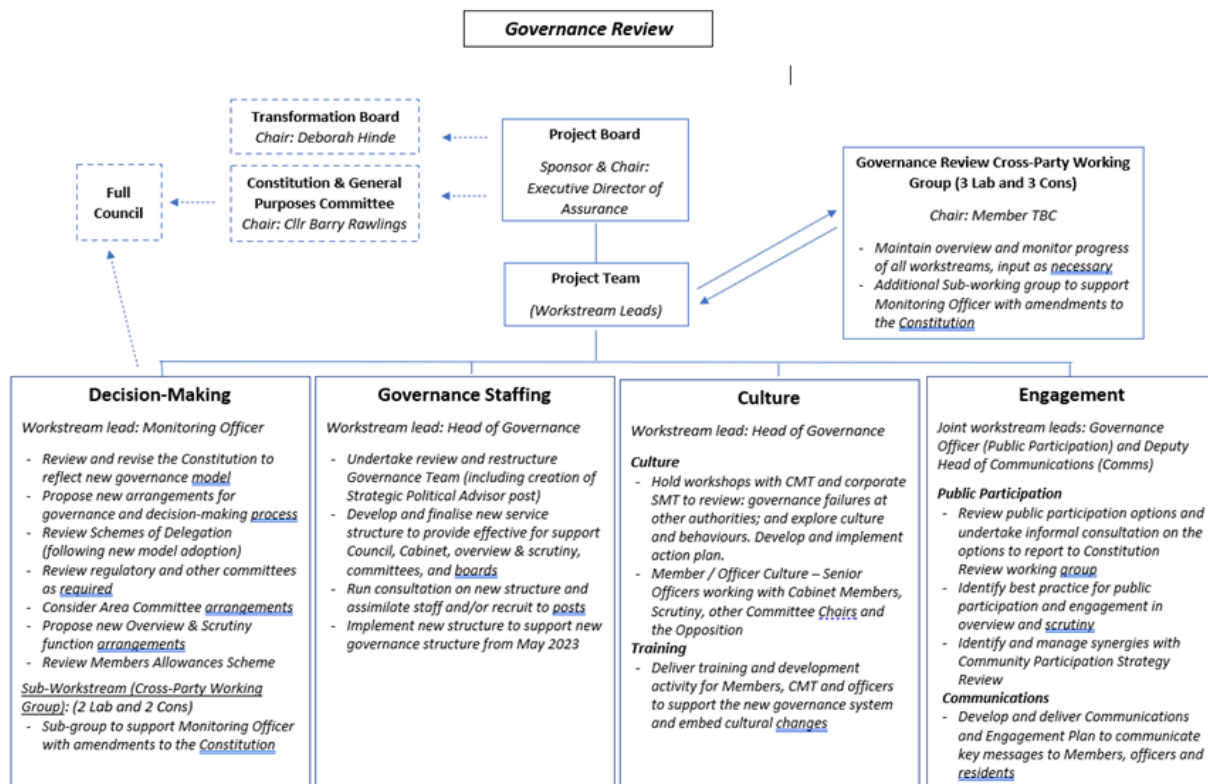


Table A: Governance Review Project Governance and Structure

- 1.6 Details of the project workstreams are set out in the sections below.
- 1.7 An overview of the project structure and workstreams was reported to the Constitution & General Purposes Committee on 6 October 2022. A further update on the workstreams was reported to that Committee on 12 January 2023.
- 1.8 New and updated Constitution sections were reported to Council meetings on 24 January, 28 February, and 2 May 2023. Details of the dates various sections were reported are set out below.
- 1.9 A resolution was passed at an Extraordinary Council meeting on 2 May 2023 as follows:

“That Council resolves to cease to operate the committee system and starts to operate executive arrangements with effect from the start of the 2023/24 Municipal Year at Annual Council on 23 May 2023.”
- 1.10 Following the passing of the resolution, a notice was placed in the local press and the new Constitution was placed on deposit for public inspection in accordance with legal requirements.
- 1.11 The new Constitution and governance arrangements were effective from 23 May 2023.

Decision-Making

- 1.12 This workstream covered:
 - Legal amendments to the Constitution to reflect new governance model;
 - Detailed arrangements for governance and decision-making (including Cabinet Forward Plan and Advanced Notice of Executive decisions, new report templates, training to officers and members about the new types of decision making);

- Review and update Chief Officers Schemes of Delegation (following the adoption of the new Constitution);
- Reviewing Area Committee arrangements;
- Proposed new overview and scrutiny arrangements; and
- Reviewing the Members Allowances Scheme.

This workstream was led by the Monitoring Officer, supported by the Head of Governance, and had input from a Cross-Party Sub-Working Group.

1.13 The Constitution & General Purposes Committee agreed at the 6 October 2022 meeting that the detailed Constitution amendments could be reported from the Cross-Party Sub-Working Group to Full Council for approval (rather than via this Committee and then to Council as is the usual process). Constitution amendments were reported to Council meetings on 24 January 2023, 8 March 2023 and to an Extraordinary Council meeting on 2 May 2023.

1.14 It should be noted that the new constitution was based on a model constitution rather than amending Barnet's current (Committee System) constitution. This will ensure that we adopt a legally compliant constitution which is based on an Executive model. The new constitution included:

- Bringing together audit and other governance mechanisms to produce a Governance, Audit, Risk Management and Standards Committee;
- Different mechanisms for public to engage with the council through the procedure rules;
- Setting up overview and scrutiny committees
- New rules and protocols to assist officers and members including putting the Officer Code of Conduct into the Constitution;
- Amending the employment rules of the council and creating an Employment Sub-Committee; and
- Clarifying which decisions should be reported Full Council.

1.15 Informal working groups have been set up consider the review of the constitution and to consider member complaints prior to these going to a formal committee.

1.16 The following Constitution sections were reported to Council on 24 January 2023:

- Article 1 – The Constitution
- Article 2 – Members and The Council
- Article 3 – The Full Council
- Article 4 – The Mayor
- Article 5 – Decision Making
- Article 6 – The Executive
- Access to Information Procedure Rules
- Members Licensing Code

1.17 The following Constitution sections and items were reported to Council on 28 February 2023:

- Financial Regulations

- Contract Procedure Rules
- Procedure for Dealing with Complaints Against Members
- Officer Code of Conduct
- Terms of Reference of Cabinet and Cabinet Members
- Terms of Reference of Council
- Terms of Reference of Committees
- Article 7 – Officers
- Delegations to Officers
- Budget & Policy Framework Rules
- Committee Procedure Rules
- Council Procedure Rules
- Executive Procedure Rules
- Public Participation Consultation Findings Report
- Equalities Impact Assessment

1.18 The following Constitution sections and items were reported to and Extraordinary Council meeting on 2 May 2023:

- Members Planning Code
- Terms of Reference – Council
- Code of Recommended Practice on Local Authority Publicity
- Members Rights of Access to Information
- Code of Conduct for Officers
- Terms of Reference – Committees
- Terms of Reference and Delegation of Duties to Cabinet
- Introduction to the Constitution and Summary
- HR Regulation
- Protocol for Recording of Decisions Made by Officers
- Code of Conduct for Member Officer Relations
- Article 6 – The Executive
- Authorisation Limits – Tables A and B
- Terms of Reference of Committees
- Executive Procedure Rules
- Committee Procedure Rules
- Code of Corporate Governance
- Members Allowances Scheme

1.19 Officers also produced the following which were required to support the new system:

- Cabinet Forward Plan (Key Decision Schedule)
- Exempt Item Notice
- Late Item Notice
- Cabinet Report Templates
- Chief Officers Schemes of Delegation
- Calendar of Meetings
- Church and Parent Governor Recruitment (for scrutiny committee dealing with education matters)

1.20 Chief Officers Schemes of Delegation were updated to reflect the new governance arrangements:

barnet.moderngov.co.uk/ecCatDisplay.aspx?bcr=1&sch=doc&cat=13721&path=0

Governance Staffing

1.21 A restructure of the Governance Service was required to support the functions and structure of an Executive system. This workstream included developing and finalising the new service structure to provide effective support for council, executive, overview and scrutiny, committees, and boards. Initial staff proposals were drafted, a consultation with staff and trade unions took place with the final, and the final structure was agreed in February 2023. An internal and external recruitment process was undertaken, and the new structure was in place from 1 May 2023. All vacant posts have been appointed to. This workstream was led by the Head of Governance.

Engagement

1.22 The Motion agreed by Council in July 2022 requested that opportunities to strengthen public participation be examined as part of the review. This workstream included:

- Reviewing public participation options and undertaking a formal public consultation on the options to report to the Constitution Review Working Group;
- Identifying best practice for public participation and engagement in overview and scrutiny;
- Identifying and managing synergies with the Community Participation Strategy Review; and
- Training for Members and officers

A public consultation ran from 14 December 2022 to 25 January 2023: [Public Participation at Council Committee Meetings Consultation | Engage Barnet](#) The findings from the consultation were used to inform recommendations on public participation options prior to changes being recommended to Full Council on 28 February 2023.

1.23 This workstream delivered a Communications and Engagement Plan to communicate key messages to Members, officers, and the public. This included promoting the public consultation and sending key messages out via the council's communications channels at key points in the project. Intranet pages were created, and these were regularly updated. In addition, internet pages provided regular updates on the progress of the project and, following the implementation of the changes, all Council and Democracy website pages were updated:

[Council and democracy | Barnet Council](#)

1.24 In addition, briefings and training modules were developed and delivered for Members and officers to ensure that they are familiar with key elements of the new governance system in advance of it becoming operational as follows:

- Barnet Labour Group Briefing – 30 August 2022
- Council Management Team (CMT) Briefing – 14 September 2022
- Senior Management Team (SMT) Briefing – 20 September 2022
- Barnet Labour Group Briefing – 23 January 2023
- SMT Briefing – 30 January 2023
- CMT Briefing on Overview & Scrutiny Arrangements – 20 March 2023
- CMT and Committee Chairs Briefing – 28 March 2023
- Staff Breakfast Briefing – 29 March 2023
- Move to Cabinet System Training – 18 April 2024
- Cabinet Member Training – 19 April 2024
- Move to Cabinet System Training – 20 April 2024
- Barnet Conservative Group Briefing – 27 April 2023
- Effective Scrutiny Training – 10 May 2023
- Effective Scrutiny Training – 24 May 2023
- Chairing and Leading Scrutiny Training – 23 June 2023

1.25 Briefings were also held immediately before committees which were new or had updated terms of reference before first meetings took place.

1.26 Further Member and officers training and/or briefings will be organised as and when required.

1.27 This workstream was led by the Head of Governance, Senior Governance Officers, and the Deputy Head of Communications assisted by the Monitoring Officer.

Culture

1.28 The Governance Review also looked at elements of organisational culture to identify lessons learnt from governance issues at other local authorities and how the council can embed the new governance system. This workstream had the following elements:

- preparing staff for the change (CMT, SMT, the Governance Service and other officers), including roles and responsibilities and Member/Officer relations (e.g., with Executive and Non-Executive Members);
- developing a series of actions following CMT and SMT workshops to review the Centre for Governance & Scrutiny Risk and Resilience Framework; and
- lessons learnt from recent Public Interest / Best Value Reviews.

1.29 Following completion of this culture review, an Action Plan was drafted. Delivery of the Action Plan will be monitored via the Annual Governance Statement. This workstream was led by the Monitoring Officer and Head of Governance supported the Head of Assurance & Business Development.

1.30 **Member Oversight**

1.31 Progress against all workstreams was regularly reported to the Governance Review Cross-Party Working Group and the Constitution & General Purposes Committee. The Constitution Review Sub-Working Group met as required to review detailed amendments to the Constitution documents which were subsequently reported to Council on the dates referred to above.

1.32 Key Milestones

1.33 The table below outlines key project milestones and decision points:

Full Council	26 Jul 2022	Motion by Leader of the Council instructing officers to undertake a review of governance arrangements
Labour Group workshop – governance arrangements	30 Aug 2022	Present available governance models and key features, some design principles and the change process to move to a new governance arrangement
Constitution & General Purposes Committee	6 Oct 2022	Progress update
Public Consultation	14 Dec 2022 to 25 Jan 2023	Public consultation on opportunities for public participation via the constitution
Constitution & General Purposes Committee	12 Jan 2023	Progress update
Council Meeting	24 Jan 2023	Report Constitution amends for agreement
Council Meeting	28 Feb 2023	Report Constitution amends for agreement
New Governance Team structure	1 May 2023	New Governance Team structure go live
Extraordinary Council Meeting	2 May 2023	Report final Constitution amends for agreement
Publication of new provisions	11 May 2023	Publish resolution of the new provisions (s.9KC LGA 2000)
Annual Council	23 May 2023	New constitution takes effect and formal change to Executive governance system

Project Delivery

1.34 The Governance Review project was delivered on time and in budget and the new system has been operational from Annual Council on 23 May 2023.

1.35 A lessons learnt review was undertaken to help Members and officer to understand any learning which could be applied to future projects (Appendix A).

2. Alternative Options Considered and Not Recommended

2.1 N/A.

3. Post Decision Implementation

- 3.1 Lessons learnt which can be applied to future Governance Review projects are set out in Appendix A.
- 3.2 Implementation of the Governance Review Culture Workstream Action Plan will be monitored via the Annual Governance Statement.

4. Corporate Priorities, Performance and Other Considerations

Corporate Plan

- 4.1 The Council's new governance arrangements will support delivery of all Corporate Priorities as detailed in Our Plan for Barnet 2023 – 2026, but particularly the priority of 'Being an engaged and effective council'.

Corporate Performance / Outcome Measures

- 4.2 To help achieve the outcomes of acting on residents' concerns and involving residents in decision-making, the council adopted new governance arrangements, with additional ways that residents can become involved in meetings. The move from a Committee System to an Executive system from May 2023 is intended to support more efficient decision-making, improved accountability with Cabinet Members being responsible for specific portfolios and increased transparency, with webcasting of committee meetings and remote access for meeting participants, including residents.
- 4.3 Arrangements to monitor the level of engagement with the democratic process, such as attending a committee in person, watching a live or recorded webcast meeting, participating in a hybrid meeting, asking questions, making a comment, submitting a deputation or petition and applying for Area Committee funding, are being implemented and will be reported in future reports once a baseline has been established. This will include monitoring:
- Webcasting viewing statistics
 - Remote participants in hybrid meetings
 - Deputations
 - Public questions
 - Public comments
 - Petitions
 - Area committee funding applications
 - Website hits on [Council and democracy | Barnet Council](#)
 - Scrutiny topics suggested by citizens
 - Participation of citizens and community groups in scrutiny task and finish groups

Sustainability

- 4.4 N/A

Corporate Parenting

- 4.5 N/A

	Risk Management
4.6	N/A
	Insight
4.7	N/A
	Social Value
4.8	N/A
5.	Resource Implications (Finance and Value for Money, Procurement, Staffing, IT and Property)
5.1	The costs of delivering this project were contained within existing budgets or funded from the Transformation Fund.
6.	Legal Implications and Constitution References
6.1	The law allowing the move to an executive system is the Local Government Act 2000 Section 9K. Under this section a local authority may cease to operate its existing form of governance and start to operate a different form of governance.
6.2	All legal requirements relating to the council changing its governance arrangements were complied with as detailed in reports to the Constitution & General Purposes Committee and Full Council as referenced in the Background Papers section below.
6.3	The Governance, Audit, Risk Management and Standards Committee is “...a key component of Barnet Council’s corporate governance. It provides an independent and high-level focus on the audit, assurance and reporting arrangements that underpin good governance and financial standards.”
6.4	Under the Council’s Constitution, Part 2B, Terms of Reference and Delegation of Duties to Committees and Sub-Committees, Section 2 sets out the terms of reference of the Governance, Audit, Risk Management and Standards Committee which includes in section 2.4.1 which includes “To review the council’s corporate governance arrangements against the good governance framework, including the ethical framework, and consider the local code of governance”.
7.	Consultation
7.1	A Public Consultation took place as detailed in section 1.16.
7.2	Consultation with Members and officers too place as detailed in section 1.18.
8.	Equalities and Diversity
8.1	An Equalities Impact Assessment was reported to Full Council on 28 February 2023.

9. Background Papers

- 9.1 [Agenda for Constitution and General Purposes Committee on Thursday 6th October, 2022, 7.00 pm \(moderngov.co.uk\)](#)
- 9.2 [Agenda for Constitution and General Purposes Committee on Thursday 12th January, 2023, 7.00 pm \(moderngov.co.uk\)](#)
- 9.3 [Agenda for Council on Tuesday 24th January, 2023, 7.00 pm \(moderngov.co.uk\)](#)
- 9.4 [Agenda for Council on Tuesday 28th February, 2023, 7.00 pm \(moderngov.co.uk\)](#)
- 9.5 [Agenda for Council on Tuesday 2nd May, 2023, 7.00 pm \(moderngov.co.uk\)](#)
- 9.6 [Browse plans - Cabinet, 2023 \(moderngov.co.uk\)](#)

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Project Closure Report (Governance Review)

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1. Introduction

In July 2022, Council passed a Motion for officers to undertake a review of the council's governance arrangements to:

- Move to a Strong Leader and Executive system;
- Introduce an Overview & Scrutiny function;
- Strengthen opportunities for public participation.

The rationale for the change was that the delivery of the new Administration's transformation programme would require more regular, timely and efficient decision-making and that may not be well served by long periods between committee cycles.

On 30 August 2022, Labour Group received a briefing on key features and pros and cons of the available governance systems. On 27 April 2023, the Conservative Group received a similar briefing.

Before the initiation of the project, the Monitoring Officer and Head of Governance had undertaken a self-assessment against the Centre for Governance & Scrutiny (CfGS) Risk and Resilience Framework and considered lessons learnt for Barnet from governance failures at other local authorities (as detailed in Public Interest reports and Best Value Reviews). During the scoping phase of the project, it was agreed that the work examining culture and governance issues at other authorities should be progressed as a 'Governance Culture' workstream as part of this project.

In accordance with the directions of Council in July 2022, the Council commenced a Governance Review project in September 2022 to give effect to the requirement from new Labour Administration to review governance arrangement to facilitate a move from a Committee System to an Executive system of governance. It was a broad and complex review and, as such, was delivered in distinctive but interrelated workstreams, as follows:

- Decision-Making – review and update of the Constitution and other key documents; with a sub-group 'Constitution Review Working Group' to support the Monitoring Officer with amendments to the Constitution;
- Governance Staffing – restructure of the Governance Team to support Council, Committees, Cabinet, Overview & Scrutiny and Boards;
- Culture – review of culture and governance issues highlighted in other local authority Public Interest/Best Value Reviews, CfGS Risk & Resilience Framework, and delivery of Council Management Team (CMT) and Senior Management Team (SMT) workshops to inform an organisation wide action plan;
- Engagement - consultation on public participation options and communications to all stakeholders; and
- Cross-Party Working Group – maintain overview and monitor progress of all workstreams; provide guidance to officers on preferred options, ensure that regular updates are reported to the Constitution & General Purposes Committee and refer matters to Full Council for decision as required. Refer to separate Terms of Reference for this group.

The changes to a 'Cabinet/Scrutiny' governance system took effect operationally from the Annual Council meeting in May 2023 with the adoption of a new Constitution.

2. Lessons Learned

Refer to Lessons Learned Log – Appendix 1.

3. Project Objectives & Benefits Realisation

Objectives from in the PID	Benefits from the PID	Status at Project Closure	Comment
<p>Review and update the Constitution and the Schemes of Delegation and put in place arrangements for a new Overview and Scrutiny function to reflect the new governance model</p>	<ul style="list-style-type: none"> ➤ Members engaged via the Constitution Review sub-working group to inform amendments to the Constitution. ➤ A constitutional framework for the Executive, Overview and Scrutiny committees, other committees and partnership boards. ➤ Legally compliant Constitution with all essential elements in place by May 2023. ➤ Updated Chief Officers Schemes of Delegation if required. 	<p>Achieved</p>	<ul style="list-style-type: none"> ➤ Legally complaint constitution achieved. All templates and notices drafted. Procedure rules have been tested and are easy to use. Increased public participation rules have been drafted. New committees developed for governance and employment. Terms of reference of committees have all bee completed. Al council deadlines met. ➤ The Governance team need to identify how comments and conclusions from Overview & Scrutiny are fed into Cabinet. ➤ Chief Officers Schemes of Delegation updated on the website at end of July 2023 - barnet.moderngov.co.uk/ecCatDisplay.aspx?bcr=1&sch=doc&cat=13721&path=0.
<p>Review and restructure the Governance Team to support the structure and functions of the executive system</p>	<ul style="list-style-type: none"> ➤ A restructured Governance Service team with updated job descriptions to support the Executive system and overview & Scrutiny arrangements. ➤ Posts assimilated or recruited in the new Governance Service structure. 	<p>Achieved</p>	<ul style="list-style-type: none"> ➤ All posts recruited to, and new Governance Team structure live from 1 May 2023. ➤ New team structure published on the intranet.
<p>Deliver the cultural change required to support new governance</p>	<ul style="list-style-type: none"> ➤ Oversight and monitoring of the corporate implementation of the action plan that has been developed through this workstream 	<p>In progress</p>	<ul style="list-style-type: none"> ➤ Final Action Plan reported to CMT Assurance on 27 June 2023.

<p>arrangements from May 2023</p>			<ul style="list-style-type: none"> ➤ Action Plan to be reviewed in the context of the LGA Peer Review Action Plan. ➤ Implementation of the Action Plan will be monitored by the Head of Governance through the Annual Governance Statement during 2023/24.
<p>Deliver a planned programme of communications activity to ensure that Members, officers and the public are aware of the forthcoming changes</p>	<ul style="list-style-type: none"> ➤ Continuous review and update of the Communications and Engagement Plan to deliver timely messages to Members, staff and the public regarding the Governance Review project, both leading up to 23rd May 2023 and beyond. 	<p>Achieved</p>	<ul style="list-style-type: none"> ➤ Continuously reviewed and refined Comms & Engagement Plan throughout the project and delivered timely comms to all stakeholders through various mediums. ➤ On-going Social media schedule signed off by Project for comms activities post 23 May 2023. Aim to continuously engage stakeholders and encourage participation in the council’s decision-making process.
<p>Facilitate and deliver CMT and SMT workshops to improve corporate awareness of governance issues and support actions to prevent governance failures in Barnet</p>	<ul style="list-style-type: none"> ➤ ‘Culture’ focussed workshops with CMT and SMT provided opportunities to socialise the planned governance changes with senior officers, as well as capturing valuable insights, reflections and ideas. 	<p>Achieved</p>	<ul style="list-style-type: none"> ➤ Completed SMT workshops during October. 64 % (83/130) overall attendance at workshop sessions. Invitations extended wider than corporate SMT to include those that write reports to Committees and/or have direct contact with Members. ➤ Positive feedback from attendees regarding the purpose/content of the workshops, good level of engagement with officers across the organisation with informative discussions taking place. ➤ Roretti’s ‘Initial findings’ report produced by Sanjay Mackintosh and Nicola Hughes, highlighting what could be improved through the change of governance structure. Merged into the Governance Culture Action Plan.

<p>Develop public participation arrangements in the Constitution and to take the results of this consultation into account</p>	<ul style="list-style-type: none"> ➤ Consideration given to all public participation options available to local authorities. ➤ Incorporation of best practice for public participation and engagement in overview and scrutiny. 	<p>Achieved</p>	<ul style="list-style-type: none"> ➤ 6-week consultation took place between 14 Dec 2022 – 25 Jan 2023. Total of 53 responses received. ➤ Consultation outcomes informed the public participation options included in Part 3 (Rules of Procedure) of Constitution amends, reported at Council meeting on 8 Mar 2023 alongside EqIA. ➤ Formal ‘We Asked, You Said, We Did’ published on the Engage Barnet website following the decision from the Council meeting. ➤ Enhanced public participation options embedded into the council’s decision-making process via the new Constitution.
<p>Identify and manage synergies with the Community Participation Strategy Review work programme, particularly in relation to public participation in council decision-making process, and more generally different ways in which the public can engage with the council through the Constitution</p>	<ul style="list-style-type: none"> ➤ Consider linkages and overlap with the Community Participation Strategy Review work programme, particularly the relaunch of the Leader Listens events, review of number of resident questions at Committee meetings, etc. 	<p>Achieved</p>	<ul style="list-style-type: none"> ➤ Consultation questions shared with Leader ahead of ‘Leader Listens’ event on 15 Dec 2022 to promote the consultation. ➤ Reviewed feedback from the consultation and utilised the information to develop arrangements to broaden the opportunities for public participation at council decision-making meetings, embedded via the new Constitution.
<p>Maintain overview of the project and ensure that all workstreams are being delivered in accordance with agreed timescales to</p>	<ul style="list-style-type: none"> ➤ Robust programme management approach with oversight of interdependencies between workstreams, management of risks/issues/concerns at a programme level, with an 	<p>Achieved</p>	<ul style="list-style-type: none"> ➤ Agreed Project Initiation Document which set out the full scope, project governance arrangements and timescale to deliver the project. ➤ Developed and monitored Project Plan, identifying interdependencies,

<p>ensure that the council can implement a Cabinet/Scrutiny system in May 2023</p>	<p>understanding of the impact of decisions/activities on project timetable.</p>		<p>key pressure points and key milestones.</p> <ul style="list-style-type: none"> ➤ Executive Director of Assurance provided strategic direction and ownership of the programme. ➤ Assistant Director of Assurance provided Project Assurance role to ensure project governance, management, and execution conducive to successful delivery. ➤ Project Team focused on delivering activities to progress the project (5 workstreams), highlighting issues/risks/ concerns for escalation to Board/CMT/ Leader. ➤ Cross-Party Working Group maintained overview and monitored progress of all project workstreams.
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4. Handover to Business

Tasks Handed over as BAU	Owners	Date	Status
<i>Brief description of the task</i>	<i>Name and job title of individual responsible for delivering the task</i>	<i>Date by which the task will be completed</i>	<i>Progress Status</i>
<p>Snagging list for the Monitoring Officer to make 'housekeeping changes' to the Constitution such as terminology to ensure consistency, numbering and formatting changes.</p> <p>Any substantial amends to the Constitution to be reviewed by the Constitution Review Working Group to be directly reported to Council for approval</p>	<p>Jessica Farmer, Monitoring Officer</p>	<p>Ongoing</p>	<p>Changes have been made. First Constitution Review Working Group has also been held. Done</p>
<p>Implementation and monitoring of the Governance & Culture Action Plan (link in into the LGA Peer review recommendations)</p>	<p>Andrew Charlwood, Head of Governance</p>	<p>31 Mar 2024</p>	<p>Assigned to Governance Officers to progress</p>

Tasks Handed over as BAU	Owners	Date	Status
Implementation of ongoing social media schedule for promoting council-decision making meetings to promote public participation options	Jonathan Schroder, Deputy Head of Communications	Ongoing	Ongoing
Liaise with Strategic Political Advisor and Leader over recess period (Aug 2023) to review Cabinet processes and Member Development needs (linking into the recommendation from the LGA Peer Review)	Andrew Charlwood, Head of Governance	Dec 2023	
Review of new governance arrangements following post implementation at 6- and 12-month interval	Andrew Charlwood, Head of Governance	30 Nov 2023 31 May 2024	
Member training on new governance arrangements, member/officer relationship, governance and scrutiny, and the Members Code of Conduct to be incorporated in the on-going Member Development Programme.	Andrew Charlwood, Head of Governance	Ongoing	Ongoing
Develop ongoing governance communications work	Andrew Charlwood, Head of Governance	Ongoing	Ongoing
Inform the Association of Democratic Services Officers (ADSO) of the Governance Review project and share information on how the change in governance arrangements and new Constitution has been delivered.	Andrew Charlwood, Head of Governance	TBC	TBC

5. Conclusion

The change in governance arrangements and revised Constitution was delivered via this project that spanned nine months. Comparatively, other councils that have undertaken a change in governance arrangements have had between 12-18 months for delivery. It has involved a collaborative effort across multi-disciplinary teams, extensive engagement with internal and external stakeholders as well as implementation of robust project governance and management to ensure successful and timely delivery of the project. It has been a very demanding project to deliver in such a short period of time and added pressure on the project team including Governance team, the Monitoring Officer, HB Public Law and other officers across Assurance and Corporate Services whilst also delivering business as usual.

The costs of delivering this project were contained within existing budgets or funded from the Transformation Fund.

The project implemented the governance changes within the agreed timescale and budget. Overall, the changes were delivered on time and in an effective way. Anecdotal feedback would suggest that within the organisation there is widespread knowledge of the changes and what they mean for day-to-day business. Communications input was integral to achieving this, especially around the various forms of engagement internally that took place from March to May 2023 (breakfast briefings, lunch and learns, presentations to senior management conference calls, etc).

Feedback on the change of governance project has been sought from across the organisation following completion of a full cycle of committees under the new structure with a new Constitution in operation, to allow meaningful insight into the experiences of staff engaging in the new decision-making process. The following questions were asked as part of the survey:

1. How easy it is to understand the new system?
2. What has worked well?
3. What could be improved?

Overall feedback has been:

- The project was successfully delivered on time and in budget with good communications and engagement across all stakeholders;
- The new arrangements have bedded in well, the Cabinet briefing has worked very well as strategic discussion rather than just a report clearance meeting and support across the Governance team has been very good. Regular comms and engagement with all stakeholders to provide project updates and obtain feedback was helpful.
- A common suggestion for improvement is to clarify the role of officers at Cabinet meetings. Post implementation, feedback has highlighted the need for greater clarity on the operational processes relating to single Member decision-making; working with Portfolio holders; overview & scrutiny and call-in; how CMT work with Cabinet Members and so on.
- Updated intranet and internet pages have been helpful in providing information and resources relating to the new governance and decision-making process, making information more widely and easily accessible.

Work examining culture and governance issues at other authorities was progressed as a 'Governance Culture' workstream as part of this project. The 'Governance Culture' workstream provided opportunities to socialise the planned governance changes with senior officers, as well as capturing valuable insights, reflections and ideas. No fundamental governance related issues were identified. However, there was room for improvement and an opportunity to embed best practice and the highest standards as the council implements its new governance arrangements from May 2023. Barnet is in a strong position with regards to its governance arrangements and culture and has an opportunity to take proactive steps to further enhance these. Councillors and officers, regardless of their role, are likely to conduct work that intersects with the council's governance framework. The emerging actions are wider than the remit of the Governance Review project and will be implemented as part of other projects and programmes, beyond this project's lifetime.

Appendix 1: Lessons Learnt Log

Lessons Learned Log		
Lesson ID	Lesson Description	Recommendation
L01	The permitted timescale for project delivery was very stringent given that such projects normally have a 12-18 months lead in time. Though the new administration were asked to reconsider the implementation timetable for the change in governance arrangements, however, officers were instructed to deliver the project by May 2023 - allowing 9 months.	Allow 12-18 months to apply such a significant change to the Governance System. Ensure resources and additional capacity added to the 'Business as Usual' Governance Services to deliver the change
L02	Have an on-going Communications Plan to promote meetings (e.g., Cabinet, Scrutiny, Area Committees, etc.)...which includes key dates of activities	Acts as reminder to Comms Team to publicize the meetings via social media
L03	Need to review the process for Deputations - 1. Revise the timings to be 3 mins to present Deputation; 7 mins to question deputation; 10 mins debate; then decide on action; and 2. To allocate timings (in a balanced way) to political groups for questions and debate so people know who is speaking. The process will be applied to committees too	Apply clear Deputations process to Cabinet and Committee meetings
L04	Suggestion for motions to be shared with CMT in advance	So that CMT can advise and brief members - Already have a process in place for sharing Motions and Amendments with CMT for awareness. Encourage Political support officers to contact the relevant lead officers to get advice on Motions before they are drafted
L05	Cabinet briefing has actually worked well as a strategic discussion rather than just a report clearance meeting. However, the timing of the briefings needs to be reviewed.	Review Cabinet Briefing timings - Done.
L06	Senior Officers stated that they lacked clarity on their role at Cabinet meetings	More work needed on making it clear to officers what their role will be at the Cabinet meetings (e.g. to attend and present reports, answer technical questions only, etc.)
L07	Ability to feed into the revision of templates was good	Important to give SLT opportunity to comment on templates going forward

Lessons Learned Log		
Lesson ID	Lesson Description	Recommendation
L08	Ensure regular comms, but not repetitive	Project tried to get the balance right and generally had good engagement, but it is a technical change and quite difficult to get the comms balance right
L09	Feedback from through the survey found that some officers found it helpful for a governance officer to speak directly with specific teams and go through the timeline in detail rather than a generic presentations	Project has been to all directorate senior management teams to answer questions. Can offer to attend SLT team meetings if requested.
L10	Responsiveness to questions was/is often delayed and therefore not helpful	It is important to respond in a timely way to questions throughout the project
L11	Portfolio holders need to be more involved in the preparation of reports as they are presenting, there's more ownership of the reports	Further work is required at Chief Officer level on how Cabinet Members and Senior Officers work together at the early stages of report writing.
L12	Briefings provided by Governance Team to Senior Leadership Teams were helpful and informative, enabled individual teams to ask questions relevant to their services, and also for the Governance Team to get feedback on the types of queries/concerns services may have in relation to the proposed changes.	The Governance Team will continue to promote these kinds of activities internally
L13	Public consultation on participation options	Reconsider the need/ timing/ resource required vs the number of respondents Consider other forms of engagement rather than former consultation i.e. discussion via focus group, workshop with particular groups (i.e. Mencap) rather than a 'flat' questionnaire
L14	Focused Constitution Review Working sub-group to support the Monitoring Officer with amends to the Constitution	Beneficial to have a politically balanced sub-group focused on reviewing proposed amends to the Constitution, but review whether two groups were required (e.g. one to review overall project progress, and another to review Constitution amendments)
L15	Constitution amends presented to Council in tranches to ensure that these are 'banked' reducing the risk of substantive change requests at Full Council	This ensured that amends were 'banked' throughout the project rather than having the uncertainty and risk that proposed amends would be rejected/queried at Full Council. Also ensure buy-in from Members throughout the process.
L16	Timing of the Leaders Cabinet Briefing	Revise timeline for Cabinet Briefings to ensure that reports have been through clearance first ahead of the briefings

Lessons Learned Log		
Lesson ID	Lesson Description	Recommendation
L17	Weekly Officer meetings on Friday's to review and revise the Constitution in detail was very helpful. It was beneficial to keep the group small and to invite others as needed i.e. Procurement, Finance, etc.	Similar arrangement would be instituted for another governance review of this nature
L18	Did not have a Service Manager in post to bounce off the Constitution amends at the formative stage.	To have the Service Manager attend the weekly Constitution Review meetings and to bring the Governance Team along in the process of drafting the Constitution to enable their input and to understand the proposed changes.
L19	Level of Member engagement varied within the Constitution Review Working Group, not all Members were engaged in reviewing the detailed changes and the level of challenge to proposed changes was not as expected.	Useful to have the Constitution Review Working Group to focus on the review of detailed proposed changes.
L20	The Cross-Party Working Group did not proactively feedback to their respective political groups and were not very engaged in the meetings.	To not have two separate Working Groups.
L21	The task of harmonising the new Constitution and the Schemes of Delegation is complex and was made further difficult with the transition of Re services in-house, which required more substantial changes to the Schemes of Delegation.	To allocate a lead officer from the Governance Team to undertake this complex and technical work
L22	Did not recruit externally (i.e. consultant) to deliver the project and it was beneficial to have internal experienced Officers involved in the project and delivering the changes that they will also be affected by.	Senior and experienced staff who have been with the organisation for a long period of time to lead/be involved in project delivery
L23	It was challenging to restructure the Governance team at the same time as project delivery. The team was unable to recruit to vacancies due to the restructure. This also negatively impacted on the well-being of team members (additional work pressure, anxiety about the restructure, impact on team and individual morale).	Consider delaying the restructure of the Governance Team to after the implementation of the new governance system and use secondments to backfill the posts temporarily.

Lessons Learned Log		
Lesson ID	Lesson Description	Recommendation
L24	HR guidance during the restructure was not consistent i.e. about whose role was 'at risk'	Helpful to have more support for Managers to deliver restructures, not just based on HR advise but actual reference to corporate policy.
L25	There were too many project meetings which led to repetition and time taken away to complete actions. Also, on reflection need to review who is involved in the meetings.	Consider more agile methods of project management, with weekly scrum meetings for progress updates. Reduce repetitive meetings and review who is involved in the meetings.
L26	Culture workstream was time consuming at the start of the project and felt disjointed from the rest of the project.	Focus on the real cultural change effected by the implementation of new governance arrangements – single Member decision-making; working with Portfolio holders; overview & scrutiny and call-in; how CMT work with Cabinet Members; etc – impact of operations changes rather than wider organisational cultural change.
L27	Helpful to engage with Senior Leadership Team through workshops.	Should be done through the engagement workstream
L28	Beneficial to have a Corporate Comms person on the project with their skill to draft content for, and understand how to, reach external audiences.	Require a dedicated corporate comms person on the project and a dedicated comms resource from the Service (which for this project was not available)
L29	Effective project management provided structure, organisation and co-ordination to the project	Requires a robust project management approach and dedicated resource for project management
L30	Some of the communications deliverables were only identified quite late in the process, as were training materials and target audience identification. This meant that around March/April, a lot of work had to be done to ensure that training opportunities were put in place.	Would be good to have an understanding of the specifics of training needs well in advance of the actual schedule going out
L31	From a service perspective, the communications liaison contact changed during the review process, which led to potential inconsistency.	Going forward, and to ensure that meetings and key dates are scheduled into the communications forward plan, it would be good to put in place monthly catch-ups between the corporate communications team and the service communications liaison to ensure that the good work done during the review is not lost as we move forward

Lessons Learned Log		
Lesson ID	Lesson Description	Recommendation
L32	A dedicated communications budget was not set, or was not clearly clarified, with the corporate communications team representative, which led to some delays in producing certain products (ie. local democracy video).	It would have been useful to have been able to spend more money on communications, marketing and promotion throughout the programme (ie. on paid social media when we engaged residents on the changes, on developing assets to promote the various key milestones)
L33	Communications input was integral to achieving this, especially around the various forms of engagement internally that took place from March to May 2023 (breakfast briefings, lunch and learns, presentations to senior management conference calls etc.)	Develop a clear comms plan early on and identify key stakeholders, key touch points in the project and consider innovative ways to communicate via multiple mediums. Ensure messaging is regular and succinct - sometimes can be too much information.

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Governance, Audit, Risk Management and Standards Committee

Title	Member Complaints 2022/2023
Date of meeting	16 th October 2023
Report of	Monitoring Officer
Wards	All
Status	Public
Urgent	No
Appendices	None
Officer Contact Details	Jessica Farmer Jessica.farmer@harrow.gov.uk

Summary

A report outlining member complaints received in 2022/ 2023 and any trends

Recommendations

1. That the committee note the member complaints received.

1. Reasons for the Recommendations

- 1.1 It is important that member have an overview of complaints received and any trends. The Procedure for dealing with Member Complaints requires that the Monitoring Officer submits a report to the Committee at annual intervals to inform the Committee about complaints which have been received and not investigated and complaints which have been investigated.
- 1.2 The recommendations enable the council to:

- Comply with the constitutional requirement to report to the Committee.
- Ensure that the Council discharges its duty to: promote and maintain high standards of conduct for Members; review the application of the Code of Conduct for Members' to Member complaints; and maintain an overview on ethical standards in general across the authority.

1.3 Four complaints were dealt with during this period, this compares to ten complaints for the previous year. Historically in years with elections there tend to be more complaints. One of the complaints the complainant did not provide any details. In one case the resident did not respond to further enquiries and in three cases no evidence was found of a breach.

1.4 One of the complaints was about a failure to disclose interests. It is councillors' responsibility to ensure that their register is up to date. After the May election all councillors were offered assistance with completing their registers. The Monitoring Officer has also trained members on two occasions since May 2022 on the code of conduct and register of interests. Members are reminded regularly to update their register. Any dispensations that are granted are now made clear on the register so that the public can see this.

For the period April 2022-March 2023

Complaint	Provisions of Code	Decision
1	Failure to declare an interest	No evidence found no breach.
2	Resident did not provide these details	Resident did not respond to further inquiries
3	Not responding to correspondence	The member asked officers to deal with the matter, no evidence found of a breach of the code.
4	Failure to declare interests	No evidence found no breach.

2. Alternative Options Considered and Not Recommended

None

3. Post Decision Implementation

3.1 Not applicable.

4. Corporate Priorities, Performance and Other Considerations

Corporate Plan

4.1 Not applicable.

Corporate Performance / Outcome Measures

4.2 Barnet Council is responsible for ensuring that its business is conducted in accordance with the law and proper standards.

Sustainability

4.3 Not applicable.

Corporate Parenting

4.4 No implications identified in the context of the report.

Risk Management

4.5 It is important that the Council discharges its duty to: promote and maintain high standards of conduct for Members; review the application of the Code of Conduct for Members' to Member complaints; and maintain an overview on ethical standards in general across the authority.

Insight

4.6 Not applicable

Social Value

4.7 Not applicable.

5. Resource Implications (Finance and Value for Money, Procurement, Staffing, IT and Property)

5.1 None, the complaints and training are resourced within the existing budget.

6. Legal Implications and Constitution References

6.1 Members' Code of Conduct – Procedure for dealing with Complaints, Section 4 D 1 paragraph 9.1 of the constitution – reads: "The Monitoring Officer will submit a report to the GARMS Committee at annual intervals to inform the Committee about complaints which have been received during the year."

6.1 The Council's arrangements under which complaints about Member conduct are investigated and decided comply with the relevant provisions of the Localism Act 2011. All complaints are dealt with in consultation with one of the council's Independent Persons that the council has to appoint under the Localism Act.

7. Consultation
7.1 When dealing with complaints the Monitoring Officer consults the Member complained about and the Independent Person.
8. Equalities and Diversity
8.1 It is a breach of the Member Code of Conduct to discriminate against people on the grounds of any of the protected characteristics in the Equality Act. Members have been provided with training in this area.
9. Background Papers
9.1 None.

London Borough of Barnet

Governance, Audit, Risk Management and Standards Committee (GARMS) -

01/10/23 - 31/05/24

Forward Work Programme

Unless otherwise shown meetings take place at:

Hendon Town Hall

The Burroughs

London NW4 4BQ

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AGENDA ITEM 14

Subject	Decision requested
16 October 2023	
Q1 2023-24 Corporate Risk Register	To note the Risk Management update for Q1 2023-24.
Local Government & Social Care Ombudsman (LGSCO) and Housing Ombudsman Summary of Upheld Complaints report 2022/23	Summary of the upheld complaints determined by the LGSCO and Housing Ombudsman during 2022/23.
Code of Conduct Allegations 2022/23	Report on complaints regarding Members that the Monitoring Officer has received about Member conduct during 2022/23.
Governance Review Project Closedown	Project closure report.
Status of the 2020/21 Audit and Plans for 2021/22 and 2022/23 Audit Delivery	To note progress on the audit of the Council's 2020/21, 2021/22 and 2022/23 accounts.
Internal Audit Exception Recommendations and Progress Report Q2 1st July - 30th September 2023	

Subject	Decision requested
27 November 2023	
Corporate Anti-Fraud Team (CAFT) Progress Report Q2 1st April - 30th September 2023	
Q2 2023-24 Corporate Risk Register	
18 January 2024	
Internal Audit Exception, Recommendations and Progress Report Q3, 1st October - 31st December 2023	
Grants Certification Work Report 2021/22	
Annual Audit Letter 2021/22	
External Audit Plan 2022/23	
SIRO Report	

Subject	Decision requested
15 April 2024	
Q3 2023-24 Corporate Risk Register	
Member Development Programme	
Annual Governance Statement and Code of Corporate Governance	
Internal Audit Exception, Recommendations and Progress Report Q4, 1st January - 31st March 2024	
Internal Audit & Anti-Fraud Strategy and Annual Plan 2024-25	
Counter-Fraud Framework	
1 July 2024	
Q4 2023-24 Corporate Risk Register	

Subject	Decision requested
Corporate Anti-Fraud Team (CAFT) Annual Report 2023-24	
Items to be allocated	
Risk Management Framework	

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