

COMMITTEE

26 September 2023

INFORMATION GOVERNANCE ANNUAL REPORT 2022/23

Report of the Strategic Director for Law & Governance

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|--------------------------------|--|---|
| Strategic Aim: | All | |
| Exempt Information | No | |
| Cabinet Member(s) Responsible: | Cllr G Waller, Portfolio Holder for Law & Governance | |
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| Ward Councillors | All | |

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 2022 to 31 March 2023

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.
- 2.2 The statistics were recorded prior to the establishment of the current directorates and therefore reflect the previous structure.

3 FREEDOM OF INFORMATION

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 2022/23

- 3.2.1 During FY 2022/23, a total of 1396 FOI/EIR requests were received with 97% responded to within the statutory timescale. This compared to 1468 the previous year with 99% responded to within the statutory timescale. A breakdown of the statistics into directorates is shown at Appendix 1.1.
- 3.2.2 Officer time spent responding to FOI/EIR Requests is shown at Appendix 1.2. The average time per month the FOI Team took to process an FOI/EIR request during FY 2022/23 was 93 hours per month. A reduction of 2 hours compared to the previous year per month. A breakdown of the statistics is shown at Appendix 1.2.
- 3.2.3 The difference in average time taken per FOI between 2021/22 and 2022/23 is 6 minutes. Extrapolated to all 923 FOIs received means 92 hours of Officer/FOI Team time was saved.
- 3.2.4 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). During 2022/23 only 3 internal reviews were processed. This was a reduction of 66% compared to the previous year where 9 internal reviews were processed. A breakdown of the statistics is shown at Appendix 1.3.

3.3 OVERALL ASSESSMENT AND LESSONS LEARNED

- 3.3.1 The Council's FOI performance remains good, with processes and procedures in place to ensure we remain compliant. During 2022/23 we received and responded to 923 FOI's and only 3 internal reviews, with no corrective action required from the ICO. This compares to 2021/22 where we received 862 FOIs with 9 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 with regular FOI webinar training attended by staff. 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. 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 COMPLIMENTS – STATISTICS FOR 2022/23

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.

During 1 April 2022 to 31 March 2023, the Council registered 145 compliments from customers. This is a decrease of 52 compliments compared to the same period in 2021/22 where 197 compliments were received. A breakdown of compliments into Directorates and departments can be found at Appendix 1.4..44

4.2.2 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.

4.2.3 Early Help. SEND and inclusion, Culture, and Customer Services/Blue Badges received the highest number of compliments, with the majority relating to helpful staff members and excellent service provided.

Comments

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

4.2.5 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.

4.2.6 From 1 April 2022 to 31 March 2023 the Council registered 28 Comments from customers; this is an increase of 255% of the total comments received compared to the same period in 2021/22 where 11 comments were received.

4.2.7 Of the 28 comments received, 17 were in relation to the leisure contract currently

held by Stevenage Leisure Ltd (SLL) to operate the Catmose Sports Centre in Oakham. A breakdown of comments into Directorates can be found at Appendix 1.5.

Complaints

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

During 1 April 2022 to 31 March 2023, the Council registered 58 complaints from customers. This is a decrease of 11 complaints compared to the same period in 2021/22 where 69 complaints were received. A breakdown of complaints into Directorates and departments can be found at Appendix 1.6.1

Complaints Upheld

- 4.2.9 Of the 58 complaints registered during 1 April 2022 to 31 March 2023, 13 were upheld (this means that the service believes that there was a failing that could have been avoided, or something went wrong).

- 4.2.10 This is a decrease of 9% of total complaints upheld compared to the same period in 2021/22 with 69 complaints registered and 22 upheld. A significant improvement has been achieved in the reduction of complaints received during 1 April 2022 to 31 March 2023. Number of Complaints Received v Upheld broken into directorates is shown at Appendix 1.6.2.

4.2.11 Lessons learned and improvements implemented

- 4.2.11.1 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.

- 4.2.11.2 The following lessons have been learned and improvements implemented to ensure that Rutland County Council gets it right the next time:

4.2.11.3 Places

- 4.2.11.4 Planning - Review of the performance of the planning department in assessing a planning application. Case officer reports and recommendations are to be made clearer to ensure that the weight given to any material planning consideration is clear. Undertake a yearly design review of developments to ensure that the Council is maintaining a high standard of design when approving development.

- 4.2.11.5 Planning - Screening Opinion - Further guidance to be provided to officers on how to complete the assessment matrix. Parishes will also be notified in future about Screening Opinions prior to issuing a planning application decision.

4.2.11.6 People

- 4.2.11.7 Childrens Social Care - Non-resident parent not informed of the outcome of social care intervention and the safety plan for the family. Learning from this complaint discussed with the whole team during team meeting. All parents with parental responsibility (resident and non-resident) are now informed in writing about the council's involvement and plan for the children.
- 4.2.11.8 SEND - Clear guidance not provided on transition arrangements. In future when a child has been out of school for a period of time, EP's will advise on a transition programme as part of the EHCP, ensuring that transition arrangements are embedded into the legal document.
- 4.2.11.9 Resources
- 4.2.11.10 Revenues & Benefits – Council Tax Liability taxpayer disagreed with decision not to award a single person discount. Improve information on our website regarding eligibility for discounts.

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.

A breakdown of complaints received from the LG&SCO broken into Directorates is shown at Appendix 1.6.3.

- 4.3.3 Of the 9 complaints registered from 1 April 2022 to 31 March 2023, 3 were upheld by the LG&SCO; 5 complaints were closed after initial enquiries and 1 not upheld. This is an increase of 8% of total complaints upheld compared to the same period in 2021/22, when 8 complaints were registered and 2 upheld.
- 4.3.4 One complaint upheld was remedied by a procedure or policy change/review; one by way of an apology and financial redress for avoidable distress / time and trouble; And the last by way of apology and financial redress for avoidable distress / time and trouble and completion of a financial assessment and review.
- 4.3.5 The Council has met deadlines when responding to LG&SCO enquiries, requesting extensions prior to deadline dates with justified reasons.
- 4.3.6 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 During 1 April 2022 to 31 March 2023, the Council registered 24 SARs, compared with 41 in same period in 2020/21. 38 Requests were completed in accordance with the statutory timescale of one calendar month. 3 were extended to 3 months due them being complex or numerous.
- 5.2.2 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. 3 of the SARs received in 2022/23 were significantly complex and sizeable; the largest being 4,000 pages.
- 5.2.3 Typically, it takes a SAR with 500 pages 5 days to process. The average number of pages per SAR was 600 pages.
- 5.2.4 During 1 April 2022 to 31 March 2023 the Council registered 1 complaint received from the Information Commissioners Office (ICO) regarding a SAR, compared to 1 in 2021/22. A SAR was not initially logged with Information Governance. The SAR was subsequently processed following ICO direction and responded to within the statutory guideline. A breakdown of SARs received broken into Directorates is shown at Appendix 1.7.

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.
- 5.3.5 Departments have been reminded of the importance to immediately notify Information Governance of any requests for personal data in the first instance.

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 22/23

- 6.2.1 From 1 April 2022 to 31 March 2023, the Council registered 21 data breaches. This is an increase of 50% compared to the same period in 2020/21 where 14 data breaches were logged.
- 6.2.2 During 2022/23, the Council reported 2 data breaches to the ICO. This is the same number compared to the same period in 2021/22. In both cases, personal data had been shared. In one case the ICO's decision was that no further action was required. In the other case, the ICO directed that an action plan be completed explaining the steps that Rutland County Council intends to take to prevent this situation from happening again and improving information rights more widely. This was implemented by way of sending "All Staff" emails to all employees from our Communications Team raising GDPR and data security awareness; reviewing data security procedures and processes; putting in place better security measures for handling children's special category data.
- 6.2.3 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 breaches that occurred in 2022/23 is when sending emails and the use of the 'blind copy' function. Staff have been reminded through "All Staff" emails 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 Regular "All Staff" emails are promulgated raising awareness of data protection. The following areas being covered:

- Data Breaches – Minimising the risk.
- How to disable the auto complete function on Outlook.

Notifying Information Governance of any personal data shared in error.
Email Chains.
Subject Access Requests

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 are to be reviewed in May 2024, May 2025 and May 2024 respectively.

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 2022/23.

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.

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 Appendix A - Information Governance Annual Report 2022-23 Statistics

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