Public Document Pack

Audit and Standards Committee

Thursday 17 November 2022 at 5.00 pm

Town Hall, Sheffield, S1 2HH

The Press and Public are Welcome to Attend

Membership

Councillors Co<mark>lin Ro</mark>ss (Chair), Ben Curran (Deputy Chair), An<mark>gela A</mark>rgenzio, Simon Clement-Jones, Tom Hunt, Kevin Oxley and Garry Weatherall.

Independent Co-opted Members

Alison Howard.



PUBLIC ACCESS TO THE MEETING

The Audit and Standards Committee oversees and assesses the Council's risk management, control and corporate governance arrangements and advises the Council on the adequacy and effectiveness of these arrangements. The Committee has delegated powers to approve the Council's Statement of Accounts and consider the Annual Letter from the External Auditor.

The Committee is also responsible for promoting high standards of conduct by Councillors and co-opted members.

A copy of the agenda and reports is available on the Council's website at http://democracy.sheffield.gov.uk. You can also see the reports to be discussed at the meeting if you call at the First Point Reception, Town Hall, Pinstone Street entrance. The Reception is open between 9.00 am and 5.00 pm, Monday to Thursday and between 9.00 am and 4.45 pm. on Friday. You may not be allowed to see some reports because they contain confidential information.

Recording is allowed at meetings of the Committee under the direction of the Chair of the meeting. Please see the website or contact Democratic Services for details of the Council's protocol on audio/visual recording and photography at council meetings.

If you require any further information please contact Sarah Cottam in Democratic Services on 0114 273 5033 or email sarah.cottam@sheffield.gov.uk.

FACILITIES

There are public toilets available, with wheelchair access, on the ground floor of the Town Hall. Induction loop facilities are available in meeting rooms.

Access for people with mobility difficulties can be obtained through the ramp on the side to the main Town Hall entrance.

AUDIT AND STANDARDS COMMITTEE AGENDA 17 NOVEMBER 2022

Order of Business

1.	Welcome and	Housekeeping	Arrangements

2. Apologies for Absence

3. Exclusion of the Press and Public

To identify items where resolutions may be moved to exclude the press and public.

4. Declarations of Interest

(Pages 5 - 8)

Members to declare any interests they have in the business to be considered at the meeting.

5. Minutes of Previous Meeting

(Pages 9 - 16)

To approve the minutes of the meeting of the Committee held on 22 September 2022

6. Annual Corporate Complaints Report & Annual Ombudsman Report 2021/22

(Pages 17 - 72)

Report of the Director of HR and Customer Services / Monitoring Officer

7. Work Programme

(Pages 73 - 82)

Report of the Interim Director of Legal and Governance.

8. Dates of Future Meetings

To note that the next meeting of the Committee will be held at 5.00 p.m. on:-

22 December 2022



ADVICE TO MEMBERS ON DECLARING INTERESTS AT MEETINGS

If you are present at a meeting of the Council, of its Policy Committees, or of any committee, sub-committee, joint committee, or joint sub-committee of the authority, and you have a **Disclosable Pecuniary Interest** (DPI) relating to any business that will be considered at the meeting, you must not:

- participate in any discussion of the business at the meeting, or if you become aware of your Disclosable Pecuniary Interest during the meeting, participate further in any discussion of the business, or
- participate in any vote or further vote taken on the matter at the meeting.

These prohibitions apply to any form of participation, including speaking as a member of the public.

You must:

- leave the room (in accordance with the Members' Code of Conduct)
- make a verbal declaration of the existence and nature of any DPI at any
 meeting at which you are present at which an item of business which affects or
 relates to the subject matter of that interest is under consideration, at or before
 the consideration of the item of business or as soon as the interest becomes
 apparent.
- declare it to the meeting and notify the Council's Monitoring Officer within 28 days, if the DPI is not already registered.

If you have any of the following pecuniary interests, they are your **disclosable pecuniary interests** under the new national rules. You have a pecuniary interest if you, or your spouse or civil partner, have a pecuniary interest.

- Any employment, office, trade, profession or vocation carried on for profit or gain, which you, or your spouse or civil partner undertakes.
- Any payment or provision of any other financial benefit (other than from your council or authority) made or provided within the relevant period* in respect of any expenses incurred by you in carrying out duties as a member, or towards your election expenses. This includes any payment or financial benefit from a trade union within the meaning of the Trade Union and Labour Relations (Consolidation) Act 1992.

*The relevant period is the 12 months ending on the day when you tell the Monitoring Officer about your disclosable pecuniary interests.

- Any contract which is made between you, or your spouse or your civil partner (or a body in which you, or your spouse or your civil partner, has a beneficial interest) and your council or authority –
 - under which goods or services are to be provided or works are to be executed; and
 - which has not been fully discharged.

- Any beneficial interest in land which you, or your spouse or your civil partner, have and which is within the area of your council or authority.
- Any licence (alone or jointly with others) which you, or your spouse or your civil
 partner, holds to occupy land in the area of your council or authority for a month
 or longer.
- Any tenancy where (to your knowledge)
 - the landlord is your council or authority; and
 - the tenant is a body in which you, or your spouse or your civil partner, has a beneficial interest.
- Any beneficial interest which you, or your spouse or your civil partner has in securities of a body where -
 - (a) that body (to your knowledge) has a place of business or land in the area of your council or authority; and
 - (b) either -
 - the total nominal value of the securities exceeds £25,000 or one hundredth of the total issued share capital of that body; or
 - if the share capital of that body is of more than one class, the total nominal value of the shares of any one class in which you, or your spouse or your civil partner, has a beneficial interest exceeds one hundredth of the total issued share capital of that class.

If you attend a meeting at which any item of business is to be considered and you are aware that you have a **personal interest** in the matter which does not amount to a DPI, you must make verbal declaration of the existence and nature of that interest at or before the consideration of the item of business or as soon as the interest becomes apparent. You should leave the room if your continued presence is incompatible with the 7 Principles of Public Life (selflessness; integrity; objectivity; accountability; openness; honesty; and leadership).

You have a personal interest where -

- a decision in relation to that business might reasonably be regarded as affecting
 the well-being or financial standing (including interests in land and easements
 over land) of you or a member of your family or a person or an organisation with
 whom you have a close association to a greater extent than it would affect the
 majority of the Council Tax payers, ratepayers or inhabitants of the ward or
 electoral area for which you have been elected or otherwise of the Authority's
 administrative area, or
- it relates to or is likely to affect any of the interests that are defined as DPIs but are in respect of a member of your family (other than a partner) or a person with whom you have a close association.

Guidance on declarations of interest, incorporating regulations published by the Government in relation to Disclosable Pecuniary Interests, has been circulated to you previously.

You should identify any potential interest you may have relating to business to be considered at the meeting. This will help you and anyone that you ask for advice to fully consider all the circumstances before deciding what action you should take.

In certain circumstances the Council may grant a **dispensation** to permit a Member to take part in the business of the Authority even if the member has a Disclosable Pecuniary Interest relating to that business.

To obtain a dispensation, you must write to the Monitoring Officer at least 48 hours before the meeting in question, explaining why a dispensation is sought and desirable, and specifying the period of time for which it is sought. The Monitoring Officer may consult with the Independent Person or the Council's Standards Committee in relation to a request for dispensation.

Further advice can be obtained from David Hollis, Interim Director of Legal and Governance by emailing david.hollis@sheffield.gov.uk.

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SHEFFIELD CITY COUNCIL

Audit and Standards Committee

Meeting held 22 September 2022

PRESENT: Councillors Colin Ross (Chair), Angela Argenzio, Simon Clement-Jones,

Tom Hunt, Kevin Oxley and Alison Howard (Independent Co-opted

Member)

1. APOLOGIES FOR ABSENCE

1.1 Apologies for absence were received from Councillors Ben Curran and Garry Weatherall.

2. EXCLUSION OF THE PRESS AND PUBLIC

2.1 No items were identified where resolutions may be moved to exclude the press and public.

3. DECLARATIONS OF INTEREST

3.1 There were no declarations of interest made at the meeting.

4. MINUTES OF PREVIOUS MEETING

4.1 RESOLVED: That the minutes of the meetings held on 28 July 2022 were agreed as an accurate record, subject to a typographical error at 5.3 of the minutes.

5. EXTERNAL AUDIT PLAN 2021/22

- 5.1 Hayley Clark (Partner), and Dan Spiller (Senior Manager), Ernst & Young LLP attended the meeting to present the report to the Committee.
- 5.2 Hayley Clark explained that the report set out the Council's Audit risks and areas of focus, in which the risks identified had not seen much progress.
- 5.3 The Committee were informed that the materiality for 2021/22 were set at £28.7m. That represented 1.8% of the Council's 2021/22 Draft Accounts' gross expenditure on provision of services.
- Hayley Clark referred to page 32 of the report which outlined Ernst & Young's timetable of communication and deliverables.

- Dan Spiller referred to page 5 of the report which set the Council's Audit risks. It was explained that a new risk had been identified which was the Valuation of Highways Infrastructure Assets. Although, this risk had emerged nationally therefore impacted many authorities. The Committee were informed that further details on that risk were set out on page 14 of the report.
- 5.6 Dan Spiller explained there was 3 areas that could potentially cause significant impact in relation to Value for Money and they were identified on page 22 of the report.
- 5.7 Members of the Committee asked questions and the following responses were provided: -
- 5.8 Hayley Clark explained that Ernst & Young's audit had already started and would continue over the coming months. Those audit results would be reported at the Audit and Standards Committee meeting in January 2023. It was added that the Value for Money commentary would be reported at the March 2023 Committee meeting. Hayley Clark mentioned that if anything of significant impact needed to be reported earlier than scheduled, then they would bring those findings to an earlier Committee meeting.
- Hayley Clark explained that due to the change in Code of Audit Practice in 2020, Ernst & Young do have a responsibility to monitor the Council's current financial position. It was added that Ernst & Young also had regular meetings with the Director of Finance and Commercial Services, in which they received regular updates.
- The Director of Finance and Commercial Services, Ryan Keyworth asked that Ernst & Young raised any significant issues with the Committee, prior to the Committee signing of the Council's 2023/24 Budget in March 2023.
- 5.11 Hayley Clark explained that the new risk identified around Valuation of Highways Infrastructure Assets was a complex technical issue. She explained that it mainly came down to the valuation of assets on the balance sheet and there were ongoing consultations to identify a way forward at a national level. These were still underway and Ernst and Young would continue to liaise with management on this risk, and take action to assess the extent to which the issue impacts on the Council.
- 5.12 RESOLVED: That the Audit & Standards Committee noted the External Audit Plan 2021/22.

6. ANNUAL INTERNAL AUDIT REPORT

- 6.1 The Committee received a report of the Senior Finance Manager, Internal Audit which highlighted the work that had been undertaken by Internal Audit during the year. The report also supported the Council's Annual Governance Statement.
- The Senior Finance Manager, Internal Audit, Linda Hunter stated that she was satisfied that the risk management, governance, and internal control framework were adequate to allow the Council the conduct its business appropriately.
- 6.3 It was stated that page 19 of the report outlined the Council's professional requirements. It was added that Appendix A to the report was an Internal Audit Charter, and Appendix B was an Internal Audit Quality Assurance and Improvement Programme.
- 6.4 It was mentioned that Internal Audit reports are then given an overall opinion as to the likelihood of the service/system under review being able to meet its objectives. Those opinions were set out on page 25 of the report. The Committee were informed that there was 0 no assurance reports, 12 Limited assurance reports, 15 Moderate assurance reports and 8 Substantial assurance reports.
- 6.5 Performance targets figures were outlined on page 27 of the report. It was mentioned that 4 out of 5 performance targets were met.
- 6.6 Members of the Committee asked questions and the following responses were provided: -
- The Senior Finance Manager, Internal Audit explained that the Internal Audit Section had been working virtually from home for the entirety of the year being reported upon. This position was currently changing with a hybrid approach being adopted. Staff were expected to spend 40% of their working week carrying out office-based working.
- The Senior Finance Manager, Internal Audit stated that the 12 Limited assurance reports, mentioned on page 25, would be added to the recommendation tracker, which will be presented to the Committee at a future meeting. These will also be reported to the Performance Delivery Board, to determine whether service officers need additional support.
- 6.9 The Senior Finance Manager, Internal Audit confirmed the hybrid style of working for Internal Audit staff had not caused any significant impact of being able to carry out duties. It was mentioned that the staff still had access to all the required equipment and systems. The service had also noticed less cancelations occurring, since moving their audit meetings onto Microsoft Teams.
- 6.10 RESOLVED: That the Audit & Standards Committee noted the

content of the report and the opinion of the Senior Finance Manager.

7. FORMAL RESPONSE TO AUDIT (ISA 260) RECOMMENDATIONS

- 7.1 The Committee received a report of the Director of Finance and Commercial Services, Ryan Keyworth. The report provided Members with an update on progress to consider and implement Ernst & Young's prior year recommendations, following the audit of the Council's 2019/20 and 2020/21 Statement of Accounts.
- 7.2 Ruth Matheson (Finance Manager) explained that each year Ernst & Young (EY) carry out an annual audit of the Council's statement of accounts and make recommendations (observations) in their Audit Results (ISA 260) report that is reported to Members of the Audit and Standards Committee. Such recommendations were for officers to implement within EY's suggested timeframes, which EY monitor and regularly update the Committee on the Council's progress. Ernst & Young presented their 2020/21 Audit Results report to the Audit and Standards Committee on 20 January 2022, which was finalised and reissued alongside EY's opinion on 1 March 2022. The Audit Results report listed fifteen open observations, both from 2019/20 and 2020/21. The nine open observations relating to 2019/20 remained open at the end of the 2020/21 audit, as EY had reported these at the end of the 2020/21 financial year and acknowledged that officers had little opportunity within the timescales to take action on the recommendations in time for EY to report in 2020/21. It was added that the observations were outlined at Appendix 1 of the report.
- 7.3 Ruth Matheson outlined the observations for 2019/20 and 2020/21 that had the most significant impact on the Council's accounts. These were as follows: -

2019/20

- Property Plant and Equipment
- School Balances
- Expenditure/payables cut off 2020/21
- Debtors
- IFRS 16
- Investment Properties
- Members of Interests
- Quality Assurance
- Leases

Further information was outlined from pages 53 to 62 of the report.

- 7.4 Members of the Committee asked questions and the following responses were provided: -
- 7.5 The Director of Legal and Governance, Gillian Duckworth explained

that Members were asked to complete a Declaration of Interests form immediately after being elected. Members should also receive an annual notification, reminding them to review their form. It was added that it was the Members responsibility to inform Officers of any changes throughout the year.

- 7.6 Ruth Matheson explained that some of the recommendations mentioned may re-occur. EY might also make further recommendations to those outlined to keep improving. Ruth Matheson did not believe there was any recommendation outlined that that was of significant weakness, each recommendation was believed to have appropriate measures in place.
- 7.7 Hayley Clark stated that she was assured that the majority of the 15 recommendations outlined would be closed off immediately. She added that there was always the chance of additional recommendations being identified.
- 7.8 The Director of Finance and Commercial Services confirmed that planning had begun for how to deal with the terminations of school PFI contracts.
- 7.9 RESOLVED: That the Audit and Standards Committee noted management's response on progress made to Ernst & Young's prior year recommendations.

8. INTERIM STANDARDS COMPLAINTS REPORT

- 8.1 The Committee received a report of the Director of Legal and Governance, Gillian Duckworth which explained the current position of standards complaints against elected Members, Co-Opted Members and Town/Parish Councillors.
- 8.2 The Director of Legal & Governance mentioned that the Audit & Standards Committee asked for this interim report, earlier in the year when the annual report was being presented.
- 8.3 The report also referred to the new appointments of independent persons (IP). It was added that 3.8 of the report mentioned that the panel who appointed the IP's were of the opinion that it may be beneficial to appoint additional IPs, to ensure the continuation of an independent voice and to increase diversity.
- The Committee were informed that 3.10 of the report highlighted the complaint outcomes for complaints made within January to July 2022.
- 8.5 A Member of the Committee asked a question, and the following response were provided: -

- 8.6 The Director of Legal and Governance confirmed the 2 outstanding complaints had been passed on to the Assistant Director Legal and Governance as she was leaving the Council on the 23 September 2022.
- 8.7 RESOLVED: That the Audit & Standards Committee (1) commented on the interim standards complaints update; and (2) noted the report.

9. ANNUAL GOVERNANCE STATEMENT

- 9.1 The Committee received a revised version of a report by the Director of Legal and Governance, prior to the meeting.
- 9.2 The Director of Legal and Governance explained that the Council was required to conduct at least annually, a review of the effectiveness of its Governance Framework and System of Internal Control. This report also formed part of the Statement of Accounts, which will be presented to the Committee at a future meeting.
- 9.3 It was mentioned that the report set out the Council's Governance Framework and how it operated. It then highlighted how the Council had reviewed it effectiveness. It was mentioned that following the review, nothing of significant impact was identified, that needed to be included in the Council's Statement of Accounts.
- 9.4 The report also referred to the recent changes in Governance arrangements from May 2022 although related to Governance throughout 2021/22.
- 9.5 It was mentioned that the Audit & Standards Committee received an email, which highlighted the completion percentages of mandatory learning at the Council. It was added that the overall percentage was approximately 42% therefore this issue needed to be addressed. The Performance and Delivery Board was looking into this.
- 9.6 The Committee were informed that Council employees will have to apply automated retention labels and retention policies to documents, this means that records will be automatically deleted at their specified time. This has the benefit of ensuring compliance with data requests and supporting staff with correctly disposing of data at the relevant time.
- 9.7 Members of the Committee asked questions and the following responses were provided: -
- 9.8 A Member of the Committee raised concerns around the low percentage figure for staff completing mandatory training.

- 9.9 The Senior Finance Manager, Internal Audit stated that maintained schools were provided with templates for example, Schools Finance Policy and have code of conduct, in addition to teachers having professional standards.
- 9.10 A Member of the Committee supported the reports statement that Performance and Delivery Board should monitor the issues outlined in the report. Although he suggested that a report came to the Committee in spring of 2023, to assure the Committee that progress were being made.
- 9.11 The Director of Legal of Governance explained that the Council had a requirement for regulatory compliance in regard to Freedom of Information and Subject Access Requests and that the information commissioner's office were the Council's regulator for that. This meant that the Council were liable to fines and civil claims, which was why not processing data requests were part of the Delivery Plan.
- 9.12 RESOLVED: The Council is required to produce and have signed off, as part of its annual accounts, an Annual Governance Statement. The statement is intended to identify any significant control weaknesses and also to set out how the council intends to address any weaknesses identified.

To note the contents of the Statement and that this has been signed by the Council Leader, Chief Executive and the Director of Finance and Commercial Services and that the statement forms part of the Annual Accounts.

10. WORK PROGRAMME

- 10.1 The Committee considered a report of the Director of Legal and Governance that outlined the work programme for the remainder of the municipal year. Members were asked to identify any further items for inclusion.
- The Committee agreed to cancel the next meeting of the Committee, on the 20 October 2022, as there were no items for consideration. In replace of this meeting, a closed meeting with Members of the Committee and External Auditors would be held online.
- The Committee agreed to include a report on the work programme, as mentioned at 9.10 of these minutes.
- The Committee agreed to move the following reports from the 17 November 2022 meeting, to the January 2023 meeting.
 - Statement of Accounts (Audited)
 - Report of those Charged with Governance (ISA 260)

10.5 **RESOLVED:** - That **(1)** the work programme be noted; **(2)** that a closed meeting be held online, for Members of the Committee and external auditors; **(3)** that a report be included on the work programme for March 2023; and **(4)** that 2 reports be moved from November 2022 to January 2023.

11. DATES OF FUTURE MEETINGS

- 11.1 It was noted that the next meeting of the Committee would be held on 17 November 2022.
- The Chair of the Committee (Councillor Colin Ross) thanked the Director of Legal and Governance for her support to the Committee throughout her time at Sheffield City Council and wished her well in her new role.



Category of Report:

OPEN

Audit & Standards Committee Report

Report of:	Mark Bennett, Director of HR and Customer Services/ Da Monitoring Officer	ivid Hollis,
Date:	November 2022	
Subject:	Annual Corporate Complaints & Annual Ombudsman Re	ports 2021/22
Author of Report:	Paul Taylor, Head of Customer Services	
Summary:		
and formally referred a Ombudsman, Parliame	n overview of the annual corporate and ombudsman compland determined by the three Ombudsmen (Local Governme entary & Health Service Ombudsman and Housing Ombudsn April 2021 to 31 March 2022	ent & Social Care
The report also identifi management.	ies future developments and areas for improvement in com	plaint
	ented by the Monitoring Officer and the Director of HR and Custoing the Complaints Service.	omer Services who
Recommendations:		
Annual Ombudsman Re	Committee is asked to consider the Annual Corporate Comeport, in order to provide its view on the performance of coin Sheffield City Council.	•
Background Papers:		
LGSCO Annual Letter 202	21/22	
HO Annual Report 2021/2	'22	



Annual Complaints Report 2021 - 2022

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1. Introduction

All councils need to provide complaint procedures to respond to citizens' concerns in an open and transparent way within defined timescales and in accordance with legislation.

The purpose of this report is to outline the complaints and compliments that the Council received in the period 1 April 2021 – 31 March 2022, highlighting key themes and longer-term trends.

- 1.1 The report also explains how the Council has performed against the required standards.
- 1.2 Sheffield City Council welcomes complaints as an opportunity to maintain high quality performance and a gateway to consistently review and improve the quality of service offered to citizens. A complaint as 'any expression of dissatisfaction whether justified or not' this definition is deliberately wide to ensure that complaints are recognised easily and can be addressed effectively and timely.
- 1.3 Sheffield City Council has two-stage approach when dealing with complaints under the corporate complaint's procedure. (See Appendix 1 Corporate Complaints Procedure). At all stages of the complaints process we advise complainants of who to contact if they are not satisfied with the outcome or the way in which it was handled. There are separate specific statutory procedures for handling Children's Social Care and Adult Social Care complaints. The annual statutory reports for these will be shortly made available.
- 1.4 The data in this report includes complaints considered at the Investigation and Investigation Review stages. Complaints resolved via problem solving have been recorded from November 2021. For consistency in reporting, this measure will be included in the 2022/23 annual report only.
- 1.5 In the reporting year 2021/22, Sheffield City Council had three main Portfolio service delivery areas. These are: Resources (including Policy Performance and Communication), People and Place. In addition, Sheffield City Council's strategic partners include Amey (Streets Ahead roads/pavements); Veolia (Waste Management). See Section 4.
- 1.6 Sheffield City Council's Customer Services Feedback & Complaints Team is responsible for the development and implementation of policy and procedures on complaints. In addition, this team acts as the Council's liaison point with the Local Government & Social Care Ombudsman (LGSCO), Housing Ombudsman (HO) and Parliamentary & Health Service Ombudsman (PHSO). The Annual Ombudsman complaints enquiries and investigations report is available here: Complaints Data Mill North

See Also Appendix 2 for Annual Ombudsman Report, LGSCO Annual Letter (Appendix C) and Housing Ombudsman Annual Report (Appendix D).

2. Headlines

22% increase in total number of complaints received from previous year (Includes Amey and Veolia)

2020/21: 2014 Complaints



2021/22: 2463 Complaints

Sheffield City Council's 2 strategic partners accounted for 57% of the total complaints received (Amey 45%, Veolia 12%) All other Council Service Complaints total 43% — see Table 3.1

The following information excludes Amey and Veoila data:

The top 3 Council Services receiving the highest number of complaints are: Resources 'other' (8%), Children's social care (6%), and Council Housing Repairs (5%) see Table 4.1

46% of complaints were responded to within 28 calendar days

(Excludes adults and children's social care statutory complaints) - see Table 8.1

The average escalation rate is 27% in 2021/22, this is an increase on the two previous years.

The average escalation rate for 2020/21 was 21% and 2019/20 was 22% - see Table 11.1

The most **frequent reason** for complaints was **Quality of Service*** and accounts for 21% of all complaint categorisations (276 of 1289)

(See Appendix 1 for definitions) * - see Table 5.1

In addition to offering citizens an apology (138), **the top 3 remedies and service improvements were**: Take action or enforce a decision (64); Change Service Provider (37) and Change, Review or Provide a Service (28) – see Table 10.1

The LGSCO upheld 15 complaints out of 20 complaints (75% of complaints investigated by the LGSCO were upheld) and the HO upheld 2 complaints

See Ombudsman's Reports in Appendix 2

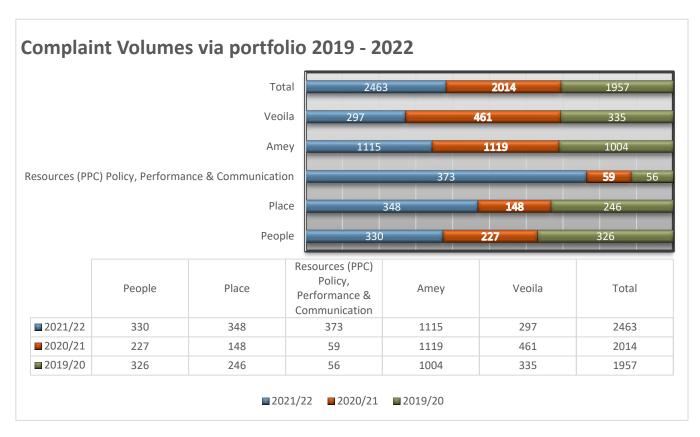
The LGSCO has reported that 114 complaints/enquiries were received about the Council during 2021/22, compared with 95 in 2020/21 and 143 in 2019/20.

The Housing Ombudsman's report is based on 38,877 homes for which Sheffield acts as Landlord.

See Ombudsman's Reports Report in Appendix 2

3 Volumes of Complaints by Portfolio Area

3.1 The table below shows the comparison of complaint volumes for the years 2019-2022:



- There is an overall 22% (449) increase in the number of complaints received than in the previous year. Three out of the five service areas have shown an increase in complaints.
- The overall increase in complaints is likely due to the implementation of a new Complaints
 Case Management Recording System, which encouraged more accurate recording of
 feedback and complaints. This included council wide recording of complaints resolved at the
 first point of contact via problem solving. Other factors included the transition from the Covid19 pandemic and media events which focused on the conduct of Sheffield City Council's Chief
 Executive.

3.2 People Portfolio Increase:

People Portfolio accounted for 13% (330 of 2463) of the complaints recorded and an increase noted across all 3 areas: Adult Health & Social Care, Children & Families and Wider people-(People Portfolio excluding the three former service areas) which includes SEN (Special Education Needs Services). The higher volumes are noted in Wider People / SEN.

2.3 Place Portfolio:

Place Portfolio accounted for 14% (348 of 2463) of the complaints recorded. The increase for this area is due to the increased number of complaints referred to the Repairs and Maintenance Service. This was expected, as in in line with government guidelines during the Covid-19 pandemic, service delivery was restricted. Only urgent and emergency repairs were prioritised. This resulted in higher demand for the service during the 2021/22, as a backlog of repairs required completion.

3.4 Resources Portfolio including (PCC) Policy, Performance & Communication

The Resources Portfolio accounted for 15% of the complaints recorded. Revenue and Benefits Team (Finance) resumed debt recovery following the national lockdown which resulted in higher complaint volumes being recorded than in the previous year.

This area also had a total of 174 complaints assigned due to the Chief Executive enquiry.

Customer Services also experienced a higher volume of complaints, linked to the post pandemic increase in demand for Council Services, which led to higher call volumes received and increased response times to these calls.

4 Volumes of New Complaints by Key Service Areas

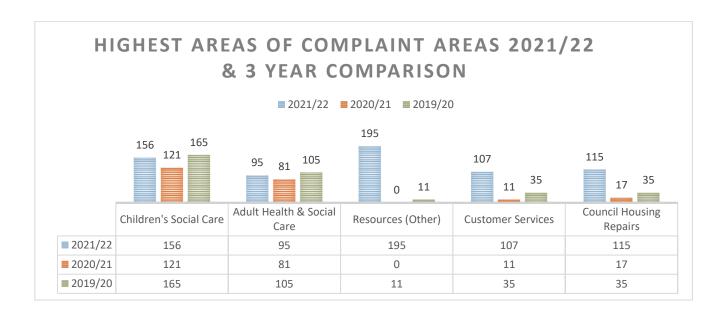
4.1 The table below shows a more detailed breakdown of complaints received by the key service areas within each portfolio group.

Note -The complaint numbers recorded below are those considered at the 'Investigation Stage' of Sheffield City Councils complaints procedure. Dissatisfaction at the 'Problem Solving' stage is not captured within this report.

Portfolio	Service Area	2019/20	2020/21	2021/22
	Social Care – Adults	105	81	95
People	Social Care – Children	165	121	156
	People – Other	56	25	79
	People Total	326	227	330
	Council Housing incl. Housing & Neighbourhood Services	119	45	95
	Council Housing Repairs	35	17	115
Place	Environmental Services	6	1	9
	Waste Management Client Team	39	15	5
	Culture & Environment	6	6	20
	City Growth	30	53	28
	Traffic & Parking	9	4	15
	Transport & Facilities Management	2	4	5
	Place – Other	0	3	56
	Place Total	246	148	348
	Customer Services	35	11	107
	Legal	1	3	1
Resources, including Policy Performance and Communication (PPC)	Finance & Commercial	9	0	70
(Revenues and Benefits previously recorded under Capita)	Benefits		42	
	Revenues		3	
	Other	11	0	195
	Resources & PPC Total	56	59	373
Total Complaints Excluding Strategic Partners		628	434	1051
Amey	Streets Ahead	1004	1119	1115
Capita	Benefits	76		
(Moved to Resources 2020)	Revenues	25		
	Capita Total	101		
Veolia	Waste Management	335	461	297
Strategic Partner		1440	1580	1412
Complaint Total				
Overall Total		2068	2014	2463

Strategic Partner Complaints (Amey and Veoila) account for 57% (1412) of the total number of complaints. This compares with 78% in the previous year. Overall, there has been a 21% **decrease** in complaints in this area.

- **Veolia** (SCC Waste Management Service) complaints **decreased** in volume by 164. The increase in the previous year was due to the introduction of charges for providing new and replacement black bins.
- Amey (Streets Ahead) total number of complaints had a minimal increase of 4 complaints
 (1115 to 1119). Streets Ahead are working closely with Sheffield City Council to review and
 analyse the complaints information to understand any learnings on the volume of
 complaints received. To put these figures into context, Streets Ahead received a total of
 39,320 enquiries, service requests and information requests during 2021/22. Complaints
 made up 2.9% of the work Amey /Streets Ahead completed as part of the contract they hold
 with Sheffield City Council.
- **4.2** The graph below shows the council service areas where the highest volumes of complaints were recorded during 2021/22 and comparison over the past 3 years 2019 2022 (This excludes strategic partner data Amey & Veoila):



Children's Social Care recorded the highest complaint category as 'Quality of Service'

Adult Social Care recorded the highest complaint category as 'Quality of Service'

Resources(including Customer Services) recorded the highest category of complaint as 'Delay'
**220 complaints were recorded against this area without a category for complaint – this has been identified from the new management
recording system and work is underway to address this issue.**

Council Housing Repairs recorded the highest complaint category as 'Delay'

5.0 Complaint Categorisation

It is important that we understand what our citizens complain about, so Sheffield City Council use generic categorisations across all complaint areas to understand these themes.

*Note – a number of complaint reasons may be recorded against each complaint

5.1 The chart below shows the 6 main reasons for complaints (see **Appendix 1** for definitions).

'Quality of Service' is the highest reason for complaints received in the reporting year 2021/22.



Improvements is required in communication and personal contact with complainants. Responding managers to ensure regular and timely updates.

This is being embedded as part of the culture change associated with the Complaints Transformation Project.

Improvement in complaint case management recording and accuracy is required. The Feedback & Complaints Team are supporting Case Coordinators and Responding Managers to make these improvements.

6.0 Accessibility /Equality Monitoring Information

In 2021/22, little demographic information (including protected characteristics data, such as gender, ethnicity, age etc) was captured as part of our complaints handling process. However an Equalities Action Plan has been completed for the period 2021-2023 and is included in Appendix 3.

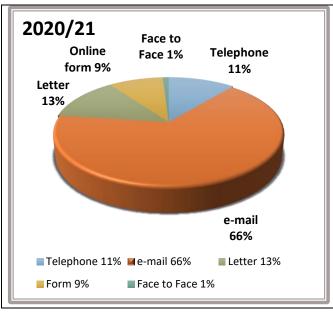
The recorded equality data is limited and requires further development to ensure that Sheffield City Council can demonstrate that it provides fair and accessible services for all.

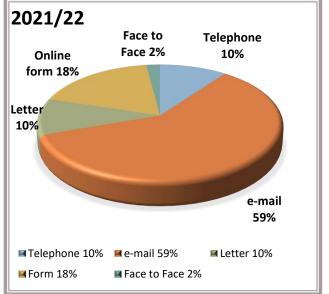
See Appendix 3

7. How People Contact Us

It is our intention that people should be able to make a complaint in any way they choose, including through our website, by email, by telephone, in writing or in person.

7.1 The table below shows how citizens have interacted with us during 2021/22 to notify us they were dissatisfied and a comparison with 2020/21:





The information demonstrates the highest access channel for complaints is via e-mail although this has decreased by 7% in comparison to 2020/21. The second highest access channel is by online form which has doubled in usage from 9% to 18%. Letter and phone contact have both decreased. (This information does not include problem solving data).

Further development is required to improve the digital offer for citizens when making a complaint.

Accessibility for non-digital citizens should also be considered.

7.2 The table below shows contact via service:

Portfolio / Service Area	ACCESS CHANNELS				
(2021/22 Complaints)	Email	Face-Face	Form	Letter	Telephone
Adult Social Care (Statutory)	34	1	3	10	2
Adult Social Care (Corporate)	7	0	3	1	2
Children and Families (Statutory Stage 1)	29	0	18	4	5
Children and Families (Corporate)	16	0	12	6	3
Wider People	38	0	0	2	2
Resources inc. PPC	41	0	4	2	3
Place	31	0	7	2	0
Council Housing	14	2	13	9	16
Repairs	14	5	9	4	7
Total	224	8	69	40	40

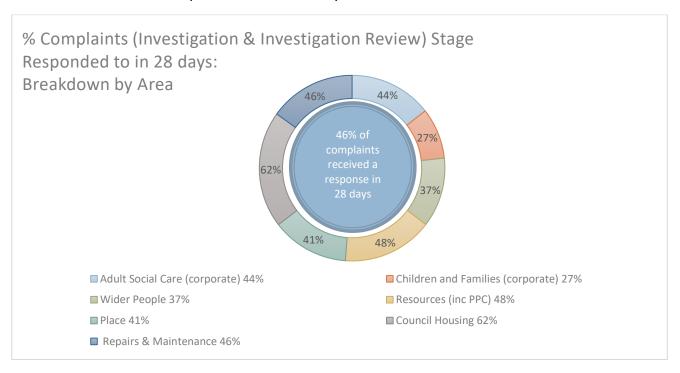
^{**}Data is only available for the period 1st April 2021 – 31st October 2021, due to the system change **

^{**}Data showing for 2021/22 only reflects the first half of the reporting year 1st April 2021 – 31st Oct 2021 – this was due to a transfer in system **

8. Complaint Response Timescales

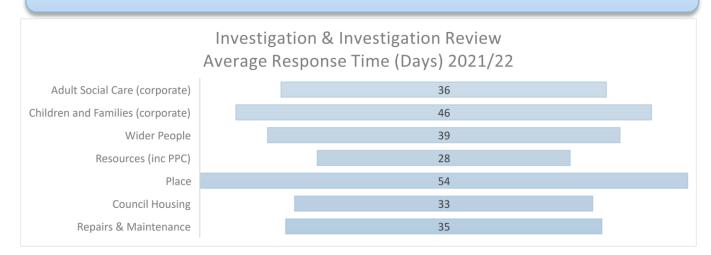
In line with the Corporate Complaints Procedure, Sheffield City Council aims to respond to complaints within 28 calendar days. {Note - There are different timescales for complaints which follow the statutory procedure - Adults & Children's social care - and so these are not included in the chart below}:

8.1 The chart below shows performance in the key service areas:



- 46% of complaints were responded to within 28 calendar days. This is a 4% decrease on the previous year. The increase in complaints received has likely affected this alongside the Covid-19 Pandemic; however more work needs to be done to improve timeliness of response.
- The overall average number of days for responding to complaints in 2021/22 was 39 days.
 Again, this was potentially due to the disruption to service during the Covid-19 pandemic and increase in complaints received.

Ongoing work required across all service areas to improve response times especially in complaints managed through the corporate procedure relating to children's social care and wider people.



^{*}The data above does not include complaints resolved within 3 days via problem solving *

9. Complaint Outcomes

Sheffield City Council measure the outcomes from complaint investigations/reviews against five main areas:

Service failure remedied (upheld). This is where the complaint has been found to be completely justified and the service has accepted errors were made or inappropriate action(s) were taken.

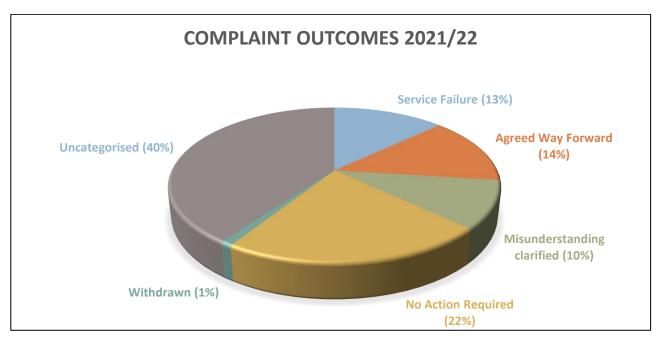
No action necessary (not upheld). This outcome is where the complaint has been found to be completely unjustified and the service is clear that there is no reasonable action which should be taken to improve any aspect of the matter complained about.

Agreed way forward (partially upheld). This is where some elements of the complaint are justified, yet others are not. It is also where, although no inappropriate actions or decisions have been made, the complainant's viewpoint is accepted and there are ways in which improved ways of working could be adopted either for the individual concerned or for all users of the service.

Misunderstanding clarified. This is where, although there have been no inappropriate actions or decisions, the basis of the complaint is found to be a lack of understanding and the complaint response focuses on explaining why certain actions were taken in a manner which is resolution focused. It is likely that improved communication earlier may have prevented the complaint.

Withdrawn. This is when the complainant decides not to pursue their complaint prior to them receiving an outcome. A complaint is not withdrawn if action has been taken to resolve the matter and a response has been made. A complaint is only withdrawn if the complainant did initially intend to make a complaint, then simply changes their mind.

In 2021/22 there were a total of 1176 complaint responses issued that resulted in one of the 6 following outcomes:



^{**}A number of outcomes have not been recorded – this is due to an input error which is being remediated**

Following the complaint response, where fault is found, Sheffield City Council recognise the need to apologise and ensure corrective action is taken to remediate the issue and make service improvements as required.

Where we identify service failure, we aim to put the complainant back into the position as if the problem had not occurred and our approach to remedies is consistent with the principles used by the Local Government Ombudsman.

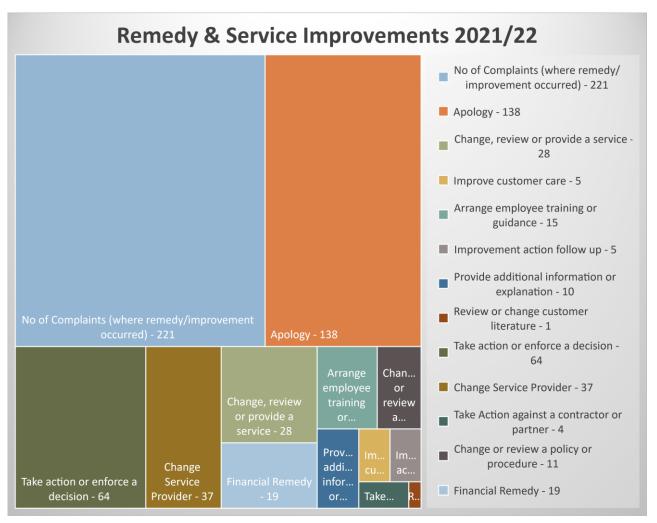
Service failure accounts for 13% (61) of complaints. (This does not include strategic partners)

Further development is required to review the above outcomes definitions to ensure these are unambiguous and more clearly demonstrates where there has been even partial service failure (currently included in the 'Agreed Way Forward' outcome)

10. Complaint Remedies and Service Improvements

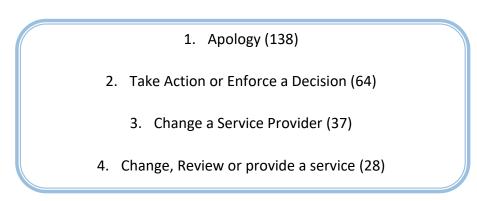
In 2021/22 Sheffield City Council recorded 337 remedies or service improvements in respect of 221 complaints. [Note - More than one remedy or service improvement can be recorded against a single complaint].

10.1 The chart below shows remedies and service improvements identified following investigation or review of a complaint:

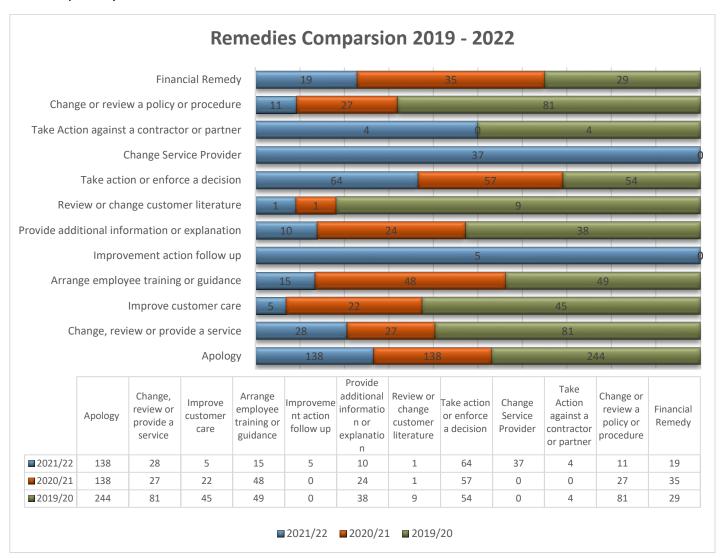


^{.*}This excludes Amey / Veolia data

Top 4 remedies and service improvements were:



10.2 The chart below shows a comparison of the same data (remedies and service improvements) over the past 3 years:



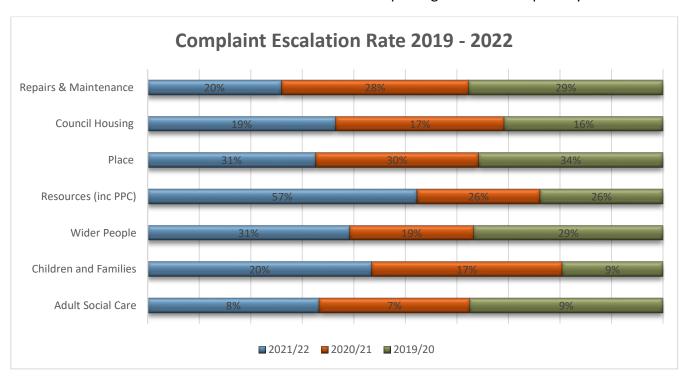
Improvements and Support to services is needed to identify learning and to demonstrate to citizens how learning has been implemented. Also, to ensure the recording of remedies is consistent across the organisation.

Improvement is still required in this area.

11. Complaint Escalations

An important measure of successful complaint handling is the escalation rate i.e. the percentage of complaints where an initial response is issued, and the complainant remains dissatisfied and requests escalation of the response. Lower escalation rates demonstrate improved customer satisfaction as it means complaints are dealt with as early as possible.

11.1 The chart below shows the escalation rates in each reporting area over the past 3 years:



- Resources had the highest escalation rate of 57% in 2021/22.
- Place & Wider People had the second highest number of escalations (31%) in 2021/22.
- Repairs & Maintenance & Children & Families had the third highest number of escalations (20%) in 2021/22.

The average escalation rate is 27% in the reporting year 2021/22, this is an increase on the two previous years. The average escalation rate for 2020/21 was 21% and 2019/20 was 22%.

12. Ombudsman Complaints

See Appendix 2

13. Quality Assurance of Complaint Responses

A Quality Assurance Framework is embedded within Sheffield City Council's Feedback and Complaint procedures to review the standards of complaint responses.

It places emphasis on customer focus (personal contact, empathy, positive tone, user friendly) and the complaint outcome (clear explanation of investigation findings, remedies and signposting).

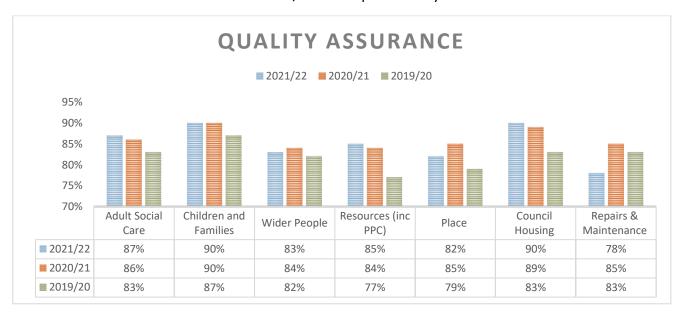
Customer Services Feedback and Complaints team, each quarter will take a sample of responses which are evaluated against the framework as follows:

- Identify areas of improvement and good practice
- Use the outcome of the evaluation to provide a platform for guidance and development on complaint handling

The corporate target for Quality Assurance is 80%. This target will be increased to 85% in 2022/23.

All areas have met or exceed the Quality Assurance Target for 2021/22 except for the Repair & Maintenance Service (78%) a decrease of 7% since the previous year.

The table below shows the results for 2021/22 vs the previous 3 years:



The Quality Assurance Framework requires review, and we propose that the benchmark is raised to 85% from 1st April 2022. All managers will continue to receive ongoing support and training to ensure quality responses. The Feedback & Complaints Team will continue to support services, highlighting responses which fall significantly below this target.

14. Summary of areas of Improvement as noted throughout this document:

We are collaborating with our strategic partners to provide more detailed analysis of high volumes of complaints

Improvements to communication with complainants must be addressed and support provided to responding managers to ensure regular and timely updates. This is an on-going development area.

Further improvements to customer satisfaction is required, especially in the area of quality of service delivery. Poor customer care is unacceptable, and Service Managers should collaborate with staff to ensure citizens are always treated with dignity and respect, and that we listen and learn from the feedback they provide, showing empathy and professionalism when communicating with them.

Equality data is limited and requires further development to ensure that Sheffield City Council can demonstrate that it provides fair and accessible services for all. From August 2022 we started to capture this information on all responses to complaints surveys following closure of the complaint.

Further development is required to improve the digital offer for citizens when making a complaint.

Accessibility for non-digitally enabled citizens is currently being considered.

Improvements and Support to services is needed to identify learning and to demonstrate to citizens how learning has been implemented. This will also ensure that the recording of remedies is consistent across the organisation.

The implementation of the new complaints recording system from November 2021 has been designed to capture this information. Staff engagement and compliance is required to ensure this information is consistently and accurately recorded.

The complaint process now includes consistent recording of all complaints resolved, including those resolved through problem solving (at the first point of contact, within three working days).

This information will be available in the 2022/23 report.

The Quality Assurance Framework requires review, and we propose that the benchmark is raised to 85% from 1st April 2022. All managers will continue to receive ongoing support and training to ensure quality responses.

The Feedback & Complaints Team will continue to support Services, highlighting responses which fall significantly below this target.

14. Key Focus Areas and Future Developments

The Key Focus Area during 2021/22 has been to launch the new Feedback and Complaints Case Management system. This was successfully implemented on the 2 November 2021. The new Feedback and Complaints Case Management System has been designed to capture all complaints (including those resolved at the Council's 'Problem Solving' stage) in one system. The 'One System One View' approach will ensure consistency in the recording of complaints regardless of access channel used, or the service the complaint is recorded by. Recording all complaints information into one system will provide structured reporting across all three Council Portfolio Areas and will also provide valuable data to individual services to show how they are performing in key areas which we would like to improve. ☐ The reporting includes key themes such as timescales and indicating how long a complaint has been open. This will allow us to focus on responding to citizens more efficiently. We have focused on Complaint Ownership and Accountability. The new complaints recording system builds in the Accountable Manager for the Service who is responsible for adherence to the Complaints Policy. The reporting function of complaints will be less labour intensive and more automated to ensure information relating to complaints management is more accessible. ☐ The Feedback and Complaints Case Management System has a mandatory functionality to record Learning Outcomes on each complaint recorded which will provide a valuable source of information to develop our services and colleagues to better meet the needs of our citizens. We have launched an internal SharePoint Site to support development and education in respect of complaints including performance and survey results against our agreed KPIs for all services. Training via Teams has been completed by all Case Coordinators who are responsible for recording complaints on the new Feedback and Case Management System. ☐ The Feedback and Complaints Team will continue to provide training and support, and to monitor Responding Managers across the Council to ensure an effective transition to, and improvement in complaint handling.

☐ The online training course for Effective Complaints Handling has been revised and relaunched from November 2021 which provides advice and support to all staff dealing with complaints.

In addition, the new system will:

- Give an opportunity to help customers feel listened to and have an improved experience of dealing with us
- ☐ Work in a more efficient way with customer information
- ☐ Help us deal positively with feedback and complaints
- ☐ Keep better records of the feedback and complaints we receive
- □ Provide better oversight of the management and handling of customer feedback so that we learn from the things we do well and make improvements where necessary.

15. How to Contact Us

If you would like to make a complaint, suggestion, or compliment, you can do this by completing an on-line form on Sheffield City Council's website:

https://www.sheffield.gov.uk/content/sheffield/home/your-city-council/complaints.html

You can also telephone us on 0114 273 4567, or write to: Customer Services, Sheffield City Council, Town Hall, Pinstone Street, Sheffield S1 2HH

If you would like to comment on this report, or have any questions about the complaints procedure, please contact the Customer Feedback and Complaints Team at:

Email complaintsmanagers@sheffield.gov.uk

Telephone 0114 273 4567 or write to us at the address given above.

Appendix 1 – 6 Main Reasons (Categories) for Complaints

Delay

Delay in delivering a service

Delay in giving advice

Delay in making a decision

Delay in taking action

Delay in providing information

Delay in responding to letters or emails

Delay in returning phone calls

Delay in meeting customer in person

Other delay problem

Failure or refusal

Failure or refusal to deliver a service

Failure or refusal to give advice

Failure or refusal to make a decision

Failure or refusal to take action

Failure or refusal to provide information

Failure or refusal to respond to letters or emails

Failure or refusal to return phone calls

Failure or refusal to meet with customer

Other failure or refusal problem

Quality

Service provided but then changed or withdrawn

Inadequate or incorrect advice given

Unreasonable decision

Incorrect decision

Incorrect action taken

Inappropriate action taken

Wrong information provided

Unclear information provided

Poor or misleading information given

Lost documents or files or correspondence

Late for appointment or visit

Breach of confidentiality

Poor Communication

Loss or damage to property

Other quality issue

Staff conduct

Discriminatory behaviour

Lack of customer care

Poor customer care

Rude or aggressive behaviour

Unhelpful attitude

Lack of knowledge or training

Other staff conduct issue

Access to service or information

Buildings Phones Information brochures or leaflets unavailable Opening times Other access to service or information problem

Policy

Equalities or diversity issues Government policy Health and safety Local policy or bylaws Council policy Cost of service Other policy problem

Equality Objective 1 - Strengthen knowledge and understanding of our communities

As a Council we want to provide high quality and accessible services that deliver what matters most to our diverse communities. We know that good quality information leads to well informed decisions, which in turn impact on the suitability and quality of services

EO1 (communities) – Aim 1 – 3	Ov	Actions	What's next	Who	Revi ew Date
We will improve the data we hold about people who use our services in terms of consistency and robustness. This will include capturing improved equality monitoring data to enable us to better understand people's	Update Equality Monitoring Information Process, Update complaints procedure and launch new procedure including measuring number of complaints.	Customer Services (CS) have designed a new form re customer equality information so we can measure who our customers are in relation to services we provide.	To be included in Phase 2 of Forms Migration Project	Customer services/ BCIS	Dec 22
needs and levels of satisfaction. We will work with the people of Sheffield and Cur partner organisations, including the Voluntary, community and faith sector, to Ensure data and knowledge are used to deliver joined up approaches to the big challenges that affect the city and our communities. Data on equalities will also be used to ensure we set a fair and evidence-based budget for	Working with City partners to develop complaints procedure more and the use suggestions and feedback from those with lived experience of using our services. We will ensure all decisions involving a phange will have an	CS launched revised complaints procedure Nov 21 we can successfully measure complaints and lessons learned to improve our services. Develop equality monitoring as part of Complaints procedure.	Phase 2 of complaints procedure to work with city partners on feedback to gain lived experience and suggestions moving forward	Corleen Bygraves- Paul	Dec 22
We will improve the information we hold about	Assessment and action plan to mitigate disadvantage.	EIAs will feature in all relevant decision making processes at start and end.	Review recent decisions to check for any EIA omissions	Customer Services SMT	Dec 22
our diverse communities including around influence, engagement, and cohesion. We will continue to undertake a broad range of consultation and engagement activities to inform decision making and will support underrepresented communities to raise issues and put forward solutions.		Encouraging others to get involved in the SEIN network	Continue to promote SEIN via Employee Briefings and Customer Services News	Paul Taylor	

Equality Objective 2 – Ensure our workforce reflects the people that we serve

We will continue to promote inclusion, fairness, and accessibility in our workforce, whilst raising our workforce diversity. A representative workforce will help us deliver services that are accessible, appropriate and that help reduce inequalities. Despite progress over recent years and in a period of continued economic challenge, we still do not have a workforce that reflects the diversity of the city, particularly at senior levels. We also have notable differences in the experiences of some staff groups with regards to morale and opportunity.

EO2 (Workforce) – Aim 1 -3	Portfolio Priorities	Actions	What's next	Who	Date
We will work towards achieving Disability Confident at Level 3 (currently level 2). We will also undertake work to further	Create Disability Confident Working Group - Review the Disability Confident criteria to explore where improvements can be made	Group established and meeting regularly. Encourage awareness of Disability Confident (including Mental health at work conversations) with managers &	Customer Services representation at Disability Confident Working Group.	Customer Services SMT (CS SMT)	Dec 22
onderstand and respond to lower morale scores for disabled staff to try and bring them in line with mon-disabled staff.	Working on accessibility & IT on Employee & customer processes – see Objective 3 also	staff	Develop Disability Confident discussions with services.	CS SMT	Mar 23
We will work to increase the diversity of top earners from the following groups, BAME (Black	Working with services on their workforce profile (Disability and Race is of particular concern - diversity within these are also		Managers conversant with Disability Confident criteria and implications of this	CS SMT	Mar 23
Asian Minority Ethnic), Women, Disabled People and LGB;	concerning.) We need to look at Positive action methods within recruitment. Agree	Accessibility paper to be written	CS to note and take actions forward	CS SMT	Mar 23
based on Chief Officer grade and equivalent. Regue	Positive action in recruitment. Agree Positive action in recruitment Regularly encourage employees to share equality monitoring information and set this as a KPI in our performance dashboard	All services issued with diversity profile Start conversations with Service managers re Positive action/Apprentices/Career	Customer Services to consider targeted apprenticeships around disability and race.	CS SMT	Jan 23
carers within our workforce. In response to lower morale scores, we will undertake further work to understand the	Launched EDI training with additional disability courses with commitment for on going conversations Launch new edi pages (Disability	progression/Resources/ppc brand/ aging workforce /flexible – part time working - see objective 4 also	Develop improved career pathways for people with protected characteristics.	CS SMT	Review Mar 23
challenges carers are facing and what can be done in response,	Awareness pages/network page carers pages)		Issue packs to new starters with key E&D information.	CS SMT	Jan 23

EO2 (Workforce) - Aim 1 -3	Portfolio Priorities	Actions	What's next	Who	Date
with a view to bringing scores in line with non-carers.	Look at carers/disability scores on future ways of working survey and explore flexible				
	working options to support employees manage better work life balances.	Use as a tool to better understand diversity. Promote census awareness	Raise census awareness	CS SMT	Dec 22
		50 % completions and known conversations started in 3 services. Bespoke training also offered	Review training progress to date and identify services still needing the team based training module.	Paul Taylor	Nov 22
			Training fully complete	Paul Taylor	Mar 23
Page		Encourage further learning on EDI/learning to educate ourselves	Encourage via Team Meetings, Employee Forums and Customer Services News. Includes awareness around Carers.	CŚ SMT	Jan 23
43		Staff network set up (29th Sept)	Ensure Customer Services membership of staff network	CS SMT	Dec 22

Equality Objective 3 – Lead the city in celebrating diversity and promoting inclusion

As a Council we want to lead the city in celebrating and promoting our diversity and the benefits and opportunities it brings. We will continue to promote inclusion, fairness, and accessibility, whilst raising the profile of Sheffield as a great place to live, study, work and visit.

EO3 (leading organisation) – Aims 1 – 3	Portfolio Priorities	What's next	Who	Date
We will work with our partner organisations across all sectors, to	AccessAble tool in place.	Promote use of tool via Customer Services, and ensure all relevant services aware of it	CS SMT	Dec 22
celebrate and promote our diverse city locally and nationally. We will support	Staff Equality & Inclusion Networks – other associated networks too.	Explore reference to tool as standard as e.g. blue badge/disabled travel pass letters	Mark Holmes	Mar 22
		Reinforce First Point position as a reporting centre for Hate Crime. Ensure publicity generally and in First Point space	Mark Holmes	Nov 22

EO3 (leading organisation) – Aims 1 – 3	Portfolio Priorities	What's next	Who	Date
We will continue our work to tackle poverty and promote social justice, including through the Fairness and Tackling Poverty Partnership and Making Sheffield Fairer campaign Group. We will raise awareness of the Fair Employer Charter and Living Wage with employers in the city; and will ensure our commissioning processes are fair and inclusive.	Look at Accessibility within services and how we influence other services to look at their accessibility of services in all communication and access to services Review /Refresh and re launch our ethical procurement policy and procedure whilst ensuring our	Full review of accessibility, including facilities for the deaf and hard of hearing community. Will include a review of public access points and the Council's Contact Centre. Continue specific work around around BSL access (inc. BSL interpretation contract) Keep contract under review	Paul Taylor/Corleen Bygraves-Paul As above As above	Dec 22 Review Dec 22 Review
We will continue to support citywide work to ensure our city is an inclusive and accessible place to live, work, study and wsit. We will work with our partner granisations to raise awareness of hate crime and how it can be reported; and will continue to challenge discrimination, bullying and harassment.	commissioning processes are fair and inclusive. Equality Impact Assessments being a fundamental part of procuring services. Customers Service & HR are a 3 rd party reporting centre			Dec 22

Equality Objective 4 - Break the cycle of inequality and improve life chances

We know that some groups experience poorer life chances than others and that poverty can be a significant factor in determining life chances and wellbeing. At a local and national level there are also areas of persistent inequality which remain a considerable challenge. We will continue to focus on those in greatest need to ensure that people can access services and support that works for them.

EO4 (breaking inequalities) – Aim 1 – 3	Portfolio Priorities	Actions/What's next	Who	Date
We will focus on Improving health and wellbeing in the city, especially for groups that experience poorer	Heath and well being strategy in place.	Reference Health and Wellbeing in new starter pack	CS SMT	Jan 23
outcomes. We will ensure decent, inclusive, and		Customer Services to be clear on actions arising from REC report	CS SMT	Dec 22

EO4 (breaking inequalities) – Aim 1 – 3	Portfolio Priorities	Actions/What's next	Who	Date
accessible housing that promotes wellbeing. Health inequalities will also be a key focus of our revised	Commit to the recommendations from the	Consider potential for relevant work experience placements	CS SMT	Mar 23
Health and Wellbeing Strategy, and we will continue to join up and improve health and social care services	REC and Disability Confident agenda	Put in place targeted Customer Services Employability Roadshows	CS SMT	Jan 23
to provide high quality and accessible care. We will work with partners to ensure there are effective pathways into education, training, and employment (including apprenticeships) to enable	We need to look closely at our apprenticeship/traineeship/	Actions around apprenticeships as per E02 above	CS SMT	Jan 23
young people to fulfil their ambitions. We will continue to work with schools and partner organisations from early years onwards, to ensure children have a great start in life and to close attainment gaps for disadvantaged pupils and children with SEND (special	graduate offer in the portfolio			
educational needs and disability). U We will work with the Police, health, specialist				
providers and other partner agencies to tackle domestic and sexual abuse. We will work with mmunities and interest groups on prevention, and				
ensuring key messages about healthy relationships, consent and sexual harassment are included in 'relationships and sex education' in the city. We will				
develop a whole family working on domestic abuse that supports victims and children and holds perpetrators to account; and ensure services are				
accessible and meet the needs of our diverse communities.				

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Annual Report Ombudsman Report 2020-2021

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- 5.0 OUTCOMES
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- 7.0 LEARNING
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1.0 INTRODUCTION

- 1.1 The effective handling of customer complaints across the organisation enables the Council to be open and transparent, respond in the right way, make the best use of resources and make well-informed decisions.
- 1.2 As part of our 2021/22 commitment to Sheffield City Council's One Year Corporate Plan, we will become a more listening and learning organisation. We have overhauled our complaints process so that customers are able to challenge and help us drive improvement in all our services. From 1 November 2021, this has included, not only the replacement of our complaints case management system but will also focus on our culture and behaviours when handling complaints.
- 1.3 We aim become better at listening to complainants; learning from complaints and improving the customer's experience when they make a complaint.
- 1.4 We welcome complaints as an opportunity to improve our services. Indeed, our definition of a complaint is "any expression of dissatisfaction whether justified or not", which is deliberately wide to ensure that complaints are recognised and are properly addressed. We also encourage positive feedback on the services we provide.
- 1.5 The Feedback & Complaints Team in Customer Services is responsible for the development and implementation of policy and procedures on complaints. In addition, the Team acts as the Council's liaison point with the Local Government & Social Care Ombudsman (LGSCO), Housing Ombudsman (HO) and Parliamentary & Health Service Ombudsman (PHSO).
- 1.6 The Ombudsmen provide a free, independent and impartial service. They consider complaints about the administrative actions of local authorities. They cannot question what a council has done simply because someone does not agree with it.

However, if they find something has gone wrong, such as poor service or service failure, and that a person has suffered as a result, they recommend a suitable remedy.

- 1.7 The LGSCO's powers are set out in the Local Government Act 1974, as amended. The HO's powers are set out in the Housing Act 1996, as amended. The PHSO's powers are set out in the Parliamentary Commissioner Act 1967, as amended, and the Health Service Commissioners Act 1993, as amended.
- 1.8 Overall, the Council and its strategic delivery partners (Amey and Veolia) dealt with 2463 complaints through the formal complaints process in 2021/22.
- 1.9 The LGSCO received 114 complaints and enquiries about Sheffield City Council and its strategic delivery partners during 2021/22.
- 1.10 The Housing Ombudsman does not publish the number of complaints/enquiries received about Sheffield City Council during 2021/22, but the Council's Feedback and Complaints Team has recorded 19 complaint referrals/enquiries from the HO during 2021/22.

2.0 SUMMARY

- 2.1 This report provides an overview of the complaints received, and formally referred and determined by the Ombudsmen during the twelve months from 1 April 2021 to 31 March 2022.
- 2.2 The report also identifies future developments and areas for improvement in complaint management.
- 2.3 The report is jointly presented by the Monitoring Officer and the Director of HR and Customer Services who is responsible for managing the Complaints Service.

3.0 COMPLAINTS OVERVIEW 2021/22

3.1 In 2021/22, there were 1051 'formal' complaints about Council Portfolios, compared with 434 the previous year. The highest number of complaints received were in relation to Resources 'other' (8%), Children's social care (6%) and Council Housing Repairs (5%).

Complaint numbers across the Council's Portfolios are significantly higher than in previous year and this is likely due to the implementation of a new Complaints Case Management Recording System, which encouraged more accurate recording of feedback and complaints. A separate annual complaints report looking at the Council's overall complaint handling during 2021/22 provides more detailed commentary on this.

There was a total of 1412 complaints about highways maintenance and waste management services delivered by our Strategic Partners. Amey and Veolia account for 57% of the total numbers of complaints received 2021/22 compared with 78% previous year.

	2020/21	2021/22
People	227	330
Place	148	348
Resources (incl. PPC)	59	373
Total Portfolios	434	1051
Amey	1119	1115
Veolia	461	297
Total incl. partners	2014	2463

3.2 The Council's Feedback & Complaints Team recorded a total of 117 complaints received by the LGSCO and HO during 2021/22, this is a significant increase on the 95 complaints received the previous year where numbers were undoubtedly influenced by the LGSCO closing its door to new complaints in early 2020 to assist local authorities in dealing with the pandemic. A breakdown by service area is provided at **Appendix A (Table 1).**

The service areas that generated the largest number of Ombudsman enquiries during 2021/22 were Housing and Neighbourhood Services (27), Adult Social Care (20) and Education & Children's Services (18).

- 3.3 It is important to note that not all Ombudsman enquiries lead to a formal investigation. In fact, of the 117 enquiries recorded by the Council's Customer Feedback & Complaints Team in 2021/22, 76% were concluded without a formal investigation. Of the 28 (24%) that were formally investigated, the highest numbers were about Housing and Neighbourhood Services (24), Adult Social Care (14) and Repairs & Maintenance (12)
- 3.4 The LGSCO has reported that 114 complaints/enquiries were received about the Council and its strategic delivery partners during 2021/22, compared with 95 in 2020/21 and 143 in 2019/20. More detailed breakdowns by category are provided at **Appendix A (Table 2).**

The numbers reported by the LGSCO do not match the number recorded by the Council's Feedback & Complaints Team because they include, for example, people who have made an 'incomplete or invalid' complaint or cases where advice was given but details were not shared with the Council.

The Housing Ombudsman's published data focusses on determined cases and does not include the number of complaints/enquiries received about Sheffield City Council during 2021/22. The Council's Feedback and Complaints Team recorded 19 complaint referrals/enquiries from the HO during 2021/22.

Complaints/Enquiries Received	2019/20	2020/21	2021/22
LGSCO	143	95	114
HO*	58	13	19

^{*}numbers recorded by Feedback & Complaints Team

4.0 RESPONSE PERFORMANCE - OMBUDSMAN

- 4.1 The Council's average response time to 100 preliminary ombudsman enquiries in 2021/22 was 10 calendar days (generally 3 working day target but some preliminary enquiries have specific response date on case by case basis).
- 4.2 The average response time to 26 initial formal enquiries made by the LGSCO/HO in 2021/22 was 34 calendar days (24 working days). Although this is an improvement on the average response time of 29 working days reported previous year, the Council only met the original response deadline in 8 (31%) of cases. In the Annual Letter, the LGSCO has raised concern about the number of late responses being received.

	Number of Initial Formal enquiries	Number within original or formally agreed extended timescale	1 - 7 day over timescale	7+ days over timescale	
LGSCO	23	7 (30%)	6 (26%)	10 (44%)	
НО	3	1 (33%)	0 (0%)	2 (67%)	

4.3 Delays in responding are mainly due to late/incomplete service comments and information but in one case the deadline was extended to accommodate a further site visit which resolved the issue (Streets Ahead). The 12 responses that exceeded the original by more than 7 days were in relation to Adult Social Care (3); Children's Social Care (2); Housing and Neighbourhoods (2); Repairs and Maintenance (1); Customer Services (1); SENDARS (1); Environmental Protection and Streets Ahead (1).

5.0 OUTCOMES

- 5.1 In resolving complaints, we aim to work with the customer to try to achieve their preferred outcome, and when appropriate we will apologise. When the Council is found to be at fault, we will aim to resolve the complaint by putting the customer back into the position they would have been in had the fault not occurred, or by offering another remedy if this is not possible.
- 5.2 During 2021/22, the LGSCO upheld 15 complaints and the HO upheld 2 complaints. A breakdown of all LGSCO/HO decisions is provided at **Appendix A (Table 3 and 4)**. Further details of the upheld complaints and the remedies and service improvements that were agreed are set out in **Appendix B**.
- 5.3 The LGSCO did not issue any public reports during 2021/22.

5.4 In total, the Council paid £8445.49 in compensatory payments and other reimbursements following Ombudsman enquiries. This compares with £26,792 paid in 2020/21.

6.0 BENCHMARKING

- 6.1 Looking at LGSCO involvement and how Sheffield City Council compares with other local authorities (see Appendix A Table 5 and 6 for core city comparison and Annual Letter at Appendix C for overall averages for similar authorities):
 - The LGSCO upheld 75% of the complaints that were formally investigated about Sheffield City Council, which is above the 68% average for similar authorities. Core City upheld rates range from 50% 78%.
 - In 20% of upheld cases the LGSCO found the authority had provided a satisfactory remedy before the complaint reached the Ombudsman, which is above the average of 11% in similar authorities. Core City rates range from 6% - 25%.
 - In terms of LGSCO recommendations, Sheffield City Council, like all the other Core Cities during 2021/22, had a 100% compliance rate but we were 'late' in completing agreed actions in 2 complaints (see Appendix B – complaint 5 and 15).
- 6.2 Looking at HO involvement and how Sheffield City Council compares with other local authority landlords (see Annual Report at Appendix D):
 - The HO upheld 40% of the complaints that were considered about Sheffield City Council, which is below the 48% average across local authority landlords.
 - In terms of HO orders, Sheffield City Council complied with 10 orders and had 100% compliance rate within 3 months, compared with a 99% compliance rate average across local authority landlords.
 - The HO issued 1 Complaint Failure Order during 2021-22. Although the council
 was able to evidence a response had been sent to the complainant in question
 the ombudsman still found the Council in breach of section 3.21 of the
 Complaint Handling Code by not providing the Ombudsman with the evidence
 as requested in a timely manner.

7.0 LEARNING

7.1 We aim to learn from complaints, so that we do not repeat the same problem. **Appendix B** includes details of the remedies, improvements and changes that have been made following Ombudsman investigations.

Examples of key learning/service improvements include:

- Regular joint meetings between Repairs & Maintenance and Leasehold Service established to review current leak cases, identify service improvements & procedures (Leasehold/Repairs & Maintenance).
- Review of system around EHCP annual reviews Information now reviewed by the management group within SENDSARS on a fortnightly process to ensure processes are managed within statutory timescales (SENDARS).
- Introduction of a tracking system to children and young people who may be struggling in placements which are at the point of breakdown or have broken down. Information reviewed on a fortnightly basis to ensure there is continuous action and scrutiny on these cases (SENDARS).
- Policy on abandoned vehicles updated and now includes police notifications and also the provision of 15 day advanced notice prior to removal of abandoned vehicles on private land (Waste Management).
- Interim training delivered around Care Act (assessment of need) pending staff accessing formal training course now being delivered by L&D (ASC).

8.0 IMPROVEMENTS 2021/22 AND ONGOING DEVELOPMENTS 2022/23

The following provides an update on actions and areas identified for improvement in 2021/22 and ongoing developments for 2022/23:

 New Feedback and Complaints Case Management system – The system went live on the 2 November 2021. The system has been designed to capture all complaints (including those resolved at the Council's 'Problem Solving' stage) in one system. The 'One System One View' approach will ensure consistency in the recording of complaints regardless of the access channel used. The new complaints recording system and more frequent open case reporting reinforces ownership and accountability within services/portfolios.

Ongoing development: Improvements continue to be made to system and associated reporting to address gaps in recording and improve performance analysis.

Training – Training has been completed by Case Coordinators who are
responsible for recording complaints on the new Feedback and Case
Management System. Complaint handling guides for all roles published on
Sharepoint. The online 'Effective Complaints Handling' training course has

been updated and relaunched from November 2021 which provides guidance to those responding to complaints

Ongoing development: The Feedback and Complaints Team will continue to track and monitor open cases and provide training and support to Responding Managers across the Council to ensure the transition and improvement in complaint handling.

Response times - Ombudsman formal enquiries/investigations — Although
there has been some improvement on the overall average response time to
formal ombudsman enquiries, the response timeframes of 20 working days
(LGSCO) and 15 working days (HO), continue to be a challenge for the Council.

Ongoing development: The Feedback and Complaint Team are working closely with key services to improve the quality and timeliness of service comments/information. Discussions are also ongoing with senior management to delegate 'sign off' of ombudsman responses to relevant Directors to reinforce ownership and improve timeliness.

 Monitoring, tracking and escalation - Ombudsman formal enquiries/ investigations – The Feedback and Complaints Team have established monitoring/tracking around formal enquiry work and are now actively including senior accountable managers (including Directors) in all chaser communication. Response time data and reasons for delay are provided to performance leads on quarterly basis.

Ongoing development: The LGSCO is due to launch a complaint handling code similar to the Housing Ombudsman code. The Feedback and Complaints Team are in the process of embedding improved monitoring and tracking of open complaints across the Council, including those that have been deemed premature by Ombudsman and referred back to the Council to deal with.

9.0 **RECOMMENDATIONS**

9.1 The Audit & Standards Committee is asked to consider the Annual Ombudsman Report in order to provide its view on the performance of Ombudsman complaints and the issues raised.

OMBUDSMAN COMPLAINTS

Table 1: This table shows a breakdown of the 117 ombudsman complaints recorded by the Council's Customer Feedback and Complaints Team during 2021/22.

Portfolio/ Partner	Subject	Formal premature referrals	Considered without Investigation	Formal investigation made	Totals 2021/22	Totals 2020/21	Totals 2019/20
	Social Care – Adults	1	6	7	14	14	23
People	Social Care - Children's		4	3	7	4	17
	Education	1	4	3	8	8	15
	Bereavement Services					0	1
	Building Control					0	2
	Environmental Services		1	2	3	2	1
Disco	Housing & Neighbourhood Services	6	13	5	24	11	18
Place	Licensing	1			1		2
	Parking Services					4	4
	Parks & Countryside		1		1	0	1
	Planning	1	6	3	10	12	7
	Repairs & Maintenance (Council Housing)	11		1	12	9	21
	Customer Services		4	3	7	3	10
	Legal	1	7		8	3	3
Resources	Finance		1		1	0	0
	Benefits	2	1		3	2	8
	Revenues	1	7		8	0	3
Amey/ Client	Streets Ahead		7	1	8	8	14
Veolia/ Client	Waste Management		2		2	0	1
	Totals	25	64	28	117	80	151

Table 2: This table shows a breakdown by subject of the 114 complaints/enquiries received by the LGSCO in 2020/21, compared with the previous two years.

LGO subject category	2019/20	2020/21	2021/22
Adult Social Care	36	21	20
Benefits and Tax	12	3	15
Corporate and other	14	10	5
Education and Children's Services	25	18	18
Environmental Services and Public Protection & Regulation	12	11	11
Highways & Transport	25	9	8
Housing	13	9	27
Planning & Development	6	14	10
Total	14 3 _{0e} 55	95	114

Table 3: This table shows a breakdown of LGSCO decisions over the last three years.

LGSCO Decisions	2019/20	2020/21	2021/22
Incomplete or invalid	8	5	5
Advice Given	7	7	7
Referred back for local resolution	40	23	23
Closed after initial enquiries	53	35	58
Investigated – not upheld	4	7	5
Investigation – upheld but remedied by LA	6	2	3
Investigated – upheld	27	13	12
Report – upheld	1	2	0
Total	146	94	113

Table 4: This table shows a breakdown of HO decisions over the last three years.

HO Decisions	2019/20	2020/21	2021/22
Closed after initial enquiries (outside jurisdiction/no further action)	2	1	1
Investigated – not upheld (no maladministration)	4	3	2
Investigated – upheld (maladministration/partial maladministration)	3	1	2
Remedied by LA (redress provided)	2	0	0
Total	11	5	5

Table 5: This table compares complaint numbers across the Core Cities based on information provided by the LGSCO in the Annual Review Letters.

	Number enquiries received 2020/21	Number enquiries received 2021/22	% increase/ decrease (+ / -)	Number of enquiries per 1000 population
Birmingham	362	463	+28%	0.41
Bristol	98	131	+34%	0.28
Leeds	135	190	+41%	0.24
Liverpool	71	114	+61%	0.23
Manchester	102	134	+31%	0.24
Newcastle	39	65	+67%	0.22
Nottingham	52	73	+40%	0.22
Sheffield	95	114	+20%	0.20

Table 6: This table compares complaint outcomes across the core cites based on information provided by the LGSCO in the Annual Review Letters.

	Number of detailed investigations 2021/22	Number of complaints upheld 2021/22	Upheld rate 2021/22	where Sa Remedy before co reached Or 2020	complaints tisfactory provided omplaint mbudsman b/21 - eld cases	Compliance with Ombudsman Recommendations 2020/21
Birmingham	128	100	78%	7	7%	100%
Bristol	34	22	65%	5	23%	100%
Leeds	41	26	63%	2	8%	100%
Liverpool	25	18	72%	1	6%	100%
Manchester	47	33	70%	3	9%	100%
Newcastle	8	4	50%	1	25%	100%
Nottingham	20	13	65%	2	15%	100%
Sheffield	20	15	75%	3	20%	100%
Average % (similar LA to SCC)			68%		11%	100%

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Portfolio/ Partner	Complaint	Date of Ombudsman Decision	Ombudsman Finding/Investigation Outcome	Agreed Remedy/Service Improvements	Remedy implementation detail and learning outcomes	Ombudsman compliance outcome
Place - Leasehold/Repairs 201910086	Ms X complained about the response to her reports of leaks in her property; her concerns about major works and service charges; and complaints handling.	13/04/21	HO found service failure by the Council in its response to the resident's reports of leaks in her property and to to the resident's concerns about major works and service charges. HO also found maladministration by the Council in it's complaint handling.	Council ordered to pay the resident compensation of £650 for distress and inconvenience as a result of fis repairs failures; its major works and service charges failures; and it's complaint handling failures. Council also ordered to: - take steps to progress inspection by an independent surveyor and to update the resident about the timeframe; write to the resident within four weeks of the inspection, to provide a final position on the major roof works, information on next steps and how the issue can be taken further, where applicable; -review the repairs record keeping failures identified and confirm measures now in place/being taken to ensure a wide range of records are kept, in line with HO's spotlight report on repairs; and - review the complaint handling issues identified and explain how it will ensure it responds to complaints and contacts from this Service in line with its complaints policy, the Complaint Handling Code and the Housing Ombudsman Scheme.	04/05/2021 - Letter sent to Ms X and shared with HO outlining how the £650 payment will be offset against service charge arrears 12/05/2021 - Independent survey carried out with Ms X present. 17/08/2021 - Independent Inspection report shared with Ms X and HO. 23/08/2021 - Senior Manager meeting held to discuss 'Lessons Learnt'. 21/12/2021 - Briefing note (with attachments) shared with HO to evidence the lessons learnt exercise/discussions undertaken as result of the complaint (meeting with senior managers held 23/08/21), alongside a copy of a further recent response sent to Ms Spina.	16/02/2022 - HO confirmed compliance with orders.
Resources - Finance (Revenue and Benefits) - 20 013 929	Mr X complained that the Council ended his council tax direct debit without telling him and, a year later, asked him to pay outstanding amount in addition to his current council tax.	29/04/21	LGSCO found that Council made a mistake and failed to transfer the direct debit to Mr X's sole account. However, while there was an error by the Council, LGSCO decided not to start an investigation because the Council had offered a fair remedy. It had explained what went wrong, apologised, spoken to the officer, offered to spread the payments over two years and invited Mr X to apply for discretionary relief if paying the arrears will cause hardship.	No further action required - Council already offered a fair remedy.	No further action required.	Not applicable
People - ASC (Social Care Accounts Service) 20 007 508	Mrs B complained on behalf of son and daughter (Ms C and Mr D) who are adults with additional needs who require care and support. Mrs B complained that the Council has not properly assessed Ms C and Mr D's finances and says it should waive charges for Ms C and Mr D on a discretionary basis.	07/06/21	LGSCO did not find fault in the way the Council assessed Ms C and Mr D's finances and its decision to charge them a contribution towards the cost of their care but did find fault in the Council's delay in deciding whether Ms C and Mr D could use their direct payment to pay family members to provide care.	The Council agreed (within one month) to apologise to Mrs B in writing for the fault and pay her £300 in recognition of her time and trouble in pursuing matters. Council agreed to complete any necessary reviews of the needs assessments and care plans of Ms C and Mr D and give a decision on whether they can use all or some of their direct payments to pay family members.	14/06/2021 - Complaint review response sent confirming agreement due to exceptional circumstances to pay family members using direct payments, subject to appropriate safeguards being in place. 17/06/2021 - Letter of apology sent to Mrs B confirming £300 agreed payment raised and processed. 27/08/2021 - LGSCO updated on progress around the review of Ms C and Mr D's needs assessment. 12/10/2021 - LGSCO satisfied Council have taken reasonable steps to carry out the agreed actions and ended their involvement accepting it hadnot been possible to fully implement the remedy on this occasion.	12/10/201 - LGSCO issued compliance outcome of "Remedy not complete but satisfied".
People - ASC Strategic Commisioning and Partnership 20 003 507	Mr X complained that care home, where the Council placed his mother, failed to look after her properly during the first COVID-19 lockdown before her death in May 2020.	29/06/21	The LGSCO found that the care home's records of the care provided for Mrs Y were inadequate, which leaves doubt over whether it was meeting all her needs properly.	The Council as commissioner of the service remains responsible for the services provided on its behalf and for the actions of the organisation providing them. The Council agreed (within four weeks) to write to Mr X and his father apologising for the failings at the care home and the distress this caused. LGSCO noted the Council and CQC are already working with care home to improve its working practices and so no need to make other recommendations.	29/07/2021 - Apology letters sent to Mr X and his father	29/07/2021 - LGSCO issued compliance outcome of 'Remedy complete late'
Accounts Service) 20 009 292	Mr X complained about how the Council calculated and decided when his late father, Mr Fis, capital had dropped below the capital limit threshold and failed to reimburse Mr Fis estate for overpaid care fees.	01/07/21	The LGSCO found fault in the way the Council gave Mr X conflicting and confusing information about how it calculated the date Mr Fs capital dropped below the threshold due to errors in its spreadsheet tool. It then delayed arranging reimbursement of overpaid care fees by six months.	The Council agreed to provide evidence it had reimbursed Mr F's estate £1832,49 in overpaid care fees from March 2020 and pay Mr X £150 to recognise the frustration and time and trouble caused by the delay.	28/07/2021 - Evidence shared with LGSCO that reimbursement of £1832.49 was made on 24/06/2021. Copy of letter of apology dated 19/07/2021 also shared confirming agreed £150 payment raised and processed.	issued 'Remedy complete and satisfied' outcome.
People - ASC Access and Prevention 20 000 997	Mr G complained a care company providing care on behalf of the Council, neglected his grandmother, Mrs C, for 14 months. He says the Council failed to notice the neglect, failed to investigate his safeguarding concerns then tried to cover up its own and the care company's failures. He also complained about an inadequate complaint response.	17/08/21	The LGSCO found the Council was at fault for the poor care provided by the care company, for failing to formally investigate a safeguarding concern and for a failure to deal promptly with Mr G's complaint. The LGSCO found no evidence of a cover up but did find evidence the Council had considered Mrs C's interests and accepted that a formal safeguarding investigation would not have altered the outcome.	The Council had already refunded £418 care fees and apologised and LGSCO concluded no further remedy was required.	No further action required.	Not applicable

Resources - Customer Services 20 009 725	Miss B complained that the Council failed to properly consider her health conditions and the impact on her ability to walk, when refusing her application for a blue badge.	25/08/21	The LGSCO found fault in the way the Council considered Miss B's application. The LGSCO found the decision reached by the Council did not foliow from the evidence provided and it is difficult for Miss B to understand the reasons for it and left her confused and uncertain about what else she can provide to support her application.	The Council agreed (within 1 month) to invite Miss B to submit a new application along with any other evidence she wishes to provide; and on receipt of the information determine the application (within 1 further month) using an assessor with knowledge of her condition.	27/08/2021 - Contact made with Miss B invitting her to submit new application and supporting evidence. 01/09/2021 - Miss B re-applied and during the application process it was confirmed that she had been awarded Personal Independent Payments for daily living/mobility needs (awarded 17/09/2021). Due to the change in circumstances a re-assessment was no longer required and a Blue Badge was issued 27/09/2021 (valid until 17/02/2024).	14/10/2021 - LGSCO issued 'Remedy complete and satisfied' outcome.
Place - Housing & Neighbourhood Service 20 014 150	Mr X complained the Council failed to give his family appropriate housing priority following noise and antisocial behaviour issues.	28/09/21	LGSCO found fault in how the Council dealt with Mr X's request for priority from 2020. The Council recognised there had been some delay in granting the priority and also accepted the grounds for originally refusing the priority were flawed.	The Council offered/agreed (within 2 weeks) to reinstate and backdate Mr X's priority to enable Mr X one further offer of suitable accommodation; and also to arrange for a senior officer to monitor the application.	08/10/2021 - System updated with reinstated priority award for one further offer of suitable property. 13/10/2021 - Priority Rehousing Award letter issued following unsuccessful attempt to contact Mr X to conduct award interview. Service continuing to try to make contact and monitor Mr X's priority award as agreed.	26/10/2021 - LGSCO issued 'Remedy complete and satisfied' outcome.
Place - Council Housin Repairs 201 903 587	g Miss X complained about the landlord's response to multiple repair issues she reported and the landlord's complaint handling.	29/10/21	, ,	The Council was ordered to pay Miss X £750 compensation offered in its investigation stage response (if not done so already), as well as an additional £750 in relation to the failures identified with its response to the repair issues, plus a further £250 for the failures identified with its complaints handling. The Council further ordered to confirm to both the resident and HO in writing the outcome of the full stock survey it has completed following the September 2021 agreement to do so. The Council to confirm expected timescales for any recommended works as part of this report. The Council also recommended to take note of the Ombudsman's spotlight report on water ingress issues for further guidance on how it might consider such issues in future; and review the complaints handling failures identified on this case, in conjunction with its self assessment of its complaints handling following the introduction of the Ombudsman's complaints handling code with training to be provided to relevant staff where appropriate.	10/11/2021 - Stock survey competed 26/11/2021 - Letter sent to Miss X detailing repairs identified and suggesting 07/12/2021 start date for works. 30/11/2021 - Payments made to complainant's bank account.	30/11/2021 - HO confirmed compliance with orders.
Place -Environmental Health 21011833	Mrs X complained the Council failed to provide a pest control service that she had paid for, and that it gave her incorrect information about when a refund would be paid, which resulted in Mrs X going overdrawn.	02/11/21	LGSCO decided not to investigate further after Mrs X advised that the Council had since taken action to resolve matters (apologised for not providing the service and for falling to communicate with her properly about this; and also offered Mrs A payment of £50 in recognition of what went wrong and made a commitment to ensure correct information is given in future). Mrs X satisfied with the action the Council has taken and therefore no grounds for further LGSCO involvement.	No further action required - Mrs X satisfied with the action the Council has taken	No further action required.	Not applicable
People - SEND 20 004 535	Mr C and Mrs M (the father and Grandmother of X), complained that the Council was at fault because: a) It withdrew funding for X's placement at a boarding school X attended which was paid for by the Council, b) It mishandled the review of X's education, health and care plan (EHCP), and c) It failed to provide X with a suitable education in 2020.	10/11/21		The Council agreed (within 2 weeks) to apologise in writing to Mr C and Mrs M and pay each of them £300 for the distress caused by delays, poor communication and failure to complete the EHCP in compliance with the statutory deadline. The Council also agreed (within 2 weeks) to apologise in writing to X and pay him £1800 for lost education and £500 for distress and a loss of therapeutic provision. The Council agreed (within 2 months) to write to the Ombudsman and explain how it will prevent similar failures in future. In particular: a) How it will tighten up EHCP review procedures; b) How it till ensure that children remain in education; and c) How it will improve communication with members of the public.	29/11/2021 - Apology letters sent to Mr C, Mrs M and X. 08/12/2021 - Payments totalling £2,900 paid. 07/01/2022 - Response sent to LGSCO outlining changes made to prevent similar failures in future. Changes include: - review of the system which is used to ensure we have accurate records of annual reviews which are due, which have taken place and those in process. This information is now reviewed by the management group within SENDSARS on a fortnightly process to ensure processes are managed within statutory timescales introduction of a tracking system which highlights children and young people who may be struggling in placements which are at the point of breakdown or have broken down. This is reviewed on a fortnightly basis to ensure there is continuous action and scrutiny on these cases improved accessibility to services such as home tutoring or online learning to children and young people who may find themselves out of placement, whilst other options are explored increased capacity across core members of staff, who are our families first point of contact and built in a communication expectation into the practice standards for SENDSARS, which is discussed in all supervisions and appraisals.	

People - ASC (Social Care Accounts Service) ref 21 000 646	Mrs X complains on behalf of her mother, Mrs Y, about the Council's decision that she deprived herself of assets to avoid paying towards her care costs.	25/11/21	Ombudsman found fault in that the Council did not demonstrate it had addressed all the grounds for review as set out by Mr and Mrs X. Decision letters did not provide "full written reasons" for its decision as specified in its terms of reference.	Council agreed (within one month) to provide an apology to Mrs X and Mrs Y. Council further agreed (within 3 months) to carry out a further review of the financial assessment to consider all the points raised by Mrs X, including the explanation for Mrs Y's motivation at the time she gifted her capital.	20/12/2021 Apology letters sent. 23/02/2022 - Review outcome letter sent	01/03/2022 - LGSCO issued 'Remedy complete and satisfied' outcome.
Place - Waste Management ref 21 004 877	Mrs X complained that the Council wrongly decided that a car on her private property was abandoned and removed it.	10/12/21	The LGSCO found fault with the Council's failure to use Mrs X's tax disc to ascertain that she was the owner of the vehicle and the Council's failure to contact the police which caused Mrs X the injustice of having her car taken away without notice.	The Council agreed (within one month) to pay Mrs X £200 to acknowledge the distress caused in addition to the £95 it offered to pay to cover her costs. The Council further agreed (within two months) to review its policy on abandoned vehicles.	14/01/2022 Payment raised 21/02/2022 Updated Policy shared with LGSCO. Policy now includes police notifications and also the provision of 15 day advanced notice prior to removal of abandoned vehicles on private land.	22/02/2022 - LGSCO issued 'Remedy complete and satisfied' outcome.
People ASC - ref 21 001 107	Ms C, complained to us on behalf of her (late) father, Mr F. Ms C complained there was an unreasonable delay by the Council in carrying out her father's needs assessment.	04/01/22	The LGSCO found there was fault with the way the Council eventually carried out the needs assessment.	The Council agreed (within 4 weeks) to issue a further apology for the additional fault identified. The Council also agreed (within 8 weeks) to review the way it plans, records and monitors (refresher) training of those responsible for carrying out needs assessments (care managers, social workers etc) to ensure it complies with the (refresher) training and skills requirements of the Care Act.	31/01/2022 - Apology letter sent. 04/03/2022 - 'Care Act' training information shared with LGSCO.	07/03/2022 - LGSCO issued 'Remedy complete and satisfied' outcome.
People - ASC 20 013 706	Mr X complained the Council failed to ensure it had effective monitoring processes in place in relation to his daughter, Miss D's, supported living placement; and delayed in responding to his complainet. He also complained that Miss D found the staff on site unapproachable and said she had not been protected adequately from being intimidated by other residents. As a result, Mr X says Miss D has no trust in the support provided in the placement, is distressed by the state of disrepair and no longer wants to live there.	17/02/22	The LGSCO found the Council has already accepted there was a need to improve monitoring and has taken appropriate steps to address this. The Council took too long to respond to Mr X's complaint and has already apologised for this which is suitable to remedy the frustration this caused Mr X.	The Council agreed (within 3 months) to provide the LGSCO evidence that the outstanding work to the communal room has been completed and evidence it has raised the issue of unacceptable delays with the Landlord.	10/01/2022 - Delays in carrying out works at the placement were raised with Landlord. 10/02/2022 Further meeting held where Landlord confirmed that works now completed 22/02/2022 - LGSCO informed of above and sent photos to evidence sofa/flooring replacement.	16/05/2022 - LGSCO issued 'Remedy complete and satisfied' outcome.
Place - Transport Planning/Environmental Health 20 011 499	Mr D complained the Council has failed to take appropriate action when he raised concerns about noise and air pollution from idling buses near to where he lives. He says he cannot sit outside on his balcony or open his windows because of the fumes and noise from the buses.	03/03/22	The LGSCO found the Council was at fault. In addition to some communication failures, the Council failed to consider its duties under the Environmental Protection Act 1990 regarding noise from idling buses near to where Mr D lives.	The Council agreed (by 31 March 2022) to: - apologise to Mr D; - pay Mr D E150 for the frustration caused to him; - contact Mr D and start an investigation under the Environmental Protection Act 1990 into whether the noise from the idling bus engines represents a statutory nuisance, and - update Mr D on the result of its discussions with Organisation A and the bus companies.	22/03/2022 - Apology/update letter sent to Mr D - letter also confirms EPS will be contacting him direct regarding EPS investigation and seeks clarification on payment method. 31/03/2022 - Cheque for £150 raised. 27/04/2022 - Confirmation sent to LGSCO that EPS have allocated case and case officer in regular contact with Mr D - noise monitoring equipment to be installed 03/05/2022.	28/04/2022 - LGSCO issued compliance outcom of 'Remedy complete late'
Resources - Customer Services 21 009 356	Mr F complained about the Council's decision to refuse his application for a blue badge. He says as a result he does not have the support he needs, causing him significant distress.	10/03/22	The LGSCO found there was fault by the Council but was satisfied with the actions the Council has since taken to remedy the injustice caused. (Following contact from the LGSCO the Council reviewed Mr F's case and issued him with a blue badge.)	No further action required - LGSCO satisfied with actions taken.	No further action required.	Not applicable

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20 July 2022

By email

Ms Josephs Chief Executive Sheffield City Council

Dear Ms Josephs

Annual Review letter 2022

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 2022. The information offers valuable insight about your organisation's approach to complaints. 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.

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.

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 agreed 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 27 July 2022. 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, my investigators have raised concerns about your Council's responses to our enquiries; responses were late in nearly half of cases. On two occasions, my investigators had to involve a manager to get a response from the Council. These delays can result in further avoidable distress to complainants, and I ask the Council to reflect on its practices and take the necessary steps to improve its liaison with my office.

Supporting complaint and service improvement

I know your organisation, like ours, will have been through a period of adaptation as the restrictions imposed by the pandemic lifted. While some pre-pandemic practices returned, many new ways of working are here to stay. It is my continued view that complaint functions have been under-resourced in recent years, a trend only exacerbated by the challenges of the pandemic. Through the lens of this recent upheaval and adjustment, I urge you to consider how your organisation prioritises complaints, particularly in terms of capacity and visibility. Properly resourced complaint functions that are well-connected and valued by service areas, management teams and elected members are capable of providing valuable insight about an organisation's performance, detecting early warning signs of problems and offering opportunities to improve service delivery.

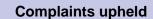
I want to support your organisation to harness the value of complaints and we continue to develop our programme of support. Significantly, we are working in partnership with the Housing Ombudsman Service to develop a joint complaint handling code. We are aiming to consolidate our approaches and therefore simplify guidance to enable organisations to provide an effective, quality response to each and every complaint. We will keep you informed as this work develops, and expect that, once launched, we will assess your compliance with the code during our investigations and report your performance via this letter.

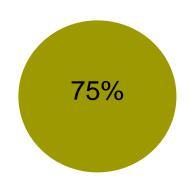
An already established tool we have for supporting improvements in local complaint handling is our successful training programme. We adapted our courses during the Covid-19 pandemic to an online format and successfully delivered 122 online workshops during the year, reaching more than 1,600 people. To find out more visit www.lgo.org.uk/training.

Yours sincerely,

Michael King

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





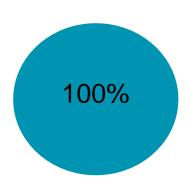
75% of complaints we investigated were upheld.

This compares to an average of **68%** in similar organisations.

15 upheld decisions

20 investigations for the period between 1 April 2021 to 31 March 2022

Compliance with Ombudsman recommendations



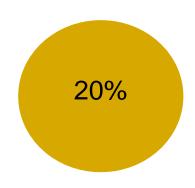
In **100%** of cases we were satisfied the organisation had successfully implemented our recommendations.

This compares to an average of **100%** in similar organisations.

14 compliance outcomes for the period between 1 April 2021 to 31 March 2022

 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 **20%** of upheld cases we found the organisation had provided a satisfactory remedy before the complaint reached the Ombudsman.

This compares to an average of **11%** in similar organisations.

3

satisfactory remedy decisions

15 upheld decisions for the period between 1 April 2021 to 31 March 2022

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Landlord Performance Data 2021-22

1.0 Number of Homes

Count of homes under the Housing Ombudsman Service's jurisdiction as of 31/03/2021

Landlord Name	Sheffield City Council
Homes	
38 877	

2.0 Determinations by Outcome

Cases determined between 01/04/2021 - 31/03/2022 by overall determination

2.1 Individual Landlord

Landiord Name	Shellield City Council	
Overall Determination	Count	%
Maladministration	2	40%
No Maladministration	2	40%
Outside Jurisdiction	1	20%
Grand Total	5	100%

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2.0 Determinations (continued)Cases determined between 01/04/2021 - 31/03/2022 by overall determination

2.2 By Landlord Type'Other' includes Co-operatives, For profit, Voluntary, Almshouse or Abbeyfield provider types

Overall Determination	Housing Association	Local Authority	Other	Grand Total
Severe Maladministration	0%	0%	0%	0%
Maladministration	19%	26%	41%	21%
Partial Maladministration	24%	22%	18%	23%
Reasonable Redress	12%	6%	6%	10%
No Maladministration	27%	26%	6%	27%
Mediation	4%	2%	18%	3%
Outside Jurisdiction	11%	18%	12%	13%
Withdrawn	2%	1%	0%	2%
Grand Total	100%	100%	100%	100%

2.3 By Landlord Size

	Overall Determination	Less than 1k units	Between 1k and 10k units	More than 10k units	Grand Total
τ	Severe Maladministration	0%	0%	0%	0%
מ	Maladministration	26%	20%	21%	21%
0	Partial Maladministration	23%	24%	23%	23%
Θ	Reasonable Redress	5%	6%	12%	10%
	No Maladministration	18%	34%	26%	27%
\approx	Mediation	6%	2%	3%	3%
U	Outside Jurisdiction	22%	13%	13%	13%
	Withdrawn	0%	1%	2%	2%
	Grand Total	100%	100%	100%	100%

3.0 Findings by CategoryFindings on cases determined between 01/04/2021 - 31/03/2022 by category and decision

Landlord Name	Sheffield City Council

	Finding					
Category	Maladministration	Service failure	Redress	No maladministration	Outside Jurisdiction	Grand Total
Anti-Social Behaviour					3	3
Complaints Handling	2		1			3
Information and Data Management					1	1
Moving to a Property					1	1
Property Condition	1	2		1		4
Staff				1		1
Grand Total	3	2	1	2	5	13

Take Specific Action (non-repair)

Grand Total

4.0 Orders Made by Orders on cases determine	Type d between 01/04/2021 - 31/03/2022 by order type
C Landlord Name	Sheffield City Council
Туре	Order
Order Type	Count
Case Review	2
Compensation	5

5.0 Order Compliance Within 3 MonthsOrders with compliance target dates between 01/04/2021 - 31/03/2022

5.1 Individual Landlord

Landlord Name	Sheffield City Council
Туре	Order

Time to comply	Count	%
Within three months	10	100%
Grand Total	10	100%

5.2 By Landlord Type'Other' includes Co-operatives, For profit, Voluntary, Almshouse or Abbeyfield provider types

Time to comply	Housing Association	Local Authority	Other	Grand Total
Within three months	100%	99%	100%	99%
More than three months	0%	1%	0%	1%
Grand Total	100%	100%	100%	100%

5.3 By Landlord Size				
Time to comply	Less than 1k units	Between 1k and 10k units	More than 10k units	Grand Total
Within three months	100%	100%	99%	99%
More than three months	0%	0%	1%	1%
Grand Total	100%	100%	100%	100%

6.0 Order Compliance Within 6 MonthsOrders with compliance target dates between 01/04/2021 - 31/03/2022

6.1 Individual Landlord

Landlord Name	Sheffield City Council
Туре	Order

Time to comply	Count	%
Within six months	10	100%
Grand Total	10	100%

6.2 By Landlord Type

'Other' includes Co-operatives, For profit, Voluntary, Almshouse or Abbeyfield provider types

Time to comply	Housing Association	Local Authority	Other	Grand Total
Within six months	100%	100%	100%	100%
More than six months	0%	0%	0%	0%
Grand Total	100%	100%	100%	100%

6.3 By Landlord Size

$\boldsymbol{\omega}$					
Эg	Time to comply	Less than 1k units	Between 1k and 10k units	More than 10k units	Grand Total
_	Within six months	100%	100%	100%	100%
<u> </u>	More than six months	0%	0%	0%	0%
_	Grand Total	100%	100%	100%	100%

7.0 Compensation Ordered

Total amount of compensation ordered in determinations made between 01/04/2021 - 31/03/2022

Landlord Name	Sheffield City Counci
Туре	Order
Total	
£2,400.00	

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Audit and Standards Committee Report

Report of:	Interim Director of Legal and Governance		
Date:	17 November 2022		
Subject:	Work Programme		
Author of Report:	Jay Bell, Democratic Services		
Summary:			
The report provides detail	s of an outline work programme for the Committee.		
Recommendations:			
That the Committee:-			
(a) considers the Work Programme and identifies any further items for inclusion; and			
(b) approves the work programme.			
Background Papers: None			
Category of Report:	OPEN		

Statutory and Council Policy Checklist

Financial Implications			
NO Cleared by:			
Legal Implications			
NO Cleared by:			
Equality of Opportunity Implications			
NO Cleared by:			
Tackling Health Inequalities Implications			
NO			
Human rights Implications			
NO:			
Environmental and Sustainability implications			
NO			
Economic impact			
NO			
Community safety implications			
NO			
Human resources implications			
NO			
Property implications			
NO			
Area(s) affected			
NONE			
Is the item a matter which is reserved for approval by the City Council?			
NO			
Press release			
NO			

REPORT OF THE INTERIM DIRECTOR OF LEGAL AND GOVERNANCE

AUDIT AND STANDARDS COMMITTEE 17 November 2022

WORK PROGRAMME

- 1. Purpose of Report
- 1.1 To consider an outline work programme for the Committee.
- 2. Work Programme
- 2.1 It is intended that there will be at least five meetings of the Committee during the year with three additional meetings arranged if required. The work programme includes some items which are dealt with at certain times of the year to meet statutory deadlines, such as the Annual Governance Report and Statement of Accounts, and other items requested by the Committee. In addition, it also includes standards related matters, including an annual review of the Members Code of Conduct and Complaints Procedure and an Annual Report on the complaints received.
- 2.2 An outline programme is attached and Members are asked to identify any further items for inclusion.
- 3. Recommendation
- 3.1 That the Committee:-
 - (a) considers the Work Programme and identifies any further items for inclusion; and
 - (b) approves the work programme.

David Hollis Interim Director of Legal and Governance

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Date	Item	Author
16 June 2022	Internal Audit Plan 2022/23	Linda Hunter (Senior Finance Manager)
	Progress in High Opinion Reports	Linda Hunter (Senior Finance Manager)
	New Housing System and Project Update	Ajman Ali (Executive Director Operational Services)
	Government Response to The Committee on Standards in Public Life Report	Gillian Duckworth (Director of Legal and Governance)
	Work Programme	Gillian Duckworth (Director of Legal and Governance)
	Strategic Risk Reporting	Helen Molteno (Corporate Risk Manager)
7 July 2022	Closed Meeting with Members and Ernst & Young	
28 July 2022	Summary of Statement of Accounts	Ryan Keyworth (Director of Finance and Commercial Services)
	Internal Audit Annual Fraud Report	Stephen Bower (Finance and Risk Manager)
	Role of the Audit Committee and Training	Claire Sharratt (Senior Finance Manager)
	Work Programme	Gillian Duckworth (Director of Legal and Governance)
22 September 2022	Virtual Training – Learning lessons from recent reports	External Facilitator Bethany Evans
22 September 2022	External Audit Plan 2021/22	External Auditor (EY)

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	Annual Internal Audit Report	Linda Hunter (Senior Finance Manager)
	Formal Response to Audit (ISA 260) Recommendations	Ryan Keyworth (Director of Finance and Commercial Services)
	Interim Standards Complaints Report (Half Yearly)	Gillian Duckworth (Director of Legal and Governance)
	Annual Governance Statement	Gillian Duckworth (Director of Legal and Governance)
20 October 2022	Closed meeting with Members and External Auditors	
17 November 2022	Annual Corporate Complaints Report & Annual Ombudsman Report 2021/22	Corleen Bygraves-Paul (Service Delivery Manager)
	Work Programme	David Hollis (Interim Director of Legal and Governance)
22 December 2022	Whistleblowing Policy Review	Elyse Senior- Wadsworth (Head of Human Resources)
	Information Management Annual Report	Sarah Green (Senior Information Management Officer)
	Progress in High Opinion Reports	Linda Hunter (Senior Finance Manager)
	Work Programme	David Hollis (Interim Director of Legal and Governance)
19 January 2023	Strategic Risk Reporting	Helen Molteno (Corporate Risk Manager)
	Annual Standards Report	David Hollis (Interim Director of Legal and Governance)
	Review of Members' Code of Conduct and Complaints Procedure	David Hollis (Interim Director of Legal and Governance)
	Community Schools Update	Andrew Jones

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		(Director of Education and Skills)
	Statement of Accounts (Audited)	Ryan Keyworth (Director of Finance & Commercial Services)
	Report of those Charged with Governance (ISA 260)	External Auditor (EY)
	Work Programme	David Hollis (Interim Director of Legal and Governance)
16 February 2023	Work Programme	David Hollis (Interim Director of Legal and Governance)
9 March 2023	Update on Governance Issues outlined in the Annual Governance Statement	David Hollis (Interim Director of Legal and Governance)
	Work Programme	David Hollis (Interim Director of Legal and Governance)
13 April 2023	Internal Audit Plan 2023/24	Linda Hunter (Senior Finance Manager)
	Compliance to International Auditing Standards	Ryan Keyworth (Director of Finance and Resources)
	Work Programme	David Hollis (Interim Director of Legal and Governance)
July / August2023	Audit Training	External Facilitator (TBC)
June 2023	Progress in High Opinion Reports	Linda Hunter (Senior Finance Manager)
	Internal Audit Annual Fraud Report	Linda Hunter (Senior Finance Manager)
	Strategic Risk Update	Helen Molteno (Corporate Risk Manager)
	Work Programme	David Hollis (Interim Director of Legal and Governance)

IMPORTANT INFORMATION FOR REPORT WRITERS

The Audit and Standards Committee provides an independent and high-level focus on the audit, assurance and reporting arrangements that underpin good governance and financial standards.

The purpose of the Committee is to provide independent assurance to the Council of the adequacy of the risk management framework and the internal control environment. It provides independent review of Sheffield City 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.

The Committee also cover Standards and is primarily responsible for promoting and maintaining high standards of conduct by councillors, independent members,

and co-opted members. It is responsible for advising and arranging relevant training for members relating to the requirements of the code of

conduct for councillors. The Committee also monitor the Council's complaints process and the Council's response to complaints to the Ombudsman.

The Committee is not an operational committee, so is not focussed on the day to day running of your service. However, its focus is on risk management and governance, so it will want to understand how you manage your key risks, and how you are responding to new challenges and developments. In particular the Committee will be interested in the progress on implementing agreed recommendations from inspection and audit reports, and will want to review your services' outputs and actions in response. You can expect some challenge if deadlines for implementing agreed actions have been missed. Please ensure breakdowns of information are included in your report, as the Committee is interested in the key facts and figures behind areas.

Most Audit and Standards papers are public documents, so use everyday language, and use plain English, don't use acronyms, or jargon and explain any technical terms. Assume the reader knows little about your subject.

Think about how the paper will be interpreted by those who read it including the media.

Use standard format - don't subvert it.

Ensure – You convey the key message in the first paragraph not the last.

The report should include –

- Summary
- Recommendation (s)
- Introduction

- Background
- Main body of the report (in. legal, financial and all other relevant implications)

(report templates are available from Democratic Services)

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