



## **Audit Committee**

Date: Tuesday, 29 November 2022

Time: 10.00 am

Venue: Council Antechamber, Level 2, Town Hall Extension

Everyone is welcome to attend this committee meeting.

**There will be a private meeting for Members only at 9.30am in Committee Room 6 (Room 2006), 2nd Floor of Town Hall Extension. A Town Hall pass is needed to reach this room.**

### **Access to the Council Antechamber**

Public access to the Council Antechamber is on Level 2 of the Town Hall Extension, using the lift or stairs in the lobby of the Mount Street entrance to the Extension  
**There is no public access from the Lloyd Street entrances of the Extension.**

### **Filming and broadcast of the meeting**

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## **Membership of the Audit Committee**

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### **Councillors -**

Lanchbury (Chair), Curley, Good, Russell, Simcock and Wheeler

**Independent Co-opted Members –** Dr S Downs and Dr D Barker

## Agenda

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- 1. Urgent Business**  
To consider any items which the Chair has agreed to have submitted as urgent.
- 2. Appeals**  
To consider any appeals from the public against refusal to allow inspection of background documents and/or the inclusion of items in the confidential part of the agenda.
- 3. Interests**  
To allow Members an opportunity to [a] declare any personal, prejudicial or disclosable pecuniary interests they might have in any items which appear on this agenda; and [b] record any items from which they are precluded from voting as a result of Council Tax/Council rent arrears; [c] the existence and nature of party whipping arrangements in respect of any item to be considered at this meeting. Members with a personal interest should declare that at the start of the item under consideration. If Members also have a prejudicial or disclosable pecuniary interest they must withdraw from the meeting during the consideration of the item.
- 4. Minutes** 5 - 12  
To approve as a correct record the minutes of the meeting held on 18 October 2022.
- 5. External Audit update**  
To receive the report of the External Auditors (Mazars).
- 6. Letters from those charged with Governance** 13 - 28  
The report of the Deputy Chief Executive and City Treasurer is attached.
- 7. Treasury Management Interim Update**  
The report of the Deputy Chief Executive and City Treasurer **will follow**.
- 8. Risk Review: Governance and Management of Complaints** 29 - 56  
The report of the Assistant Chief Executive and the City Solicitor is attached.
- 9. Code of Corporate Governance** 57 - 72  
The report of the Deputy Chief Executive and City Treasurer is attached.
- 10. Corporate Risk Register**  
The report of the Head of Audit and Risk Management **will follow**.

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|--|---------|
| <b>11. Register of Significant Partnerships</b>                          | 73 - 84 |
| The report of the Deputy Chief Executive and City Treasurer is attached. |         |
| <b>12. Work Programme and Decisions Monitor</b>                          | 85 - 92 |
| The report of the Governance and Scrutiny Support Unit is attached.      |         |

## Information about the Committee

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The Committee is responsible for approving the Council's statement of accounts; considering the Audit Commission's Annual Audit and Inspection Letter and monitoring the Council's response to individual issues of concern identified in it. The Committee also considers the Council's annual review of the effectiveness of its systems of internal control and assurance over the Council's corporate governance and risk management arrangements, and engages with the external auditor and external inspection agencies to ensure that there are effective relationships between external and internal audit.

The Council is concerned to ensure that its meetings are as open as possible and confidential business is kept to the strict minimum. When confidential items are involved these are considered at the end of the meeting at which point members of the public are asked to leave.

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Agenda, reports and minutes of all Council Committees can be found on the Council's website [www.manchester.gov.uk](http://www.manchester.gov.uk).

Smoking is not allowed in Council buildings.

Joanne Roney OBE  
Chief Executive  
Level 3, Town Hall Extension,  
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Manchester, M60 2LA

## Further Information

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For help, advice and information about this meeting please contact the Committee Officer:

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This agenda was issued on **Monday, 21 November 2022** by the Governance and Scrutiny Support Unit, Manchester City Council, Level 2, Town Hall Extension (Library Walk Elevation), Manchester M60 2LA.

## **Audit Committee**

### **Minutes of the meeting held on 18 October 2022**

#### **Present:**

Councillor Lanchbury - In the Chair  
Councillors Curley, Russell, Simcock and Wheeler  
Independent Co-opted member: Dr S Downs

#### **Apologies:**

Independent Co-opted member: Dr D Barker  
Councillor Good

#### **Also Present:**

Councillor Akbar, Executive Member for Finance and Resources  
Councillor Stanton, Deputy Executive Member for Finance and Resources.  
Alistair Newall, Mazars (External Auditor)

### **AC/22/38 Minutes**

#### **Decision**

To approve the minutes of the meeting held on 27 September 2022 as a correct record.

### **AC/22/39 Oral update: the unaudited 2021/22 Accounts**

The Deputy Chief Executive and City Treasurer gave an oral update on progress towards finalisation of the unaudited 2021/22 Annual Accounts.

The key points which the Committee was invited to note were:

- The unaudited accounts (2021/22) have been published and are open for public inspection until 4 November 2022.
- The Whole of Government Accounts (WGA - 2020/21) have been completed for submission to the Government, as part of the consolidated audited accounts of organisations across the UK public sector.
- External Auditors were on-site and work has commenced (2022/23 accounts) and was underpinned by regular meetings with the Deputy Chief Executive and City Treasurer and Deputy City Treasurer to oversee progress of the audit which was said to be on track in terms of the revised timetable.
- The implementation of a 'statutory override' (a temporary change to legislation) was anticipated in relation to the accounting methodology for highways assets in light of its impact on the finalisation of the 2020/21 accounts, nationally. A delay was therefore possible in relation to the completion of the current financial year's accounts (2022/23), with timescales yet to be determined.
- Sign-off of the external audit of the unaudited 2021/22 accounts was anticipated for early next year, this was however dependent on the outcome and resolution of the accounting methodology issue.

In a discussion about likely timescales for the statutory override, the Deputy City Treasurer outlined the steps involved based on current understanding of the timescales involved for the override's enactment itself, to the interpretation of guidance to undertake technical adjustments for incorporation into the accounts. Based on current knowledge, sign off as anticipated in the early new year. The Committee noted this.

### **Decision**

To note the update.

### **AC/22/40 Oral update: External Audit Progress (Mazars)**

Having duly noted the Deputy Chief Executive and City Treasurer's update on the current position of the 2021/22 unaudited accounts, the Committee heard from Alistair Newall (Mazars) about the commencement of Mazar's audit work on the accounts (2022/23).

Mr Newall confirmed that audit work had commenced and that a good experienced team of six auditors was in place (working a mixture of on-site and remotely) with view to completion of the audit of accounts within two months. He indicated that the early focus on planning and the identification of testing samples in the early stages had had a positive impact and that lessons learnt from previous challenges around resource management had proved effective.

A further update on the progression of external audit would be brought to the next meeting.

### **Decision**

To note the progress outlined.

### **AC/22/41 Oral Update: Appointment of External Auditors**

The Deputy Chief Executive and City Treasurer updated the Committee on progress on the appointment of an external auditor.

The key points which the Committee was invited to note were:

- That the first stage of procurement is complete and as such, six audit firms had been offered contracts (one of whom was Mazars)
- The next stage of the procurement process was the allocation of those firms to individual local authorities, in line with PSIA arrangements. An announcement was expected within the next couple of months, subject to no complexities arising from the PSIA consultation process.
- The fees would increase at a rate of approximately 150% when compared to previous rates. Whilst the impact of the fee increase on the budget was as yet unknown, it was felt that this would support the delivery of future audit work of a greater quality and breadth than was previously possible.

The Deputy Chief Executive and City Treasurer responded to a question about how the decision to allocate is made. She explained that the process followed was part of established PSIA procurement procedures where an assessment was undertaken to determine which provider was best placed to deliver the work across the country. For example in Greater Manchester the request was for a firm that could deliver audit work across all of the Greater Manchester Authorities in view of the extent of collaboration across the boroughs.

The Committee was invited to note that of the six firms who had progressed to the second stage of the procurement process, a number of whom's names were known to the Council, with two new entrants to the market were included on the list. No decision could be made until the consultation period of the PSIA allocation process had elapsed and the responses subsequently evaluated. Members were also invited to note that the PSIA had sought through its tendering processes to actively encourage new entrants to the market, through the structuring of contracts specifically to encourage bids from firms who did not yet have a long track history of local government audit work but were seeking to become established providers.

### **Decision**

To note the update.

### **AC/22/42 Internal Audit Assurance (Q2)**

The Committee considered a report of the Head of Audit and Risk Management which provided an update on progress on the agreed Audit Plan in the second quarter of the 2022/23 municipal year. The report also referenced additional work that had been assigned to the Audit Service and copies of the Audit Opinions issued during the period July 2022 to September 2022 as an appendix.

The report provided information about:

- The delivery of the Audit Programme
- Resourcing and the Audit Plan
- Children's Services and Education: Management Oversight and Supervisions, Foster Care Payments and the OfSTED Improvement Plan, Supporting People, Elective Home Education, Safer Recruitment in Schools, School financial Health Checks and Follow up Audits for individual schools with a limited assurance opinion.
- Adult Services: Management oversight and supervisions, payments, adaptations and Adults Quality Assurance Framework,
- Corporate Core and Information Governance: Core, ICT and Information governance
- Neighbourhoods; Growth and Strategic Development: Pest Control, Youth and Play Provision Transition, Avro Hollows, Building Control, Housing Operations – Consumer and Building Safety Regulations and Highways Pothole Grant activity
- Procurement, Contracts and Commissioning: Social Value, Our Town Hall -

Management of Work Package Delivery, Adult Social Care: Contract Governance, The Factory - Management of Work Package Delivery and Payments, New Contract Management System, Counter-Fraud and Investigations (proactive and reactive corporate cases), and Other Reactive Investigations including Business Grants, Council Tax Reduction Scheme and Housing Tenancy

The Head of Audit and Risk Management introduced the report outlining the above points of consideration and responded to questions and comments from the Committee.

In response to a comment about the time taken to implement the reviewed Audit and Risk Management Service's staffing structure, the Head of Audit and Risk Management responded that following advice from HROD, the decision had been taken to widen the process to a whole service review. The scale of change and complexities around staff migration had led to challenges in finalising the role descriptors for the Health and Safety team. However, these had very recently been agreed. Next steps were described as sign off from HROD and progression to the consultation period.

In response to a query about how costs to the Local Authority were recovered where it was under a statutory duty to intervene in remedial work for dangerous buildings, the Head of Audit and Risk Management advised that work in that area had not yet commenced. The Committee recognised that where those costs were attached to the sale of a particular piece of land, the time taken for those funds to be returned to the Director of Planning, Building Control's budget could be in some cases, extremely lengthy and sought to explore what actions could be taken to manage those deficits. The Head of Audit and Risk Management agreed to explore whether this matter could form part of the scope of Internal Audit's work in that area.

In response to comments about the number of limited assurance opinions issued to schools around compliance with 'safer recruitment' policies, the Head of Audit and Risk Management explained that whilst the Local Authority offered training to schools, officers were seeking to explore how compliance assurance could be strengthened. Discussions moved to schools financial health checks. The Committee noted the progress described in the report and asked what measures were being undertaken to ensure that guidance on financial compliance had been appropriately strengthened, including other Authority approaches. The Head of Audit and Risk Management explained that samples used the report were to a limited degree, skewed, in that they comprised of a mixture of targeted and randomly selected schools with some selected purely on the basis that they had not been visited for an audit of any given capacity for some time. Capacity as a result of staff vacancies and the segregation of duties within smaller schools remained a prevalent issue to be resolved. The Head of Audit and Risk Management added that whilst these findings were not uncommon across the wider school estate, there was no room for complacency, and as such, officers would seek to explore to what extent other authority's approaches had achieved. However as both the budget and estate had reduced over the recent years, the ability of the Authority to provide support and challenge to schools had declined. In terms of action points, the Authority would be writing to all schools about the findings of the thematic audit and following issue of



the final audit report (an Executive Summary of which would be provided to the Committee), next steps would be agreed. The Deputy Chief Executive and City Treasurer added that majority of the Local Authority's school estate were primary schools where challenges around divisions of duty were most likely to occur. Additional guidance on how to practice safely was therefore being developed in light of pressured resources within the schools sector.

There was a discussion about the volume and complexities of various grant funding schemes and their reliance on assurance processes to be overseen by internal audit and finance capacity resources. The Deputy Chief Executive and City Treasurer described the challenge and additional burden this placed on the services as a direct result of the associated governance and the assurance processes which underpinned them. The committee was advised that different government departments and funding institutions have different requirements and processes.

The Head of Audit and Risk Management responded to questions about the report's reference to ICT's Vulnerability, and Asset Management programmes, noting the issue of a reasonable assurance opinion. The Deputy Executive Member for Finance and Resources referred to the refreshed ICT and Digital Strategy which would be considered at the upcoming meeting of the Executive for approval and would address the points raised in the audit. A rollout of staff training on the new Data Strategy, a strand of which would establish a solution for the retention of important documents, whilst adhering to regulatory framework. A bespoke training exercise for elected members was also planned. In response the management of vulnerabilities he described a reasonably defensible position with further information to follow in due course. With regard to the Authority's website and Customer Relations Management (CRM) system, these too were under review, with a view to improving accessibility for residents, the vision being that CRM would eventually accommodate virtually all resident-facing Council Services and improve resident's digital experience

## **Decision**

To note the update.

## **AC/22/43 Outstanding Audit Recommendations (Q2)**

The Committee considered a report of the Head of Audit and Risk Management which summarised the current implementation position and arrangements for monitoring and reporting internal and external audit recommendations in accordance with Public Sector Internal Audit Standards.

In addition to the report's introduction and background information, the following information was also included:

- Current Implementation Position Update
- Outstanding Recommendations – over 12 months
- Significant / Critical Overdue Recommendations – 6 to 12 months
- Significant / Critical Overdue Recommendations – 1 to 6 months
- Reporting timescales for recommendations which are as yet not due a response.

With reference to outstanding recommendation in relation to Mental Health Casework, the Head of Audit and Risk Management advised that training of staff would take place during 21 – 28 October 2022. A member questioned whether consideration given been on the likely impact of scheduling the training during the school's half term holidays and could be reflected in the evaluation of it's uptake. The Executive Member for Finance and Resources added that whilst he was satisfied to see that the training was in place, the point made about its scheduling was valid. He suggested that the next scheduled report, should provide the committee with the appropriate level of assurance that eligible staff had undergone the appropriate training in order that the Committee could be satisfied that that the recommendation had been fully implemented. The Head of Audit and Risk Management agreed to pass those comments on to the Director.

In respect of foster care overpayments, the Committee was asked to note that an audit of the foster care service was currently in progress and, as such, the Committee's earlier recommendation on foster care payments would be addressed in full in the forthcoming report. The audit was described as a full scale analytical review of data population for such payments, with reasonably positive results yielded to date.

In respect of the overdue recommendation associated with Avro Hollows Tenant Management Organisation (TMO), the Head of Audit and Risk Management gave clarification that a 3 month priority for recommended interventions to address the identified gaps in assurance had been passed to the TMO and the Director of Strategic Housing.

The Committee noted the progress and timeline on the introduction of a centralised contract management system. In response to the partially-implemented overdue significant recommendation for Waivers and Contract Extensions, a member expressed the view officers should be invited to attend the Committee and so that members were able to get a better understanding of the barriers to implementation. The Deputy Chief Executive and City Treasurer commented that there were occasions where waivers and / or direct allocations were an appropriate procurement method. She gave assurance that effective measures were in place to monitor contract extensions and waivers and support informed decision making, adding that where it was agreed that a procurement exercise was indicated, this was duly followed up. She also said that that the flexibility to extend contract arrangements formed part of the Council's contract awarding practices and benefited the Council particularly for longer contract awards.

## **Decision**

To note the report

## **AC/22/44 Work Programme and Recommendations Monitor**

The Committee considered a report of the Governance and Scrutiny Support Unit which set out its future Work Programme for the forthcoming municipal year.

A member asked that the Corporate Risk Register and the Management of Inflationary Risk reports currently scheduled for the Committee's January 2023 meeting be brought forward to the next meeting of the Committee.

A member noted that the report on governance and management of complaints was scheduled for the committee's next meeting. He stated that he was aware that the Complaints function was being used in relation to the management of requests for information that related to the extension of the Christies car parking scheme and questioned whether the complains function was an appropriate vehicle to manage such requests. He asked whether the scheduled report could include an update on that particular matter.

The Committee suggested the following additions to its annual training event:

- ICT systems and governance considerations
- Treasury Management
- Capital / Revenue budgets

The Chair suggested that a paper be brought to the next meeting with an overview of proposed items to be considered in the December training event. In the interim, the Deputy Chief Executive and City Treasurer agreed to circulate a note to members of the committee which listed Frequently Asked Questions in relation to capital and revenue budgets.

### **Decision**

To agree the Committee's Work programme, subject to the amendments above.

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**Manchester City Council  
Report for Information**

**Report to:** Audit Committee - 29 November 2022

**Subject:** Letters from those charged with Governance

**Report of:** Deputy Chief Executive and City Treasurer

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**Summary**

As part of the audit of the accounts, the External Auditor requests information from the Deputy Chief Executive and City Treasurer and the Chair of the Audit Committee in respect of financial accounting arrangements, the risks of fraud and compliance with laws and regulations.

This report provides the responses issued to the External Auditor from (A) the Audit Committee Chair and (B) Deputy Chief Executive and City Treasurer for the audit of the 2021/22 accounts.

**Recommendations**

Members are requested to note the letters to the External Auditor agreed by the Audit Committee Chair and the Deputy Chief Executive and City Treasurer.

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**Wards Affected:**

None

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**Contact Officers:**

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**Background documents (available for public inspection):**

No specific reports other than referred to in the attached letters

## A. Responses from the Chair of the Audit Committee

Question	Response
How do you exercise oversight of management's processes in relation to:	
<ul style="list-style-type: none"> <li>Undertaking an assessment of the risk that the financial statements may be materially misstated due to fraud or error (including the nature, extent and frequency of these assessments);</li> </ul>	Via Audit Committee oversight of the draft and final accounts, outcome of financial reporting processes and the work of the External Auditor.
<ul style="list-style-type: none"> <li>Identifying and responding to risks of fraud in the Council, including any specific risks of fraud which management have identified or that have been brought to its attention, or classes of transactions, account balances, or disclosure for which a risk of fraud is likely to exist.</li> </ul>	Via the Counter Fraud Strategy and annual report of the Head of Audit and Risk Management – last reported to the Committee September 2022. This report included a copy of the Council's Fraud Risk Assessment.  For financial accounts as above.
<ul style="list-style-type: none"> <li>Communicating to employees its view on business practice and ethical behaviour (for example by updating, communicating and monitoring against the Council's code of conduct); and</li> </ul>	There are a range of mechanisms in place to promote positive business practice and ethical behaviour as part of Our People strategy that include: <ul style="list-style-type: none"> <li>Regular confirmations that officers have confirmed agreement to the Code of Conduct and key policies.</li> <li>Regular review and refresh of the Code and associated policies. This includes leadership of 'people' policies by the HR&amp;OD service and reporting to Scrutiny Committees. Recent updates include for example workforce equality and wellbeing reports to Resources and Governance Scrutiny November 2022.</li> <li>Recording of interests generally and with a specific additional focus in procurement activities.</li> <li>Leadership and Management training programmes.</li> <li>Induction process for all new starters</li> <li>Regular communications to staff on key policies and procedural requirements.</li> <li>On line anti-fraud training and wider on-line learning packages for example around information security, cyber security and equality/diversity/inclusion.</li> </ul>

Question	Response
	<p>The annual governance statement includes a service self assessment process that provides a level of assurance that Heads of Service have considered staff awareness of a range of policies and standards and this informs improvement actions each year.</p> <p>The Council's Monitoring Officer, DCE and City Treasurer, Deputy S151, Director of HROD, Deputy City Solicitor and Head of Audit and Risk Management in particular provide support to officers and Members and also provide oversight of the governance arrangements and through this they reinforce the need for high standards of behaviour and conduct.</p>
<ul style="list-style-type: none"> <li>Communicating to you the processes for identifying and responding to fraud or error.</li> </ul>	<p>Via the Counter Fraud Strategy and annual report of the Head of Audit and Risk Management - September 2022. This report included additional information in respect of whistleblowing as requested by the Audit Committee.</p> <p>Audit Committee maintains oversight of the Anti Fraud and Corruption Policy, Whistleblowing Policy, Anti Bribery Policy and Anti Money Laundering Policy – that are available to staff via the intranet.</p>
<p>How do you oversee management processes for identifying and responding to the risk of fraud and possible breaches of internal control?</p> <p>Are you aware of any breaches of internal control during 2021/22?</p>	<p>Via the Counter Fraud Strategy and annual report of the Head of Audit and Risk Management (September 2022) as well as the annual audit opinion of the Head of Audit and Risk Management (April 2022). These reports would be used to confirm any breaches of internal control during 2021/22 identified through the audit process and actions being taken to address these. The reports do not highlight any significant or systemic breaches of internal control.</p>
<p>How do you gain assurance that all relevant laws and regulations have been complied with?</p>	<p>We rely on the work of the DCE and City Treasurer and the External Auditor in this regard. This includes Legal Services and</p>

Question	Response
<p>Are you aware of any instances of non-compliance during 2021/22?</p>	<p>Finance review of reports supporting key decisions.</p> <p>There are no specific matters of concern beyond civil claims and matters of general business (e.g. ICO reports, complaints, issues raised with Ombudsman etc) that I am aware of.</p>
<p>Are you aware of any actual or potential litigation or claims that would affect the financial statements?</p>	<p>I am advised that Legal Services provide details of all outstanding claims against the Council to inform the final accounts; and that details of all claims over £100k are provided to the Council's Monitoring Officer, DCE and City Treasurer, Head of Legal Services and Head of Audit and Risk Management monthly and an individual assessment of the likelihood and value of settlement is provided.</p> <p>The DCE and City Treasurer provides assurance that the assessment of claims and required reserves and provisions are reflected in the final accounts.</p>
<p>Have you carried out a preliminary assessment of the going concern assumption and if so have you identified any events which may cast significant doubt on the Council's ability to continue as a going concern?</p>	<p>We rely on the work of the DCE and City Treasurer and the External Auditor in this regard. However, based on the outputs from budget planning and monitoring processes, there are no factors that cause me or the Audit Committee to cast significant doubt on the Council's ability to continue as a going concern although this will remain an area of ongoing focus given the impacts of Covid19 on the Council's financial position and resilience.</p> <p>This is implicit within budget monitoring and treasury management reviews, the ongoing assessment of reserves and provisions, as well as the annual accounts. These are used to inform financial planning and budget setting decisions which are reported to Executive, Audit Committee and Full Council.</p>



Question	Response
1. Are you aware of any actual, suspected or alleged instances of fraud during the period 1 April 2021 – 31 March 2022	Yes – these are set out in the Internal Audit Annual Counter Fraud Report (September 2022) to which the external auditor has access. None of the concerns reported to me or to Audit Committee indicate a systemic or significant fraud risk across the Council.
2. Do you suspect fraud may be occurring within the organisation?	Yes as above – given the size, scale and complexity of the Council I cannot provide complete assurance that there is no fraud (or theft, irregularity) occurring but I do not consider from reports being provided to me that there is systemic or significant fraud risk across the Council.
3. Have you identified any specific fraud risks within the Council?	These are reported to me and Audit Committee and are set out in the fraud risk assessment included in the Internal Audit Annual Counter Fraud Report (September 2022)
4. Are you satisfied that internal controls, including segregation of duties, exist and work effectively ( <i>if 'yes', please provide details</i> )?	Yes – these are reviewed by management and independently by Internal Audit and risks reported to Audit Committee. The work of checking internal controls does inevitably identify areas for improvement and Audit Committee oversee actions being taken to address these.
5. If not where are the risk areas?	<p>Areas of risk are reported in the reports of the Head of Audit and Risk Management as summarised in the annual opinion as presented to Audit Committee.</p> <p>Matters may also reflected in the Annual Governance Statement based on a robust holistic assessment of organisational governance arrangements and improvements are monitored through SMT and Audit Committee oversight of this process.</p>
6. How do you encourage staff to report their concerns about fraud?	<p>All staff are encouraged to speak up on matters of concern, including fraud, and this is emphasised in the Council behaviours and Officer Code of Conduct.</p> <p>The Council has a Whistleblowing Policy with associated contact number, email and on line reporting form; and details of the use of these by staff are reported in the Annual Counter Fraud Report (September 2022). Details of staff awareness and communications are reflected in the Counter Fraud Strategy.</p> <p>The Council also has existing policies and procedural frameworks around complaints and employee dispute</p>

Question	Response
	and officers who lead in this policy areas engage with internal audit to share possible concerns that might constitute whistleblowing.
7. What concerns about fraud are staff expected to report?	Any concerns over fraud within or against the Council – this could include theft, bribery, corruption etc
8. Are you aware of any related party relationships or transactions that could give rise to instances of fraud?	<p>Related party relationships and transactions involving suppliers could give rise to risks of fraud but these are assessed alongside wider fraud risks as part of the Council's counter fraud and financial management arrangements.</p> <p>Declarations of interest is included as part of the procurement process for officers and any potential conflicts are also declared by all Members.</p>
9. How do you mitigate the risks associated with fraud related to related party relationships and transactions?	From an Audit Committee perspective this is through the procurement process, contract management and monitoring and a robust partnership governance framework, including the significant partnership register.
10. Are you aware of any entries made in the accounting records that you believe or suspect are false or intentionally misleading?	No – but I and the Audit Committee seek independent assurance in this regard from the External Auditor
11. Are there particular balances in the accounts where fraud is more likely to occur?	Income and payments present an element of risk of fraud/theft/loss but there are no particular balances I consider present a heightened risk of fraud.
12. Are you aware of any assets, liabilities or transactions that you believe have been improperly included or omitted from the accounts of the organisation?	No – but I and the Audit Committee seek independent assurance in this regard from the DCE and City Treasurer and the External Auditor
13. Could a false accounting entry escape detection? If so, how?	None that I am specifically aware of but I and the Audit Committee seek independent assurance in this regard from the DCE and City Treasurer, Finance Teams, Internal Audit and the External Auditor
14. Are there any external fraud risk factors, such as collection of revenues?	There are a range of external fraud risks as set out in the annual fraud report (September 2022). These include areas where there is a financial incentive for external persons to commit fraud against the Council such as:

Question	Response
	<ul style="list-style-type: none"> <li>• Revenues / income – Council tax, business rates etc</li> <li>• Payment misdirection / interception</li> <li>• Claimant fraud – social care, housing, covid19 grants etc</li> <li>• Overclaiming for costs of goods / services</li> </ul>
15. Are you aware of any organisational or management pressure to meet financial or operating targets?	As a Council we are under pressure to the deliver the best possible outcomes for residents of the City but there is not inappropriate pressure to meet targets. There is pressure to meet targets but through sound practice and performance.
16. Are you aware of any inappropriate organisational or management pressure being applied, or incentives offered, to you or colleagues to meet financial or operating targets?	I am not aware of inappropriate pressures being applied to management or to Members or any incentives that could drive negative behaviours. As a Council we are under pressure to the deliver the best possible outcomes for residents of the City but there is not inappropriate pressure to meet targets.
17. What arrangements has the Council put in place in response to the Bribery Act 2010?	<p>The Council has an anti-Bribery Policy in place and on-line counter fraud training for staff.</p> <p>A key area of inherent risk for bribery is procurement and there are strong controls in place with declarations of interest, selection of appropriate panels and oversight from the Corporate Procurement and Commissioning Service in contract letting and award processes.</p> <p>At Audit Committee (and also via the Resources and Governance Scrutiny Committee) Councillors are provided with updates and independent assurance over the systems in place for procurement.</p>

## B. Responses from the Deputy Chief Executive and City Treasurer

Question	Response
<p>What processes are in place at the Council to:</p> <ul style="list-style-type: none"> <li>Undertake an assessment of the risk that the financial statements may be materially misstated due to fraud or error (including the nature, extent and frequency of these assessments);</li> </ul>	<p>The Council has a regular, robust process for budget setting and monthly reporting, with financial reporting through to SMT and Executive, providing a high degree of oversight of financial reporting.</p> <p>The financial accounts are prepared in line with a clear timetable and set of requirements overseen by experienced, qualified finance professionals with addition rigour applied in areas of estimates and assumptions such as the determination of provisions and reserves. This process and timetable is shared with the External Auditor and their advice and input is sought on matters of complexity or key judgements. Specialist financial advisors are used as appropriate for particularly complex transactions.</p> <p>A lessons learnt exercise was carried out on the 2020/21 Final Accounts process with an action plan to address areas for improvement including to ensure accurate valuations can be carried out in line with accounting standards and the use of peer quality assurance / review / challenge of the accounts from within the finance team to help highlight possible anomalies or errors.</p> <p>Core financial systems form part of the focus of Internal Audit as part of the annual audit plan. Through review of budget monitoring and final accounts processes and reports, including the draft accounts, I have a high degree of confidence that the financial accounts are free from material fraud and error.</p>
<ul style="list-style-type: none"> <li>Identify and respond to risks of fraud</li> </ul>	<p>Through regular reporting to me by the Head of Audit and Risk Management including quarterly investigation and counter fraud reports. I also receive copies of all investigation reports and updates on areas of risk identified on an ongoing basis. These matters are also discussed in my 121 meetings with the Head of Audit and Risk Management.</p> <p>The work of the Counter Fraud and Irregularity Team in Internal Audit is based on an organisational risk assessment and includes focus on internal fraud and error risk as well as external risks presented in areas such as Covid19 grants and payments, Council Tax</p>

	<p>Reduction, Business Rates and Housing. This risk assessment is updated for issues arising and feeds into the annual internal audit plan so that additional assurance can be obtained in areas of known risk.</p> <p>There is a clear policy framework and this includes regular refresh of policies and procedures including engagement with trades Unions and Members via the Audit Committee. These are available to all staff on the intranet.</p> <p>All of this work is summarised annually in the Counter Fraud Strategy and annual report of the Head of Audit and Risk Management - September 2022.</p> <p>For financial accounts as above.</p>
<ul style="list-style-type: none"> <li>Communicate to employees the Council's views on business practice and ethical behaviour (for example by updating, communicating and monitoring against relevant codes of conduct)</li> </ul>	<p>Via the communications strategy set out in the Counter Fraud Strategy.</p> <p>There are a range of mechanisms in place to promote positive business practice and ethical behaviour as part of Our People strategy that include:</p> <ul style="list-style-type: none"> <li>Regular confirmations that officers have confirmed agreement to the Code of Conduct and other key policies and training.</li> <li>Development and update of the Code and governance handbook – including quick guide to the constitution</li> <li>OurManchester Leadership and Management training programmes; as well as briefings held with Senior Leadership Group.</li> <li>Induction process for all new starters</li> <li>Regular communications to staff on key policies and procedural requirements.</li> <li>On line anti-fraud training and wider on-line learning packages for example around information security, cyber security and EDI.</li> </ul> <p>The annual governance statement includes a service self assessment process that provides a level of assurance to me that Heads of Service has considered staff awareness of a range of policies and standards and this informs improvement actions each year.</p> <p>Alongside my role, the Council's Monitoring Officer, Deputy S151, Director of HROD, Head of Legal</p>

	<p>Services and Head of Audit and Risk Management in particular provide support to officers and Members and also provide oversight of the governance arrangements and through this they reinforce the need for high standards of behaviour and conduct.</p>
<ul style="list-style-type: none"> <li>Communicate to the Audit Committee the processes for identifying and responding to fraud or error.</li> </ul>	<p>This is done primarily through the Counter Fraud Strategy and annual report of the Head of Audit and Risk Management - September 2022.</p> <p>Audit Committee maintains oversight of the Anti Fraud and Corruption Policy, Whistleblowing Policy, Anti Bribery Policy and Anti Money Laundering Policy – that are available to staff via the intranet.</p>
<p>How does management gain assurance that all relevant laws and regulations have been complied with? Have there been any instances of non-compliance during 2021/22?</p>	<p>The Council has a clear, transparent constitution that is subject to regular review and refresh to ensure that it remains up to date and reflects relevant laws and regulations. This process is overseen by the City Solicitor who has a key role through her service to seek assurance and provide support to ensure compliance with laws and regulations.</p> <p>Reports supporting decision making included oversight by Legal Services and Finance to ensure that decisions are lawful and in accordance with the Constitution.</p> <p>The Commercial Governance Team under the Deputy City Treasurer works closely with Legal and Democratic services in ensuring the legality of decision making. This team also supports the Commercial Board with senior representation from a range of key support services (procurement, commissioning, legal, finance, audit etc) focused on the commercial and legality aspects of contracts, companies and partnerships.</p> <p>The Council's policy framework and supporting procedures are designed to ensure compliance with laws and regulations in respect of such matters as employment law, equalities duties and data protection legislation.</p> <p>There are no specific matters of concern beyond civil claims and matters of general business (e.g. ICO complaints, issues raised with Ombudsman) that I am aware of.</p>
<p>Are there any actual or potential litigation or claims</p>	<p>Legal Services provide details of all outstanding claims against the Council to inform the final accounts. This is provided to my finance teams to</p>

<p>that would affect the financial statements?</p>	<p>inform the determination of provisions, reserves and any potential contingent liabilities.</p> <p>There is a pro-active approach to identifying potential future risks of claims and litigation which includes finance and legal services officers engaging with Directorate Management Teams and Chief Officers to understand potential future risks. Legal also work closely with the Insurance Team to identify and evaluate the risks associated with untoward events to assess the likelihood and scale of impact of potential litigation. These risks are assessed and recorded by Legal Services to inform the process of financial management and financial reporting.</p> <p>Details of all claims over £100k are provided to me and the Council's Monitoring Officer, Head of Legal Services and Head of Audit and Risk Management monthly and an individual assessment of the likelihood and value of settlement is provided. Where there is a financial risk attributed to such claims (or risks of claims) they are reflected in the financial accounts and subject to review by External Audit.</p>
<p>What controls are in place to: identify, authorize, approve, account for and disclose related party transactions and relationships. For any new related parties (i.e. any not already disclosed in the previous year's audited financial statements) please provide a list of them, explain their nature, and whether there have been any transactions with these related parties during the year to 31 March 2022.</p>	<p>The process for identifying related parties is undertaken as part of the annual accounts and is informed by:</p> <ul style="list-style-type: none"> <li>• Declarations of interest (senior officers and Members)</li> <li>• The Council's significant partnership register and work of the Commercial Board</li> <li>• Legal Services review of officer/member roles in companies and partnerships.</li> </ul> <p>This process informs the disclosure of related party transactions.</p> <p>A list of all such related parties will be provided as required as part of the audit of the accounts and the totals of material transactions with related parties form a note to the accounts.</p>

### Appendix 1

Question	Response
<p>1. Are you aware of any <b>actual, suspected or alleged instances of fraud</b> during the period 1 April</p>	<p>Yes – these are set out in the Internal Audit Annual Counter Fraud Report (September 2022) to which the external auditor has access. None of the</p>

Question	Response
2021 – 31 March 2022 (if 'yes', please provide details)?	concerns reported to me or to Audit Committee indicate a systemic or significant fraud risk across the Council.
2. Do you suspect fraud may be occurring within the organisation?	Yes as above – given the size, scale and complexity of the Council I cannot provide complete assurance that there is no fraud (or theft, irregularity) occurring but I do not consider there is systemic or significant fraud risk across the Council.
3. Have you identified any specific fraud risks within the Council?	Yes – these are set out in the Counter Fraud Strategy and the Internal Audit Annual Counter Fraud Report (September 2022). For 2021/22 this continued to include risks around Covid19-related grants administered by the Council but where the design of controls and roles of finance, revenues, assessments and internal audit has managed risk effectively. Other areas include procurement, cyber and payment/income processes.
4. Are you satisfied that internal controls, including segregation of duties, exist and work effectively (if 'yes', please provide details)?	Yes – these are reviewed by management and independently by Internal Audit and risks reported to Audit Committee. The work of checking internal controls does inevitably identify areas for improvement and SMT and Audit Committee oversee actions being taken to address these.
5. If not where are the risk areas?	Areas of risk are included in the reports of the Head of Audit and Risk Management as summarised in the annual opinion presented to Audit Committee (April 2022). Matters may also reflected in the Annual Governance Statement based on a robust holistic assessment of organisational governance arrangements and improvements are monitored through SMT and Audit Committee oversight of this process.
6. How do you encourage staff to report their concerns about fraud?	The Council has a Whistleblowing Policy with associated contact number, email and on line reporting form; and details of



Question	Response
	<p>the use of these by staff are reported in the Annual Counter Fraud Report (September 2022).</p> <p>Details of staff awareness and communications are reflected in the Counter Fraud Strategy and these include access to on line awareness training and corporate communications. Policies are accessible on the intranet.</p>
7. What concerns about fraud are staff expected to report?	Any concerns over fraud within or against the Council – this could include theft, bribery, corruption etc
8. Are you aware of any related party relationships or transactions that could give rise to instances of fraud?	Related party relationships and transactions involving suppliers could give risk to risks of fraud but these are assessed alongside wider fraud risks as part of the Council's counter fraud and financial management arrangements.
9. How do you mitigate the risks associated with fraud related to related party relationships and transactions?	Through a robust procurement process and through contract management and monitoring and a robust partnership governance framework, including the significant partnership register and Commercial Board.
10. Are you aware of any entries made in the accounting records that you believe or suspect are false or intentionally misleading?	No – I obtain assurance on this from the finance teams involved in the production of the accounting records and Statement of Accounts including the Deputy City Treasurer; and independent assurance in this regard from the External Auditor
11. Are there particular balances in the accounts where fraud is more likely to occur?	Income and payments present an element of risk of fraud/theft/loss but there are no particular balances I consider present a heightened risk of fraud.
12. Are you aware of any assets, liabilities or transactions that you believe have been improperly included or omitted from the accounts of the organisation?	No – I obtain assurance on this from the finance teams involved in the production of the accounting records and Statement of Accounts; and independent assurance in this regard from the External Auditor
13. Could a false accounting entry escape detection? If so, how?	There are no specific areas I am aware of where a false accounting entry could escape detection – I obtain assurance on this from the finance teams involved

Question	Response
	in the production of the accounting records including review and approval of journals and production of the Statement of Accounts; and independent assurance in this regard from the External Auditor
14. Are there any external fraud risk factors, such as collection of revenues?	<p>There are no specific material external fraud risk factors that I am aware – fraud risks from external sources are considered as part of overall risk assessments and control procedures and could include but are not limited to:</p> <ul style="list-style-type: none"> <li>• Misstatement of invoices / overcharging by suppliers</li> <li>• Money laundering in the revenues cycle</li> <li>• False claims by residents or other third parties – including for covid19 grants in 2021/22.</li> </ul> <p>I am assured over the policy frameworks and controls that operate in these areas</p>
15. Are you aware of any organisational or management pressure to meet financial or operating targets?	<p>There is reasonable pressure to meet targets in terms of performance, outcomes and financial management but these are no more than I would expect given the Council's priorities and need to ensure a balanced budget. All managers have individual objectives and for senior staff these are reviewed by SMT and performance against these is reviewed by chief officers with support of HROD – this would pick up any unrealistic targets that might lead to inappropriate organisational or management pressure.</p>
16. Are you aware of any inappropriate organisational or management pressure being applied, or incentives offered, to you or colleagues to meet financial or operating targets?	As above
17. What arrangements has the Council put in place in response to the Bribery Act 2010?	<p>The Council has a policy and procedure in place and is accessible to all staff via the intranet. All staff and key services have been made aware of this via corporate communications and is</p>

<b>Question</b>	<b>Response</b>
	emphasised as part of briefings and audit support to key services such as Procurement and Legal Services.

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**Manchester City Council  
Report for Information**

**Report to:** Audit Committee – 29 November 2022

**Subject:** Risk Review item - Governance and Management of Complaints and Information Requests 2021/22

**Report of:** The Assistant Chief Executive and the City Solicitor

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### Summary

This report presents the complaints, enquiries and information request dashboard, which sets out the Council's annual performance for 2021/22 in the management of corporate and social care complaints, Councillor and MP enquiries, as well as information requests.

### Recommendations

Audit Committee Members are asked to note the report and the key messages in relation to the Council's performance in these areas of Complaints and Enquiry management service and legal compliance.

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**Wards Affected:** All

<b>Environmental Impact Assessment</b> - the impact of the issues addressed in this report on achieving the zero-carbon target for the city

Our Manchester Strategy outcomes	Summary of how this report aligns to the OMS
A thriving and sustainable city: supporting a diverse and distinctive economy that creates jobs and opportunities	
A highly skilled city: world class and home grown talent sustaining the city's economic success	
A progressive and equitable city: making a positive contribution by unlocking the potential of our communities	

A liveable and low carbon city: a destination of choice to live, visit, work	
A connected city: world class infrastructure and connectivity to drive growth	

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**Background documents (available for public inspection):**

The following documents disclose important facts on which the report is based and have been relied upon in preparing the report. Copies of the background documents are available up to 4 years after the date of the meeting. If you would like a copy please contact one of the contact officers above.

## 1.0 Purpose of report

- 1.1 This report outlines the Council's performance in relation to complaints and related metrics, as well as the performance management of information requests, during 2021/22.
- 1.2 Audit Committee are asked to note that 2021/22 saw improvements in performance on the timeliness of response, reversing the situation in 2020/21 where the impact of COVID-19 on staff and services, and the introduction of a new complaints system impacted complaints performance. As we have emerged from the pandemic and the new system has become embedded, the timeliness of responses is much more in line with the Council's pre-pandemic performance. Other positive areas to note include a high number of instances of praise, and the proportion of complaints upheld is similar to the previous year.
- 1.3 The number of complaints received however, has very significantly increased across nearly every service. There was an increase in both Freedom of Information and GDPR requests and a significant number of Ombudsman enquiries and decisions (albeit recognising that for a period of time in 2020/21, the Ombudsman suspended its work).
- 1.4 Attached to this report at **Appendix 1** is the complaints and information request dashboard which covers data for the financial year 2021/22.
- 1.5 In response to a specific request from Audit Committee, this year's report includes examples of how services have taken on the learning from complaints received and changed how they work, in section 8.

## 2.0 Complaints and Enquiries Management

- 2.1 The accompanying dashboard highlights performance for each measurable indicator in more detail, summarised in the table below for 2021/22 compared with previous years.

Period	Stage 1 complaints	Responded to within 10 working days	Social Care	Responded to within 20 working days	MP enquiries	Responded to within 10 working days	No of Ombudsman Enquiries	Average no of days to respond and % upheld
2014/15	1864	89%	314	55%	1321	82%	39	28 (26% upheld)
2015/16	1841	85%	220	70%	1331	80%	27	28 (44% upheld)
2016/17	2243	81%	285	80%	1537	83%	17	27 (10% upheld)
2017/18	2013	87%	343	81%	1545	76%	22	27 (44% upheld)
2018/19	2253	80%	305	84%	1577	83%	35	26 (22% upheld)
2019/20	2140	74%	162	72%	1723	76%	20	26 (18% upheld)

Period	Stage 1 complaints	Responded to within 10 working days	Social Care	Responded to within 20 working days	MP enquiries	Responded to within 10 working days	No of Ombudsman Enquiries	Average no of days to respond and % upheld
2020/21	2103	58%	411	54%	1827	73%	37	21 (14% upheld)
2021/22	3157	77%	377	59%	1835	76%	81	16 (24% upheld) <sup>1</sup>

2.2 2020/21 was a challenging year as we responded to the pressures of the Covid-19 pandemic as well as managing a change to how we record and manage complaints and moved over to a new system, Infreemation, based on a workflow process, rather than relying on email transactions. 2021/22 brought a different but related set of challenges. In 2020/21, many residents were willing to tolerate quite severe interruptions to service because of the pandemic and often waited until a higher threshold of service failure before complaining. As we reached 2021/22, public perceptions had changed, and higher numbers of people made complaints to the Council. Stage one complaints have markedly increased across nearly every service area (NB on 1 April 2021, Homelessness services moved from Adults Services to Neighbourhoods). This in turn has led to an increase in Stage two complaints, and again in turn, to an increase in Ombudsman enquiries and decisions.

2.3 Summary performance against targets in 2021/22 were as follows:

Key Performance Indicator	2021/22 performance	Current target
Stage 1 Corporate Complaints responded to within 10 working days	77%	85%
Stage 1 Corporate Complaints escalated to Stage 2	16%	15%
Stage 2 Corporate Complaints responded to within 10 working days	60%	80%
Corporate Stage 1 and Stage 2 Complaints Upheld (and Stage 3 pre-2017)	28%	40%
Councillor and MP enquiries responded to within 10 working days	76%	85%
Social Care Complaints handled within timescale	59%	80%
Social Care Complaints Upheld	27%	40%
Average time to respond to LGSCO enquiries	16 days	28 days
LGSCO decisions upheld	24%	30%

2.4 Notwithstanding the increase in cases handled by the Complaints Team this year, at stage of the complaints process, performance against target has markedly improved on the previous year and whilst targets have not been met, overall performance is much closer than in previous years.

### 3.0 Performance Management of Corporate Complaints

<sup>1</sup> See section 6.2.2 for an explanation as to why this differs from the Ombudsman's recording of this metric.



- 3.1 **Stage one complaints. Expected standard - 85% of Stage one complaints responded to within ten working days**
- 3.1.1 Cases recorded in this report are all complaints received during the period (not necessarily responded to within the 2021/22 financial year) and include all outcomes, i.e., in addition to those where a full and formal response was issued, this report also includes those complaints that were informally resolved and thus averted or withdrawn, or that after investigation were referred on to another organisation. This methodology is consistent with that used in previous reports.
- 3.1.2 The Council received 3,157 Stage one complaints in 2021/22, compared to 2,103 in the previous year, a 50.1% increase which is consistent across most services. As noted above, in 2020/21, the number of complaints was much reduced at the start of the year and gradually increased as the year progressed, rising from 269 in Q1 of 2020/21 and rising to 708 in Q4 of 2020/21. The year continued this trend, with Q1 receiving 770 complaints and rising to 941 during Q2. To put that into context, on 29 March 2021 the formal “stay at home” order was lifted, and by 19 July 2021, nearly every restriction had been lifted. By 14 September it was becoming clear that further restrictions may be necessary, and the Prime Minister published “Plan B” in order to mitigate unmanageable impacts upon the NHS because of the omicron variant. This was duly implemented on 8 December and removed on 24 February 2022. The number of complaints received in Q3 and 4 have broadly tracked these changes, reducing to 692 in Q3 and 754 in Q4. Despite this very significant increase in cases, the timeliness of responses has been broadly consistent at 75% with an uptick in the final quarter of the year. Overall, 77% of responses were issued within ten working days, a 19% improvement on the previous year and a return to pre-Covid-19 levels of performance.
- 3.1.3 The Neighbourhoods Service has seen an overall increase in complaints received of 31.8%, 1,646 Stage one complaints in total, from 1,249 the previous year. A key factor for this is moving Homelessness Services from Adults Services to Neighbourhoods into Housing Operations, which accounts for 106 Stage one complaints. There have been increases in complaints across most services. Biffa are one of the largest have seen a rise in cases, from 655 to 707. These complaints had already increased in 2020/21, due to a number of factors; as more people stayed at home, they generated more waste at home and this led to some issues, such as bin trucks filling up and crews needing to temporarily abort collections whilst they emptied. Bin crews were also disproportionately affected by COVID isolation rules and this too affected collection reliability. Additionally, the national shortage of HGV drivers meant that Biffa experienced driver shortages and no agency availability to backfill these. This year saw a much larger number of complaints about failed collections, as many people perceived that the pandemic was “over” and that collections should no longer be affected by COVID restrictions. Biffa’s responsiveness has however improved markedly, from a rate of 61.5% in 2020/21 to 95.6% in 2021-22, in large part due to staffing changes. Highways have also seen a stark increase in cases, from

233 to 347, but again with an improvement in timeliness of 61.7% on time in 2020/21 to 85.3% in 2021/22, now hitting the target of 85%. An additional factor in this improvement for Highways is the recruitment of a dedicated complaints officer to support the coordination of Highways complaints.

- 3.1.4 The Corporate Core saw an increase in 64.9% in the number of its annual complaints, from 524 to 864, but yet managed to response to 77% of these on time, compared to 63% last year. This reflects the change to a number of factors that brought down response timeliness last year to a number of traditionally high performing services, such as the demands on the Revenues and Benefits Unit to quickly create the infrastructure to process a series of Covid-19 related grants and the resulting impact upon day-to-day services. Timeliness has therefore significantly improved across most services, with Council Tax responsiveness improving from 30.6% on time to 79.2%, Benefits from 34% to 82.3% and Parking Services from 48.4% to 75.9%. In turn, because of staff being able to return to their usual duties and because the city was reopened, again, cases increased. Council tax saw an increase in complaints from 134 to 216 as more summonses were issued, and Parking Services saw increases in complaints from 190 to 357 as more drivers have returned to the city.
- 3.1.5 It should be noted that corporate complaints relating to Children and Adults are different to social care, and are focussed on a small number of services, e.g., School Admissions, Special Educational Needs provision, or Adults Finance.
- 3.1.6 Adult Services saw a drop of 55% in its corporate complaints, from 75 to 33, responding to 67% on time (same as previous year). In large part this is due to the move of Homelessness from Adults to the Neighbourhoods Directorate. Adults often see a larger proportion of social care complaints than corporate complaints and so this figure is consistent with expectations.
- 3.1.7 Children's Services by contrast saw a very significant 292% increase in complaints, from 160 to 468, responding to 67% on time compared with 52% in the previous year. In large part, this was due to a new system being used for School Admissions. This was launched during the summer holidays and this meant that for a period of time, it was not possible to update children's records on the old system, and the contact centre were not able to view the new system. Additionally, Admissions found that they were unable to immediately send the first waiting lists of the new school year to schools. Lastly, because of these issues, parents were receiving no updates and would call the Council daily or sometimes multiple times a day, causing tremendous pressure on the Contact Centre who could not offer any advice and could only advise parents to complain. The technical issues were rectified by 21 September 2021, but not before a very large number of parents had complained as their children did not have school places as quickly as they ought. There were also known issues with Home to School Transport that were peripherally linked to this issue. School Access and Sufficiency therefore saw an increase in complaints from 67 to 263.

- 3.1.8 Growth and Development saw an increase consistent with most other Directorates of 53.6%, from 95 in 2020/21 (51% on time) to 146 in 2021/22 (59% on time). This does still represent a comparatively small number of complaints and constitutes a small increase in Planning complaints and a small number of cases that have been passed to Strategic Housing following the reintegration of Northwards Housing into the Council.
- 3.1.9 The Council as a whole is 8% from achieving its target for responding to complaints on time (85% within 10 working days), with an improvement in performance of 19 percentage points on the previous year, from 58% to 77%. This improvement has essentially been because the factors that inhibited responses last year have, in the main, been resolved. Most staff who were redeployed have returned to their substantive work and as we are two years into the new case management system, Infreemation, familiarity with it has improved. The Complaints Team has also not had the levels of staff absence it had during 2020/21 and so is better able to process and monitor complaints, albeit this has been hampered somewhat by the significant increase in volume, with a reduction in staff resource. It is hoped that given the final quarter of the year showed a response within ten working days rate of 81% that we will continue to see this trend in 2022/23.
- 3.1.10 As noted earlier in this report, Northwards Housing was reintegrated into the Council and now forms part of the Housing Operations Service within Neighbourhood Services alongside Homelessness. As complaints relating to social housing are not subject to the Local Government and Social Care Ombudsman regime as most of the Council's complaints are, but instead fall within the jurisdiction of the Housing Ombudsman, there are different complaints policies and processes that must be followed for both. Because of this, a decision was made not to immediately integrate Northwards complaints into the Council's complaints processes, however this work will take place this year. For the year 2021/22, Northwards received 69 complaints and responded to 51 (73.9%) of these within ten days.
- 3.2 **Complaints escalated to Stage two. Expected standard - 15% of corporate Stage one complaints escalated to Stage two**
- 3.2.1 Complaints escalated to Stage two are managed by the Council's centralised Complaints Team (based in Performance Research and Intelligence - PRI). This provides an independent review of how the complaint has been dealt with at Stage one and provides the final opportunity to investigate before the complainant is referred to the Local Government and Social Care Ombudsman.
- 3.2.2 The Council as a whole has seen a 2% increase in the proportion of complaints escalated to the final stage of the complaints process, from 14% in 2020/21 to 16% in 2021/22, just missing the target of 15%. This reflects that most complainants are satisfied with the investigation undertaken at Stage one.

3.2.3 In reviewing each Directorate's performance, Adults have seen a stark decrease in the percentage of complaints escalated, from 21% to 3% albeit from a small number of complaints and also because the service that most often had cases escalated, Homelessness, has been moved to Neighbourhoods. Neighbourhoods in turn has seen an increase from 13% to 18%. Children's Services have seen a small decrease of 4% (9% in 2020-21 to 5% in 2021-22). The Core was largely consistent with the previous year at 17%, whilst Growth and Development had the largest percentage of cases escalated at 19%, from 24% the previous year.

3.3 **Responding to stage two complaints. Expected standard - 80% of corporate Stage two complaints responded to within ten working days**

3.3.1 The total number of Stage two cases received has increased markedly from the previous year from 292 to 534, in large part due to the overall increase in complaints this year. The largest distributions were in the Corporate Core (150) and Neighbourhoods (322). This increase in caseload has placed a great deal of pressure on the Corporate Complaints Team, who manage these enquiries centrally, and timeliness, whilst improved from the previous year at 26%, is still well below target at 60%.

3.3.2 Essentially this reflects a correction of last year's abnormal factors, i.e., the new complaints management system and the difficulty conducting investigations when officers are managing new and different pressures as a result of COVID19 and who therefore have less capacity to respond to requests for information. Additionally last year there had been some staffing absences in the Complaints team that have now improved.

3.3.3 By virtue of having the largest volume of service touchpoints with residents, the Neighbourhoods Service have usually had the majority of Stage one and two complaints. This proportion has grown substantially in this period, from 38% (131) of all Stage two complaints in 2019/20 to 54% (157) in 2020-21 and now to 60% this year. This is however in approximate alignment with the proportion of Stage one complaints received, i.e., 52% of all corporate Stage one complaints in 2021/22 were for the Neighbourhoods Service. This still however means that Neighbourhoods have seen a more than doubling in the number of Stage two complaints received. Growth and Development has seen a modest increase in five additional Stage two complaints this year, albeit from a low base. Children Services has seen a more than doubling of Stage two corporate complaints, in large part because of the Admissions issues whereas because Homelessness has moved, Adults have a substantial fall in the number of Stage two corporate complaints to just one. The Corporate Core has seen a 182% increase in the number of Stage two complaints, almost doubling over the course of the year, from 82 to 150, however in this instance this is a more usual number of Stage two complaints for the service and reflects that last year had an unusually low number of Stage two complaints.

3.3.4 The Complaints Team will continue to proactively monitor internal deadlines and to pursue services for their responses to investigation questions. Where

complaints cannot be responded to within ten working days, the Complaints Team will proactively notify the complainant to advise of the delay and offer a revised date when they should expect a full response. There will also be continued use of escalation procedures within services to prevent delays in meeting the response deadline, where the expectation is that senior managers (i.e. Head of Service or Strategic Directors) will become involved in progressing matters where there are delays.

### 3.4 **Stage one and two complaints upheld. Expected standard - 40% of corporate Stage one and two complaints upheld**

3.4.1 The Council has seen consistent performance in the percentage of complaints upheld from 2020/21 to 2021/22, remaining at 28% despite the very large increase in cases. The Complaints Team has always emphasised that whilst it is important to be robust where the Council is not at fault, it is more important that investigations are thorough and non-defensive. This stance leads to a higher calibre of complaint response, and a reduced risk of escalation to the Ombudsman, however it will also lead to an increase in the percentage of complaints being upheld.

3.4.2 The Neighbourhoods Directorate have the highest number of cases upheld by a significant factor at 632 upheld or partially upheld cases (32%), against the 1968 cases received. This is explained in part due to the nature of the service Neighbourhoods offers and the complaints received; specifically, around failed bin collections, where there is limited scope for investigation and where it is often more expedient to accept that a failed collection is the result of crew error rather than residents failing to present the bin. The Neighbourhood's Directorate has however seen a further 3% decrease in the proportion of complaints upheld from the previous year, following a 7% decrease the year before.

3.4.3 Corporate Core has seen both an increase in its complaint decisions and its percentage of upheld complaints, from 17% to 20% and 104 upheld complaints to 203. This has predominantly arisen from Revenues, with 92 upheld or partially upheld complaints form a total of 315.

3.4.4 Adults have seen a 3% reduction in the percentage of corporate decisions upheld, from 29% to 26%. Again, there has been a significant reduction in corporate complaints for Adults with the transfer of Homelessness.

3.4.5 Children Services have seen significant increases to both their number of complaints and the proportion of these that were upheld (30%, up from 19%) and this can be traced directly to the new system introduced in Admissions, as outlined earlier in this report. Admissions in 2022 has been a smoother experience, and so we would expect improvements on this metric next year.

## 4.0 **Performance Management of Councillor and MP enquiries**

### 4.1 **Responding to Councillor and MP enquiries. Expected standard - 85% of enquiries responded to within ten working days**

- 4.1.1 The Council's performance against this metric is largely consistent with the previous year, with an increase of 3% responded to on time. In total there were 1835 enquiries received in 2021/22, compared with 1827 last year. Whilst the overall number of enquiries received is only slightly different, these have been assigned very differently to services which again reflects the significant changes COVID has brought and the new types of problems that residents sought assistance for.
- 4.1.2 Adults have seen 160 fewer enquiries (276 this year compared with 436 last year) but have responded to 9% more on time. Children's Services have by contrast seen 189 additional enquiries (up from 272 to 461 this year) but responded to 11% more on time. The Corporate Core has seen a 51% reduction in the number of enquiries on the previous year (350 compared with 680) but responded to 3% fewer enquiries on time. The Core is however the only service to hit target at 91% on time. Neighbourhoods has seen a 65% increase in cases, (from 422 to 700) but still managed to respond to 20% more on time, (up from 51% to 71%) showing the greatest improvement of any service. Growth and Development have had the greatest percentage increase in cases at 240%, but again, this is from a low base metric and so only reflects a comparatively small number of cases (20 to 48) and responding to 71% on time. The Council overall is 9% from target.

## 5.0 Performance Management of Social Care Complaints

### 5.1 **Responding to Social Care complaints. Expected standard - 80% of social care complaints handled within timescale**

- 5.1.1 Although legislation sets timescales for Children's Social care complaints (Stage one, maximum of 20 working days, Stage two, maximum of 65 working days and Stage three Review Panel, must be organised within 30 working days), Adult social care legislation does not, but states timescales must be negotiated with the complainant. That said, the Council aims to complete Adult's complaint responses within 20 working days, in line with the process for Children's Services social care complaints.
- 5.1.2 Children's Services have seen a further 13% decrease in performance on this metric, following last year's 11% decrease, taking them to within 34% of target (at 46%). This is despite having 30 fewer social care complaints this year, (155 in 20/21 to 125 in 21/22). The decrease in performance will have been impacted by the changes within the services but also within the Complaints Team, leading to times of lower staffing and time training new members of staff. Anecdotally, while the number of cases reduced, the cases received were more complex and required input from colleagues in Legal Services and HR.
- 5.1.3 Adults by contrast have seen significant improvement on this metric, with a small reduction in cases received (252 this year compared with 256 for last) but a 14% improvement in cases responded to on time (51% to 65%). This appears to be as a result of the easing of the Covid-19 pressures seen in

2020/21 allowing services the capacity to be able to focus upon these complaints.

- 5.1.4 Overall, there was a 9% reduction in the number of social care complaints received, but a 5% increase in timeliness of response (54% to 59% on time).

5.2 **Social Care complaints upheld. Expected standard - 40% of social care decisions upheld**

- 5.2.1 The Council saw a small increase in the percentage of social care decisions upheld, seeing a rise from 20% to 27%, more than achieving target.

6.0 **Performance Management of Local Government and Social Care Ombudsman (LGSCO) Enquiries**

6.1 **Responding to Local Government and Social Care Ombudsman enquiries. Expected standard - Local Government and Social Care Ombudsman enquiries responded to within 28 days**

- 6.1.1 The Council received 81 formal enquiries from the LGSCO this year, a significant increase from the 37 cases recorded in the previous year and the 20 in the year before that. The Ombudsman reflects on the unusual low number in their 2020/21 Annual Report in relation to the previous year, *“In the 2020/21 year we received and decided fewer complaints than normal because we stopped accepting new complaints for three months due to Covid-19.”* The Council’s performance with regard to timely responses appears to show that performance has improved, with enquiries taking an average of 16 days instead of 21 in the previous year and remains well within target of 28 days. This is not to say that there have not been several complex cases that required more detailed input and working with partner organisations to provide a comprehensive response to the Ombudsman’s enquiries, and this is reflected in the comparatively high number of days needed for Adults and Children’s cases, however, for the year as a whole, only Children’s Services did not hit the 28-day target at 32 days.

6.2 **Local Government and Social Care Ombudsman decisions. Expected standard - 30% of Local Government and Social Care Ombudsman decisions upheld**

- 6.2.1 It should be noted that whilst the Council received 81 enquiries, it received 108 decisions. An enquiry denotes a full investigation with written questions that the Council must answer. At the end of the Ombudsman’s investigation, a decision will be issued. In some cases however, the Ombudsman has sufficient information from casefiles or from complainant submissions to issue a decision on the case without initiating a formal investigation or issuing formal enquiries- i.e decision recorded as *‘closed after initial enquiries’*. This is why there is a discrepancy between enquiries and decisions.

- 6.2.2 The percentage of Ombudsman decisions upheld (according to Council analysis) is 24% against a target of 30%. It should be noted from section

6.2.6 below, that the Ombudsman's upheld figure (as reported in their Annual report) is much higher, at 70%, but this is because they do not include cases which they *close after initial enquiries* in their upheld category, whereas the Council would record these as not upheld. The Council believes that our recording is a fairer way to present an outcome, because to close a case after initial enquiry, we believe, denotes no evidence of fault and therefore, is technically, not upheld.

- 6.2.3 The percentage of cases increased by 47.9% across the year with 35 more decisions received this year. This can be explained because of the reduction in cases seen last year as a result of the Ombudsman's decision not investigating cases, nor accepting new complaints, between March and June 2020 in order not to burden Councils in their efforts to support their residents and enact COVID measures. This rise in cases was driven predominantly by Neighbourhoods, with an increase in cases in Compliance, Highways and Waste, followed by the Core with increases in the Revenues Service. This rise notwithstanding, only Children's Services has exceeded target in the percentage upheld at 56%. It should be noted that the Ombudsman still records a complaint as upheld even where the Council has already acknowledged the fault and upheld it through our own complaint procedures.
- 6.2.4 The Council received one public report from the Ombudsman this year. This is where the Ombudsman believes that the injustice is so great, there are grounds to highlight the case to the wider public as a means for others to learn from the errors, or it is issued where the Council does not accept the Ombudsman's findings and seeks to challenge them. This was in relation to a case in education about providing for a child with complex needs and learning difficulties. The Ombudsman noted that the Council had made payments to the complainant and had since accepted its findings.
- 6.2.5 Previous annual reports have highlighted several improvement areas to focus on, including more consistent application of remedies (including financial redress, and being more open with apologies), challenging the Ombudsman's findings where appropriate and development of robust learning action plans to prevent reoccurrence of faults.
- 6.2.6 This approach continues to work well, with the LGO finding that our Council had already provided adequate remedies in 9% of cases that the LGO subsequently upheld. This is the first time that Manchester City Council has not exceeded the average in similar authorities, (in this instance, 11%) and will be a focus for officers in coming months, along with a refresh of our remedy policy in line with new guidance to be issued by the Ombudsman.
- 6.2.7 The Ombudsman has an interactive map available on their website, showing comparisons with other authorities. In this, Manchester is shown to have the following performance highlights, which show our performance is consistent with similar authorities:



- 70%<sup>2</sup> of complaints investigated were upheld, compared with an average of 68% in similar authorities
- in 100% of cases, they were satisfied the Council had successfully implemented their recommendations, compared with an average of 100% in similar authorities
- in 9% of upheld cases they found the Council has provided a satisfactory remedy before the complaint reached the Ombudsman, compared with an average of 11% in similar authorities

6.2.8 The interactive map can be found at:

<https://www.lgo.org.uk/your-councils-performance/manchester-city-council/statistics>

## 7.0 Praise

7.1 There were 409 instances of praise recorded this year, up from 383 in the previous year:

Directorate	Instances of praise
Adults Services	174
Children's and Education Services	116
Corporate Core	24
Growth and Development	12
Neighbourhoods	83
<b>Total</b>	<b>409</b>

## 8.0 Learning from complaints

### 8.1 Our approach to learning

8.1.1 We recognise that when things go wrong, we need to learn from any mistakes made to ensure that we reduce the likelihood of the same fault occurring again. Where possible, we should also seek to proactively improve the level of service that the Council provides in the future. Audit Committee in 2021 specifically asked that more information on service learning from complaints is included in this year's report.

8.1.2 Any complaint which is upheld or partially upheld will identify errors made by the Council and will identify actions and potential service improvements that can be developed following the complaints investigation. We categorise these learning actions as low or high risk. Complainants are informed of the actions that will be taken and the expected time frames for completion.

8.1.3 Low risk are those actions typically relating to issues which affect an individual team or service. The Corporate Complaints Team is not responsible for monitoring the completion of low-risk actions. This

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<sup>2</sup> Note: as explained in section 6.2.2, this percentage does not match the Council's metric (24% of Ombudsman enquiries upheld) due to different methods of recording. The Council records complaints where the Ombudsman does not investigate as 'not upheld', whereas they record these separately.

responsibility sits with individual team/ service managers. Completion of low-risk actions is however seen as an important part of the complaints process as this demonstrates the Council's commitment to improving our services. We are also conscious that failure to complete promised actions increases the likelihood of us receiving further complaints about similar issues.

- 8.1.4 High risk are those issues which affect all services across the city as opposed to one individual team, or those complaints which require strategic review resulting in a significant change to the Council's policies/procedures.

## 8.2 **Critical Learning and Learning Action Plans**

- 8.2.1 Where complaints are received that are a concern in terms of risk and impact on the complainant or the Council (High risk), a *Learning Action Plan* is developed and monitored by the Corporate Complaints Team, working with the service manager, to secure ownership and commitment to the actions and timescales. Once the plan is signed off as completed, where appropriate the key actions and learning outcomes will be shared in a communication bulletin across the service, and beyond if necessary, to ensure that the impact of the learning improves practice and performance in the future.

- 8.2.2 30 Learning Action Plans were launched in 2021/22:

<b>Directorate</b>	<b>Learning Action Plans</b>
Adults Services	5
Children's and Education Services	12
Corporate Core	8
Growth and Development	1
Neighbourhoods	4
<b>Total</b>	<b>30</b>

- 8.2.3 Actions in a number of these Learning Action Plans resulted in changes to processes or procedures, examples of which are set out below:

- I. The Corporate Complaints Team and Equalities Specialists instigated a programme of work to review and improve our handling of enquiries and complaints from people who are neurodiverse. Staff identified a trend that in a number of cases, complainants appeared to encounter difficulties navigating the Council's processes because of their neurodiversity; this often led to a breakdown in communication between officers and the complainant. As well as developing training to raise staff awareness of the potential needs of neurodiverse people, this programme of work involves a full review of the Council's policy for dealing with unreasonable persistent complainants and a review of our wider complaint handling policy to ensure the needs of neurodiverse people are not overlooked. As such, this work has required significant investment in terms of staffing resources and is still ongoing. Complaints Team staff have however already implemented changes in approach, which have had an immediate beneficial effect, enabling us

to achieve amicable resolutions to complaints that would otherwise have been referred to the Ombudsman (Chief Executives)

- II. A complainant had to chase officers for information about disputed residential care home charges during periods when her relative was away from the care home due to being in hospital, which led to avoidable stress and time and trouble. The Council then took too long to explain the position clearly. The learning process found that the financial information leaflet provided to residents and their families at the point of entering residential care, did not make it clear that in such circumstances where the room in the placement is being held pending the resident's return it would therefore incur a charge. Our Financial Information leaflet regarding Paying for Permanent Residential Care was subsequently reviewed and more clarity provided around liability for costs during periods of absence from a care home. Our electronic records system was also updated to reflect this change to ensure that staff could appropriately advise of the policy on charges in future cases (Adult Social Care)
- III. The Council stopped a young person's education incentive payment twice without notice or explanation and did not backdate payments to cover the gaps. The Council refreshed our leaving care financial policies and procedures to make them clearer for staff to understand and to ensure there was no room for error in interpretation and application. This in turn, also meant that young people themselves could better navigate the process, through this policy and hold the service to account if errors were made. (Children's Services).
- IV. The Council should have considered a complainant's concerns about the standard of care he was receiving and not passed them on to the Mental Health Trust without first engaging with him. Adult Social Care reviewed our process for dealing with complaints from or on behalf of people whose support is provided by partner agencies, for example Greater Manchester Mental Health and strengthened the procedures to ensure roles and responsibilities are clear and that appropriate consent is sought before information is shared between agencies. (Adult Social Care)
- V. The Council failed to properly consider offering post-16 transport to a young person, with an Education Health and Care Plan (EHCP). This was reviewed at both stages of the Appeal process and still refused. The learning from the case found that the School Transport policy created by the Council did not properly conform to the legal requirements as set out in the SEN Code of Practice and was therefore being misinterpreted by the service and the Appeals Panel. The policy was extensively reviewed, seeking independent guidance and support from specialists, and all standard decision letters and guidance for the Appeal Panel has also been changed, with further training, to ensure the appropriate legal test is applied in all cases to support effective decision making. The service also looked again at any decisions made

in the previous 12 months that may have been impacted to determine whether this fault may have impacted others, in order to take corrective action where this was apparent. (Children's Services).

8.2.4 Learning Action Plans also recorded themes around training, development and actions taken with staff/contractors/residents, some examples of which are below:

- I. A Neighbourhood Team carried out additional monitoring of our Waste and recycling contractor Biffa's performance on an estate on a temporary basis. Whilst this found Biffa were fulfilling their contractual requirements, it was identified that the state of the area remained a concern due to persistent fly tipping and littering. The team committed to continuing regular visits to informally monitor the area and report issues, as well as engaging with residents to encourage the local community to play a part in improving the area (Neighbourhood Area Teams).
- II. The Council decided to recover a grant payment made in error, without fully considering what caused it to be wrongly issued and the impact that this would have on the recipient. Managers circulated guidance to staff, explaining the need to consider the individual circumstances when deciding whether to recover a Covid -19 grant payment if made in error (Business Rates)
- III. The Council gave incorrect advice to a property owner and did not comply with his request for communication by telephone as a disability related reasonable adjustment. Managers liaised with the Corporate Complaints Team and Equalities Specialists with a view to developing an improved understanding for staff about the need to consider and if appropriate proactively offer reasonable adjustments to disabled people (Business Rates).
- IV. A complainant felt intimidated by a carer at his supported accommodation. There was a delay in formally responding to his complaint and the provider did not retain details of their investigation. The Council gave complaint handling guidance to the provider to improve their future complaint investigations (Adult Social Care).
- V. The Council failed to accommodate a resident under section 20 (s20) of the Children's Act 1989, whereby the resident would have been classed as a looked after child and afforded greater security and care. The young person considered themselves to be homeless, but the Council had not properly considered her status as such. Training and guidance for dealing with homelessness applications from 16- and 17-year-olds, was reissued and the service reviewed all applications completed in the previous financial year to check these were correctly dealt with (Children's Services)

## 9.0 Freedom of Information and GDPR requests

**9.1 Responding to GDPR requests. Expected standard - 90% of GDPR requests responded to within relevant statutory timescale (ordinarily one month).**

9.1.1 The Council receives requests from individuals under the GDPR (for example, Subject Access Requests for personal information (SARs), the right to rectification and the right to be forgotten). It also receives requests for disclosure of personal information from external organisations under the Data Protection Act 2018. The Council has received a significantly higher number of GDPR requests, the majority of which are SARs, in 2021-22 than for the previous financial year. The Information Commissioner's Office (ICO) has set an expected standard for responding to GDPR requests as set out in 9.1. The appendix to the report captures the overall performance of the Council as well as that of each of the Directorates in meeting that standard and of those requests which have been responded to the percentage of those responded to on time has increased from 78% to 84%, and so is just below the minimum figure.

9.1.2 The 90% target has been met on this metric by the Neighbourhoods Service and Growth and Development, and there has also been an improvement in the Corporate Core. Children's Services and Adults Services, although still some way from the target, saw an increase in responses sent on time, despite 42% and 22% more requests being received respectively. Children's Services and Adults Services continue to receive the most complex and sensitive requests from individuals which in many cases comprise a significant volume of records that are often held in paper format requiring retrieval of files from archive.

**9.2 Responding to FOIA requests. Expected standard – 90% of Freedom of Information Act requests responded to within relevant statutory timescale (ordinarily 20 working days).**

9.2.1 The Council receives requests for information under both the Freedom of Information Act and the Environmental Information Regulations. For the purposes of performance reporting the two regimes are combined into a single figure and are referred to as 'FOIA requests.' As set out in the appendix to the report there has been an increase in the total number of requests received across the Council however, despite this, the number responded to on time has improved marginally by 3%. None of the Directorates have met the ICO target of 90% but with the exception of the Neighbourhoods Service all have equalled or improved their performance which was recorded for the financial year 2020/21. However, it should be noted that the Neighbourhoods Service received 22% more requests during 2021/22 with the moving of Homelessness Services from Adults Services to Housing Operations in Neighbourhoods being a factor in this increase.

**10.0 Recommendations**

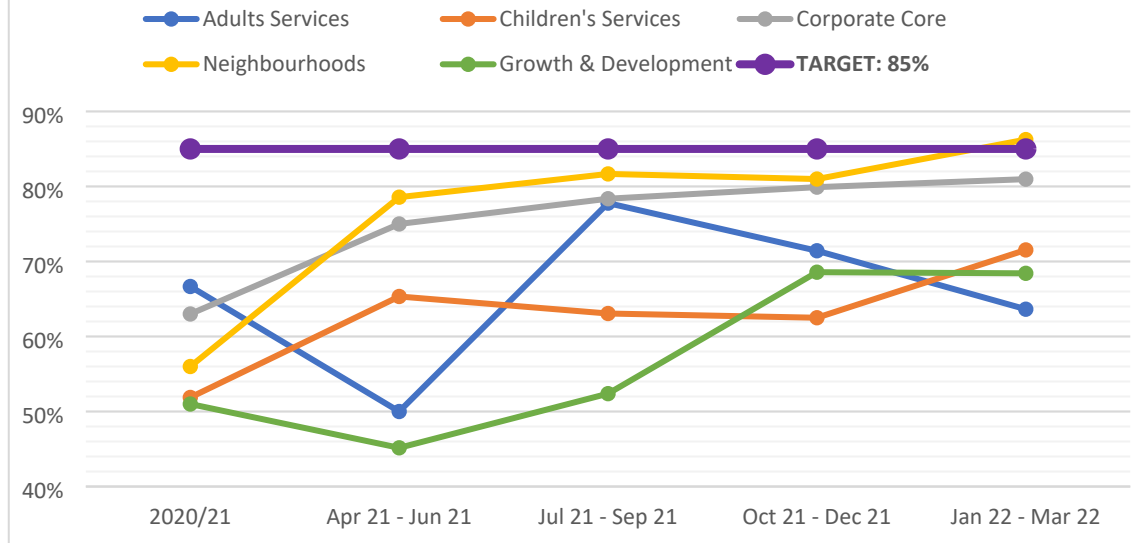
10.1 Audit Committee are asked to note the Council's performance in managing complaints and enquiries in 2021/22, and are asked to note the key

messages that are emerging in relation to the management of information requests.

# Appendix 1 - Complaints and Information Request Dashboard 2021-22

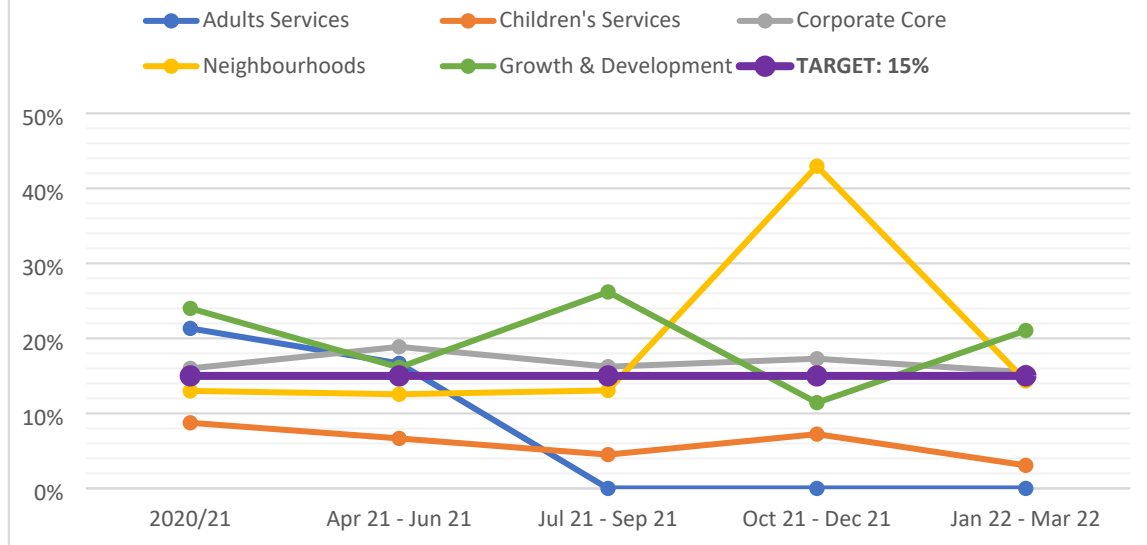
Number of Stage 1 corporate complaints and % handled within 10 working days											Year To Date:		
Directorates	1 Apr 20 - 31 Mar 21		Target 21/22	1 Apr 21 - 30 Jun 21		1 Jul 21 - 30 Sep 21		1 Oct 21 - 31 Dec 21		1 Jan 22 - 31 Mar 22		1 Apr 21 - 31 Mar 22	
	No.	%		No.	%	No.	%	No.	%	No.	%	No.	%
Adults Services	75	67%	85%	6	50%	9	78%	7	71%	11	64%	33	67%
Children's Services	160	52%		75	65%	111	63%	152	63%	130	72%	468	66%
Corporate Core	524	63%		196	75%	228	78%	214	80%	226	81%	864	77%
Neighbourhoods	1,249	56%		462	79%	551	82%	284	81%	349	86%	1,646	82%
Growth & Development	95	51%		31	45%	42	52%	35	69%	38	68%	146	59%
All Directorates	2,103	58%		770	75%	941	76%	692	76%	754	81%	3,157	77%

Proportion of Stage 1 Corporate complaints handled within 10 working days (breakdown by Quarter)



Number of Corporate Stage 1 complaints % escalated											Year To Date:		
Directorates	1 Apr 20 - 31 Mar 21		Target 21/22	1 Apr 21 - 30 Jun 21		1 Jul 21 - 30 Sep 21		1 Oct 21 - 31 Dec 21		1 Jan 22 - 31 Mar 22		1 Apr 21 - 31 Mar 22	
	No.	%		No.	%	No.	%	No.	%	No.	%	No.	%
Adults Services	75	21%	15%	6	17%	9	0%	7	0%	11	0%	33	3%
Children's Services	160	9%		75	7%	111	5%	152	7%	130	3%	468	5%
Corporate Core	524	16%		196	19%	228	16%	214	17%	226	15%	864	17%
Neighbourhoods	1249	13%		462	13%	551	13%	284	43%	349	14%	1,646	18%
Growth & Development	95	24%		31	16%	42	26%	35	11%	38	21%	146	19%
All Directorates	2103	14%		770	14%	941	13%	692	25%	754	13%	3,157	16%

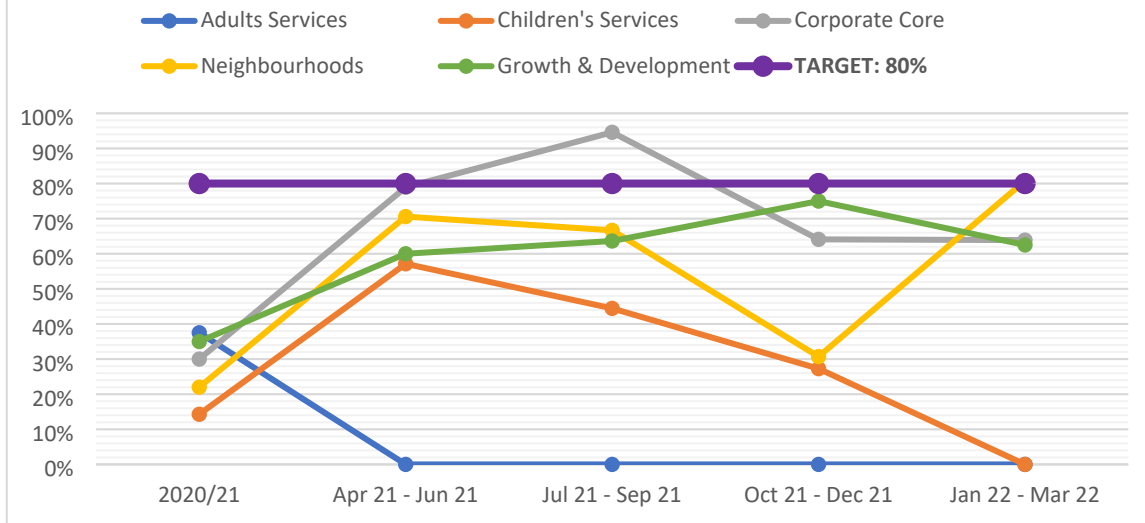
Proportion of Stage 1 Corporate complaints escalated (breakdown by Quarter)





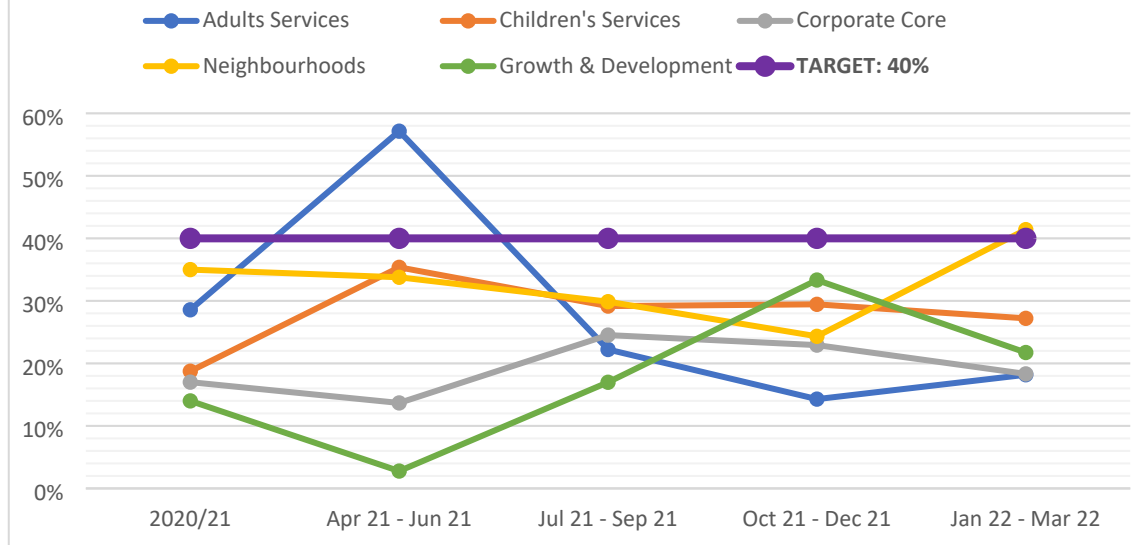
Number of stage 2 corporate complaint responses and % handled within 10 working days											Year To Date:		
Directorates	1 Apr 20 - 31 Mar 21		Target 21/22	1 Apr 21 - 30 Jun 21		1 Jul 21 - 30 Sep 21		1 Oct 21 - 31 Dec 21		1 Jan 22 - 31 Mar 22		1 Apr 21 - 31 Mar 22	
	No.	%		No.	%	No.	%	No.	%	No.	%	No.	%
Adults Services	16	38%	80%	1	0%	0	N/A	0	N/A	0	N/A	1	0%
Children's Services	14	14%		7	57%	9	44%	11	27%	6	0%	33	33%
Corporate Core	82	30%		38	79%	37	95%	39	64%	36	64%	150	88%
Neighbourhoods	157	22%		68	71%	75	67%	127	31%	52	81%	322	56%
Growth & Development	23	35%		5	60%	11	64%	4	75%	8	63%	28	64%
All Directorates	292	26%		119	71%	132	73%	181	39%	102	69%	534	60%

Proportion of Stage 2 Corporate complaints handled within 10 working days (breakdown by Quarter)

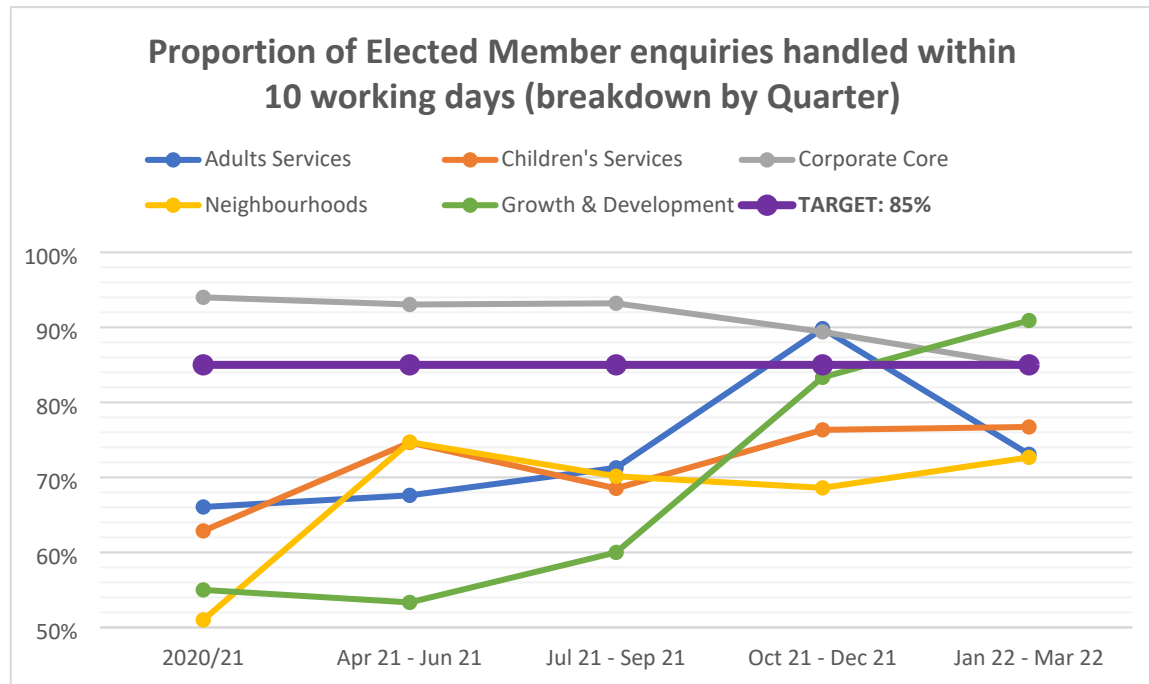


Number of Corporate Stage 1 and 2 decisions and % upheld											Year To Date:		
Directorates	1 Apr 20 - 31 Mar 21		Target 21/22	1 Apr 21 - 30 Jun 21		1 Jul 21 - 30 Sep 21		1 Oct 21 - 31 Dec 21		1 Jan 22 - 31 Mar 22		1 Apr 21 - 31 Mar 22	
	No.	%		No.	%	No.	%	No.	%	No.	%	No.	%
Adults Services	91	29%	40%	7	57%	9	22%	7	14%	11	18%	34	26%
Children's Services	176	19%		82	35%	120	29%	163	29%	136	27%	501	30%
Corporate Core	608	17%		234	14%	265	25%	253	23%	262	18%	1014	20%
Neighbourhoods	1411	35%		530	34%	626	30%	411	24%	401	41%	1968	32%
Growth & Development	118	14%		36	3%	53	17%	39	33%	46	22%	174	19%
All Directorates	2404	28%		889	28%	1073	28%	873	25%	856	31%	3691	28%

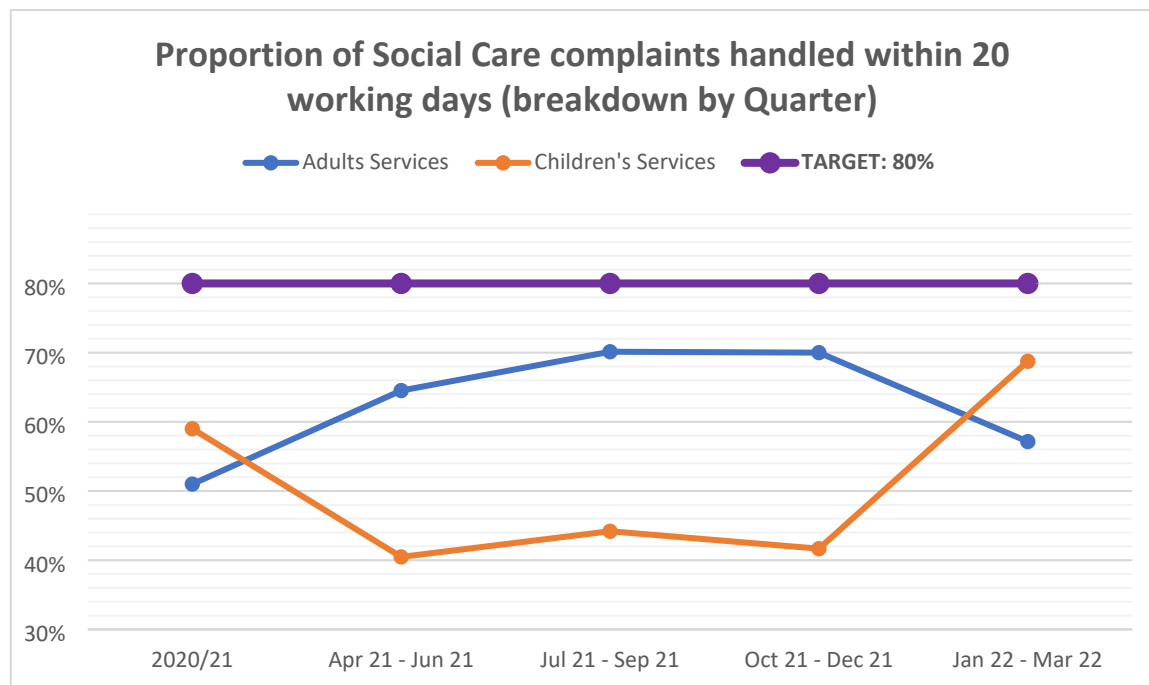
Proportion of Stage 1 and Stage 2 Corporate complaints upheld (breakdown by Quarter)



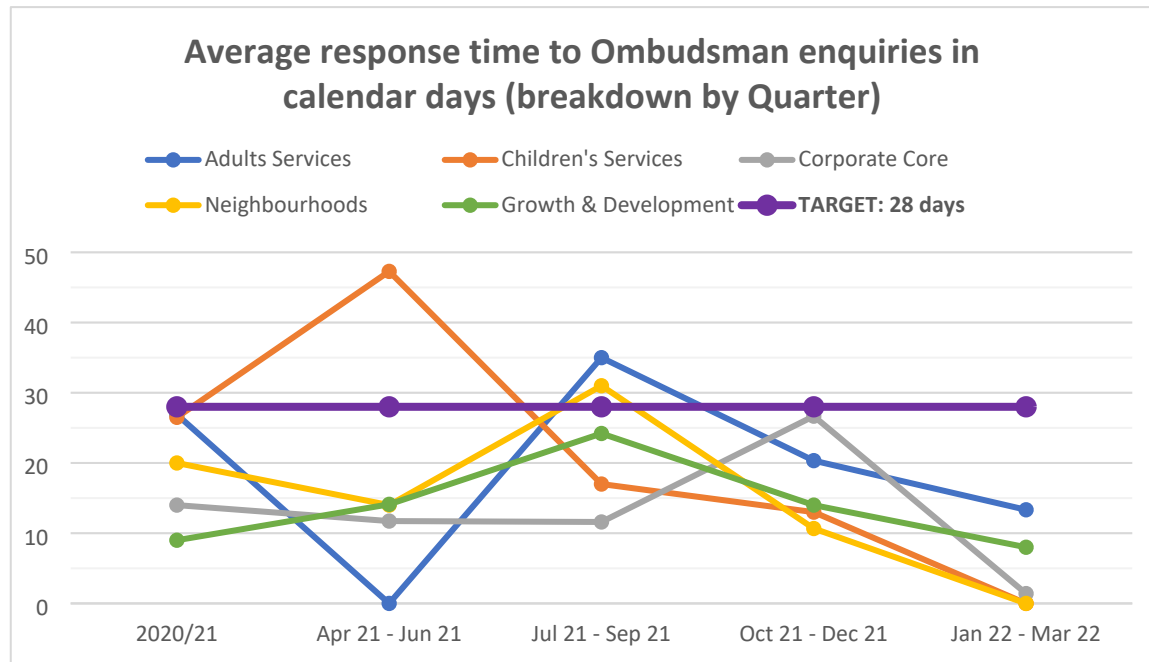
Number of Councillor, Mayoral and MP enquiries and % handled within 10 working days											Year To Date:		
Directorates	1 Apr 20 - 31 Mar 21		Target 21/22	1 Apr 21 - 30 Jun 21		1 Jul 21 - 30 Sep 21		1 Oct 21 - 31 Dec 21		1 Jan 22 - 31 Mar 22		1 Apr 21 - 31 Mar 22	
	No.	%		No.	%	No.	%	No.	%	No.	%	No.	%
Adults Services	436	66%	85%	71	68%	94	71%	59	90%	52	73%	276	75%
Children's Services	272	63%		71	75%	143	69%	131	76%	116	77%	461	74%
Corporate Core	680	94%		115	93%	103	93%	66	89%	66	85%	350	91%
Neighbourhoods	422	51%		166	75%	201	70%	172	69%	161	73%	700	71%
Growth & Development	20	55%		15	53%	10	60%	12	83%	11	91%	48	71%
All Directorates	1,830	73%		438	78%	551	74%	440	77%	406	76%	1835	76%



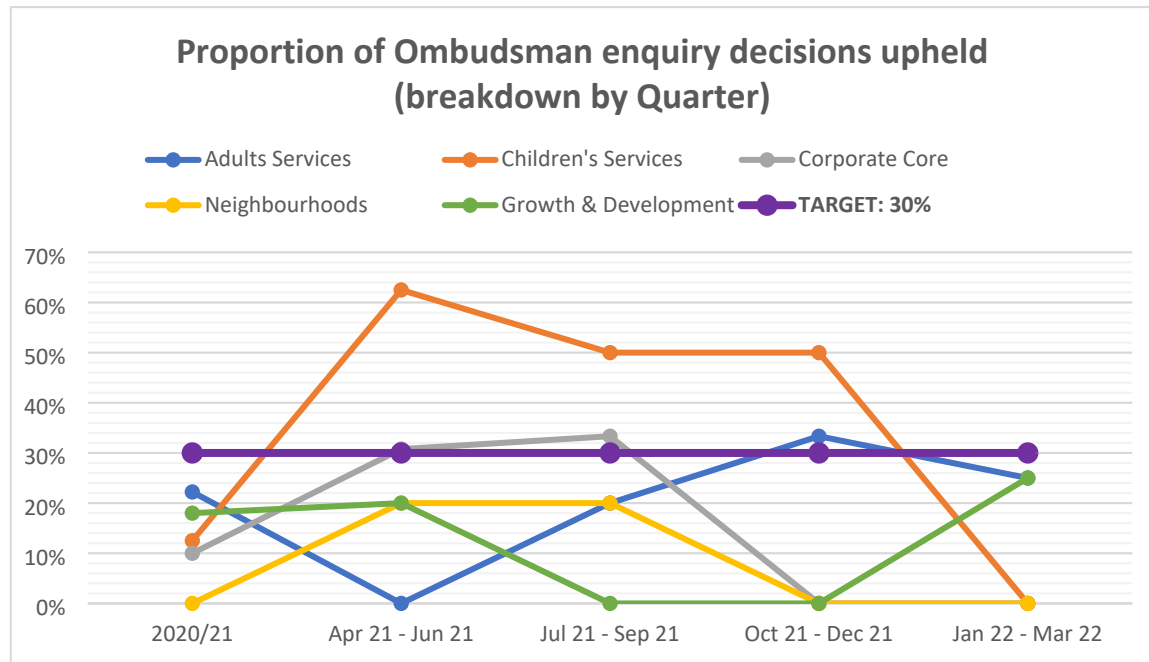
Number of Social Care Complaints and % handled within target											Year To Date:		
Directorates	1 Apr 20 - 31 Mar 21		Target 21/22	1 Apr 21 - 30 Jun 21		1 Jul 21 - 30 Sep 21		1 Oct 21 - 31 Dec 21		1 Jan 22 - 31 Mar 22		1 Apr 21 - 31 Mar 22	
	No.	%		No.	%	No.	%	No.	%	No.	%	No.	%
Adults Services	256	51%	80%	62	65%	77	70%	50	70%	63	57%	252	65%
Children's Services	155	59%		42	40%	43	44%	24	42%	16	69%	125	46%
<b>Total Social Care</b>	<b>411</b>	<b>54%</b>		<b>104</b>	<b>55%</b>	<b>120</b>	<b>61%</b>	<b>74</b>	<b>61%</b>	<b>79</b>	<b>59%</b>	<b>377</b>	<b>59%</b>



Number and average response times of Ombudsman enquiries (in calendar days)											Year To Date:		
Directorates	1 Apr 20 - 31 Mar 21		Target 21/22	1 Apr 21 - 30 Jun 21		1 Jul 21 - 30 Sep 21		1 Oct 21 - 31 Dec 21		1 Jan 22 - 31 Mar 22		1 Apr 21 - 31 Mar 22	
	No.	Avg days		No.	Avg days	No.	Avg days	No.	Avg days	No.	Avg days	No.	Avg days
Adults Services	10	27	28	0	N/A	2	35	3	20	3	13	8	21
Children's Services	10	27		7	47	3	17	3	13	1	0	13	32
Corporate Core	10	14		11	12	10	12	3	27	5	1	30	11
Neighbourhoods	3	20		9	14	2	31	6	11	3	0	23	14
Growth & Development	4	9		4	14	5	24	1	14	2	8	7	12
All Directorates	37	21		31	21	20	18	16	16	14	5	81	16

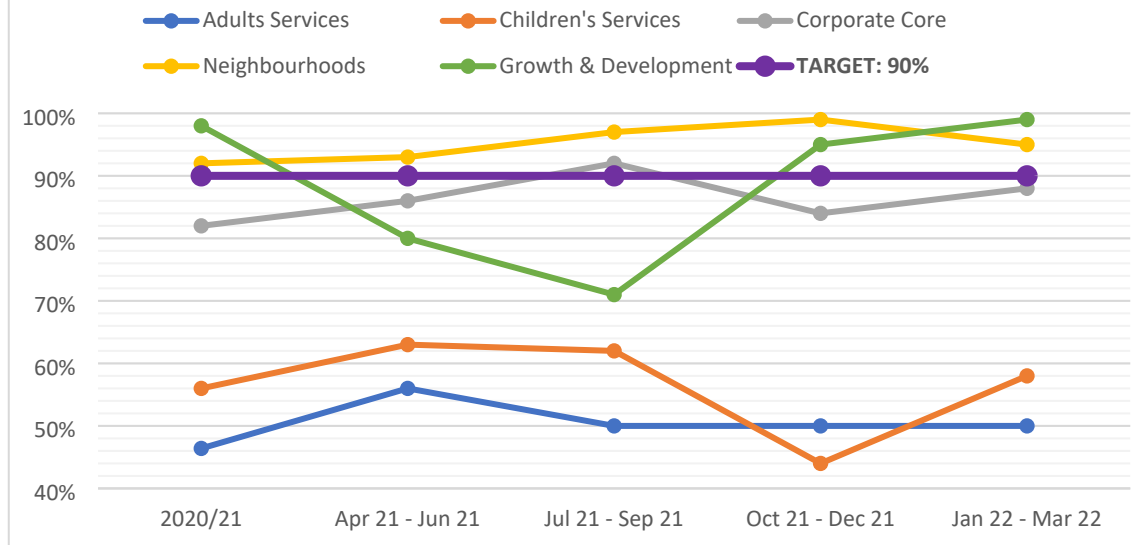


Number of Ombudsman enquiry decisions and % upheld											Year To Date:		
Directorates	1 Apr 20 - 31 Mar 21		Target 21/22	1 Apr 21 - 30 Jun 21		1 Jul 21 - 30 Sep 21		1 Oct 21 - 31 Dec 21		1 Jan 22 - 31 Mar 22		1 Apr 21 - 31 Mar 22	
	No.	%		No.	%	No.	%	No.	%	No.	%	No.	%
Adults Services	18	22%	30%	2	0%	5	20%	5	33%	4	25%	16	25%
Children's Services	16	13%		8	63%	4	50%	4	50%	0	N/A	16	56%
Corporate Core	21	10%		13	31%	12	33%	5	0%	7	0%	37	22%
Neighbourhoods	7	0%		10	20%	5	20%	9	0%	6	0%	30	13%
Growth & Development	11	18%		5	20%	0	0%	1	0%	3	25%	9	11%
All Directorates	73	14%		38	34%	26	31%	24	17%	20	5%	108	24%

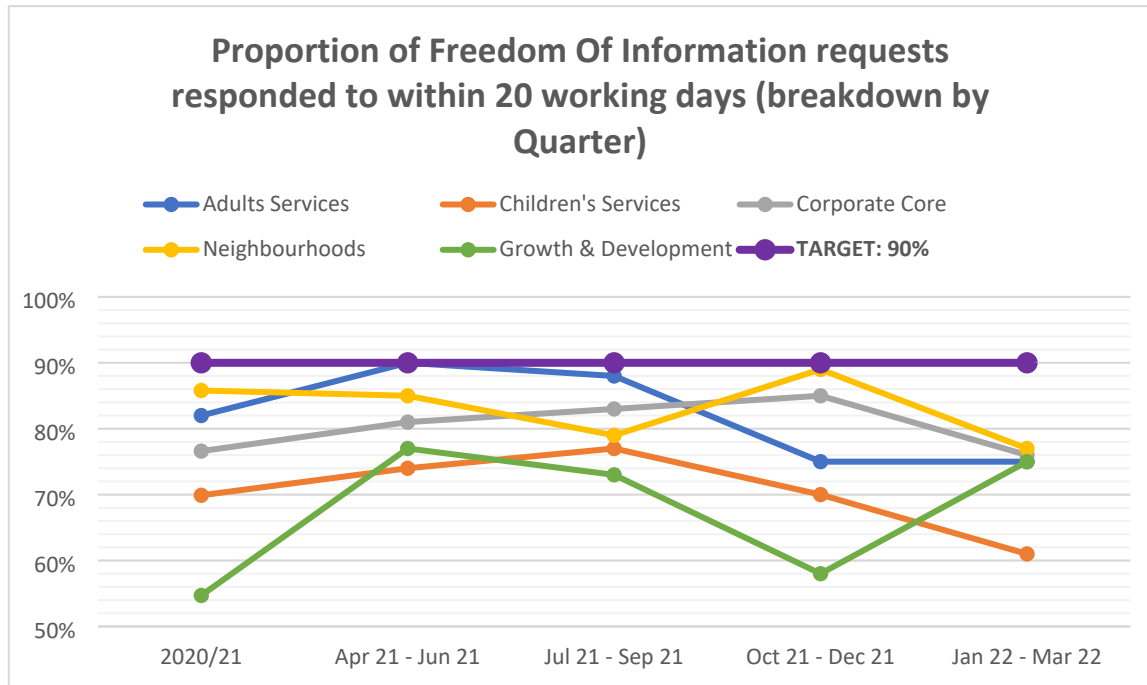


Data Protection Request (DPA/GDPR/Disclosure) Number % responded to by SLA (one month)											Year To Date:		
Directorates	1 Apr 20 - 31 Mar 21		Target 21/22	1 Apr 21 - 30 Jun 21		1 Jul 21 - 30 Sep 21		1 Oct 21 - 31 Dec 21		1 Jan 22 - 31 Mar 22		1 Apr 21 - 31 Mar 22	
	No.	%		No.	%	No.	%	No.	%	No.	%	No.	%
Adults Services	69	46%	90%	47	56%	42	50%	12	50%	18	50%	119	54%
Children's Services	255	56%		92	63%	77	62%	64	44%	95	58%	328	59%
Corporate Core	228	82%		86	86%	72	92%	69	84%	78	88%	305	87%
Neighbourhoods	360	92%		183	93%	191	97%	171	99%	203	95%	748	96%
Growth & Development	93	98%		10	80%	21	71%	43	95%	100	99%	174	95%
All Directorates	1005	78%		418	83%	292	82%	359	86%	494	85%	1674	84%

Proportion of Data Protection requests responded to within 1 month (breakdown by Quarter)



Number FOI requests and % within deadline (20 working days)											Year To Date:		
Directorates	1 Apr 20 - 31 Mar 21		Target 21/22	1 Apr 21 - 30 Jun 21		1 Jul 21 - 30 Sep 21		1 Oct 21 - 31 Dec 21		1 Jan 22 - 31 Mar 22		1 Apr 21 - 31 Mar 22	
	No.	%		No.	%	No.	%	No.	%	No.	%	No.	%
Adults Services	219	82%	90%	61	90%	59	88%	71	75%	57	75%	248	82%
Children's Services	209	70%		62	74%	60	77%	63	70%	55	61%	240	73%
Corporate Core	638	77%		142	81%	157	83%	134	85%	199	76%	632	81%
Neighbourhoods	457	86%		146	85%	135	79%	159	89%	147	77%	587	71%
Growth & Development	257	55%		63	77%	61	73%	67	58%	94	75%	285	71%
All Directorates	1780	76%		474	82%	472	81%	494	79%	552	76%	1992	79%





**Manchester City Council  
Report for Information**

**Report to:** Audit Committee – 29 November 2022  
**Subject:** Draft Code of Corporate Governance  
**Report of:** Deputy Chief Executive and City Treasurer

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**Summary**

This report proposes both a revised draft of the Council's Code of Corporate Governance (the Code) which is in accordance with published guidance, and a revised process. Compliance with the Code is monitored on an annual basis through the Council's Annual Governance Statement.

**Recommendations**

Audit Committee is invited to comment on the Council's revised draft Code of Corporate Governance, and to recommend to the Council that responsibility for approval of the Code of Corporate Governance is delegated to the Audit Committee, as set out in the recommendations section at the end of the report.

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**Wards Affected: All**

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## **1. Introduction and Context**

- 1.1 The Council maintains a local Code of Corporate Governance (the Code), which is recommended as good practice for local authorities by the Chartered Institute of Public Finance and Accountancy (CIPFA). The Code sets out the Council's governance standards. These standards ensure the Council is doing the right things, in the right way in a timely, inclusive, open, effective, honest and accountable manner.
- 1.2 The framework for the Code is based on the seven principles of good governance for local authorities which are set out in the CIPFA and Society of Local Authority Chief Executives (SOLACE) guidance "Delivering Good Governance in Local Government: Framework (2016)". The revised Code deals with each of these principles in turn.
- 1.3 Alongside the seven CIPFA Framework principles, the vision, culture, and values of the Council – the Our Manchester behaviours, and Our Manchester Strategy – are at the heart of the Council's approach to governance. Our vision, culture and values have shaped the commitments which are set out in the Code, and which articulate the Council's approach to meeting the seven principles of good governance.
- 1.4 The Code sets out the Council's governance commitments, but it deliberately doesn't include details of how these commitments have been met. How these commitments have been met is set out in the Governance Framework section of the Council's Annual Governance Statement (AGS). In the AGS, hyperlinks are provided where the reader can access more information about examples of governance in action, for example key strategies and reports.

## **2. Improvements to the Code**

- 2.1 A review of the Code has been carried out to improve the document and process. This has included a review of good practice across peer local authorities such as Core Cities (including Leeds, Bristol, and Birmingham), other Greater Manchester authorities and examples highlighted by CIPFA (including Lambeth and Westminster).
- 2.2 Key aims of the review included:
  - To produce a more concise, accessible, and easily digestible document, so that stakeholders can more clearly understand the Council's governance commitments.
  - To reduce the resources needed to update the Code in future, in line with the principles of the Future Shape of the Council transformation programme.
- 2.3 Some of the key improvements which have been made are as follows:
  - The Code is now a much more concise document (10 pages, compared to 23 pages for the previous version).

- There is a focus on a series of concise and clear bullet point commitments, to improve the communication of the document to key stakeholders such as Heads of Service. This replaces long paragraphs of text in the previous version.
- The document fully meets digital accessibility standards.
- Removal of excessive detail means that the document will become out of date less frequently, helping to improve the efficiency of the update process, and less resources in terms of officer time will be needed to update the document.

2.4 The Code will be made publicly available on the Council's 'Key Governance Documents' webpage, where the Annual Governance Statement can also be accessed. It is proposed that the document will no longer be contained in the Council's Constitution, which is not a mandatory requirement. This will support the efficiency of the production process, making it more agile, and improve the public accessibility of the document. In future, the timetable for update can be determined by when it is prudent to reflect any significant changes in the Council's approach to governance in the Code, rather than this being constrained by the fixed update cycle of the Constitution. It is anticipated that an update of the Code may be required every two to three years. Updates to the Code will continue to be submitted to both Standards Committee and Audit Committee, which is the same as current practice.

### **3. Next Steps**

3.1 Once any comments from Audit Committee have been incorporated, a final version will be uploaded to the Council's 'Key Governance Documents' webpage. Once finalised, the updated Code will be communicated to key stakeholders including Heads of Service, to support effective understanding and delivery of the Council's commitments to good governance across the organisation.

### **4. Recommendation**

4.1 If Audit Committee support the proposal at paragraph 2.4 of the report it is asked to recommend to the Council that responsibility for approval of the Code of Corporate Governance is delegated to the Audit Committee and that in doing so the Council agree to:

- Changing the delegations to the Audit Committee set out in the Council's Constitution so that approval of the Code of Corporate Governance is the responsibility of Audit Committee.
- Deleting the reference to the Code of Corporate Governance from the Council's Policy Framework at Article 4 of the Council's Constitution; and
- Removing Section G of Part 6 ("Manchester City Council - Code of Corporate Governance") from the Council's Constitution.

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# Code of Corporate Governance

## Introduction

Our Code of Corporate Governance ('the Code') sets out the Council's governance standards. These standards ensure the Council is doing the right things, in the right way in a timely, inclusive, open, effective, honest and accountable manner.

## The Council's Corporate Governance Principles

The Code is based on the seven governance principles set out in the CIPFA/SOLACE<sup>1</sup> guidance 'Delivering Good Governance in Local Government' (2016).

These principles ('A' to 'G') and their sub principles ('A1' to 'G3') are set out below, along with a series of 'we will' commitments which articulate the Council's approach to meeting the principles.

### A. Behaving with integrity, demonstrating strong commitment to ethical values, and respecting the rule of law.

#### A1 - Behaving with Integrity

We will:

- Foster a culture of behaviour based on shared values, ethical principles and good conduct that is put into practice by members and officers alike.
- Take an 'Our Manchester' approach to everything that we do. This means we have five behaviours which represent how we should do things:
  1. We are proud and passionate about Manchester
  2. We take time to listen and understand
  3. We own it and are not afraid to try new things
  4. We work together and trust each other
  5. We show that we value our differences and treat people fairly
- Ensure that staff are aware of and know how to access whistle-blowing, and anti-fraud and corruption procedures. All our staff are expected to help prevent fraud and corruption, and are encouraged, supported, and protected to speak up if they encounter potential wrongdoing.

#### A2 - Demonstrating Strong Commitment to Ethical Values

We will:

- Operate a Standards Committee that champion high standards of ethical governance from elected members.
- Maintain robust policies and procedures so that ethical values are put into practice, including separate Codes of Conduct for members and staff and a

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<sup>1</sup> CIPFA is the Chartered Institute of Public Finance and Accountancy and SOLACE is the Society of Local Authority Chief Executives

Member / Officer Relations Protocol, which are clearly communicated and readily accessible.

- Operate effective procedures for the declaration of interests, gifts and hospitality for both members and officers.
- Operate ethical procurement policies to ensure that commitment to our values and integrity is delivered by external suppliers delivering services on our behalf.

### A3 - Respecting the Rule of Law

We will:

- Appoint a Monitoring Officer (the City Solicitor) who is a member of the Strategic Management Team (SMT) and ensures that decisions are taken in a lawful and fair way, procedures are followed and that all applicable statutes and regulations are complied with.
- Put in place measures to address breaches of our legal and regulatory powers. The Council's Monitoring Officer (the City Solicitor) has statutory reporting duties in respect of unlawful decision making and maladministration. Similarly, the Chief Finance Officer (the Deputy Chief Executive and City Treasurer) has statutory reporting duties in respect of unlawful and financially imprudent decision making.
- Appoint Statutory Officers that have the skills, resources and support necessary to perform effectively in their roles. These include:
  - Head of Paid Service (Chief Executive)
  - Monitoring Officer (City Solicitor)
  - Chief Finance Officer (Deputy Chief Executive and City Treasurer)
- Support the statutory officers as well as other key post holders and elected Members to fulfil their responsibilities within legislative and regulatory requirements.
- Ensure that all Members and Officers appointed to undertake roles as Directors on either Company or Charity Boards are adequately trained and supported to ensure that they undertake their duties within the context of the relevant Acts that govern such bodies.

## B. Ensuring openness and comprehensive stakeholder engagement

### B1 - Ensuring Openness

We will:

- Set out our website in a clear and accessible way, using infographics and plain language, with information which residents use most easily accessible from the homepage.
- Ensure that decisions taken by Council (the meeting attended by all Councillors), as well as those taken by Committees or by the Executive are recorded on our website, alongside the reasons and the evidence considered.
- Ensure that subject to limited exemptions these decisions are made in public and information relating to those decisions is made available to the public.

- Publish notification online of the intention to take the most significant executive decisions on a Register of Key Decisions.
- Provide live webcasts of decision making and Scrutiny Committee meetings.

## B2 - Engaging Comprehensively with Institutional Stakeholders

We will:

- Develop and maintain relationships with leaders of other organisations across the private, public and voluntary sector contributing to the vision for the city in the Our Manchester Strategy.
- Maintain a register of our significant partnerships to assess the level of assurance for the governance arrangements of each partnership and highlight areas where improvements may be required to further strengthen these arrangements. This activity will be reported and accountable to Audit Committee and underpinned by clear and well documented supporting evidence.
- Ensure effective monitoring of the performance and outcomes delivered through the companies, Joint Ventures and charities which the Council is a party to, through the Council's Commercial Board and the Shareholder Panel.

## B3 - Engaging with Individual Citizens and Service Users Effectively

We will:

- Use the Our Manchester approach when engaging with residents, with the principles of better lives, listening, recognising strengths and working together. This means that we focus first on the strengths and potential in people and places, rather than starting from their challenges.
- Use the most appropriate methods to engage and consult to ensure the reach is as broad and inclusive as possible, including but not limited to community engagement, formal consultation, and working with residents and service users to design services that best meet their needs.
- Proactively engage with the city's diverse communities and identity groups to inform the development and delivery of our functions. This includes recognising the distinction between engaging communities of geography (a finite number of residents within individual neighbourhoods) and communities of identity. Identity groups can mean people with protected characteristics defined by the Equality Act, which includes disabled people, older people, communities experiencing racial inequality, and LGBTQ+ people, who are widely dispersed across Manchester. The Council also engages with a broader range of identity groups than those defined in the Equality Act, including ex-armed forces personnel and their families, people living in poverty, people with caring responsibilities and homeless people.
- Work with Voluntary, Community and Social Enterprise (VCSE) organisations to assist in effective engagement with Manchester's diverse communities within neighbourhoods and communities of identity.
- Strives to balance the feedback we receive from more active stakeholders with that from less active stakeholders through monitoring responses by age, gender, location, ethnicity, sexuality, and other factors and delivering targeted



promotion where required to ensure that the sample of respondents is representative of the city as a whole.

- Adopt a “You Said ... We Did” approach to consultation and promotes material advising the public and other stakeholders of the key findings from consultations and how they have been taken into account.
- Maintain effective channels for dialog and debate with residents, including via social media.
- Maintain effective complaints and compliments handling and monitoring procedures, so that we can identify where improvements in service delivery are needed and learn effectively from the complaints that we have received.

## C. Defining outcomes in terms of sustainable economic, social, and environmental benefits

### C1 - Defining Outcomes

We will:

- Engage and consult with residents, partners and other key stakeholders when designing key strategies.
- Ensure that outcomes are focused on achieving delivery of the overall vision for the city in the Our Manchester Strategy.
- Maintain a current Corporate Plan which sets out the priorities which the Council will focus on to play its part in delivering the vision for the city.
- Put the Our Manchester Strategy and Corporate Plan priorities at the heart of our budget, business planning, and service planning processes.
- Commit to service managers ensuring that Service Plans are clearly communicated to all staff, so that they understand the role that they will play in delivering the Corporate Plan priorities.
- Commit to consulting with the businesses and residents of Manchester in the design of our budget proposals to understand their priorities, and to be transparent about financial limitations.
- Develop a Medium-Term Financial Strategy which sets out financial assumptions and provides a set of goals for financial decision making for the planning period ahead.

### C2 - Sustainable Economic, Social and Environmental Benefits

We will:

- Commit to considering the full combined economic, social and environmental implications of our decisions through, for example, data analysis and consultation with affected parties so that our decisions advance the achievement of the city’s vision.
- Set out the impact a decision will have on the five Our Manchester Strategy outcomes and include both an Environmental, and an Equality Impact Assessment, in any reports which recommend a decision.
- Maintain up to date plans to address climate change and provide regular online progress updates on delivery. This includes progress towards science-based carbon reduction targets for Manchester which require the city to become net zero carbon by 2038.

- Provide political leadership on our equality, diversity, and inclusion (EDI) priorities at Executive Member level, and senior officer leadership at SMT level.
- Ensure that services are clear about their role in meeting the Public Sector Equality Duty (S149 of the Equality Act 2010). When required, Equality Impact Assessments will be carried out to assess the impact of proposals which may have a differential effect on individuals with protected characteristics and communities across the city.
- Commit to progressing EDI for our workforce, informed by our Employee Network Groups and the represented Trade Unions.
- Enact plans and strategies which will boost productivity in the city, to reduce poverty and create an economy that is inclusive and benefits everyone. We will meet the vision of Manchester being a more highly skilled city using learning and employment, creating an economy where more of our residents are connected to the city's success.
- Have a set of social value priorities and an approach for promoting social value, particularly through our procurement. We will continually look to refine and update our approach, introducing innovations where possible.

#### D. Determining the interventions necessary to optimise the achievement of the intended outcomes

##### D1 - Determining Interventions

We will:

- Ensure that decision makers receive accurate, relevant and timely performance information and intelligence to support them with objective and rigorous analysis of options, covering intended outcomes, financial impact and associated risks informing efficient service delivery.
- Seek to continuously enhance the insights made available to decision makers, for example by delivering improvement programmes focusing on key areas such as digital and data.
- Commit to seeking continuous feedback from residents and those who use our services both in planning service changes and improvements, for example through surveys, consultations or bespoke feedback gathering.
- Ensure effective delegation of decision making to officers so that they can deal with the day-to-day running of services without the need to constantly refer matters back to elected Members. Details of what decisions are taken in this way are included in the Scheme of Delegation in the Council's Constitution.

##### D2 – Planning Interventions

We will:

- Plan our activity at a strategic level through our budget and business planning cycle, in consultation with internal and external stakeholders, to ensure services delivered across different parts of the organisations and partners complement each other and avoid duplication.

- Ensure consistent and effective service planning, with each service completing an individual plan. Services will ensure that their priorities and activities set out in their service plan all contribute towards delivery of our Corporate Plan, and that there is also a focus on continuous improvement.

### D3 - Optimising Achievement of Intended Outcomes

We will:

- Integrate and balance our service priorities, affordability, and other resource constraints, considering the full cost of operations over the medium and longer term, including both revenue and capital spend budgets. This includes producing a medium-term financial plan.
- Take an integrated approach to the deployment of revenue and capital spend, aligned to delivery of the Our Manchester priorities.
- Consider social value at pre-tender and tender stage to ensure that appropriate desirable outcomes can be offered by suppliers in their tender submissions.

## E. Developing the entity's capacity, including the capability of its leadership and the individuals within it

### E1 - Developing the Organisation's Capacity

We will:

- Have organisational development plans in place which support staff to develop the skills and behaviours to enable us to effectively deliver against the Our Manchester Strategy, and to continue to transform our culture.
- Enact strategies which aim to create a more inclusive Council, where our workforce fully reflects the rich diversity and talent of the communities we serve at all levels.
- Deliver change programmes which will continue to reshape how services are delivered internally and externally, using new technologies, ways of working and new delivery models.

### E2 - Developing the Capability of the Organisation's Leadership and Other Individuals

We will:

- Ensure that newly elected Council Members receive an induction into the work of the Council and their role as a local member.
- Provide ongoing elected Member development, including briefings by officers into any new developments which affect their role.
- Ensure that all staff have regular one to ones with their manager, known as "About You" sessions. These will include discussions on objectives and goals, performance, understanding training and development needs, and health and wellbeing.
- Listen to the views of our staff through surveys and then use the learnings from these to inform and improve the way that we prioritise, operate, and communicate.

- Run events which give all staff the opportunity to connect with priorities, and engage with the senior leadership, for example in question-and-answer sessions.
- Commit to developing all our managers at all stages throughout their careers. We offer a broad range of courses ranging from those aimed at all new managers, existing managers, and leaders.
- Ensure that all managers are aware of, understand and are following key corporate people management policies and processes such as managing attendance.
- Commit to supporting the physical, mental, social, and financial wellbeing of our workforce. This includes providing support and guidance on the Intranet, a 24/7 Employee Assistance Programme for staff and their families, and a health and wellbeing strategy.

## F. Managing risks and performance through robust internal control and strong public financial management

### F1 - Managing Risk

We will:

- Operate a risk management framework that aids decision making in pursuit of the organisation's strategic objectives, protects the Council's reputation and other assets and is compliant with statutory and regulatory obligations.
- Ensure that staff are appropriately trained to ensure that they manage risk effectively using appropriate methodologies, including the management of safeguarding risks in line with professional standards.
- Consider emerging pieces of legislation and policy changes to understand and prepare for their potential impact.

### F2 - Managing Performance

We will:

- Ensure that services use timely and accurate performance information and insight about service delivery, to support intervention to address any barriers to good performance.
- Provide SMT with concise, clear, and integrated finance and performance reports to support effective resources allocation, and to shine a light on any challenges so that they can be addressed.

### F3 - Effective Overview and Scrutiny

We will:

- Maintain Scrutiny Committees, which hold decision makers to account and play a key role in ensuring that public services are delivered in the way that residents want.
- Ensure that where appropriate officers know how to engage with and support the Scrutiny Committees.

#### F4 - Robust Internal Control

We will:

- Maintain robust internal control processes, which support the achievement of our objectives while managing risks. The current approach will be set out annually in Risk and Internal Audit reports to Audit Committee.
- Maintain and communicate clear policies and arrangements in respect of counter fraud and anti-corruption.
- Maintain an Audit Committee which oversees the effectiveness of governance and risk management arrangements, internal systems of control, and anti-fraud and anti-corruption arrangements.
- Annually report to Audit Committee our internal auditor's findings into the overall adequacy and effectiveness of the framework of governance, risk management and control.
- Ensure that implementation of, or response to improvement recommendations made by Internal and External Auditors and other external assessors occurs within due dates.

#### F5 - Managing Data

We will:

- Comply with data protection legislation, which includes the UK General Data Protection Regulation, the Data Protection Act 2018 (DPA). This will ensure that data processing is carried out fairly, lawfully, and transparently.
- Ensure that all valid requests from individuals to exercise the rights provided for in data protection legislation are dealt with as quickly as possible, and by no later than the timescales allowed in the legislation.
- Review and supplement our policies, and keep our processing activities under review, to ensure they remain consistent with the law, and any compliance advice and codes of practice issued from time to time by the Information Commissioner's Office (ICO).
- Ensure that it is clear to all staff and Members that they are personally accountable for using the Council's information responsibly and appropriately.
- Ensure that staff and Members are appropriately trained in protecting information.
- Make information available to the public via the information access regimes provided for by Freedom of Information and Environmental Information legislation.
- Ensure that Information Governance is overseen at a senior level by the Corporate Information Assurance and Risk Group (CIARG), chaired by the City Solicitor who is the Senior Information Risk Officer for the Council (SIRO).

#### F6 - Strong Public Financial Management

We will:

- Maintain an approach to Financial Management that ensures that public money is safeguarded at all times, ensuring value for money. Our approach supports both long-term achievement of objectives, and shorter term financial

and operational performance. This is outlined within the Council's Medium Term Final Strategy.

- Via Financial Regulations and through the leadership of the Chief Finance Officer (Deputy Chief Executive and City Treasurer), ensure that appropriate advice is given on all financial matters, proper financial records and accounts are kept, and oversees an effective system of internal financial control. The City Treasurer ensures well developed financial management is integrated at all levels of planning and control including management of financial risks, systems, and processes.
- Comply with the Financial Management Code (FM Code) which sets out the standards of financial management expected for local authorities and is designed to support good practice, and to assist local authorities in demonstrating their financial sustainability. As part of this we will carry out credible and transparent financial resilience assessments.
- When making our budget calculations, ensure that the Chief Finance Officer (CFO) reports to Council on the robustness of the estimates made for the purposes of the calculations, and the adequacy of the proposed financial reserves.
- Follow CIPFA's Prudential Code and Treasury Management Code of Practice which set out the risk framework through which the Council manages its balance sheet and makes capital investment decisions.
- Maintain strategies and processes detailing our approach to decision making on capital investments, and treasury management (including debt management and cash investing).

## G. Implementing good practices in transparency, reporting, and audit to deliver effective accountability

### G1 - Implementing Good Practice in Transparency

We will:

- Commit to publishing information, including reports, in a manner which is accessible to residents and other stakeholders.
- Ensure that our website is set out in a clear and easily accessible way, using infographics and plain language.
- Follow the Local Government Transparency Code, which includes requirements and recommendations for local authorities to publish certain types of data.

### G2 - Implementing Good Practices in Reporting

We will:

- Make reports publicly available online which chart the city's progress towards its vision and priorities as set out in the Our Manchester Strategy.
- Provide integrated finance and performance monitoring information to SMT. This will enable monitoring of delivery of our Corporate Plan priorities, support effective resource allocation, and help to identify any challenges so that they can be addressed.

- Produce Communities of Identity reports, working with communities, VCSE organisations and partners to identify the different experiences of diverse communities in Manchester.

### G3 - Assurance and Effective Accountability

We will:

- Welcome peer challenge, internal and external review and audit, and inspections from regulatory bodies, giving thorough consideration to arising recommendations.
- Monitor the implementation of internal and external audit recommendations. Assurance reports will be presented to Audit Committee and the Council's external auditors, summarising the Council's performance in implementing recommendations effectively and within agreed timescales.
- Follow the Public Sector Internal Audit Standards (PSIAS), which includes a commitment to develop audit plans which are designed to invite comment from management and the Audit Committee.

### Meeting the commitments set out in the Code

Each year the Council publishes an [Annual Governance Statement \(AGS\)](#) to accompany the Annual Accounts.

The AGS provides an overview of how the Council's governance arrangements operate, including how they are reviewed annually to ensure they remain effective.

In 'The Governance Framework' section of the AGS (Section 4) key examples are given of how the Council has met the governance commitments set out in the Code. This includes hyperlinks to sources of further information, which include more detail about how the Council has implemented its commitments.

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**Manchester City Council  
Report for Information**

**Report to:** Audit Committee – 29 November 2022

**Subject:** Register of Significant Partnerships: Partnerships with Reasonable or Limited Assurance Ratings

**Report of:** Deputy Chief Executive and City Treasurer

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### Summary

The report provides an update on the partnerships where a ‘Reasonable’ or ‘Limited’ rating was recorded and presented to the Audit Committee in June 2022.

### Recommendations

Audit Committee is requested to comment on and note the progress made to improve governance arrangements for the partnerships detailed in the report.

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### Wards Affected: All

**Environmental Impact Assessment** - the impact of the issues addressed in this report on achieving the zero-carbon target for the city

This report is for information in relation to the governance strength ratings of partnerships and does not directly propose decisions affecting the achievement of the zero-carbon target.

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### Background documents (available for public inspection):

The following documents disclose important facts on which the report is based and have been relied upon in preparing the report. Copies of the background documents are available up to 4 years after the date of the meeting. If you would like a copy, please contact one of the contact officers above:

- Audit Committee 14<sup>th</sup> June 2022 - Register of Significant Partnerships 2022

## 1 Introduction

- 1.1 In June each year, the Audit Committee is presented with the outcome of the annual assurance process called the Register of Significant Partnerships (RSP). The RSP is a compilation of a range of entities / partnerships that are considered to be of the highest significance to the financial position or reputation of the Council, which deliver key corporate objectives, statutory obligations and Our Manchester priorities. An updated version of the 2021 RSP is attached to this report at Appendix 1. Please note, the attached RSP has been updated to reflect the position agreed by Audit Committee in June 2022, with the entities that were no longer deemed to fall within the RSP criteria or in existence now removed.
- 1.2 To be included on the Council's Register of Significant Partnerships, the partnership should meet one or more of the following criteria:
- I. Of strategic importance to the Council, critical to the delivery of the Council's key objectives or statutory obligations, and / or to the delivery of the Our Manchester Strategy;
  - II. Critical to the reputation of the Council – failure of the partnership to deliver could damage the reputation of the Council;
  - III. Responsible for spending significant public investment or whereby the Council has significant exposure.
- 1.3 Given that partnership working is a significantly important way for the Council to meet its strategic objectives, the principles of ensuring the lawful conduct of business, that public money is safeguarded, accounted for and spent efficiently and effectively, apply equally to both the Council and its partners. Therefore, it is vital that the Council has assurance that these partnership arrangements are clearly defined with effective governance arrangements in place for all such arrangements.
- 1.4 The purpose of the RSP is to assess whether or not the partnership arrangements that the Council is a party to are performing well, delivering value for money and realising the benefits and outcomes that they were established to achieve. The RSP process standardises the Council's approach to the overview of its partnerships; helping strengthen accountability, manage risk and ensure consistent working arrangements.
- 1.5 During the annual review of the RSP all partnerships are rated with a level of assurance. There are four levels of assurance. These are as follows:
- Substantial: Demonstrating consistent application of good governance practices, providing a high level of assurance and delivering both the partnership and Council objectives, with any matters noted not putting the overall delivery objectives at risk.
  - Reasonable: An overall sound system of governance has been established but there are some areas for improvement to ensure the delivery of both the objectives of the Council and the partnership. Recommendations will be moderate or a small number of key priorities.

- Limited: A governance system has been established but there are several significant areas highlighted for improvement, which, if not implemented, could result in the non-delivery of partnership and Council objectives. Recommendations will be significant and relate to key risks.
- Weak: Controls are generally weak leaving the partnership's system open to potential of significant error, resulting in a high probability that partnership and Council objectives will not be met unless action is taken. Critical priority or several significant priority actions required.

1.6 As part of the annual RSP process and subsequent ongoing monitoring of the partnership arrangements, any partnership which does not receive a substantial rating is required to provide a six-month update to Audit Committee to outline progress to further strengthen the level of assurance.

1.7 Following the completion of the 2021 review process, of the 48 partnerships on the register, 38 (79.1%) were rated as having a 'Substantial' assurance rating, 4 (8.3%) rated as 'Reasonable', 1 (2.1%) rated as 'Limited', zero rated as 'Weak' and 5 entries (10.5%) removed from the register. This report provides an update on the entries which were reported to Audit Committee in as being rated 'Reasonable' and 'Limited'.

## **2 Update on partnership governance arrangements for those with a Reasonable or Limited Governance Strength Rating**

2.1 Following the last assessment process and the annual update on the Register of Significant Partnerships that was presented to Audit Committee in June 2022, the section below provides an update on the entities that were rated either as Reasonable or Limited.

### **Limited Rating**

#### **2.2 Manchester Working Ltd (entry 4)**

2.2.1 Manchester Working Ltd (MWL) was established as a joint venture company in 2006 for the provision of building maintenance services for the Council and Northwards Housing.

2.2.2 The company has one remaining contract that is due to be completed at the end of November. Once the contract is complete it is anticipated that work can commence on the winding up of the company.

2.2.3 There is no material change in terms of the Board make up which is currently made up of two Council representatives and six representatives from Mears. However, one of the current Council representatives will need to step down at the end of the calendar year due to their departure from the Council and consideration will need to be given to whether a replacement is

required.

- 2.2.4 The annual statement of accounts for the period ending 31 December 2021 have been filed at Companies House and it is unlikely that there will be any remaining assets once the Company is formally wound up.

### **Reasonable Rating**

## **2.3 Manchester Safeguarding Partnership (entry 16)**

- 2.3.1 Greater Manchester Integrated Care Arrangements came into place on 1<sup>st</sup> July 2022. Andrea Patel, Director of Safeguarding Manchester, provides continuity from the previous arrangements. Any impact on the Manchester Safeguarding Partnership (MSP) has been proactively managed through regular reporting and consultation.
- 2.3.2 MSP formalised the arrangements for the MSP Steering group in April 2022 (formally MSP task and finish group). The Terms of Reference state the purpose of the group is to oversee the business of the MSP and support the infrastructure to help partners work together to drive progress and MSP strategic priorities. The group meet monthly with the partnership manager and consultant working on the development plan which is intended to drive forward improvements to decision making and scrutiny.
- 2.3.3 The MSP annual report 2020/21 was presented to the Children and Young People Scrutiny Committee in May 2022 and the inaugural Children of Manchester Safeguarding Conference was held in July. The conference is to become an annual event.
- 2.3.4 Considerable progress has been made in financial planning processes and transparency. A planned zero-based budget exercise to propose a new contributions formula has been delayed due to capacity issues and competing priorities. However, the MSP is in a good financial position and has invested in improvement capacity.
- 2.3.5 MSP has revised and agreed a risk identification model and reports on the risk register quarterly. Leadership and accountability are sighted on risk and the MSP Steering Group have monthly oversight and if required immediate action is taken.
- 2.3.6 The Safeguarding Effectiveness subgroup is working to a new framework and guidance. The first of two development sessions to implement the new arrangements was held in September 2022 and the second is scheduled to take place in November 2022. The partnerships data set, scoreboard and reporting mechanism are progressing and expected to be embedded by quarter 4, 2022/23.
- 2.3.7 Going forward the development plan will continue to drive improvement activity and increase the level of assurance for the MSP. The strategic development sessions will inform the 5-year plan 2023/2028.

## **2.4 Greater Manchester Mental Health NHS Foundation Trust (GMMH) (entry 26)**

- 2.4.1 The partnership is based on a legal contract with GMMH for the delivery of the Council's statutory duties under a Section 75 partnership agreement. The purpose is to deliver Social Worker Assessment and care management, approved mental health provision, community inclusion services and resettlement functions within an integrated health and social care organisation. The Section 75 Agreement forms part of a wider single integrated health and social care (NHS standard) contract held by GMMH and commissioned by the Council and Clinical Commissioning Group (CCG).
- 2.4.2 In the previous reporting period, the self-assessment highlighted major changes to the contractual landscape driven by the NHS Long Term Plan. This plan confirmed that all parts of England would be served by an Integrated Care System (ICS) from April 2021. In Greater Manchester, this was delayed to 1<sup>st</sup> July 2022.
- 2.4.3 The Greater Manchester ICS has now been established and has absorbed the former Manchester Health and Care Commissioning and its Mental Health Contract (of which Adult Social Care remains an Associate Commissioner). MCC Legal Teams have supported Adult Social Care with the directorate's elements of social care provision contained within the contract, which was formally executed in September 22.
- 2.4.4 Alongside this, Adult Social Care is refreshing its Section 75 Partnership Agreement with Greater Manchester Mental Health Foundation Trust. The first draft of this document is anticipated to be completed at the end of October 22. It will then undergo a period of review between the partnership with a view to this being agreed and executed by December 2022. This refreshed agreement brings a strengthened governance framework via amendments to the Terms of Reference for the Joint Assurance Group and a newly established annual mental health business improvement planning cycle.

## **2.5 Manchester Local Care Organisation (MLCO) (entry 40)**

- 2.5.1 The Our Healthier Manchester Locality Plan sets the ambitions for the city to significantly improve health outcomes and tackle health inequalities.
- 2.5.2 The partnership's aim and objectives are set out in an agreed Section 75 agreement which was created to govern the partnership arrangements and decision making between MCC and Manchester Foundation Trust (MFT). The agreement enables MLCO to deliver an enhanced range of functions and include the transfer of commissioning functions for social care.
- 2.5.3 The arrangements in place relating to Manchester Local Care Organisation continue to be effective with there being no significant change following the

annual update. This includes the Section 75 agreement and associated internal governance, risk and performance arrangements.

- 2.5.4 In line with the national implementation of Integrated Care Systems system wide governance in Manchester has undergone some changes, which, in turn, have an implication for MLCO. This includes the disestablishment of the MLCO Accountability Board, and the establishment of Manchester Provider Collaborative. Work is underway to re-establish a forum that would assume the core functions of the Accountability Board forum the principal objective of which would oversee the delivery of the services and functions that fall within the purview of the current Section 75 agreement that exists between MCC and MFT.
- 2.5.5 This would recognise that each partner has defined reserved matters, that there is a benefit to having a shared assurance space, and that a section 75 exists between MCC and MFT that codifies a relationship that exists and formally acknowledges that both the MLCO Chief Executive and MLCO Director of Finance have delegated responsibilities in relation to adult social care and community health services.
- 2.5.6 The revised piece of governance will:
- enable MLCO to hold strategic discussions with the two partnering organisations that established the MLCO and likewise the two partnering organisations to hold bilateral discussions relating to MLCO with each other
  - enable joint oversight of key performance and financial issues relating to MLCO delivery.
  - manage areas of joint risk
  - this forum is intended to mobilise in quarter three 2022/23.

## **2.6 One Education (entry 43)**

- 2.6.1 One Education provides a range of educational and Business Support services to Manchester schools and following a competitive tendering process, One Education was also awarded the contract for the provision of Educational Psychologist services to Manchester City Council schools.
- 2.6.2 Solace has recently concluded a review of One Education, which was commissioned by MCC. The review identified and made useful recommendations on:
- Alignment the strategic fit and shared priorities between MCC and One Education
  - Introduction of a Shareholder Agreement between MCC and One Education
  - Recruitment of Non-Executive Directors in order to further strengthen the Board
  - Further work on company business model, particularly exploring the potential to create a charitable arm

- The need for MCC and One Education to review areas of activity / services to schools where there is an overlap e.g. payroll

2.6.3 A recent meeting took place between One Education and the Council to review the recommendations and agree how they are progressed, some of which are short-term e.g. NED recruitment, Shareholder Agreement, whilst others will need to be progressed in line with the development of the new Education Strategy for Manchester (responding to the Governments White Paper).

2.6.4 On an operational basis, the Acting Chief Executive's contract has been extended until the end of December 2022, with positive work continuing on building constructive engagement and further enhancing relationships with key stakeholders. In addition, there have been some other good appointments at senior level. One Education has had a strong start to the academic year, maintaining a high proportion of SLAs with schools, with the company on track to achieve a positive outturn this financial year.

### **3 Next Steps**

3.1 Following this year's annual assessment, a lessons learnt exercise was carried out and improvements to further strengthen and enhance the process were identified. These areas will be implemented as part of the annual update of the register. These included amendments to the on-line review form to ensure the capture of further relevant information, a review to ensure the Link Officers who complete the assessments are the appropriate people and a more detailed timeline for producing the register. The plan is to build a lessons learnt exercise into the annual process so continual improvement will be made year on year.

3.2 Work has been carried out to verify whether the current partnerships on the RSP are still relevant and whether any further are entries required to be added. A further six entities have been identified for inclusion on the next RSP:

- Manchester Climate Change Partnership Board
- Manchester Heat Network Special Purpose Vehicle
- Manchester Schools Alliance
- Manchester Institute of Health & Performance Limited
- The National Football Museum
- This City MCR Limited

The new entries will start to be reported on from as part of the next annual update of the register which is due to be presented to Audit Committee in June 2023.

3.3 It is also to be noted that the Register of Significant Partnerships is referenced as a key governance and assurance tool as part of the refreshed Corporate Code of Governance. The Code sets out the Council's governance standards. These standards ensure the Council is doing the

right things, in the right way in a timely, inclusive, open, effective, honest and accountable manner. An update of the Corporate Code of Governance was recently presented to Standards Committee and is also on the agenda of today's Audit Committee meeting.



Key to Level of Assurance Ratings	<b>Substantial:</b> Demonstrating consistent application of good governance practices, providing a high level of assurance and delivering both the partnership and Council objectives. Any matters noted do not put the overall objectives at risk.
	<b>Reasonable:</b> An overall sound system of governance has been established but there are some areas for improvement to ensure the delivery of both the objectives of the Council and the partnership. Recommendations will be moderate or a small number of significant priority.
	<b>Limited:</b> A governance system has been established but there are a number of significant areas highlighted for improvement, which if not implemented, could result in the non-delivery of partnership and Council objectives. Recommendations will be significant and relate to key risks.
	<b>Weak:</b> Controls are generally weak leaving the partnership's system open to the potential of significant error, resulting in a high probability that partnership's and the Council's objectives will not be met unless action is taken. Critical priority or a number of significant priority actions required.

					Ratings	
No	Partnership Name	Short Description of Partnership	SMT Lead	Class	2020 Level of Assurance Rating	2021 Level of Assurance Rating
<b>INCORPORATED BODIES (separate and distinct legal entities)</b>						
1	Manchester Central Convention	Manchester Central Convention Complex Ltd, wholly owned by the City Council. Owns the Convention Complex (formerly G-Mex). Reports to Manchester Central Board.	Carol Culley	Public Public	Substantial	Substantial
2	Manchester Science Partnership Ltd	Manages the Science Park and attracts science and technology investment into Manchester. Partners: University of Manchester, Salford CC, MMU and private sector. Reports to company board.	Joanne Roney	Public Private	Substantial	Substantial
3	Manchester Airport Holdings Ltd	Copmany with shareholding held by the Council, Investors and the other Greater Manchester local authorities.	Rebecca Heron	Public Private	Substantial	Substantial
4	Manchester Working Ltd	Repairs and maintenance Joint Venture with Mears. Reports to Manchester Working Board.	Carol Culley	Public Private	Limited	Limited
5	Oxford Road Corridor Manchester	Delivery vehicle for a strategic development framework within the Oxford Road Corridor area, oversees an area of the City running south from St Peter's Square to Whitworth Park. Partners: University of Manchester, Manchester Metropolitan University, Central Manchester Foundation Trust, Bruntwood. Reports to Corridor MCR Board.	Rebecca Heron	Public Private	Substantial	Substantial
6	Mayfield	This is a partnership between the Council, Transport for Greater Manchester and London & Continental Railways, to facilitate the regeneration of the Mayfield area of Manchester, as a high quality mixed used scheme. Reports to Partnership Board.	Rebecca Heron	Public Private	Substantial	Substantial
7	Manchester Life	Joint Venture established between Abu Dhabi United Group and the City Council, to deliver predominantly housing development. The first phase of the partnership will focus on the development of 6 sites within the Ancoats and New Islington neighbourhoods of the city which are in the ownership of the Council.	Rebecca Heron	Public Private	Substantial	Substantial
8	Matrix Homes	Joint Venture arrangement between the Council and the Greater Manchester Pension Fund (GMPF) building new homes for sale and market rent across five sites in the city.	Rebecca Heron	Public Public	Substantial	Substantial
9	Eastlands Strategic Development Company Ltd	The Eastlands Strategic Development Company, provides an overview and direction for the Eastlands Development Company to carry out the development of Eastlands Regeneration Area. The partnership between MCC and MCFC acts as a facilitator to drive growth in the east of the city and looks to best utilise the land surrounding the stadium to encourage economic growth.	Rebecca Heron	Public Private	Substantial	Substantial
10	Eastlands Development Company Ltd	The company is a vehicle for investment into East Manchester and provides a formal partnership arrangement for MCC and MCFC to leverage funding and investment in the area in line with the East Manchester Regeneration Framework.	Rebecca Heron	Public Private	Substantial	Substantial
11	NOMA	Partnership to oversee and guide regeneration and development within the area between Victoria and Shudehill. Hermes are taking forward the delivery of the masterplan in partnership with the Council and MEPC.	Rebecca Heron	Public Private	Substantial	Substantial
12	Northern Gateway (Victoria North)	Joint venture with Far East Consortium to regenerate Northern Gateway area for high quality housing and ancillary development to create a vibrant, attractive and sustainable neighbourhood. This also includes the submission of c£51m funding from Homes England Marginal Viability Fund to support infrastructure works.	Rebecca Heron	Public Private	Substantial	Substantial
13	Manchester Creative Digital Assets	Created to manage and operate the council's digital assets (The Sharp Project, Space Studios Manchester and Arbeta), to identify gaps in provision and bring forward strategies to provide support to digital businesses.	Rebecca Heron	Public Public	Substantial	Substantial

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## STATUTORY PARTNERSHIPS

14	Manchester Safeguarding Partnership	Statutory body to ensure the multi-agency arrangements for children and adults at risk of, or experiencing, harm are effective in safeguarding individuals and promoting their welfare (replaces MSCB and MSAB). Led by three safeguarding partners of MCC, GMP and CCG, all of which have equal responsibility for the arrangements. Reports to partnership Accountability and Leadership Board.	Paul Marshall / Bernadette Enright	Public Public	Reasonable	Reasonable
15	Health and Well Being Board	Thematic partnership providing collaborative approach to improve the health and wellbeing of residents and reduce health inequalities. Reports to Manchester Partnership	David Regan	Public Public	Substantial	Substantial
16	Manchester Community Safety Partnership	Statutory thematic partnership providing strategic direction for challenging and resolving crime and antisocial behaviour. Partners: GMP, Offender Management Services, GM Fire and Rescue Service, Public Health Manchester, the Universities, Housing Providers, and voluntary and community organisations. Reports to Manchester Investment Board.	Neil Fairlamb	LSP	Substantial	Substantial

## NON-STATUTORY PARTNERSHIPS

17	Children's Board	Thematic partnership providing strategic leadership on the design and delivery of services for children, young people and families in Manchester. Partners: MHCC, GMP and schools. Reports to the Health and Wellbeing Board.	Paul Marshall	LSP	Substantial	Substantial
18	CityCo (Manchester) Ltd	Aims to improve, develop and regenerate all aspects of the city centre as a trading environment. Incorporates Piccadilly Partnership. Partners include Bruntwood and Manchester Arndale. Reports to CityCo Board.	Neil Fairlamb	Public Private	Substantial	Substantial
19	GM Multi Agency Public Protection Arrangements	Enables Police, Probation and Prison services to work together to protect the public against dangerous and sexual offenders. Partners include Probation Service, GMP, Northwards Housing, Her Majesty's Prison Service and CCGs. Reports to Police Authorities.	Rebecca Heron	Public Public	Substantial	Substantial
20	Manchester Concert Hall Ltd.	Manages Bridgewater Hall. Partners: Partners: SMG (the operator of the Hall) and MCC. Reports to Company Board	Neil Fairlamb	Public Private	Substantial	Substantial
21	Manchester Credit Union (MCU)	A not-for-profit financial co-operative serving people who live or work in Manchester. Partners: DWP, Northwards Housing and City South Housing (both provide accommodation). Reports to Union Board.	Carol Culley	Public Private	Substantial	Substantial
22	Manchester Services for Independent Living (MSIL)	Operates under a SLA between MCC and Manchester CCG to provide Community Equipment Service to residents. SLA under review to incorporate changes to Community Health MCR. Reports to Partnership Board.	Bernadette Enright	Public Public	Substantial	Substantial
23	Manchester International Festival	Delivers a biennial International Festival. MIF will take on role of operator of The Factory once completed in 2021. Partners include Arts Council of England and GMCA. Reports to the Festival Board. An independent review and evaluation, commissioned at the end of each Festival, is reported to Executive.	Neil Fairlamb	Public Private	Reasonable	Substantial
24	Greater Manchester Mental Health NHS Foundation Trust (GMMH)	Based on a legal contract for the delivery of the Councils statutory duties under a Section 75 Agreement (Mental Health Act) commissioned by the Council and CCG. This works to deliver care management and assessment and Approved Mental Health Professional (AMHP) functions within an integrated health and social care organisation. Reports to various boards within MHCC, GMCA and the Council.	Bernadette Enright	Public Public	Reasonable	Reasonable
25	Millennium Quarter Trust	Manages, operates and maintains amenities and facilities in the Manchester Millennium Quarter area (now known as Medieval Quarter). Partners include Manchester Cathedral, Selfridges, the Corn Exchange and Chetham's School of Music.	Rebecca Heron	Public Private	Substantial	Substantial
26	St John's (Quay Street)	Manchester Quays Limited (MQL) is a Joint Venture between the Council and Allied London Properties Ltd set up to re-develop the former ITV site at Quay Street and Water Street. Reports to the Project Board.	Rebecca Heron	Public Private	Substantial	Substantial
27	North West Regional Strategic Migration Partnership	Supports the development of a regional strategy and co-ordinates support and services for migrants living and/or working in the North West. Partners: range of organisations representing, public, private and third sector. Reports to UK Border Agency via partnership's Executive Committee.	Neil Fairlamb	Public Public	Substantial	Substantial
28	Wythenshawe Forum Trust	To manage and operate the Wythenshawe Forum site, including the contract management of Everyone Active (SLM). Partners include NHS, GMP, Manchester Airport, Wythenshawe Housing Group and Manchester Enterprise Academy. Reports to the partnership's Board.	Neil Fairlamb	Public Public	Substantial	Substantial

29	Work and Skills Board	Thematic partnership responsible for economic growth, employment and skills. Partners include LTE Group, GMCC, MHCC, Manchester College, Manchester Adult Education Service, Manchester Solutions and VCS. Reports to Our Manchester Investment Board.	Angela Harrington	LSP	Substantial	Substantial
30	AVRO Hollows	Tenant Management Organisation (established under the Government's Right to Manage legislation) contracted to manage c300+ Council owned homes in Newton Heath.	Rebecca Heron	Public Private	Reasonable	Substantial
31	SHOUT	Tenant Management Organisation contracted to manage c100 Council owned homes in Harpurhey.	Rebecca Heron	Public Private	Reasonable	Substantial
32	Strategic Education Partnership	The partnership brings together the Council, schools and partners such as MMU and UoM to agree and connect key educational, skills and employment priorities for Manchester.	Amanda Corcoran	Public Private	Substantial	Substantial
33	HOME	The partnership between the Council and Greater Manchester Arts Centre (trading name of HOME) to secure the funding, development and operation of HOME and ensure it achieves our vision and contributes to the City's economy, cultural ecology and delivering social impact for residents, visitors and workers in Manchester and beyond.	Neil Fairlamb	Public Private	Substantial	Substantial
34	Our Manchester Forum	The Our Manchester Forum brings together leaders from the public, private and voluntary sector to develop the Our Manchester Strategy 2016-2025 and oversee progress towards delivering it.	Joanne Roney	Public Private	Substantial	Substantial
35	Our Manchester Investment Board	The partnership drives delivery of the Our Manchester approach across the city and Bringing Services Together for People in Places, which is Manchester's approach to place-based integration of public service reform across the city.	Joanne Roney	Public Public	Substantial	Substantial
36	Manchester Local Care Organisation (MLCO)	To provide integrated, out-of-hospital, community based care for Manchester residents, bringing together Primary Care, Mental Health, Social Care and Community Health services in an integrated approach. Contributes to improvements in the health of the population, reduce demand and spend on acute health and care services, and improve the care available for patients. Embed new models of care based on the Our Manchester approach, and connect effectively with wider services and assets in communities. Reports to partnership's Board.	Bernadette Enright	Public Public	Reasonable	Reasonable
37	MCRactive	Established as a non-profit organisation formalised by the Council, MCRactive came into effect on 1 Dec 2018: to provide leadership through collaboration with the whole sport and physical activity sector to implement the Sport and Physical Activity Strategy and manage the leisure facilities contract. Reports to partnership's Board.	Neil Fairlamb	Public Public	Substantial	Substantial

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### SCHOOL LEADERSHIP

38	One Education	Fully Council owned limited company providing a range of pupil and business support services to schools and academies in Manchester, Greater Manchester and beyond. One Education has a Board of Directors which includes officers of the Council.	Amanda Corcoran	Public Public	Reasonable	Reasonable
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### PRIVATE FINANCE INITIATIVES (PFI)

39	Grove Village PFI	Delivers estate regeneration in Ardwick neighbourhood by creating a mixed tenure community, improving the environment, delivering new retail opportunities and offering work, training and other community development activities. Reports to Grove Village Monitoring Board.	Rebecca Heron	Public Private	Substantial	Substantial
40	Renaissance (Miles Platting Neighbourhood PFI)	Contractual agreement to manage housing estates in the Miles Platting neighbourhood. Reports to Strategic Housing DMT and PFI Stock Transfer Board. Reports to Miles Platting PFI Joint Board PFI Contract Board.	Rebecca Heron	Public Private	Substantial	Substantial
41	Schools PFI - Temple Community Primary	Contractual agreement to design, build and manage facilities at Temple Primary School. Reports to School Organisation and Strategy Board.	Amanda Corcoran	Public Private	Substantial	Substantial
42	Schools PFI - Wright Robinson	Contractual agreement to design, build and manage facilities at Wright Robinson High School. Reports to School Organisation and Strategy Board.	Amanda Corcoran	Public Private	Substantial	Substantial
43	Brunswick PFI	Contractual agreement to remodel the Brunswick neighbourhood which will see over 650 homes refurbished; 296 properties demolished, 124 homes reversed; 309 new build homes for sale; 200 new build HRA homes (including a 60 place extra care unit) and the creation of new parks, a retail hub and neighbourhood office. Reports to Brunswick PFI Joint Board and Housing Board.	Rebecca Heron	Public Private	Reasonable	Substantial

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**Manchester City Council  
Report for Information**

**Report to:** Audit Committee – 29 November 2022  
**Subject:** Work Programme and Decisions Monitor  
**Report of:** Governance and Scrutiny Support Unit

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**Summary**

This report provides the following information:

- Decisions Monitor
- Items for information
- The draft Work Programme

**Recommendation**

The Committee is invited to discuss the information provided and agree any changes to the work programme that are necessary.

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**Wards Affected:** All

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**Contact Officers:**

Name: Donna Barnes  
Position: Governance Officer  
Telephone: 0161 234 3037  
E-mail: donna.barnes@manchester.gov.uk

**Background document (available for public inspection):**

None

## 1. Monitoring Previous Audit Committee Decisions

This section of the report contains recommendations made by the Committee and responses to them indicating whether the recommendation will be implemented, and if it will be, how this will be done.

Date	Item	Decision	Response	Contact Officer
18 October 2022	Work Programme and Decisions Monitor	To request that the report on Governance and Management of Complaints provides information on the management of requests for information in relation to Christie Parking Extension Scheme. (AC/22/44)	To confirm that the Corporate Complaints Manager has issued a separate note to the Chair and the Councillors who raised this matter as it falls outside the scope of the 2021/22 complaints report as it relates to arrangements in 2022/23. As such this request was addressed thought the provision of a separate note to relevant Committee members.	Assistant Chief Executive
18 October 2022	Work Programme and Decisions Monitor	The Committee suggested the following additions to its annual training event: <ul style="list-style-type: none"> <li>• ICT systems and governance considerations</li> <li>• Treasury Management</li> <li>• Capital / Revenue budgets</li> </ul> (AC/22/44)	Added to the scope of the training (see	The Head of Audit and Risk Management

## 2. Items for Information

### Audit Committee – Annual Training Event - 13 December 2022

See proposed focus of the training below:

Theme	Focus
<ul style="list-style-type: none"> <li>• ICT</li> </ul>	<ul style="list-style-type: none"> <li>• Governance</li> <li>• Strategy</li> <li>• Approach</li> <li>• Priorities</li> <li>• Plan.</li> <li>• To include an update on actions being taken to respond to cyber risk</li> </ul>
<ul style="list-style-type: none"> <li>• Treasury management</li> </ul>	<ul style="list-style-type: none"> <li>• Governance</li> <li>• Strategy</li> <li>• Definitions</li> <li>• Capital vs Revenue implications</li> <li>• Budget setting and reporting</li> </ul>

**Audit Committee  
Work Programme – November 2022**

**Meeting Date: 29 November 2022, 10am (Agenda published: 21 November 2022)**

Item	Purpose	Executive Member	Strategic Director/ Lead Officer
External Audit Update	To receive the report of the External Auditors (Mazars)		Mazars (External Auditors)
Letters from those charged with Governance	To note letters from the Council to the External Audit in response to standard questions to management and the Chair of the Audit Committee as part of the audit completion process	Councillor Akbar	The Deputy Chief Executive and City Treasurer
Treasury Management Interim Update	To report the Treasury Management activities of the Council during the first six months of 2022-23	Councillor Akbar	The Deputy Chief Executive and City Treasurer
Risk Review: Governance and Management of Complaints	<p>To provide a summary of the Council's annual performance for 2021/22 in respect of the management of corporate and social care complaints, Councillor and MP enquiries, as well as information requests.</p> <p>To include directorate specific overviews of complaints management procedures and information where indicated on service change as a direct outcome of complaints. (AC/21/40)</p> <p>To also include reference to Annual Review learning</p> <p>To request that update provides information on the management of requests for information in relation to Christie Parking Extension Scheme. (AC/22/44)</p>	Councillor Akbar	<p>The Deputy Chief Executive and City Treasurer</p> <p>Please see response to this request as described in Section 1 of this report.</p>



Code of Corporate Governance	To receive the updated Code of Corporate Governance.	Councillor Akbar	The Deputy Chief Executive and City Treasurer
Corporate Risk Register	To receive the Corporate Risk Register. To include information which discusses measures to mitigate inflationary risk.	Councillor Akbar	The Deputy Chief Executive and City Treasurer and the Head of Audit and Risk Management
Register of Significant Partnerships	To receive the 6 monthly update on partnerships where a 'Reasonable' or 'Limited' rating was recorded.	Councillor Akbar	The Deputy Chief Executive and City Treasurer
Work Programme and Decisions Monitor	To receive the Committee's Work Programme and Decisions Monitor  To include an overview of the scope of training for the December annual training event (AC/22/44)		Governance and Scrutiny Support Unit  An outline of the proposed focus of training is listed in Section 2 (Items for Information)

**Meeting Date: 13 December 2022**

Item	Purpose	Executive Member	Strategic Director/ Lead Officer
This meeting date is reserved for the Committee's annual training event			

**Meeting Date: 17 January 2023,10am (Agenda published: 9 January 2023)**

Item	Purpose	Executive Member	Strategic Director/ Lead Officer
Internal Audit Assurance (Q3)	To receive a report which summarises summary audit work undertaken and opinions issued quarter 3 of the municipal year.	Councillor Akbar	The Head of Audit and Risk Management
Outstanding Audit Recommendations (Q3)	To receive a summary of the current implementation position and arrangements for monitoring and reporting internal and external audit recommendations for Quarter 3, in accordance with Public Sector Internal Audit Standards.	Councillor Akbar	The Head of Audit and Risk Management
Audit Strategy Memorandum / External Audit Plan	To receive the Audit Strategy memorandum / external audit plan.	Councillor Akbar	The Head of Audit and Risk Management
Work Programme and Decisions Monitor	To receive a report on current activity to mitigate inflationary risk  To receive the Committee's Work Programme and Decisions Monitor	Councillor Akbar	The Deputy Chief Executive and City Treasurer  Governance and Scrutiny Support Unit

**Meeting Date: 14 March 2023,10am (Agenda published: 6 March 2023)**

Item	Purpose	Executive Member	Strategic Director/ Lead Officer
Accounting concepts and policies critical accounting judgements and key sources of estimation uncertainty	To receive a report that discusses the accounting concepts and policies, critical accounting judgements and key sources of estimation uncertainty that will be used in preparing the 2022/23 annual accounts	Councillor Akbar	The Deputy Chief Executive and City Treasurer

Annual Internal Audit Plan	To provide the Internal Audit Strategy and annual internal audit work plan for Audit Committee consideration in line with Public Sector Internal Audit Standards.	Councillor Akbar	The Head of Audit and Risk Management
External Audit Update	To receive a report on the progress of the council's external audit.	Councillor Akbar	Mazars (External Auditors)
Risk Review: TBC	Standing agenda item for any items requested by the Audit Committee to support the Committee in discharging its terms of reference – scope TBC		TBC
Work Programme and Decisions Monitor	To receive the Committee's Work Programme and Decisions Monitor		Governance and Scrutiny Support Unit

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