

AUDIT AND RISK COMMITTEE

27 September 2022

INFORMATION GOVERNANCE ANNUAL REPORT

Report of the Director for Legal & Governance

Strategic Aim:	All	
Exempt Information	No	
Cabinet Member(s) Responsible:	Councillor K Payne - Portfolio Holder for Finance, Governance and Performance, Change and Transformation	
Contact Officer(s):	Angela Wakefield, Director of Legal & Governance, Monitoring Officer	01572 758220 awakefield@rutland.gov.uk
	Dave Cousens, Information Governance Coordinator	01572 758265 dcousens@rutland.gov.uk
Ward Councillors	Not Applicable	

DECISION RECOMMENDATIONS
That the Committee: 1) Notes the information contained in this report.

1 PURPOSE OF THE REPORT

- 1.1 This annual report provides an overview of the Council's activity in respect of how it has discharged its responsibilities in matters relating to Information Governance, including information regarding Compliments, Comments and Complaints over the last financial year from 1 April 2021 to 31 March 2022.

2 BACKGROUND AND MAIN CONSIDERATIONS

- 2.1 The Council has statutory obligations to meet as set out in legislation including dealing with Freedom of Information Requests, Environmental Information Regulations Requests, Subject Access Requests, Data Incidents and Complaints. More information is provided in each section.

3 FOI

3.1 Obligations and legislation

3.1.1 The Freedom of Information Act 2000 and The Environmental Information Regulations 2004 impose an obligation on public authorities to provide public access to certain information held by them. On receipt of a valid request for information, the authority must comply with that request as required by the Act, unless an exemption can be applied.

3.1.2 Anyone has a right to request information from a public authority. Our three separate duties when responding to these requests are:

- to tell the requester whether we hold any information falling within the scope of their request;
- to provide that information; and
- to respond to the request within 20 working days.

3.2 Statistics for 2021/22

3.2.1 The number of FOI's/EIR's received during 2021/22 is shown in the table below:

	2021/22		2020/21	
Directorate	Number of FOI's	% Responded Within Timescales	Number of FOI's	% Responded Within Timescales
People	274	99%	227	96%
Resources	272	98%	288	98%
Places	316	97%	308	98%
Land Charges (Personal Searches)	606	100%	612	100%
Total	1468	99%	1435	98%

3.2.2 Officer time responding to FOI/EIR requests:

The time taken by officers to process FOI's/EIR's is shown in the table below:

	2021/22	2020/21
Number of FOIs/EIRs*	862 (+606*)	823 (+612*)
Average Officer Time (per request)	49 mins	39 mins
Average FOI Team Time (per request)	30 mins	30 mins
Average Officer/FOI Team Time (per request)	79 mins	69 mins
Average FOI Team Time (per month)	36 Hrs	35 Hrs

3.2.3 If a requester is unhappy with an FOI/EIR response, they can request an internal review. If they remain unhappy following the internal review, the matter can be referred to the Information Commissioners Office (ICO). The table below sets out the number of internal reviews and referrals for 2021/22 and the previous year.

	2021/22	2020/21
Total Number of Requests for Internal Reviews (IR)	9	10
% Completed Within Recommended Timescales	100%	90%
Internal Review Outcome: Upheld	1	1
Internal Review outcome: Not upheld	8	9
Escalations to ICO	2*	1
Complaint outcome: upheld by ICO - corrective action required	0	0
Complaint outcome: not upheld - ICO found no fault	1	1

* 1 x escalation to the ICO remains open. Rutland County Council notified on 21 March 22. ICO still to allocate to an officer.

3.3 Overall assessment and Lessons learnt

- 3.3.1 The Council's FOI performance remains good, with processes and procedures in place to ensure we remain compliant. During 2021/22 we received and responded to 862 FOI's and only 9 internal reviews, with no corrective action required from the ICO. This compares to 2020/21 where we received 823 FOIs with 10 internal reviews, with none requiring corrective action required from the ICO.
- 3.3.2 Training and development within the Information Governance team to administer the FOI process is ongoing. Having experienced staff in place allows for repeat requests and frequently requested information to be identified, this will support the reduction of officer time responding to requests as the FOI team can respond directly.

4 COMPLIMENTS, COMMENTS & COMPLAINTS

4.1 Obligations and legislation

- 4.1.1 The Council has an obligation to provide the public with a clear route to make a formal complaint should they wish to do so. Our complaint policies and procedures were reviewed in 2020 and remain fit for purpose. Individual policies for Adults and Children's Services are available to ensure that complaints are dealt with in accordance with legislation to safeguard individuals. The Council's policies can be found on the Council's [website](#).
- 4.1.2 The Council is committed to providing a high-quality service to everyone we deal with. In order to do this, we need individuals to give us any feedback on our service, and to tell us when we get things right or wrong.
- 4.1.3 When individuals do complain or make comments then we take them seriously, deal with them as quickly as possible and learn from them so that we can continuously improve our service.

4.2 Statistics for 21/22

Compliments

- 4.2.1 A compliment can be defined as customer feedback, which tells the Council that it has provided a service well, or how helpful a member of staff has been.
- 4.2.2 During 1 April 2021 to 31 March 2022, the Council registered 197 compliments from customers. This is an increase of 46% compared to the same period in 2020/21 where 135 compliments were received.
- 4.2.3 Below is a breakdown by Directorate:

	2021/22	2020/21	Diff(+/-)
Places	78	47	+31
Resources	32	17	+15
People	87	71	+16
Total	197	135	+62

Places

	2021/22	2020/21	Diff (+/-)
Community Safety	1	2	-1
Culture	38	13	+25
Development Control	6	2	+4
Economic Development	1	0	+1
Environment, Licensing & Trading Standards	0	0	0
Forestry	1	0	+1
Grounds & Cemetery	1	0	+1
Highways	9	5	+4
Parking	2	3	-1
Property	1	1	0
Streetscene & Waste	8	20	-12
Transport	10	1	+9
Total	78	47	+31

Resources

	2021/22	2020/21	Diff (+/-)
Business Support	7	1	+6
Communications	0	2	-2
Customer Services/Blue Badges	13	6	+7
Elections	1	1	0
Finance	0	0	0
Governance	6	0	+6
Human Resources	0	0	0
Information Governance	3	2	+1
Revenues & Benefits	2	5	-3
Total	32	17	+15

People

	2021/22	2020/21	Diff (+/-)
Adult Social Care	33	20	+13
Children Social Care	23	12	+11
Early Help, SEND and Inclusion	25	34	-9
Learning & Skills	6	5	+1
Total	87	71	+16

4.2.4 It is always encouraging to see visibility of the good work that is being delivered by the Council and it will remain a topic for discussion with departments to encourage and promote sending compliments in for central collation.

4.2.5 Oakham Castle, Protection & Permanency, SEND, CST and Community Support Services received the highest number of compliments, with the majority relating to helpful staff members.

Comments

4.2.6 A comment can be defined as an idea, suggestion or opinion on how the Council could improve its services.

4.2.7 The comments received have been reviewed with no themes identified. All comments are forward to the relevant Head of Service to be assessed and actioned where appropriate.

4.2.8 From 1 April 2021 to 31 March 2022 the Council registered 11 Comments from customers; this is an increase of 120% of the total comments received compared to the same period in 2020/21 where 5 comments were received.

4.2.9 Of the 11 comments received, 3 were in relation to the Recycling Centre Booking System and 3 for the Cottesmore Hunt.

4.2.10 Below is an overview of how this breakdown by Directorate:

	2021/22	2020/21	Diff(+/-)
Places	11	2	+9
Resources	0	2	-2
People	0	1	-1
Total	11	5	+6

Complaints

4.2.11 A complaint can be defined as dissatisfaction with any service provided by the Council.

4.2.12 Below is a breakdown by Directorate:

	2021/22	2020/21	Diff(+/-)
Places	39	32	+7
Resources	10	8	+2
People	20	25	-5
Total	69	65	+4

Places

	2021/22	2020/21	Diff (+/-)
Community Safety	1	0	+1
Culture	0	0	0
Development Control	13	25	-12
Economic Development	2	0	+2
Environment, Licensing & Trading Standards	3	2	+1
Forestry	1	0	+1
Grounds & Cemetery	0	0	0
Highways	4	2	+2
Parking	1	0	+1
Property	1	0	+1
Streetscene & Waste	13	3	+10
Transport	0	0	0
Total	39	32	+7

Resources

	2021/22	2020/21	Diff (+/-)
Business Support	1	0	+1
Customer Services	0	0	0
Elections	0	0	0
Finance	0	0	0
Governance	1	1	0
Human Resources	0	1	-1
Information Governance	0	0	0
Revenues & Benefits	8	6	+2
Total	10	8	+2

People

	2021/22	2020/21	Diff (+/-)
Adult Social Care	5	10	-5
Children Social Care	2	11	-9
Early Help, SEND and Inclusion	13	4	+9
Total	20	25	-5

4.2.13 The Increase in Streetscene and Waste complaints is mainly owing to the non-collection of bins due to COVID-19 infections of contractor staff.

Complaints Upheld

4.2.14 Of the 69 complaints registered during 1 April 2021 to 31 March 2022, 22 were upheld (this means that the service believes that there was a failing that could have been avoided, or something went wrong). This is an increase of 23% of total complaints upheld compared to the same period in 2020/21 with 65 complaints registered and 6 upheld. 5 years ago, 115 complaints were registered with 28 upheld. A significant improvement has been achieved in the reduction of complaints received during 1 April 2021 to 31 March 2022.

4.2.15 Number of Complaints Received v Upheld

Directorate	2021/22			2020/21			Diff (-/+)
	Received	Upheld	% Upheld	Received	Upheld	% Upheld	
Places	39	16	41%	32	4	12.5%	+29.5%
Resources	10	2	20%	8	0	0%	+20%
People	20	4	20%	25	2	8%	+12%
Total	69	22	32%	65	6	9%	+23%

4.2.16 lessons learned and improvements implemented

- 4.2.16.1 Most complainants want to make sure what happened to them doesn't happen to someone else. Our complaints process should help to find the root causes of problems and make improvements to systems and processes where they haven't worked properly. This can include changing policies and procedures, or training staff.
- 4.2.16.2 The following lessons have been learned and improvements implemented to ensure that Rutland County Council gets it right the next time:
- 4.2.16.3 Resources
- 4.2.16.4 Post Room - An EHCNA application was not distributed it to the SEND team as required which resulted in the delay in processing the request. As a result, further training and guidance on processing of post has been provided to Administrator. A new process for services collecting hard copies of post in person will be introduced. Procedures will be closely monitored and reviewed.
- 4.2.16.5 Business Support - Wording and tone of the email sent to customer fell well below the Council's standards. The email sent was not only sent to the wrong person but delivered a message that was totally unacceptable. Processes have been reviewed and systems have been put in place to ensure that this poor standard of service does not happen again. Administrator will undergo further training regarding the standard of customer service expected, particularly in the wording of emails and letters.
- 4.2.16.6 People
- 4.2.16.7 SEND – The Local Authority did not meet a 4-week timescale concerning a potential breach of duty under section 44 of the Children and Families Act 2014. The SEND service is working closely with our Rutland Parent Carer Forum to communicate to families how the SEND service is managing demand and capacity in the SEND system and will endeavour to keep the Local Offer up to date.
- 4.2.16.8 SEND - The Local Authority accept that communication regarding the issue with Health advice was poor. The service reviewed how we communicate with parents and carers where deadlines will not be met due to circumstances beyond the control of the Local Authority.
- 4.2.16.9 SEND – Parents request for support to help her care for her child. RCC carried out a review of the process for carrying out parent carer assessments. The assessment process has been reviewed, and the carers assessment will be a component of the child and family assessment.

4.2.16.10 Places

4.2.16.11 Installation of Fence – The levels change was not picked up or referred to in the Planning Officers delegated report. The submitted plans showed a change in levels to the boundary of property and should have been fully evaluated in the Officers Report. In order to ensure that this does not happen again the importance of recording all details including levels changes with the team. Delegated reports were amended to ensure that there is a section in the report template to cover issues relating to ground levels.

4.2.16.12 Bin Collection/Delivery - Due to industry wide issues and driver shortages, there has been a high staff turnover recently and unfortunately newer crew members were not aware of the issue with these bins. All members of the crews have now been spoken to and clear instructions issued. We have also clearly labelled the bins so that this acts as an immediate visual reminder to both crews and residents of the flat blocks.

4.3 The Local Government and Social Care Ombudsman Complaints (LG&SCO)

4.3.1 The LG&SCO looks at complaints about Councils in a fair and independent way. All decision statements are published on their website.

4.3.2 The Ombudsman sends an Annual Review Letter to all councils. The letter provides a summary of the complaints that the Ombudsman has received regarding the Council, if complaints have been upheld and any remedies/actions recommended by the Ombudsman. The Council's Statutory Complaints Officer will review this information upon receipt to ensure all actions have been implemented and are embedded in our ways of working.

4.3.3 Below is a breakdown by Directorate of complaints received from the LG&SCO:

	2021/22	2020/21	Diff(+/-)
Places	5	1	+4
Resources	1	2	-1
People	2	4	-2
Total	8	7	+1

4.3.4 Of the 8 complaints registered from 1 April 2021 to 31 March 2022, 2 were upheld by the LG&SCO; 5 complaints were closed after initial enquiries and 1 closed as a premature decision with advice given to the complainant. This is a decrease of 4% of total complaints upheld compared to the same period in 2020/21, when 7 complaints were registered and 2 upheld.

4.3.5 Both of the complaints upheld were remedied by way of an apology and financial redress for unnecessary upset time and trouble.

4.3.6 The Council has met deadlines when responding to LG&SCO enquiries in all but one case, where Rutland County Council requested an extension and responded within the revised deadline.

4.3.7 Typically, we spend 2 hours administering and responding to a complaint. However, this is dependent on the complexity of the issues raised.

5 SUBJECT ACCESS REQUESTS (SAR)

5.1 Obligations and legislation

- 5.1.1 The UK General Data Protection Regulation (UK GDPR) enables individuals the right to access any personal data an organisation holds on them. This is known as a Subject Access Request (SAR).

5.2 Statistics for 21/22

- 5.2.1 Below is a breakdown by Directorate:

	2021/22	2020/21	Diff(+/-)
Places	12	18	-6
Resources	5	1	+4
People	24	27	-3
Total	41	46	-5

- 5.2.2 During 1 April 2021 to 31 March 2022, the Council registered 41 SARs, compared with 46 in same period in 2020/21. All 46 requests were completed in accordance with the statutory timescale of one calendar month.
- 5.2.3 SARs can be complex to process as they often involve multiple data subjects' personal data within each record. This gives rise to the need for detailed redaction of each record to ensure that disclosure is accurate. Each request may include hundreds of records. 7 of the SARs received in 2021/22 were significantly complex and sizeable; the largest being 4000 pages.
- 5.2.4 Typically, it takes a SAR with 500 pages 5 days to process. The average number of pages per SAR is 722.
- 5.2.5 During 1 April 2021 to 31 March 2022 the Council registered 1 complaint received from the Information Commissioners Office (ICO) regarding a SAR, compared to 1 in 2020/21. The case is open and is yet to be allocated to an ICO case officer after 4 months.

5.3 Overall assessment and lessons learnt

- 5.3.1 The Council has met all obligations
- 5.3.2 The Information Governance team undertake all redaction to allow the services to concentrate on frontline services.
- 5.3.3 The redaction process is completed electronically, rather than using hardcopies to avoid the transportation of hardcopy personal data and to reduce costs.
- 5.3.4 Requesters are provided with the final response either by secure email or on a USB stick thus making savings on paper, printing and postage.

6 DATA BREACHES AND REFERRALS TO THE INFORMATION COMMISSIONER'S OFFICE (ICO)

6.1 Obligations and legislation

- 6.1.1 A personal data breach means a breach of security leading to the accidental or unlawful destruction, loss, alteration, unauthorised disclosure of, or access to, personal data.
- 6.1.2 Not every data breach needs to be reported to the ICO. The Data Protection Officer (DPO) and/or Senior Information Risk Owner (SIRO) review every breach to consider the likelihood and severity of the risk to people's rights and freedoms. If it is likely there will be a risk, the Council will report breaches to the ICO. By law the Council has 72 hours from the time of notification of the breach to report breaches that meet the threshold to the ICO.

6.2 Statistics for 21/22

- 6.2.1 From 1 April 2021 to 31 March 2022, the Council registered 14 data breaches. This is a decrease of 36% compared to the same period in 2020/21 where 22 data breaches were logged; and a 55% decrease compared to 2019/20.
- 6.2.2 The reduction in data breaches is due in part to the Council's continued ways of working. The Council has promoted working electronically to aid the working from home model and to reduce the cost of printing and postage across the organisation. As a result of this there has been a significant reduction in the processing of hardcopy personal data, therefore, less room for errors to be made in this area.
- 6.2.3 During 2021/22, the Council reported 2 data breaches to the ICO. This is the same number compared to the same period in 2020/21. In both cases, personal data had been shared. In both cases the ICO's decision was that no further action was required. Action has been taken to raise staff awareness of data sharing via eLearning training modules and staff briefings.
- 6.2.4 On average, the officer time taken to investigate a data breach in its entirety is 2 days. Depending on the severity of the breach, this can be longer.

6.3 Overall assessment and lessons learnt

- 6.3.1 The theme of the breaches that occurred in 2021/22 is when sending emails and the use of the 'blind copy' function. Staff have been reminded that outgoing emails to multiple external recipients should be sent using 'blind copy' so that email addresses are hidden from view.

7 DATA PROTECTION

7.1 Training

- 7.1.1 There is no requirement set out in the GDPR regarding data protection training for staff, however, principle 7 of the GDPR states that 'Data Controllers (the Council) are responsible for the compliance with the principles and must demonstrate this to data subjects and the regulator'.
- 7.1.2 To ensure our compliance, all new starters and elected members are required to complete mandatory GDPR eLearning training as part of their induction. Thereafter, all staff and elected members complete a GDPR refresher eLearning module after their first year at the Council. This is a rolling programme of training with completion monitored by the DPO.

7.1.3 Due to 2 data breaches occurring in 2021/22, the relevant teams have revisited the Information Sharing and Consent eLearning module to raise awareness when processing personal data. Since then, the Council has not experienced any breaches of a similar nature.

7.1.4 The Information Governance team will deliver further SAR training in 2021/22 as described in point 5.3.

7.2 Policy Reviews

7.2.1 The Council is required to have policies on Data Protection and Document Retention; these are published on the Council's website.

7.2.2 The review of the Council's Data Protection Policy, RIPA Policy, Document Retention and Records Disposal Policy were approved by Cabinet in April 2021.

7.3 Transparency Code

7.3.1 The Council has statutory obligations to publish data as required by the Local Government Transparency Code 2014. Publishing under this code gives the public access to information about local authorities' assets, contracts and financial spend as well as providing detail on senior officer's roles and salaries.

7.3.2 The quarterly update of this information typically takes officers 2 hours to complete with the quarter 1 update taking significantly longer as more information is required to be published at this point.

7.3.3 There were no new requirements to the published data in 2021/22.

7.4 Regulation of Investigatory Powers Act 2000 (RIPA)

7.4.1 The Council has not exercised its RIPA powers since the last report to the Committee earlier this year.

7.4.2 As reported in the RIPA Update Report to the Committee in April 2021, the planned actions following the Investigatory Powers Commissioner's Office (IPCO) Remote Inspection were completed; RIPA training in Dec 2021 and the Policy update approved in April 2022.

8 CONSULTATION

8.1 No formal consultation is required.

9 ALTERNATIVE OPTIONS

9.1 The Committee is asked to note the report. There are no alternatives.

10 FINANCIAL IMPLICATIONS

10.1 There are no financial implications arising from this report.

11 LEGAL AND GOVERNANCE CONSIDERATIONS

11.1 There are no legal and governance issues arising from the recommendations in this report.

11.2 The key legal issues are noted in each section and the report shows how we have complied with relevant legislation.

12 DATA PROTECTION IMPLICATIONS

12.1 A Data Protection Impact Assessments (DPIA) has not been completed because there are no risks/issues to the rights and freedoms of natural persons.

13 EQUALITY IMPACT ASSESSMENT

13.1 An Equality Impact Assessment (EqIA) has not been completed because there are no service, policy or organisational changes being proposed.

14 COMMUNITY SAFETY IMPLICATIONS

14.1 There are no community safety implications.

15 HEALTH AND WELLBEING IMPLICATIONS

15.1 There are no health and wellbeing implications.

16 CONCLUSION AND SUMMARY OF REASONS FOR THE RECOMMENDATIONS

16.1 To ensure the Committee has been updated on Information Governance activity.

17 BACKGROUND PAPERS

17.1 There are no additional background papers to the report.

18 APPENDICES

18.1 There are no appendices

A Large Print or Braille Version of this Report is available upon request – Contact 01572 722577.