



Complete Agenda

Democracy Service
Swyddfa'r Cyngor
CAERNARFON
Gwynedd
LL55 1SH

Meeting

STANDARDS COMMITTEE

Date and Time

10.30 am, MONDAY, 4TH NOVEMBER, 2024

Location

Virtual Meeting

(For public access to the meeting, please contact us)

Contact Point

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(DISTRIBUTED 25/10/24)

STANDARDS COMMITTEE

Membership

Elected Members (3)

Councillors

Anne Lloyd-Jones

Beth Lawton

Dewi Owen

Independent Members (with a vote) (5)

Aled Jones

David Wareing

Hywel Eifion Jones

Mark Jones

(Vacant seat)

Community Committee Member (with a vote) (1)

Richard Parry Hughes

A G E N D A

1. APOLOGIES

To receive any apologies for absence.

2. DECLARATION OF PERSONAL INTEREST

To receive any declarations of personal interest.

3. URGENT ITEMS

To note any items that are a matter of urgency in the view of the Chair for consideration.

4. MINUTES

4 - 6

The Chair shall propose that the minutes of the previous meeting of this committee held on 17th June, 2024 be signed as a true record.

5. REGISTER OF GIFTS AND HOSPITALITY

7 - 13

To submit the report of the Propriety and Elections Manager

6. DECLARATION OF INTERESTS REGISTER

14 - 23

To submit the report of the Propriety and Elections Manager

7. INDEPENDENT REVIEW OF INVESTIGATIONS BY THE PUBLIC SERVICES OMBUDSMAN FOR WALES INTO CODE OF CONDUCT COMPLAINTS

24 - 63

To submit the report of the Monitoring Officer

8. ALLEGATIONS AGAINST MEMBERS

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To submit the report of the Propriety and Elections Manager

9. THE OMBUDSMAN'S ANNUAL REPORT

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To submit the report of the Propriety and Elections Manager

10. NATIONAL STANDARDS COMMITTEES FORUM MINUTES

213 - 218

To submit the report of the Monitoring Officer.

STANDARDS COMMITTEE, 17/06/24

Present:-

Elected Members:- Councillors Anne Lloyd Jones, Beth Lawton and Dewi Owen.

Independent Members: Mr Aled Jones, Mr Hywel Eifion Jones (Chair), Mr Mark Jones and Mr Dave Wareing.

Community Committee Member: Mr Richard Parry Hughes

Also in Attendance: Iwan Evans (Monitoring Officer), Sion Huws (Propriety and Elections Manager) and Sioned Mai Jones (Democracy Services Officer).

1. APOLOGIES

None to note.

2. DECLARATION OF PERSONAL INTEREST

None to note.

3. URGENT ITEMS

No urgent matters were raised.

4. MINUTES

The Chair signed the minutes of the previous committee meeting held on 19 February 2024 as a true record.

5. Self-assessment and Work Programme

Submitted – the report of the Monitoring Officer inviting the committee to:-

- undertake a self-assessment of the work and outputs of the committee during 2023/24; and:-
- consider the draft work programme for 2024/25.

The following points were highlighted:-

- It was believed that more work was needed on matters relating to the Code of Conduct noting that the further training in question had not been arranged yet and the work had slipped. It was noted that two detailed, half-day courses had been held at the beginning of the year for the Code of Conduct. Dissatisfaction was expressed that approximately a third of the Members had not attended this mandatory course which meant that around 20 Members needed to complete it. Further sessions would be held but it was acknowledged that work was to be done to increase the numbers that had completed this training.
- It was acknowledged there had been significant progress in the work of monitoring the compliance of the Group Leaders but it was highlighted that there was a need to move from the induction period to the performance period. It was reiterated that a great deal of work had been done last year to establish the duty but there was

now a need to move to a more operational system as the initial arrangements were in place.

- It was noted in relation to the work on Community Councils, that a pilot and course had been run however, the training programme had not been created due to the workload. The desire to complete the work was expressed but it was noted that it was currently in competition with other resources and priorities.

When conducting the self-assessment, the following points were noted:-

- It was asked what could be done to ensure that all Members completed the training. It was suggested there was room to promote it further through the Group Leaders although it was acknowledged that Group Leaders could not force the Members to complete the training. Further suggestions were offered such as offering a course that was slightly different or that took less time.
- It was expressed that further work was to be done with the Group Leaders but it appeared that the Leaders were working well with the Monitoring Officer and the work done so far had been good. It was noted there was a structure in place and there had been good progress in the work over the last year.
- In terms of the Community Councils, it was acknowledged that more work was needed but the comments about scarce resources were accepted. It was noted that although the training programme had not been created, that the Legal Service provided advice and support to the Community Councils throughout the year.

While discussing the Work Programme for 2024/25 it was noted there was a need to hold a meeting with the Political Group Leaders during the year. The Committee was reminded that last year's meeting had been held after one of the Standard Committee's meetings. The possibility of holding this meeting as part of the formal meeting was considered. It was noted that there was an item on the Political Group Leaders protocol on the work programme for the November meeting and the meeting could be relevant. It was decided to aim towards the November meeting, either during the formal meeting or after it. It was suggested that it could be mentioned to the Leaders soon to ensure their availability.

It was asked whether it would be beneficial to look at a way of improving Community Council functions and it was suggested that a report on the matter be included on the work programme for November as an additional item to try to find a way forward. It was noted that a small number of the 64 Town/Community Councils in Gwynedd had highlighted the need for further guidance. The suggestion of taking a step back and assessing the situation was appreciated. It was confirmed that training was one aspect and that dealing and advising was another. Further suggestions were received such as grouping the Community Councils into Gwynedd Ni areas which were 8 areas and hold the training on-line through Zoom, it was believed that this would facilitate arrangements. The suggestion was appreciated and any further suggestions were welcomed.

It was suggested that an item could be moved to the February meeting as there were a number of items already on the work programme for November in addition to the additional item of Training and Supporting Community Council and the possible invitation for Political Group Leaders. It was agreed to move the item on Reviewing Internal Resolution Arrangements to February. It was noted that many of the other items on the November agenda were items for information.

DECISION

- (a) To adopt the following as the Standards Committee's self-evaluation of its performance in 2023/24.**

FUNCTION	ASSESSMENT (1/2/3/4)	Evidence	Further action
1. Promote and maintain high standards of conduct by members	1.	The Chair and Vice-chair have attended the Wales Standards Forum to share experiences with other standards committees. Submit the annual report to the Full Council.	Continue to attend and support.
2. Assist the members to adhere to the Code of Conduct	1.	The Monitoring Officer and his team provide advice and guidance at meetings, and on a one-to-one basis for members.	
3. Advise the Council about adopting or amending the Code of Conduct	1.	No occasion has arisen to revise the Code. However, the Internal Resolution Procedure was reviewed to support the duty of Leaders of Political Groups under 52A(1) of the Local Government Act 2000.	
4. Monitor the implementation of the Code of Conduct	1.	Receive regular reports on allegations against members. Receive the annual reports of the Ombudsman and the Adjudication Panel for Wales.	Continue to monitor and consider alternative methods of receiving information. Receive annual reports on the register of interests and hospitality.
5. Advise, train or arrange for members to receive training on matters relating to the Code of Conduct	3.	Full Code of Conduct training was arranged for members with the first session taking place during February and the second in April.	Need to look at providing further training as many members did not attend.
6. Granting dispensations to members	1.	Two applications for dispensation were discussed and allocated by the Committee in February 2024.	
7. Deal with reports of case tribunals and any reports from the Monitoring Officer on matters referred by the Ombudsman	1.	One hearing was held during the year regarding a Member of Cyngor Gwynedd. In addition, the procedure for hearings was reviewed to strengthen the communication.	
8. Authorise the Monitoring Officer to	No action required.	None to report	

pay allowances to persons assisting with an investigation			
<p>9. Monitor the compliance of Leaders of Political Groups on the Council and their duties under Section 52A(1) of the Local Government Act 2000.</p> <p>Advise, train or arrange for the Council's Political Group Leaders to receive training on matters relating to those duties.</p>	2.	<p>A joint session was held with Political Group Leaders and the Standards Committee Members to consider the duty.</p> <p>Criteria and a procedure on reporting on duty were adopted.</p> <p>The Monitoring Officer has met with the Group Leaders individually to discuss Code of Conduct matters.</p>	The arrangements will be undertaken in accordance with the statutory guidelines.
10. Exercise the above relevant functions in relation to community councils	3.	<p>The Monitoring Officer and his team provide advice and guidance to councillors, clerks and members.</p> <p>However, it was acknowledged that providing for an activity such as training had been challenging and this area needed attention and to come to a conclusion regarding the way forward.</p>	Need to consider resuming the programme virtually when resources allow.

- (b) To agree to move the Review of Internal Resolution Procedure item from the meeting in November 2024 to the meeting in February 2025 to add an item on Training and Supporting Community Councils to the meeting in November. Following this amendment, to approve the following work programme for 2024/25:-

17 June 2024

Annual Report

Allegations against members

Self-assessment and Work Programme

4 November 2024

Register of Gifts and Hospitality

Declaration of Interests Register

The Ombudsman's Annual Report

Allegations against members

Review of the Protocol for Political Group Leaders

To accept the report from the Wales Standards Forum

Training and Supporting Community Councils

17 February 2025

Adjudication Panel's Annual Report

Allegations against members

Self-assessment and Work Programme
Review Internal Solution Arrangements

6. THE STANDARDS COMMITTEE'S ANNUAL REPORT 2023-24

Submitted - the report of the Propriety and Elections Manager enclosing a draft of the committee's annual report for 2023/24. The committee's observations and approval of the document were invited.

The Propriety and Elections Manager noted that the Chair and the Monitoring Officer's forewords would follow and the information on the Group Leaders' Duty would be incorporated in the report. Committee members were invited to check the section on Committee member details in the report and asked to contact the officers if anything needed to be amended. It was reported that the annual report would be submitted to the Full Council in July.

Gratitude was expressed for the work of preparing the annual report and it was asked whether there were any comments on the report. It was suggested that the section reporting on cases that had been before the Standards Committee should be made anonymous. Attention was drawn to a part of the report which covered the Ombudsman's decisions reiterating that this section was anonymous and did not name Town/Community Councils. It was believed that the section of the report covering the work of the Standards Committee during 2023-24 should also be anonymous and refer to the person as Cyngor Gwynedd Councillor rather than naming the individual.

In response, it was noted that it was possible to change the report and make it anonymous as the name of the Member had already been noted during the public hearing. It was agreed that this should be done, especially given that the individual had already been penalised. An enquiry was made regarding matters involving Declaring an Interest during Full Council meetings. It was noted that Members were not usually advised to declare an interest when submitting the Annual Report item as it was a factual report. Nevertheless, it was noted if there was a discussion on a specific complaint the Member would be required to withdraw from the meeting at that time, but such a discussion was not anticipated.

It was noted there was no reason not to name individuals under Other Complaints in the report as this was consistent with the complaints element and that the matter related to obtaining permission to participate in a Committee discussion despite there being a prejudicial interest. It was added that these items were already public, and that the situation differed to cases that had been before the Committee.

It was reiterated that it was the duty of the Standards Committee to assess and monitor the work of Political Group Leaders. It was agreed with the assessment that had been included that there had been a positive start to this work. It was believed that it would assist the Standards Committee to have this duty in place.

Reference was made to the English version of the report on page 31, case number 202303259 and 202303399 which referred to a Member as "his" and then "her". It was noted that this would be corrected in the English version.

RESOLVED to approve the Annual Report of the Standards Committee for 2023-24 to be submitted to the full Council on 11 July 2024, subject to making the reference to the complaint of breaching the code of conduct anonymous.

7. ALLEGATIONS AGAINST MEMBERS

Submitted – the report of the Propriety and Elections Manager which presented information to the Committee about the Ombudsman's decisions on formal complaints against members. It was reported that this was a summary of the complaints that had been closed to provide the Committee with a snapshot of the type of things that went to the Ombudsman and the decisions when assessing the complaints.

The members expressed their thanks for the report recognising the work taking place in the background.

RESOLVED to note the information

The meeting commenced at 10.30am and concluded at 11:20am.

Committee:	The Standards Committee
Date:	4 November 2024
Title:	The Gifts and Hospitality Register for Members
Author:	Siôn Huws, Propriety and Elections Manager
Purpose:	For information and to offer any observations on the arrangements

Background

1. This report is presented to the Committee as part of its work of monitoring standards within the Council.
2. The Model Code of Conduct for Members makes it compulsory for members to provide written notification to the Monitoring Officer of any offer of a gift, hospitality material benefit or advantage above a value set by the authority and do so within 28 days. Gwynedd has decided that the value should be £25, and furthermore that such offers must be registered whether accepted or not.
3. A form is available for registering offers and a copy is attached as **Appendix 1**.

The Protocol

4. The Council adopted a Protocol for Members on Gifts and Hospitality in 2004. Following the publication of a new Code of Conduct and Guidelines by the Ombudsman the Standards Committee reviewed the Protocol and presented its recommendations to the Council. The Council adopted the current Protocol, incorporating the Committee's suggested amendments on 2 May 2013.
5. A copy of the Protocol is attached as **Appendix 2**.

The Register

6. This Committee has in past discussed whether the register should be published on the Council's website. It was decided then that it should not be. Whilst the Council must publish its register of Members' Interests on the website but no such obligation exists in respect of the register of Gifts and Hospitality.

Analysis

7. The registrations on the current register were analysed and the results are set out in the table below:

Date of Form	Gift/Hospitality	Accepted/refused	Value
10-01-23	Flowers and a bottle of prosecco after helping a constituent with a planning application	No information	Over £25
04-09-23	Gift vouchers as thanks for helping with a planning application	Refused – given back to the family	No information
25-03-24	A bottle of whisky through the post without covering note or return address. Member believes that it was because of help given with a planning application. He had previously explained that he could not accept a gift.	Given to local village hall as raffle prize	£25 - £27
23/08-24	Hamper as thanks for assisting with planning application	Refused – returned to constituent	No information

7.1 It remains the cases therefore that, on the basis of what is registered, the number of offers of gifts and hospitality is low. All offers registered to date (since May 2022) are expressions of thanks to local members for assistance in relation to planning applications, after the decision has been made.

Recommendation

8.The Committee is asked to:

- (a) note and accept the report
- (b) offer any observations on the report

Ffurflen cofrestru rhoddion a lletygarwch aelodau

Members' gifts and hospitality registration form



Enw.....

1. Manylion y rhodd neu'r lletygarwch a gynigwyd / Details of gift or hospitality offered:

.....

.....

.....

.....

.....

.....

2. Y person neu'r corff a wnaeth y cynnig / Person or organisation who made the offer:

.....

.....

3. A dderbyniwyd y cynnig? / Was offer accepted?

Derbyniwyd/Accepted	<input type="checkbox"/>
Gwrthodwyd/Refused	<input type="checkbox"/>

4. Gwerth y rhodd neu letygarwch / Value of gift or hospitality:
(Rhowch amcangyfrif os na fedrwnch roddi ffigwr pendant / Put estimate if you cannot provide precise amount)

.....

Arwyddwyd/Signed..... Dyddiad/Date.....

(I'w dychwelyd i'r Swyddog Monitro / To be returned to the Monitoring Officer)

PROTOCOL FOR MEMBERS ON GIFTS AND HOSPITALITY

1. Introduction

- 1.1 You should treat with extreme caution any offer or a gift or hospitality made to you personally. You are responsible for any decision to accept an offer of a gift or hospitality, and your personal reputation and that of the Council could be seriously jeopardised by the inappropriate acceptance of such an offer.
- 1.2 No hard and fast rules can be laid down to cover every circumstance but this protocol offers guidelines to assist you in making a decision.

2. The Law

- 2.1 Accepting a bribe is an offence. If it is proved that you have received any gift, loan, fee, reward or advantage by somebody seeking to obtain a contract from the Council then the onus will be on you (and the person making the offer) to prove that you have not acted dishonestly.
- 2.2 The Members Code of Conduct states "That you must avoid accepting from anyone gifts, hospitality (other than official hospitality, such as a civic reception or a working lunch duly authorised by your authority), material benefits or services for yourself or any person which might place you, or reasonably appear to place you, under an improper obligation."

"You must not in your official capacity or otherwise, use or attempt to use your position improperly to confer on or secure for yourself, or any other person, an advantage or create or avoid for yourself, or any other person, a disadvantage."

"You must within 28 days of being offered any gift, hospitality, material benefit or advantage above the value of £25 provide written notification to your authority's monitoring officer of the existence and nature of that gift, hospitality, material benefit or advantage. You must register any such offer whether you accept it or not."

3. Principles

- 3.1 Improper obligation – A gift or hospitality should never be accepted as a reward or inducement to act in a particular way as a councillor or as a means of obtaining influence.

- 3.2 Benefit to the Council – Gifts or hospitality should only be accepted if there is a benefit to the Council of so doing. The benefit should be proportionate with the gift.
- 3.3 Misinterpretation – Gifts or hospitality should not be accepted if to do so would leave the council or member open to accusations of misconduct. Members must not only conduct themselves properly, they also be seen to be conducting themselves properly.
- 3.4 Soliciting a gift or hospitality – Gifts or hospitality should never be sought or invited in connection with a role as a councillor.

4. Gifts

- 4.1 A “gift” includes free goods and services, the opportunity to buy goods/services subject to a discount or terms which are not available to the public, or the opportunity to buy goods/services that are not available to the public. Care should be taken in situations where work or goods are ordered but no invoice is presented.
- 4.2 You may accept civic gifts on behalf of the Council. This protocol is not applicable to such gifts and neither do they need to be registered.
- 4.3 You should not accept personal gifts that are relevant to your position as a member or arising from that position, from anyone. However, it would be appropriate for you to keep small and insignificant gifts such as diaries etc. You may also accept raffle prizes.
- 4.4 You should refuse any gift offered to you, or to a member of your immediate family, from any person or organisation doing business or seeking to do business with the Council or applying to the Council for some sort of decision.
- 4.5 When a gift has to be declined the offerer should be courteously but firmly informed of the procedures and standards operating within the Council. If such a gift is delivered :
- it must be returned immediately to the sender giving reason.
 - the acceptance and return of gifts over £25.00 should be registered
 - where an offerer insists that you accept the gift, you should contact the Monitoring Officer for advice on further appropriate action.

5. Hospitality

- 5.1 You should not accept hospitality from a person or organisation that is seeking a decision from the Council or is doing business or seeking to do business with the Council, unless it is part of a general public presentation.
- 5.2 You should only accept offers of hospitality if there is a genuine need to impart information or represent the Council in the community.
- 5.3 You should avoid hospitality in a situation where you would be the sole guest.
- 5.4 Offers to attend social or sporting functions should only be accepted where these are part of the life of the community or where the Council should be seen to be represented.
- 5.5 Where visits are required as part of the process of making decisions you should ensure that the Council meets the cost of such visits to avoid jeopardising the integrity of subsequent decisions.
- 5.6 You may accept hospitality through attendance at relevant conferences and courses where it is clear that the hospitality is corporate rather than personal, where the Council has given permission beforehand and where the Council is satisfied that any of its decisions will not be compromised.
- 5.7 You may accept normal refreshment in connection with your work as a member (tea, coffee, biscuits etc.)

6. Registration

- 6.1 Under the Council's Code of Conduct you must register any gift or hospitality that you receive that is worth more than £25.00. You should also register any such offer that you have refused.
- 6.2 The gift and hospitality register is kept by the Monitoring Officer who should be informed in writing of any gift or hospitality that you receive or refuse that is worth more than £25.00. The register will be available for public inspection.
- 6.3 The figure of £25.00 is of course relevant in considering what should be registered, it does not mean that you can accept all gifts or hospitality that are worth less than that. You must consider carefully every offer whatever its value.

7. Further Advice

- 7.1 If you have any doubt concerning an offer of a gift or of hospitality, you should seek the advice of the Monitoring Officer.
- 7.2 The Ombudsman has issued statutory guidance on the Code of Conduct and its interpretation. It can be seen on his website – www.ombudsman-wales.org.uk

Committee:	The Standards Committee
Date:	4 November 2024
Title	Register of Members' Interests
Author:	Siôn Huws, Propriety and Elections Manager
Action:	For Information and to offer any observations on the arrangements

Background

1. This report is presented to the Committee as part of its work of monitoring standards within the Council.

Gwynedd Council's Register of Members' Interests

2. The Members' Code of Conduct states that members (including co-opted members entitled to vote) must disclose orally to any meeting in which they are present, the existence and nature of any personal interest they have in the business being considered at that meeting. Furthermore, it states that a written notice must be provided to the Monitoring Officer.

3. In addition, the Code of Conduct also states that, within 28 days of being elected or appointed, members must register their personal interests by providing a written notice to the Monitoring Officer. They must also provide a notice of any changes to those interests and also any new interests, within 28 days of becoming aware of them.

4. To assist members to adhere to the requirements of the Code of Conduct, the Council has provided two forms; one which is suitable for 'upfront' registration, and the other for registering declarations made at meetings. The declarations made on both forms constitute the register of interests. Copies of these forms are attached as **Appendices 1 and 2**.

5. The Monitoring Officer is under a statutory duty to establish and maintain a register of interests. This is a public document, and it must be available at an office of the authority for inspection by members of the public at all reasonable hours. It must also be published on the authority's website. On Gwynedd Council's website, each member's declarations are available on their personal pages. Declarations made in meetings can also be found in the published minutes of that meeting.

Reminding Members

6. As stated above, it is the responsibility of members to inform the Monitoring Officer of any change to their registered personal interests and of the existence of any new interest. To assist them in doing this, the intention is to establish a process of reminding members annually. This would involve emailing all members, asking them to consider their current

registrations, which can be found on their personal pages on the website, and informing us of any changes that are required so that we may update the register.

Registration of Interest in a Meeting

7. When a member declares at a meeting a democratic service officer will provide him/her with a form to be completed and will collect it at the end of the meeting. Distributing registration forms to members attending meetings virtually and ensuring their return has meant considerably more work for democratic service officers. Returning them by post, by hand or by scanning and emailing them is also more troublesome for members. We are therefore currently developing a process of online registration using the Microsoft Forms application. This will mean that an officer can send an email containing a link to an online form to a member during the meeting. The only thing the member will then have to do is complete the online form.

Community Councils

8. The above statutory provisions are also applicable to town and community councils but with the following differences:

- There is no requirement to register personal interests 'upfront'.
- It's the Clerk to the council, rather than the Monitoring Officer, who is responsible for establishing and maintaining the register and for receiving notifications of personal interests.

9. We have provided community councils with Gwynedd's forms so that they can use them as templates if they wish. Whilst there is no requirement to register interests 'upfront', we advocate this as good practice.

Recommendation

10. The Committee is asked to:

(a) Accept and note the report

(b) Put forward any observations on steps that could be taken in relation to the registration of interests

Hysbysiad o Fuddiant Personol/ Notification of Personal Interest

Cod Ymddygiad Aelodau / Members' Code of Conduct



Rwyf i, y Cynghorydd / I, Councillor.....

yn eich hysbysu yn ysgrifenedig o fuddiant personol a ddatgelais yn y cyfarfod canlynol / give you written notification of a personal interest disclosed by me at the following meeting:

..... (enw'r pwyllgor / name of meeting)

a gynhaliwyd ar / held on.....(dyddiad y cyfarfod / date of meeting)

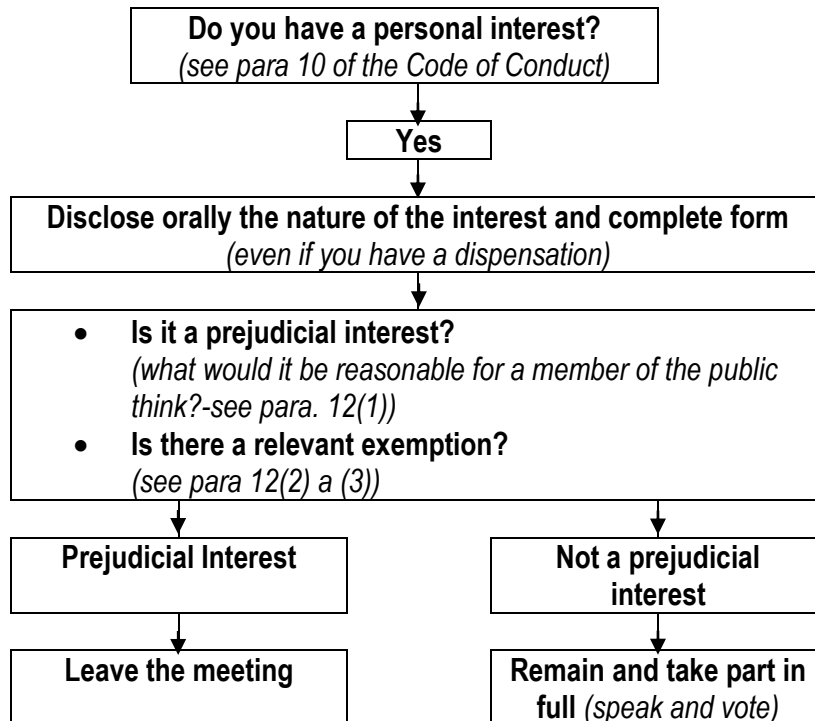
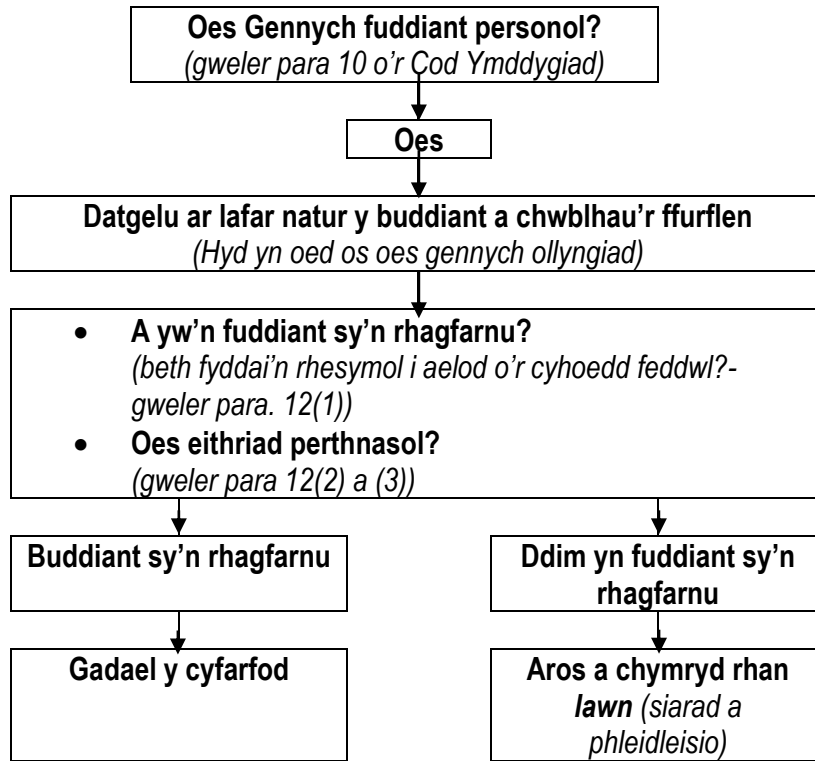
Enw a rhif yr eitem / Name and number of item:

Manylion y buddiant personol / Details of Personal Interest:

- ☐ Nid oedd yn fuddiant sy'n rhagfarnu / It was not a prejudicial interest
- ☐ Roedd yn fuddiant sy'n rhagfarnu a gadewais y cyfarfod / It was a prejudicial interest and I left the meeting
- ☐ Roedd yn fuddiant sy'n rhagfarnu ond derbyniais ollyngiad wrth y Pwyllgor Safonau / It was a prejudicial interest but I have received a dispensation from the Standards Committee

Arwyddwyd / Signed.....

Dyddiad / Date.....



Ffurflen Cofrestru Buddiannau /Interests Registration Form

Cod Ymddygiad Aelodau Cyngor Gwynedd Gwynedd Council Members Code of Conduct



Cofrestrwch eich buddiannau personol dan y penawdau priodol isod gan roddi “dim” lle nad oes gennych fuddiant. Mae rhaid cwblhau pob rhan o’r ffurflen a’i dychwelyd i’r Swyddog Monitro o fewn 28 diwrnod.

(Os ydych yn ystyried fod unrhyw wybodaeth yn wybodaeth sensitif (gweler Atodiad 1) dylsech gysylltu a’r Swyddog Monitro am arweiniad)

Register your personal interests under the appropriate heading below putting “none” where you do not have a relevant interest. You must complete every section of the form and return it to the Monitoring Officer within 28 days.

(If you consider the information to be sensitive information (see Appendix 1) you should contact the Monitoring Officer for guidance.)

Enw/Name.....

1.Gwaith, Swyddi a Busnes

Unrhyw gyflogaeth yr ydych yn ymgymryd â hi neu fusnes yr ydych yn ei redeg;

1. Employment, Jobs and Business

Any employment, or business carried on by you

2. Eich Cyflogwr, Partneriaethau neu Gyfarwyddwriaethau

Unrhyw berson sy'n eich cyflogi neu sydd wedi eich penodi, unrhyw ffyrm yr ydych yn bartner ynddi neu unrhyw gwmni yr ydych yn gyfarwyddwr arno ac yn derbyn tâl.

2. Your Employer, Partnerships or Directorships.

Any person who employs or has appointed you, any firm in which you are a partner or any company for which you are a remunerated director.

3. Taliadau Etholiad a Chefnogaeth Ariannol

unrhyw berson, ac eithrio'r Cyngor sydd wedi rhoi taliad i chi mewn cysylltiad â'ch ethol neu mewn cysylltiad ag unrhyw dreuliau a dynnwyd gennych wrth i chi gyflawni eich dyletswyddau fel aelod;

3.Election Payments and Financial Support

any person, other than the Council , who has made a payment to you in respect of your election or any expenses incurred by you in carrying out your duties as a member;

4.Cyfranddaliadau a Waranau ("Securities") Mewn Cwmnïau

Unrhyw gorff corfforaethol y mae ganddo le busnes neu dir yng Ngwynedd , ac y mae gennych gyfranddaliadau neu waranau (securities) eraill yn y corff hwnnw ac sy'n werth mwy na'r gwerth enwol o £25,000 neu un ganfed ran o gyfanswm cyfalaf cyfrannau'r corff hwnnw;

4. Shareholdings and Securities in Companies

Any corporate body which has a place of business or land in your authority's area, and in which you have a beneficial interest in a class of securities of that body that exceeds the nominal value of £25,000 or one hundredth of the total issued share capital of that body

5. Cytundebau gyda'r Awdurdod

Unrhyw gontract am nwyddau, gwasanaethau neu waith a wnaed rhyngoch chi, rhwng ffyrm yr ydych yn bartner ynddi, neu gwmni yr ydych yn gyfarwyddwr arno ac yn derbyn tâl, neu rhwng corff o'r math a ddisgrifir yn 4 uchod a'r Cyngor

5. Contracts With the Authority

Any contract for goods, services or works made between the Council and you or a firm in which you are a partner, a company of which you are a remunerated director, or a body of the description specified in sub-paragraph 4 above

6.Tir ac Eiddo

Unrhyw dir neu eiddo Yng Ngwynedd yr ydych yn berchen arno neu yn dal les ynddo (ar eich pen eich hun neu ar y cyd ag eraill) gan gynnwys eich cartref.

6. Land and Property

Any land or properties in Gwynedd of which you are an owner, hold a lease of (alone or jointly with others) including your home.

7. Tenantiaeth gan y Cyngor

Unrhyw dir y mae'r Cyngor yn landlord arno ac y mae ffyrm yr ydych yn bartner ynddi, cwmni yr ydych yn gyfarwyddwr arno ac yn derbyn tâl, neu gorff o'r math a ddisgrifir yn 4 uchod yn denant arno;

7.Tenancies by the Council

Any land where the landlord is the Council and the tenant is a firm in which you are a partner, a company of which you are a remunerated director, or a body of the description specified in sub-paragraph 4 above.

8.Penodiadau gan yr Awdurdod

Unrhyw gorff yr ydych wedi eich ethol, eich penodi neu eich enwebu gan eich Cyngor i fod arno;

8.Appointments by The Council

Any body to which you have been elected, appointed or nominated by the Council;

9. Aelodaeth neu Swyddogaeth Reoli Cyrff Cyhoeddus , Cymdeithasau Tai, Elusennau, Cymdeithasau a Chlybiau, Pleidiau Gwleidyddol (nad ydynt wedi eu datgan yn 8 uchod),

Unrhyw;

- awdurdod cyhoeddus neu gorff sy'n arfer swyddogaethau o natur gyhoeddus;
- cwmni, cymdeithas ddiwydiannol a darbodus, elusen, neu gorff arall a chanddo ddibenion elusennol;
- corff y mae dylanwadu ar farn neu bolisi cyhoeddus ymhlith ei brif ddibenion;
- undeb llafur neu gymdeithas broffesiynol; neu
- clwb preifat gymdeithas neu gymdeithasiad sy'n gweithredu o fewn ardal Gwynedd

yr ydych chi'n aelod ohono/ohoni neu'n dal swydd neu swyddogaeth o reolaeth y corff.

9. Membership or Management Role of Public Bodies, Housing Associations, Charities, Clubs and Associations, Political Parties (which are not disclosed in 8 above).

Any;

- public authority or body exercising functions of a public nature;
- company, industrial and provident society, charity or body directed to charitable purposes;
- body whose principal purposes include the influence of public opinion or policy;
- trade union or professional association; or
- private club, society or association operating within the Gwynedd area

in which you have membership or hold a position of general control or management.

10. Trwydded o Dir

Unrhyw dir yng Ngwynedd y mae gennych chi drwydded (ar eich pen eich hun neu ar y cyd ag eraill) i'w feddiannu am 28 diwrnod neu gyfnod hwy

10. Licence in Land

Any land in Gwynedd in which you have a licence (alone or jointly with others) to occupy for 28 days or longer.

Arwyddwyd /Signed.....

Dyddiad /Date.....

<p>18.5 Y GOFRESTR BUDDIANNAU AELODAU</p> <p>18.5.1 Cofrestru Buddiannau Ariannol ac Eraill ac Aelodaeth a Swyddi Rheoli.</p> <p>(a) Yn amodol ar is-baragraff (c) mae'n rhaid i chi o fewn 28 diwrnod o'r</p> <p>(i) adeg y caiff côd ymddygiad eich awdurdod ei fabwysiadu neu y caiff darpariaethau gorfodol y côd enghreifftiol hwn eu cymhwyso i'ch awdurdod; neu o'ch</p> <p>(ii) etholiad neu benodiad i'r swydd (os yw hynny'n ddiweddarach), gofrestru eich buddiannau ariannol a buddiannau eraill, pan fyddant yn dod o fewn categori a grybwyllwyd ym mharagraff 8.4.1(b)(i) yng nghofrestr eich awdurdod a gynhelir o dan Adran 81(1) Deddf Llywodraeth Leol 2000 trwy roi hysbysiad ysgrifenedig i Swyddog Monitro eich awdurdod.</p> <p>(b) Mae'n rhaid i chi, o fewn 28 diwrnod o ddod yn ymwybodol o unrhyw fuddiant personol newydd neu newid i unrhyw fuddiant personol a gofrestrwyd o dan baragraff (a), gofrestru'r buddiant personol newydd hwnnw neu'r newid hwnnw i fuddiant personol trwy roi hysbysiad ysgrifenedig i Swyddog Monitro eich awdurdod.</p> <p>(c) Nid yw paragraffau (a) a (b) yn berthnasol i wybodaeth sensitif a bennwyd un unol â pharagraff 18.5.2(a).</p> <p>18.5.2 Gwybodaeth Sensitif</p> <p>(a) Pan fyddwch o'r farn bod y wybodaeth yn ymwneud ag unrhyw un o'ch buddiannau personol yn wybodaeth sensitif a bod Swyddog Monitro eich awdurdod yn cytuno, ni fydd angen i chi gynnwys y wybodaeth honno wrth gofrestru'r buddiant hwnnw, neu, fel y bo'n berthnasol newid i'r buddiant o dan baragraff 18.5.1.</p> <p>(b) Mae'n rhaid i chi o fewn 28 diwrnod o ddod yn ymwybodol o unrhyw newid i amgylchiadau sy'n golygu nad yw'r wybodaeth a eithriwyd o dan is-baragraff (a) yn wybodaeth sensitif mwyach, hysbysu Swyddog Monitro eich awdurdod gan ofyn i'r wybodaeth gael ei chynnwys yng nghofrestr buddiannau aelodau eich awdurdod.</p> <p>(c) Yn y côd hwn, mae "gwybodaeth sensitif" yn golygu gwybodaeth y byddai caniatáu iddi gael ei harchwilio gan y cyhoedd yn creu, neu'n debygol o greu, risg ddifrifol y gallech chi neu unigolyn sy'n byw gyda chi fod yn agored i drais neu fygythion.</p>	<p>18.5 THE REGISTER OF MEMBERS' INTERESTS</p> <p>18.5.1 Registration of Financial and Other Interests and Memberships and Management Positions</p> <p>(a) Subject to sub-paragraph(c) you must within 28 days of</p> <p>(i) your authority's code of conduct being adopted or the mandatory provisions of this model code being applied to your authority; or</p> <p>(ii) your election or appointment to office (if that is later) register your financial interests and other interests where they fall within a category mentioned in paragraph 18.4.1(b)(i) in your authority's register maintained under Section 81(1) of the Local Government Act 2000 by providing written notification to your authority's Monitoring Officer.</p> <p>(b) You must within 28 days of becoming aware of any new personal interest or change to any personal interest registered under sub-paragraph (a), register that new personal interest or change by providing written notification to your authority's Monitoring Officer.</p> <p>(c) Sub-paragraphs (a) and (b) do not apply to sensitive information determined in accordance with paragraph 18.5.2(a).</p> <p>18.5.2 Sensitive Information</p> <p>(a) When you consider that the information relating to any of your personal interests is sensitive information and your authority's monitoring officer agrees, you need not include that information when registering that interest, or as the case may be a change to the interest under paragraph 18.5.1.</p> <p>(b) You must, within 28 days of becoming aware of any change of circumstances which means that information excluded under sub-paragraph (a) is no longer sensitive information, notify your authority's monitoring officer asking that the information be included in your authority's register of members' interests.</p> <p>(c) In this code, 'sensitive information' means information whose availability for inspection by the public creates, or is likely to create, a serious risk that you or a person who lives with you may be subjected to violence or intimidation.</p>
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Committee:	The Standards Committee
Date:	4 November 2024
Title:	Independent Review of Ombudsman Investigative Arrangements
Author:	Iwan Evans Head of Legal Services – Monitoring Officer
Purpose:	For information

1. Background

The purpose of this report is to present information to the Committee about the findings of an independent inquiry into the Ombudsman's processes.

2. Recommendation

Provide feedback on the report

3. Background

3.1 In March 2024 it emerged that a team manager responsible for Code of Conduct investigations at the Ombudsman's office had been making political and partisan political posts on social media. The issue received considerable press coverage at the time. This led to the officer's resignation. The officer was responsible for leading the team that assessed and decided to investigate complaints that councillors had breached the Code of conduct. Inevitably this was going to raise serious questions about the influence or impact of these views on the Ombudsman's service's impartiality and confidence that decisions to investigate or not investigate were completely without bias and outside any political standpoints. As a result, the Public Services Ombudsman commissioned an independent inquiry to review these decisions in their entirety to provide public assurance of the propriety of the arrangements. The fundamental importance that the Ombudsman's work is completely non-political cannot be over emphasised but also that

this is the public perception as well. The review was led by Dr Melissa McCullough, Commissioner for Standards for the Northern Ireland Assembly.

3.2 The key findings of the report are as follows:

- “ The PSOW’s Code of Conduct processes and delegations are robust, in terms of safeguarding, fairness and impartiality. They are systematic, well documented and supplemented with appropriate guidance and the reasoning for decisions is required to be recorded and explained, as applicable.
- All decision-making is based solely on evidence, facts, and solid, well-articulated reasoning and, as such, there was no evidence of political bias. The case review found no evidence that the decision-making on any of the cases reviewed was influenced by any political affiliation of the person who made the complaint and/or the member who was complained about.
- There was no evidence that the former team manager expressed her personal views on political matters “akin to her social media posts” in the office and/or inappropriately influenced any other staff members, in the performance of their duties under the Local Government Act 2000.

3.3 There is no need to underline the central role of the Public Services Ombudsman in maintaining the ethical framework of local authorities in Wales. There is no comparable system in England and there are significant advantages in maintaining a system where there is an independent body has responsibility for the investigation process. The fact that this situation has arisen has been a source of general dismay and concern. Therefore, the findings of this report are key to moving on from the incident and maintaining confidence in this system.

4. Report Recommendations

4.1 There are several recommendations in the report on page 26. I would like to highlight three specific ones that would be of interest to you as members and are about the investigation arrangements:

- Documenting the political affiliation of the Accused Member: to mitigate the risk of unconscious bias on the part of the IO and to underpin the fairness of the

complaint assessment process, it is recommended that steps are taken to ensure that the political affiliation of the Accused Member is not recorded on the PAAF.

- Accused Member not informed of complaint until after assessment: in the interests of fairness and transparency, it is recommended that the PSOW considers reverting to the previous practice of notifying the Accused Member of the complaint once it is received.
- Public interest factors and considerations: the review recognises the factors and considerations listed are non-exhaustive but recommends that PSOW gives consideration to developing more detailed internal guidance on assessing the public interest test. Additionally, the public interest factors and considerations should be reviewed regularly.

The Committee is asked to consider the report and provide an opinion and respond to the findings.

Appendix 1

Independent review of investigations by the Public Services Ombudsman Wales to Code of Conduct complaints

Independent review of investigations by the Public Services Ombudsman for Wales into Code of Conduct complaints

Review panel

Dr Melissa McCullough (Lead Reviewer)

Mr John Devitt

Mr Shane McAteer

Review summary

On 26th March 2024, the Public Services Ombudsman for Wales ("PSOW") received a substantiated complaint about social media posts made by the then Code Team Manager. A number of the social media posts were political in nature. The media became aware of the social media posts and concerns were raised about the PSOW's guiding principles of impartiality and independence, with some calling for the PSOW to be abolished.

The PSOW suspended the Code Team Manager on 29 March 2024 and she resigned on 3 April 2024. In May 2024, the Ombudsman commissioned this independent review to establish whether the PSOW's Code Team processes, delegations and decisions in relation to the assessment and investigation of complaints by the Code Team and former Code Team Manager ("FCTM") had been sound, free from political bias and to ensure that lessons are learned from what had happened. The review did not include an investigation of the FCTM or the incident itself.

The review examined the Code Team processes and delegations. The scope of the review also examined 673 cases where decisions not to investigate were taken plus 11 discontinued investigations, which in total accounted for the Code Team decision-making either directly by the FCTM or decision-making for which the FCTM had oversight. As part of the review, interviews were carried out with the Code Team investigation officers ("IOs"), the Director of Investigations ("DOI/CLA") and the FCTM to

establish whether the FCTM expressed her personal views on political matters in the office and/or inappropriately influenced other staff members.

The review found the PSOW's Code of Conduct processes and delegations to be appropriate, fair and impartial and free from political bias. In relation to the cases reviewed, the review found no evidence of politically biased decision-making. The cases reviewed were thoroughly analysed and the decision-making was well-reasoned, consistent, sound and fully documented for each case reviewed. The checks and balances within the process were apparent, providing further assurance of quality, non-biased decision-making. The review found the processes were impeccably followed by the IOs, including the FCTM. The review found no evidence that the FCTM expressed her personal views on political matters akin to her social media posts in the office and/or inappropriately influenced other staff members.

In order to maintain public trust in its operations, the PSOW's work, especially on standards relating to Welsh local government, should follow a well-defined and fair process and should exhibit excellent analysis and reasoning to ensure decision-making is demonstrably impartial. The findings of this review point towards such excellence, in both complaint assessments and processes. This should provide much reassurance to the public that they can trust and have confidence in the work of the PSOW and its Code Team.

Abbreviations & Acronyms

PSOW	Public Services Ombudsman for Wales
DOI/COO	Director of Improvement & Chief Operating Officer
DOI/CLA	Director of Investigations & Chief Legal Advisor
LRO	Lead Review Officer
CTM	Code Team Manager
FCTM	Former Code Team Manager [1st April 2021 to 31 August 2023]
IO	Investigation Officer
PAAF	Pre-assessment and Assessment Form
SC	Standards Committee
APW	Adjudication Panel for Wales

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Independent review of the PSOW's investigation of Code of Conduct complaints

Introduction

1. The office of the Public Services Ombudsman for Wales ("PSOW") was established in April 2006 by the PSOW Act 2005. This Act was repealed and replaced in 2019 to become the Public Services Ombudsman (Wales) 2019 Act¹ ("The 2019 Act").
2. The role of the PSOW is to 1) look into complaints that something has gone wrong with Welsh public services; 2) look into complaints that Welsh councillors have breached their Code of Conduct; and 3) work with public bodies to improve public services and standards of conduct within local government across Wales.
- complaints that local councillors had breached the Code of Conduct for councillors in accordance with the Local Government Act 2000² ("LGA 2000").
5. There were a number of social media posts of a political nature made by the FCTM, including a reply post which said "F*** the Tories". Media coverage followed, as did questions and concerns about the impartiality and independence of the PSOW.
6. This independent review was commissioned by the PSOW. Its remit did not include investigating the incident or the FCTM. Rather, the review had the following scope and purpose.

Incident leading to this review

3. On 26 March 2024, the PSOW received a substantiated complaint that a member of staff (herein referred to as the "Former Code Team Manager" or "FCTM") had been making inappropriate and unacceptable social media posts of a political nature.
4. The FCTM was suspended on 29 March 2024 and resigned from her role with the PSOW on 3 April 2024. The FCTM had been, until the end of August 2023, leading the Code Team assessing and investigating

Scope and Purpose of the Review³

7. The purpose of this independent review was to look at the PSOW's processes for the assessment and investigation of complaints that members of local authorities, fire and rescue authorities, national park authorities and police and crime panels in Wales have breached their Code of Conduct. The aim of this review was to provide assurance as to whether the PSOW's Code of Conduct Team processes, delegations and decisions in relation to the assessment and investigation of complaints by the Code Team and FCTM

¹ <https://www.legislation.gov.uk/anaw/2019/3/contents>

² <https://www.legislation.gov.uk/ukpga/2000/22/part/III/chapter/III>

³ Appendix 1

have been sound, free from political bias⁴ and that lessons are learned from what has happened.

8. This review's terms of reference were focussed on the following deliverables. (attached at Appendix 1)

(1) Review of the PSOW's Code of Conduct processes and delegations to ensure that they are appropriate, fair and impartial and free from political bias.

(2) Review of decisions taken by the former team leader and her Team not to investigate Code of Conduct complaints from 1 April 2021 to 22 October 2023, to ensure that the PSOW's two-stage test was applied properly and decisions were free from political bias (673 cases).

(3) Review of the cases where the former team leader was the 'case owner' which were investigated and closed without a referral to a standards committee or the Adjudication Panel for Wales from 1 April 2019 to 22 October 2023, to ensure that there is no evidence of political bias in the handling of these cases (11 cases).

(4) Establish whether there is evidence that the team leader expressed her personal views on political matters akin to her social media posts in the office and/or inappropriately influenced other staff members, in the performance of their duties under the Local Government Act 2000.

(5) Make any recommendations which the Lead Reviewer considers appropriate and issue a final report which the PSOW will share with the Senedd's Finance Committee.

⁴ For the purposes of this review, political bias will be found where there is evidence that the decision on a case was influenced by the political affiliation of the person who made the complaint and/or the member who was complained about.

Review methodology

9. The following outlines how the various parts of this review were carried out.

Documentary review

10. Documentation examined included: the Code of Conduct Complaints Process (the process manual); the Code of Conduct Complaints Process Internal guidance note - Scheme of Delegation; the Decision Review Process; the Code of Conduct – Assessing the Public Interest factsheet; the Local Resolution Procedure and the PSOW Staff Standards of Conduct Policy.

Case review

11. There were 673 cases reviewed in which decisions were made not to investigate by the Code Team whose members were led by the FCTM. A further 11 cases, which the FCTM investigated, and which were subsequently discontinued by the DOI/CLA, were also reviewed.
12. Two members of the review team conducted the case review. We sought to calibrate our approach by reviewing thirty cases together at the start to ensure alignment in terms of the review of the documentation including key parts of the process, evidence, the two-stage test and overall review parameters for each case. Once calibrated, cases were randomly split and allocated by even and odd case numbers. Regular meetings were held throughout the review to update and discuss the cases, identify any anomalies or questions arising, and to document any themes emerging.

13. The PSOW does not purposely keep information relating to the political affiliation of members subject to the complaint. The review initially collated known political affiliations for the purpose of cross-referencing, if required, at the case review stage.
14. After all cases were reviewed, a 5% dip-sampling (n=34) was carried out by the third review team member who was not involved with the substantive case review. These represented 24 Code Team cases and 10 FCTM cases which included 5 PSOW case review decisions.

Staff interviews

15. Prior to the substantive case review, 10 members of the Code Team relating to the 673 cases being reviewed were interviewed. Once the case review was complete, the FCTM and the DOI/CLA were interviewed.
16. Interviews were undertaken on the basis of confidentiality and with the purpose of establishing whether the FCTM expressed her personal views on political matters and/or inappropriately influenced other staff members on the Code Team.
17. All interviews were recorded and transcribed for the purposes of the review. Transcripts were provided to interviewees to ensure that each interviewee was satisfied that the transcript was a true record of what they said.
18. Manual thematic analysis was carried out to identify patterns or themes emerging from the interview data. Any excerpts used in this report were approved by the maker of the statement.

Review Outcomes

Processes and Delegations Review

Introduction

19. This element of the review (i.e. the first element of the terms of reference) included an examination of the PSOW's Code of Conduct processes and delegations, specifically in terms of ensuring that they are appropriate, fair and impartial and free from political bias. In particular, this involved consideration of the 'Code of Conduct Complaints Process' document (the process manual) which 'is used to manage the intake, assessment, investigation and reporting of complaints made to the Ombudsman that there may have been a breach of the Local Authorities Model Code of Conduct' and which acts as 'a directive to staff on case management'.⁵
20. Other documentation examined included: the Code of Conduct Complaints Process Internal guidance note - Scheme of Delegation; the Decision Review Process; the Code of Conduct – Assessing the Public Interest factsheet; the Local Resolution Procedure and the PSOW Staff Standards of Conduct Policy. Arising from this exercise, various points for clarification were raised and responded to via correspondence with the Director of Investigations & Chief Legal Adviser (DOI/CLA).

Issues examined

21. As part of this element of the review, the following issues were examined and findings noted:

Documenting the political affiliation of the Accused Member

22. From the case review exercise, it was noted that the political affiliation of the Accused Member is sometimes recorded on the Pre-assessment and Assessment Form (PAAF) at the beginning of the complaint assessment process. The recording of political affiliation appears to be a consequence of the requirement in the process manual which states: 'The Accused Member's details should be added to the PAAF by linking to the relevant Council website page and taking a screenshot of the details.'⁶

This issue was discussed during the staff interviews and it was noted that the screenshot from the Council website may include details of political affiliation and this information is then captured on the PAAF as a by-product of that administrative action. There was consensus that such information is not required and should not be recorded at the assessment stage. It was also noted that, in individual cases where political affiliation is relevant to the narrative of the complaint, the position would be apparent from the case evidence or could be checked by the investigator if necessary.

⁵ Page 6 of the process manual.

⁶ Paragraph 4.2 of the process manual.

Accused Member not informed of complaint until after assessment

23. This issue was considered in terms of the fairness of the process. It was noted that the Accused Member is not informed about the complaint until after the assessment process has been completed and the complaint is either rejected or is deemed to have met the two-stage test for an investigation to commence. If it is decided not to investigate, the Accused Member is provided with a redacted copy of the statement of reasons but generally does not receive a copy of the complaint.⁷ If it is decided to investigate, the Accused Member is provided with a redacted copy of the complaint (and any response to a 'minded to' letter).⁸

24. Previous to the process referred to above at paragraph 23, the PSOW would have notified the Accused Member of the complaint once it was received. Prior to taking the decision to change the process, the PSOW consulted with Monitoring Officers via the Local Government Monitoring Officers Group network to explain the reasons for the change. The chief reason was to reduce unnecessary worry for members on complaints which are not ultimately investigated. Another reason was that notification to the member of the full complaint on receipt of the complaint sometimes prompted the member to begin gathering their own evidence to defend their position and this also led to some 'tit for tat' complaints being made. PSOW were of the view that changing the approach to the current one was a more efficient use of resources. After trialling this new approach

for a few months, no concerns were raised by Monitoring Officers, and this process was adopted.

25. Regarding this process change, the staff interviewed expressed the following views as regards to the previous approach: that such pre-assessment communications are unnecessary and can cause the Accused Member undue worry in terms of complaints which are ultimately not investigated; that it was more resource intensive for PSOW when it involved pre-assessment discussions with the Accused Member; and that notifying the Accused Member of a complaint at an early stage can give rise to 'tit for tat' complaints. Staff noted that the old approach had benefits in terms of fairness and transparency.

Decisions not to investigate

26. The review sought clarification on whether (notwithstanding the provision in paragraph 5.15 of the process manual and the Decision Review Process) there is any review/check mechanism in place in relation to IO decisions not to investigate (e.g. random sampling as part of an audit process). In that regard, from the staff interviews, it was noted that there may be merit in having a quality assurance mechanism in respect of IO decisions not to investigate on the basis of the public interest test. It was subsequently confirmed that, other than cases where there is a specific "review request" from the complainant, no random sampling takes place of the quality of IO decisions, either generally to review decisions taken or specifically in relation to the application of the public interest test. It was noted, however, that the Service Quality

⁷ Paragraphs 5.12 and 5.13 of the process manual.

⁸ A "minded to" letter is the letter sent to the complainant seeking any additional evidential material and information to support the complaint Paragraphs 7.1 of the process manual.

Officer randomly samples cases from a “service standard” perspective but this does not consider the quality of decision making.⁹

Proposals to investigate, to extend investigations and to commence Own Initiative investigations

27. The review obtained clarification on various issues in this regard. From the process manual it is apparent that the Code Team Manager (CTM) has delegated authority to overrule IO proposals to investigate and IO proposals to extend the investigation or commence a new investigation against another member.¹⁰ While this is not specifically referred to in the Scheme of Delegation, it was confirmed that, in practice, in view of the seniority of the CTM role, the CTM may overrule an IO’s proposal to investigate. The review was also advised that, if there is strong disagreement between the IO and the CTM or if the CTM considers the decision not to investigate may be a contentious one, they will refer a case up to the DOI/CLA for a view, though this practice is not outlined in the process manual/Scheme of Delegation. Further, it was confirmed that, aside from the Decision Review Process, there is no review/check mechanism in place in relation to the CTM’s decisions.

28. The review also sought clarification: on whether the IO has discretion or is required to propose an extension/OI investigation if, during the course of an investigation, other potential breaches of the Code are identified, either involving the Accused Member under investigation or another member; on what basis the CTM might not agree to the IO proposal to extend the investigation or commence a new investigation against another member; and on whether the CTM

has delegated decision-making authority in this regard (as this is not included in the Scheme of Delegation).

29. It was confirmed that, when analysing evidence gathered, it is a matter for the IO to apply their discretion/judgement on cases as to whether to recommend, on the basis of the two-stage test having been met, that an investigation should be extended to consider other possible breaches by the Member being investigated or to recommend that another Member be investigated. The review was advised that, if the CTM or the DOI/CLA disagree which such a recommendation, it will be on the grounds that the two-stage test is not met (e.g. the matter is not serious enough and/or the breach appears to be a minor/technical one). It was also confirmed that, although not specified in the Scheme of Delegation, in practice the CTM has delegated authority not to extend the investigation.
30. In terms of a partial safeguard, however, it was noted that ultimately all the investigation cases are reviewed by either the Ombudsman or the DOI/CLA before they are closed (by the Ombudsman personally if a case is referred to the APW/standards committee or by the DOI/CLA if discontinued and/or no further action/no breach is appropriate). Therefore, as part of that review exercise, other possible breaches, which meet the two-stage test, may be identified or a contrary view may be taken on any earlier decision regarding extensions, in which case the IO is instructed to include the additional matters.¹¹

⁹ Correspondence with the DOI/CLA, dated 7 August 2024.

¹⁰ See paragraphs 6.1 and 8.1 of the process manual.

¹¹ Correspondence with the DOI/CLA, dated 7 August 2024.

Opportunity for the Accused Member to provide comment

31. In assessing the fairness of the process, consideration has also been given to the opportunities which the Accused Member has to comment on the allegations against them, in particular as the facts are established during the investigation process. It was noted from the process manual that: the Accused Member is provided with all relevant evidence gathered in advance of interview and then has the opportunity to comment on this at interview; where the case is referred to the APW/standards committee, a draft report is sent to the Accused Member for comment before it is finalised; and, any comments made by the Accused Member in response to the draft report will be summarised in the final report, given due consideration and also usually included in the report appendices.¹²
32. The review was advised that: all relevant facts which are key to whether there has been a breach of the Code will be explored with the member at interview and the resultant information is used to decide what facts are/are not disputed; following interview, the evidence is analysed and disputed facts are decided on the balance of probability; the “findings on fact” are not shared with the Accused Member prior to them being issued with the draft report as applicable; the purpose of sharing the draft report, which includes an outline of the “disputed” and “non disputed” facts, is to provide the member with an opportunity to comment, including on the “facts” and the “conclusions”, before the PSOW takes a final

decision; and that the PSOW role is to refer cases where its “findings on fact” are *suggestive* of a breach (whereas, as a part of the hearing process, the APW/standards committee makes final findings on fact as to whether there has been a breach of the Code).¹³

Reassessment/reconsideration of complaints

33. The review also sought clarification on the division of responsibilities in this regard, including: whether the Lead Review Officer (“LRO”) has delegated decision-making authority on review requests that complaints be reassessed/reconsidered (as this is not clear in the Scheme of Delegation); and whether a different IO undertakes the reassessment/reconsideration when the LRO upholds a complaint review request.¹⁴ It was confirmed that the LRO has delegated decision-making authority in this area and that a different IO considers the complaint afresh when a review request is upheld.¹⁵

Other safeguards existing

34. In addition to the procedural checks and balances alluded to above, the review has noted a range of other safeguards and good practices which underpin the appropriateness, fairness and impartiality of the process. For example:
- The complainant is required to complete a disclosure declaration, including to confirm: that they agree to the details of the complaint, including their identity, being shared with the Accused Member and others as appropriate;

¹² Paragraphs 12.4, 13.8 and 13.10 of the process manual. It was also noted that, for transparency purposes, comments provided by the Accused Member which are irrelevant to the issues being investigated and therefore not included in the report appendices, are listed in a ‘Schedule of Unused Material’ which is issued with the final report.

¹³ Correspondence with the DOI/CLA, dated 7 and 9 August 2024.

¹⁴ Paragraphs 15.5 and 15.11 of the process manual.

¹⁵ Correspondence with the DOI/CLA, dated 7 August 2024.

and that they are prepared to give spoken evidence in support of their complaint (and, where the complainant provides information relating to a third party, consideration is given to the need to obtain a declaration from that third party to share this information)¹⁶;

- The PSOW's decision on whether to investigate a complaint should be reached within 6 weeks from the date on which satisfactory information is received ("DSIR")¹⁷;
- All applicable actions and decisions leading up to the decision on whether to investigate the complaint are recorded systematically on the PAAF;
- The process manual includes detailed guidance on Article 10, freedom of expression considerations;
- The reasoning behind decisions is recorded and explained throughout the process – e.g. the requirements on the IO to provide on the PAAF an explanation of each aspect of the two-stage test and to provide the complainant with a written statement of reasons for the decision not to undertake an investigation or to discontinue an investigation¹⁸;
- Investigations are conducted in private and there is an emphasis on taking care when sharing information during the investigation to maintain confidentiality where appropriate¹⁹;
- The IO is required to keep the Accused Member and the complainant updated of the

progress of the investigation at least every 6-8 weeks²⁰;

- A decision to discontinue an investigation for any reason must be approved by the DOI/Ombudsman²¹;
- The review process is managed by the LRO who acts independently of the PSOW's Assessment and Investigation Teams in providing a "fresh pair of eyes" review and who is directly accountable to the Ombudsman²²;
- The PSOW Staff Standards of Conduct Policy includes requirements relating to fairness and impartiality including, for example, the "paramount importance that PSOW staff should be, and be seen to be, impartial and non-partisan"²³; and
- The PSOW induction for staff and training programme covers unconscious bias and training on taking decisions fairly.

¹⁶ See section 3 of the process manual.

¹⁷ Paragraph 5.2 of the process manual.

¹⁸ Paragraphs 5.7, 5.11 and 11.4 of the process manual.

¹⁹ See, for example, paragraphs 5.12 and 7.8 of the process manual.

²⁰ Paragraph 7.11 of the process manual.

²¹ Paragraph 11.2 of the process manual.

²² Paragraph 7 of the Decision Review Process.

²³ Paragraph 7.1 of the PSOW Staff Standards of Conduct Policy, October 2022 (v. 3.0).

Conclusion

35. **The review has found that, in general terms, the PSOW's Code of Conduct processes and delegations are robust in terms of safeguarding fairness and impartiality. They are systematic, well documented and supplemented with appropriate guidance and the reasoning for decisions is required to be recorded and explained as applicable.**
36. The documentary review also identified some aspects of the guidance which could benefit from clarificatory amendments and the suggestions in this regard are outlined in the recommendations at the end of this report.

Results of the Code Team Case Review

Introduction

37. This element of the review relates to terms of reference 2 and 3, and examined the decisions taken by the FCTM and her Team not to investigate Code of Conduct complaints, to ensure that the PSOW's two-stage test was applied properly and decisions were free from political bias.
38. Of the 673 cases reviewed, 584 were owned by 11 members of the Code Team with FCTM oversight and 89 were owned by the FCTM.²⁴
39. The review considered a diverse range of cases²⁵, and the vast majority (98%) of cases reviewed were against councillors from either Local Authorities or Community Councils.
40. For all of the cases reviewed, it was unnecessary to cross-reference the case with the political affiliation of the member subject to the complaint. This was because the review found no evidence that any of the case decisions were made on the basis of anything other than the evidence available, the facts established and the resultant reasoned conclusions.

Results

41. The case review examined whether the overall process was adhered to in line with the process manual. Through the documents examined, it was clear that the process was followed in each case reviewed.
42. The PAAF was present in all cases reviewed and contained initial input from the Intake Team including the address of the member complained about and any linked or previous cases on the system relating either to the complaint, complainant or the Member complained about and any precedent cases that might be applicable to it. Once received, evidence showed that the FCTM often entered relevant information on the PAAF, including her initial thoughts to provide a steer to the member of the Code Team who would be assessing the complaint. Once the FCTM completed the PAAF, she allocated the case to a member of the Code Team to carry out their assessment.
43. There was also evidence of conflicts being declared by the FCTM at this early stage (e.g. "Assessment will be overseen by [senior manager] if required, rather than [the FCTM] as there is a potential conflict of interest – [FCTM] has knowledge of/ acquainted with the Councillor").
44. The overall assessment by the allocated member of the Code Team (the IO) could be readily viewed in the documentation and included their input into the PAAF, application

²⁴ Appendix 2

²⁵ Appendix 3

of the two-stage test, decision notices (the letters sent to the complainant once the assessment is complete) and various other correspondence and meeting notes including evidence where any advice and/or guidance was sought from line management.

45. Evidence of the two-stage test being applied was found in all cases reviewed, and was articulated within the PAAF and the decision notices. The quality and content of decision notices were reviewed in detail to ensure that the outcome, decision-making and application of the two-stage test was evidentially sound and clearly reasoned.
46. The review found the application of the first part of the two-stage test, which relates to assessing whether there was direct evidence that a breach of the Code took place, was consistently carried out, documented and clearly stated in the PAAF and all decision notices reviewed. In a number of cases, where it was unclear from the complainant's submission exactly which element of the Code was alleged to have been breached or where evidence may have been missing, additional evidential material and information was requested to support the complaint in the form of a "minded to" letter sent to the complainant. On the occasions where a "minded to" letter was sent, all relevant processes including timeframes were adhered to in accordance with the existing process manual. Where the IO decided that the complaint did not meet the first stage of the test, a thorough explanation was provided to the complainant as to why, including a clear explanation that the second stage of the test was not considered due to the first not being met and, on occasions, additionally explaining why, even had it been met, it would not have been in the public interest to investigate.

47. Where the first stage of the test was met, the IO went on to apply the second stage of the test; this is where the public interest element is considered. Many factors and relevant considerations can be considered by the IO at this stage of the test. There was evidence of consistent, thorough, substantial and sound reasoning, including evidence of careful consideration and analysis in all cases reviewed when taking the various public interest factors into consideration. The review found the following public interest factors considered and evidenced by the IOs: the seriousness of the breach; whether the member deliberately sought material gain for themselves or another person at the public expense; whether the circumstances of the breach were such that a member had misused a position of trust or authority and caused harm to another; and whether the breach was motivated by any form of discrimination against any of the victim's protected characteristics. Other relevant considerations²⁶ that were taken into account in some of the cases reviewed included: the circumstances of the complaint; the extent to which the councillor was responsible for, or was to blame for, the alleged breach; evidence of previous similar behaviour by the member; whether they had been the subject of previous complaints or investigations; whether the alleged conduct was ongoing, repeated or escalating behaviour; whether the alleged conduct had caused harm or impacted on another person, group or body; and consideration of the views expressed by the complainant, or any other person affected by the alleged conduct, relating to the impact and effect.
48. The review found that where complainants sought and were granted a review, these were considered by the LRO. In every review considered, great care was taken in

²⁶ <https://www.ombudsman.wales/fact-sheets/code-of-conduct-assessing-public-interest/#Considerations>

examining the decision and explaining the process, rationale and outcome in the review decision notice.

Decision notice excerpts

49. The review highlighted many examples of excellent practice in relation to decision-making which was evident in the decision notices. A few samples are included below. For reasons of confidentiality, these examples do not include details of the complaint, and therefore, cannot be fully illustrative of the reasoning provided within the decision notices. Nonetheless, though limited in detail, they are an important inclusion.

50. Each decision notice explained the process to the complainant:

"To decide whether to investigate a breach of the Code, we apply a 2-stage test. First, we consider whether there is evidence to suggest that a breach of the Code may have occurred. Second, we consider whether it is in the public interest to investigate the matters complained about. We take into account a number of public interest factors such as:

- the seriousness of the alleged behaviour*
- whether the member misused a position of trust or has sought to gain, for themselves or others, at public expense*
- whether an investigation is required to maintain public confidence in elected members*
- whether an investigation is proportionate in the circumstances or whether, if proven, a referral to a Standards Committee or the Adjudication Panel for Wales would be appropriate."*

51. Many decisions taken not to investigate related to the member's right to freedom of expression (Article 10, Human Rights Act 1998). The review found this was well explained in all decisions where Article 10 was engaged.

"The Member's comment relates to a political matter and therefore the Member would have enhanced protection under Article 10. In this case it is unlikely that the post and comment made by the Member would be considered so serious that a sanction would be considered a proportionate interference with the Member's right to freedom of expression. It is also the case that the comment relates to political opponents, who are also expected to have a 'thicker skin' approach to political comments and debate.

That is not to say that the Member does not need to be mindful of the language [he/she] uses. The more egregious the language used and the less political the person is (that the comments are made about), the more likely it is that a sanction would be proportionate. Therefore, the Member may wish to discuss with their Monitoring Officer, or the leader of their political group, the type and appropriateness of the comments they make on a public forum.

As it is unlikely that a sanction would be considered a proportionate interference with the Member's right to freedom of expression, even if a breach of the Code were proven, it is highly unlikely a sanction would be imposed on the member. In view of this an investigation would not be proportionate or in the public interest." CT8

"It is not uncommon for elected members to say things about political opponents which others may consider to be rude or offensive. However, it is not the purpose of the Code

to inhibit free speech and the robust expression of political differences. I have also previously explained that Councillors have a wide freedom of expression both in a personal and professional capacity. Article 10 of the European Convention on Human Rights, which affords Councillor X the right to free speech, means that he can say things which may be shocking or offensive to some people. Whilst I fully appreciate that you consider Councillor X's comments to be bullying in nature, I do not consider on the evidence provided that they are sufficiently offensive, egregious²⁷ or insulting to amount to bullying behaviour towards fellow members or a breach of the Code." CT6

52. All decision notices explained the rationale in relation to the application of the two-stage test. Where complainants did not provide sufficient evidence to meet the first stage of the test, the decision notice explained this in full. Additionally, where the first stage wasn't met, the decision notices often explained why, even had it been met, it would not have been in the public interest to investigate. The review also noted the reminder often provided in these types of complaints, that the Ombudsman does not condone the language or behaviour in question, and that the Councillor be mindful of their obligations under the Code.

"In light of all of the above, I find that you have not provided sufficient evidence to substantiate your complaints and demonstrate a breach of the Code. The Ombudsman will not investigate unless there is reasonably strong evidence to suggest that the member concerned has breached the Code. Accordingly, I have decided that your complaint does not meet

the first stage of the 2-stage test and, therefore, it should not be investigated." CT2

"As set out above. I am not persuaded that there is evidence of a breach of the Code of Conduct. Therefore, an investigation is not necessary. But for the avoidance of doubt, I should set out that even if I was satisfied there was a breach of the Code of Conduct, I do not think that an investigation would be proportionate and in the public interest. Even if a breach were proven, I do not consider that a likely sanction would be so significant as to mean that an investigation would be necessary or proportionate in the public interest." FCTM

"The conduct of which you complain may amount to a breach of the Code. However, in these circumstances, I am not persuaded that it would be proportionate and in the public interest to investigate your complaint. In deciding proportionality, one consideration is whether, if a breach of the code were proven, a sanction would be likely to be imposed.

Having very carefully considered the matter, I am not persuaded that it is likely that a sanction would be imposed on the member even if a breach were proven. I say this because..... While this does not excuse the behaviour, this would provide some mitigation.

That said, the Ombudsman would not condone this type of language, which is disrespectful and unprofessional, and I would take this opportunity, on the Ombudsman's behalf, to remind Councillor X of [his/her] obligations under the Code, which in respect of paragraph 6(1)(a) apply at all times. Councillor X should also bear in

²⁷ R (on the application of Calver) v Adjudication Panel for Wales [2012] EWHC 1172 (Admin)

mind that, in the event of any further complaints of this nature, the conclusions reached in respect of this complaint are likely to be considered." CT5

53. There were examples of complainants being signposted to local resolution and provided with other useful advice.

"If you feel that there is evidence of maladministration in the Council's handling of the matters you have raised, you may wish to complain directly. If, when you have done so, you consider that there is evidence of maladministration which has caused you personal injustice, you may contact the Ombudsman. Further information can be found here:

<https://www.ombudsman.wales/fact-sheets/complaints-against-public-bodies-our-procedure/>" CT5

54. In cases where a review of the decision not to investigate was granted, the LRO and the Code Team followed the Decision Review Process. Decision letters issued by the LRO were extremely thorough, clear and showed evidence of sound decision-making. They also set out the LRO's role and the factors taken into account when deciding whether a case should be looked at again.

"As Lead Review Officer, I am not involved in the assessment or investigation of cases carried out by this office. Instead, I act on the Ombudsman's behalf, and with her delegated authority, to determine whether there are grounds for her to overturn a decision previously taken on a case, and to carry out further assessment of it.

However, I must make clear that I cannot decide that a case should be looked at again simply because you may disagree with the decision made. Therefore, for me to

*consider a review request, a complainant **must** be able to demonstrate either:*

- that new and significant information has come to light which affects the decision; or,*
- that in reaching the decision we did not have proper regard to the information that was available to us.*

I must also emphasise that my role is not to re-assess your complaint about Councillor [X], but is, instead, to consider whether [the IO] properly considered your complaint, and if the decision made was reasonable, and in accordance with our statutory jurisdiction and practice when considering Code of Conduct complaints.

I have approached my review on that basis."
LRO

"I can understand why it is difficult for you to accept the decision reached by this office not to investigate your complaint. However, I have seen no evidence of service failure in the decision itself or in how our two-stage test was applied to it. I therefore do not uphold your review request or your complaint.

The Ombudsman has a set of service standards. I have considered whether they have been met in relation to the service provided to you by this office.

Our service was clearly accessible for you to use. I consider that [the IO] communicated with you clearly, to explain how we apply the two-stage test to our assessment of Code of Conduct complaints and that he was professional in his correspondence with you. I am of the view that the decision reached in your case was both fair and transparent." LRO

55. As well as the robust processes and sound, well-reasoned decision-making, the tone and structure of all correspondence, especially the decision notices and the review decision notices, was in compliance with the Ombudsman Guidance on House Style Requirements. For example, the service standard to provide accurate information in plain and clear language was evident in each case reviewed, as was ensuring that their communication reflects the “standards and values we hold ourselves to” which include: being respectful, demonstrating enthusiasm and pride in their job, taking responsibility, and being supportive and diverse. This consistent communication style was evidenced throughout all of the cases reviewed.

Dip sampling outcome

56. A total of 5% of the cases were reviewed as an additional check, and included 24 Code Team cases and 10 FCTM cases. This sampling exercise concurred with the findings of the substantive case review, and found no evidence that decision-making was influenced by the political affiliation of the person who made the complaint and/or the member who was complained about.

Conclusion

57. The review found all decision-making was based solely on evidence, facts and solid, well-articulated reasoning, and as such, there was no evidence of political bias. The case review found no evidence that the decision-making on any of the cases reviewed was influenced by the political affiliation of the person who made the complaint and/or the member who was complained about.²⁸

²⁸ For the purposes of this review, political bias will be found where there is evidence that the decision on a case was influenced by the political affiliation of the person who made the complaint and/or the member who was complained about.

Review of the discontinued investigation cases where the FCTM was “case owner”

58. The review examined eleven cases which the FCTM investigated, and which were subsequently discontinued by the DOI/CLA, without a referral to a standards committee or the APW to ensure that there was no evidence of political bias in the handling of these cases.
59. All of the cases reviewed were against councillors from either Local Authorities or Community Councils.
60. All of the discontinuation decisions made by the FCTM were signed off by the DOI/CLA and the Ombudsman, in line with the process manual.
61. The review of these cases was carried out using a similar process as the 673 cases reviewed above, including careful consideration of the evidence, application of the two-stage test, and assessing the reasoning for discontinuation.

Conclusion

- 62. The discontinuation decisions review found all decision-making was based solely on evidence, facts and solid, well-articulated reasoning, and as such, there was no evidence of political bias. There was no evidence that the decision-making in relation to these discontinuation cases was influenced by the political affiliation of the person who made the complaint and/or the member who was complained about.**

Staff interviews relating to the expression of personal views on political matters

63. This part of the review relates to term of reference 4, and examined whether there is evidence that the team leader expressed her personal views on political matters “akin to her social media posts” in the office and/or inappropriately influenced other staff members. The themes emerging from interviews with the Code Team, the DOI and the FCTM provide further context, and include additional themes that have fed into the “lessons learned” section later in this report.

Code Team

64. Shock was the sentiment expressed by all Code Team staff interviewed in relation to when they first heard about the incident. Every Code Team member said that they were “shocked” or “surprised” with a few stating they were “devastated” when they heard of the incident involving the social media posts by the FCTM. At least four of the Code Team were friends with the FCTM on Facebook; none of them recalled seeing the posts in question. Many were not active on Twitter.

65. The staff interviews confirmed that discussions about politics did not occur between colleagues, either in-office or remotely. Every Code Team member said they did not socialise with the FCTM outside of work and had never had a discussion with the FCTM about politics, never shared any personal political views with colleagues and had never been influenced in any way by the FCTM or anyone’s political views in the office.

“We’re just very much looking at the case and seeing what the evidence is and looking at our two-stage test and deciding whether it meets with that or not.....My experience is that nobody would think it was appropriate anyway to have those types of conversations.” CT4

“I haven’t seen anything that would lead me to give any cause for concern about her work or her demeanour in the office, or as you say I haven’t seen anything around political views in the office. From my perspective she was always very professional, and she did take the role very seriously within the office.” CT5

“I can honestly say I don’t know which way my colleagues vote. We don’t talk about politics. I don’t know what their views are and that’s how it should be.” CT7

“I remember feeling really impressed about how professional she was, and not once did she mention her political views or opinions; not once. Actually, none of us in the team have discussed that either.” CT10

“With work, it was always about the evidence and the two-stage test and whether there was direct evidence, and then whether it was in the public interest. The political parties of the members complained about, or the complainants, never really featured in any of the decision-making or even not really commented upon unless the complainant had made it specific - had expressed that it was a political spat, so to speak.” CT11

66. Another theme emerging was the respect Code Team members had for the FCTM, the work that she did, her professionalism and the support she provided to those she managed.

"We'd often have chats about cases if I was finding it difficult, and she was always I thought really professional and full of knowledge, so it was always really helpful to chat through things with her. I never thought anything other than she's assessing this against the code of conduct and our two-stage test, ever." CT3

"Yes, I mean, she took such pride in what she did. She loved her job. She was exemplary in terms of being a manager, and supportive and promoting the work we do. She clearly took a lot of pride in it and working for the organisation." CT8

"If she felt that there was an exchange worth a discussion, she would welcome that discussion. She wasn't seeking to impose her view on you. She wanted to understand your opinion, and for us to reach the right decision based on that, so I think that's an important point worth making." CT9

"She felt passionately about doing it the right way, and so I'd be very surprised if any evidence does come to light of political bias.....she would've done anything to make sure that nothing within work could impact the integrity of the process, or the decisions that we make." CT9

67. The impact on the PSOW and its staff was mentioned by many members of the Code Team. They spoke about the negative impact this incident has had on them, their work and on the reputation of the PSOW. While this theme does not relate to the FCTMs expression of any personal or political views

[ToR 4], it is included here as an important theme to provide context on the impact the incident has had which has informed the lessons learned section of the report.

"We're a small team, we work closely together, really believe in what we do, and I think that the comments that have been made about us as a team and an organisation have been unfair...and I think that's had a big impact on everyone. Scrutiny is fine when it's fair scrutiny, but it feels like some of the comments have been really unfair." CT6

"That's not nice to hear, really trashing your work, really, when you know that quite a lot of care goes into what we do." CT10

"It's a shame, because I have no doubt that the work that everybody puts in is completely impartial and is of a really good standard, so I just think it's unfortunate that it's being called into question because of the actions of one individual in that respect." CT5

"It's a specialist role, and we have specialist staff that have done it and done it well for many years, and we know how to do it. So it wouldn't be appropriate for anybody else to do that. So I think it is really important that we keep that work, and we keep doing what we're doing, and we keep upholding standards, which is what we do." CT5

68. The staff views about the Code of Conduct process were sought in order to help inform the review of processes and delegations which have been discussed above in this report. Overall, it was evident that each Code Team member was very proud to work for the PSOW, took pride in their work, and felt the processes were robust, with many

mentioning the checks and balances that are in place.

"I think it's a very thorough - lots of checks and balances. It's a real quality product at the end of it." CT10

"I think our processes are - it's quite a rigorous process. There are lots of checks and balances and I think that's largely to make sure that inappropriate decisions aren't made and that we're considering things appropriately - that we're not biased in our decision-making, that we're treating cases fairly, that we're looking to make consistent decisions - and that sort of thing. It does mean that the process is a lengthy one and that our investigations do take an awful long time. There's a reason why those checks are in place. I think it would be dangerous for us to cut those corners to have a shorter investigation and possibly open ourselves up to other risks." CT7

"I think you have to, because if you do something that's ill-thought through or poorly thought through and you get challenged, as in a review, you've got to be able to justify why you came to that decision or what you based that decision on so that it can be considered properly by the person who needs to review, if you know what I mean. You always bear that in mind - well, I have anyway - when you're putting your PAAF and your decision notice together, because you need to be able to justify why you're thinking what you're thinking." CT8

"It's like they hand-picked people for the organisation that have the right attitude and mindset to the work, and it's clear that the team really care, are really thorough, really care about the work." CT10

DOI/CLA

69. The DOI/CLA was interviewed as part of the review. The DOI/CLA worked with the FCTM for fifteen years at the PSOW and, like the rest of the staff interviewed, expressed her disbelief and shock at the incident. She also expressed her view that the FCTM was a professional and valued member of the organisation.

"As far as I was aware, and in my experience with her, always professional, objective in her application of what we do here, and that was my experience of her. As I say, I worked very closely with her over that long period, and I would add, as well, she was always really regarded as an effective, first of all, investigator, but a really good manager, as well, of our work. She really was one of our highly valued up and coming managers, really."

"We talk about cases, and as you'll have seen from the way we set out the context, if we think somebody's political allegiance is relevant to a case, there might be reference to it, but I really didn't know what her own personal political views are. I think it's a type of office, because we are very clear about issues of disrepute, because of what we do, and I think we all keep our personal views to one side, and we know we have to apply that objectively..... It's not the sort of conversations we have in the office, or I have with staff, anyway."

FCTM

70. The FCTM was interviewed after the case review was complete. As stated previously, it was not in the scope of this review to investigate the incident or the FCTM in relation to the posts she made. However, the review felt it would be entirely appropriate to

invite the FCTM to speak to the Lead Reviewer to provide any information she felt relevant to the review, if she wished to do so; we are grateful that she engaged with the review. The following points were noted.

- The FCTM stated that this was the first time she had formally spoken to anyone about the details of the incident.
- The FCTM said that she is not very political and doesn't lean towards any political party; rather, she has strong personal views about policy issues and the impact policies have on people.
- The review learned that the FCTM implemented unconscious bias training for the PSOW, and further delivered the decision-making induction module to staff which included the topics of confirmation bias, conscious and unconscious bias, and personal bias, all of which were endorsed by the PSOW. She also said that she discussed these topics with her team regularly, including the importance of applying the code and not personal biases about the members or their political parties. She also said she recognised the importance of the will of the electorate, regardless of her own views and would often remind her team of this.
- The FCTM said that she had declared interests, as required by PSOW relating to her personal relationships with friends who

had political affiliations. She said that if any complaints were received which related to those people, she declared an interest and did not deal in any detail with that casework.

- The FCTM said she was "heartbroken" that anything she could have done could have damaged the reputation of the office. She said she had worked very hard for the organisation for fifteen years and was good at her job. She said she was not concerned by PSOW's decision to commission an independent review, stating that "Anyone can look at any of my work. I document everything. I created the PAAF, the form to keep it all logical so that anyone can see it, anyone can access it. I kept all of my notes, everything in a place where it can all be accessed. There's clear oversight from top to bottom. I introduced the - put in the Article 10 considerations up front to make sure that we considered all that at the outset...We had bi-weekly discussions as a team, and we had monthly case meetings where we went through every single case with senior managers in the room."

Conclusion

- 71. The review found no evidence that the FCTM expressed her personal views on political matters "akin to her social media posts" in the office and/or inappropriately influenced other staff members, in the performance of their duties under the Local Government Act 2000.**

Recommendations

72. The following recommended improvements, which relate to the current process, would augment the existing safeguards for ensuring the fairness and impartiality of the processes and would clarify the related guidance as applicable:

- (1) **Documenting the political affiliation of the Accused Member:** in order to mitigate the risk of unconscious bias on the part of the IO and to underpin the fairness of the complaint assessment process, it is recommended that steps are taken to ensure that the political affiliation of the Accused Member is not recorded on the PAAF. The process manual will need to be amended accordingly, with updated instructions for the Intake Team.
- (2) **Accused Member not informed of complaint until after assessment:** in the interests of fairness and transparency, it is recommended that the PSOW considers reverting to the previous practice of notifying the Accused Member of the complaint once it is received. This would also protect the PSOW from criticism in that regard, which might arise from circumstances in which the Accused Member is unsighted of the complaint and learns of its existence via a third party or the media. If the PSOW decides to revert to the previous practice, the process manual will need to be amended accordingly.
- (3) **IO decisions not to investigate:** notwithstanding the applicable provisions in the process manual²⁹ and in the

Decision Review Process, it is recommended that an additional review/check mechanism is put place for the purpose of quality assuring the IO decisions in this regard, particularly around the public interest test, and as a further safeguard against the potential for unconscious bias on the part of the IO. This recommendation is supported by findings from the staff interviews. Given the volume of complaints, however, the proposed measure needs to be proportionate and it is suggested that this could be achieved by way of occasional random sampling of IO decisions.

- (4) **CTM's delegated authority to overrule IO proposals to investigate and IO proposals to extend the investigation or commence a new investigation against another member**³⁰: notwithstanding the applicable provision in the Decision Review Process, it is recommended that an additional review/check mechanism is introduced in respect of these delegated decisions, in order to mitigate the risk of unconscious bias on the part of the CTM when deciding not to agree IO proposals. It is suggested that this measure could also be achieved by way of random sampling of CTM decisions. Also, the Scheme of Delegation should be updated to include these CTM decision-making powers.
- (5) **Opportunity for the Accused Member to provide comment:** the review recognises that, as part of the combined PSOW and APW/standards committee process, the Accused Member has a number of

²⁹ See, for example, paragraph 5.15 of the process manual.

³⁰ See paragraphs 6.1 and 8.1 of the process manual.

opportunities to comment on the facts of the case.³¹ The review therefore found the process to be demonstrably fair. That said, the PSOW may wish to consider whether there are any additional points in the process in which there would be a benefit in providing the Accused Member with the opportunity to comment further on relevant facts, particularly in advance of reaching draft conclusions/findings on whether the evidence is suggestive of a breach.

(6) **Public interest factors and**

considerations: the review recognises the factors and considerations listed are non-exhaustive, but recommends that PSOW gives consideration to developing more detailed internal guidance on assessing the public interest test. Additionally, the public interest factors and considerations should be reviewed regularly.

(7) **Clarificatory amendments:** with a view to clarifying the guidance, the review also recommends that:

- I. The process manual is amended to address the apparent contradiction in terminology whereby "direct evidence that a breach of the Code took place" is a requirement for a complaint to pass assessment stage (paragraphs 5.4 and 5.5) whereas an investigation can be concluded based on the finding that there is "no evidence of a breach of the Code" (paragraph 13.1(a));
- II. The process manual is amended to reflect the existing practice that, when the LRO upholds a complaint review request, the reassessment/reconsideration is undertaken by a different IO to the IO who undertook the original assessment/investigation; and
- III. The Scheme of Delegation is updated in light of the retitling of the LRO post to make clear that the LRO has delegated authority in respect of decisions on whether to uphold a review request that the complaint should be reassessed/reconsidered.

³¹ See, for example, paragraphs 12.4, 13.8 and 13.10 of the process manual.

Lessons Learned

73. The findings of this review should offer reassurance to the public and to elected members that the PSOW Code of Conduct processes are robust, consistently applied, fair and fit-for-purpose. As the review found no evidence of political bias in the decision-making nor any material process concerns, the main lessons learned relate to measures that might lessen the risk of this type of thing occurring again. The review recommends that the PSOW reflects on the following points:

- (1)** Whether the PSOW's Staff Code of Conduct, policies and practices relating to social media usage could be more comprehensive in relation to setting out the circumstances in which social media activity by an employee amounts to misconduct, both in their work and private lives, with consideration of current case law in relation to freedom of expression (Article 10) and other relevant precedent cases.
- (2)** Whether steps need to be taken to ensure clear information is provided as part of any PSOW recruitment processes to

ensure candidates are made aware of any necessary curtailment of PSOW employees' right to freedom of expression, including activity on social media.

- (3)** Whether bias/unconscious bias assessments should be a mandatory part of the recruitment process.
- (4)** Whether mandatory refresher training on unconscious bias and on social media usage should be implemented on an annual basis.
- (5)** Whether, should similar exceptional circumstances arise, the PSOW requires any further policies or processes to be in place to support its staff.
- (6)** Whether, due to the particular challenges arising from investigating the conduct of elected members, appropriate training is in place for applicable PSOW staff in relation to resilience in managing the pressures and vulnerabilities which come with this role.

Report conclusion

74. As stated in The Venice Principles³², “Ombudsman Institutions have an important role to play in strengthening democracy, the rule of law, good administration and the protection and promotion of human rights and fundamental freedoms”. The PSOW is built on the principles of independence, impartiality, fairness and inclusivity. These principles must be reflected in the important work carried out by the PSOW in order to maintain public trust in its operations. This necessarily means that the assessments carried out by investigation officers who work for the PSOW should demonstrate a consistent application of a well-defined and fair process as well as excellent analysis and reasoning to ensure that their decision-making is patently impartial and non-biased. The findings of this review point towards such excellence, in both processing and complaint assessment. This should provide reassurance to the public that they can trust and have confidence in the work of the PSOW and its Code Team.

³² [https://www.venice.coe.int/webforms/documents/default.aspx?pdffile=CDL-AD\(2019\)005-e](https://www.venice.coe.int/webforms/documents/default.aspx?pdffile=CDL-AD(2019)005-e)

Appendix 1: Terms of Reference

Independent Review of PSOW's Investigation of Code of Conduct Complaints

Final Version 16.05.24

Background

The office of the Public Services Ombudsman for Wales was established in April 2006 by the Public Services Ombudsman (Wales) Act 2005. In 2019 this Act was repealed and replaced by the Public Services Ombudsman (Wales) 2019 Act ("The 2019 Act"). The appointment of 'Ombudsman' is made by the Crown and the current Ombudsman, Michelle Morris, has been in post since April 2022.

The role of the PSOW is to: 1) look into complaints that something has gone wrong with Welsh public services; 2) look into complaints that Welsh councillors have breached their Code of Conduct; and 3) work with public bodies to improve public services and standards of conduct within local government across Wales.

Context

On 26 March 2024, the PSOW was informed by a member of the public that a member of staff (herein referred to as the "Former Team Leader") had been making inappropriate and unacceptable social media posts of a political nature.

The Former Team Leader was suspended on 29 March 2024 and resigned from her role with PSOW on 3 April 2024. The Former Team Leader had been, until the end of August 2023, leading

the Code Team assessing and investigating complaints that local councillors had breached the Code of Conduct for councillors in accordance with the Local Government Act 2000 ('LGA 2000').

Scope and Purpose of the Review

The purpose of the independent review is to look at the PSOW's processes for the assessment and investigation of complaints that members of local authorities, fire and rescue authorities, national park authorities, and police and crime panels in Wales have breached their Code of Conduct. The aim of this review is to provide assurance as to whether the PSOW's code of conduct processes, delegations, and decisions in relation to the assessment and investigation of such complaints have been sound, free from political bias, and that lessons are learned from what has happened.

Political bias will be found where there is evidence that the decision on a case was influenced by the political affiliation of the person who made the complaint and/or the member who was complained about.

While there is currently no evidence that the Former Team Leader expressed her personal views or influenced others in the office, PSOW recognises that any review also needs to provide assurance on the Former Team Leader's decision-

making and potential influence on others. There is no intention for this review to reassess cases afresh or to reopen cases.

Code of Conduct complaints which are not investigated

From 1 April 2021 onwards, the Code Team was responsible for the assessment of Code of Conduct complaints and making decisions on which complaints should not be investigated. Prior to this date these assessments were made in a different team, which was not managed by the Former Team Leader.

On 1 September 2023, as happens from time to time in accordance with the operational needs of the office, the PSOW rotated team leaders and the Former Team Leader moved to manage a different team in PSOW. On this occasion, the rotation occurred as a result of the retirement of a team leader who managed a Public Service Complaints Investigation Team.

From 1 September 2023 until 22 October 2023, the Code Team had no team leader, pending the new team leader taking up this role on 23 October. During the time when no team leader was in position, a more senior manager oversaw the work of the Code of Conduct Team. She was, from time to time, assisted by the Former Team Leader.

This review will consider assessment decisions taken by the Former Team Leader and the Code Team from 1 April 2021 until 22 October 2023.

The PSOW applies a two-stage test when deciding whether a complaint should be investigated. Firstly, whether the evidence provided suggests that a breach of the Code of

Conduct has occurred, and, secondly, whether an investigation is required in the public interest.

As the Former Team Leader did not manage the Team which took assessment decisions on Code of Conduct cases before 1 April 2021, this review will not consider assessment decisions taken before 1 April 2021.

Code of Conduct complaints — cases which are investigated

Decisions to start an investigation under section 69 of the LGA 2000 are taken by the Director of Investigations/Chief Legal Adviser.

Decisions to discontinue an investigation before its completion are taken by the Director of Investigations/Chief Legal Adviser.

On completion of an investigation, the PSOW's role is to decide which of the following findings under s69(4) of the LGA 2000 is appropriate:

- (a) that there is no evidence of any failure to comply with the code of conduct;
- (b) that no action needs to be taken in respect of the matters which are the subject of the investigation;
- (c) that the matters which are the subject of the investigation should be referred to the monitoring officer of the relevant authority concerned for consideration by its standards committee, or;
- (d) that the matters which are the subject of the investigation should be referred to the president of the Adjudication Panel for Wales for adjudication by a tribunal.

Decisions that there is no evidence of a breach of the Code (as outlined in (a) above) or that no action needs to be taken in respect of the matters investigated (as outlined in (b) above) are taken by the Director of Investigations/Chief Legal Adviser.

Cases which the Former Team Leader investigated during the period from 1 April 2019 (when the Former Team Leader became responsible for the oversight of Code of Conduct work) until 23 October 2023 and which the Former Team Leader either decided to discontinue or close because there was no evidence of a failure to comply with the code or no action needed to be taken, will be considered as part of this review. Although the Former Team Leader did not make the final decision on these cases, all cases which the Former Team Leader investigated whilst in a management role overseeing Code of Conduct casework for PSOW, will be considered as part of this review.

Decisions to refer a matter for hearing to a standards committee or the Adjudication Panel for Wales under (c) or (d) above, are taken by the Ombudsman.

These cases are then subject to an independent hearing, in which the investigation may be challenged and scrutinised and witnesses may be called before the relevant standards committee or Adjudication Panel for Wales reaches a decision on whether the councillor complained about has breached the Code of Conduct, and if so, whether a sanction should be imposed.

A councillor may appeal against decisions taken by a standards committee to the Adjudication Panel for Wales.

A councillor may appeal against decisions taken by the Adjudication Panel for Wales to the High Court.

The Adjudication Panel for Wales and standards committees are independent of the Ombudsman and take decisions on cases independently of the Ombudsman. Cases referred to either a standards committee or the Adjudication Panel for Wales have already been reviewed by those bodies. Decisions of those bodies are appealable: that is, there is a statutory mechanism in place which allows a councillor subject to a decision of those bodies to seek a further review of those decisions. The Ombudsman has no power to alter a decision of a standards committee or the Adjudication Panel for Wales. The only way in which such decisions can be challenged or altered is via the statutory appeal process. Accordingly, the review will not include these cases.

Lead Reviewer

Dr. Melissa McCullough

Melissa McCullough is the Commissioner for Standards for the Northern Ireland Assembly (since 2020) and also the Commissioner for Standards for the Jersey and Guernsey States Assemblies (since March 2023). Melissa moved to Belfast from the United States in 1994 and obtained a PhD from Queen's University Belfast, Faculty of Medicine in 1997. She has worked as an academic in law, ethics, and professionalism in the UK and Ireland since 2005. Melissa also holds the Advanced Professional Certificate in Investigative Practice, a Master's degree in Bioethics and Applied Ethics and a Bachelor of Laws degree. Melissa served as a ministerial appointed non-executive director on the Health and Social Care Board in Northern Ireland from 2009 until 2020 and is currently a member of the BMJ Ethics Committee.

Review Team

Mr. John Devitt

John Devitt is a Senior Policing Oversight Specialist & Independent Professional Investigator. John is a former Scotland Yard Detective and Senior Investigator for the Office of the Police Ombudsman for Northern Ireland. John has extensive major crime investigation knowledge and experience. He has, over his long career, undertaken some of the most challenging, complex, and sensitive investigations nationally and internationally. John currently sits as an Advisory Panel Member for the charity Inside Justice which reviews and investigates alleged miscarriages of justice. John also supports the Northern Ireland Assembly Commissioner for Standards with her ethics and standards current case work. He has been a member of the Institute of Professional Investigators since 1992.

Mr. Shane McAteer

Shane McAteer is the Clerk of Standards at the Northern Ireland Assembly and has worked as a senior public official for over 20 years, with experience in supporting the development and scrutiny of public policy and legislation and in providing procedural advice, policy analysis, and professional support to elected representatives. Shane has particular experience in advising elected representatives on Code of Conduct requirements and in supporting the adjudication of complaints against elected representatives. He has expertise in conduct/workplace investigation and holds the Advanced Professional Certificate in Investigative Practice. In addition, Shane has prior experience as a Third Sector CEO.

Evidence Gathering

The Review Team will each be provided access to the case management database. Aside from what is available on the case management database, the Review Team will also gather any and all written correspondence, documentation, and communications relating and relevant to the scope and purpose of the review including email, telephone, digital and hard copy information. The Review team may deem it necessary to interview team members and staff and other relevant third parties as may become apparent throughout the review.

Deliverables

The Ombudsman has appointed Melissa McCullough to lead this independent review and report on their findings.

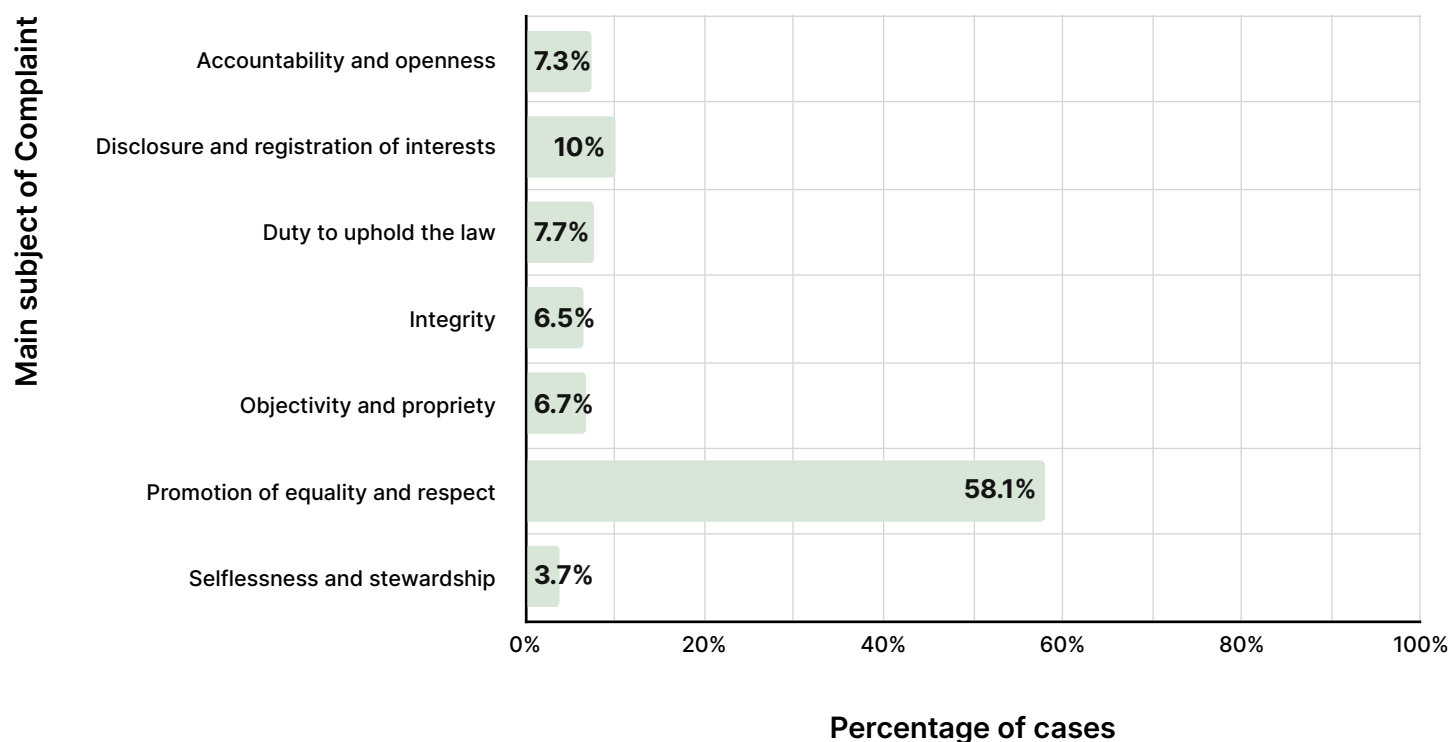
The PSOW considers that Dr. McCullough should have a wide scope for comment and should seek to:

1. Review the PSOW's Code of Conduct processes and delegations to ensure that they are appropriate, fair, impartial, and free from political bias.
2. Review the decisions taken by the former team leader and her team not to investigate Code of Conduct complaints from 1 April 2021 to 22 October 2023, to ensure that the PSOW's two-stage test was applied properly and decisions were free from political bias (673 cases).
3. Review cases where the former team leader was the 'case owner' which were investigated and closed without a referral to a standards committee or the Adjudication Panel for Wales from 1 April 2019 to 22 October 2023, to ensure that there is no evidence of political bias in the handling of these cases (11 cases).
4. Establish whether there is evidence that the team leader expressed her personal views on political matters akin to her social media posts in the office and/or inappropriately influenced other staff members, in the performance of their duties under the Local Government Act 2000.
5. Make any recommendations which Dr. McCullough considers appropriate and issue a final report which the PSOW will share with the Senedd's Finance Committee. In the event that Dr. McCullough considers it necessary to widen the scope of this review, she will inform and agree this with the Ombudsman.

Appendix 2: Number of cases reviewed by case owner

Code Assessment Team	Number of Cases Reviewed
CT 1	11
CT 2	15
CT 3	91
CT 4	6
CT 5	30
CT 6	116
CT 7	68
CT 8	95
CT 9	49
CT 10	19
CT 11	84
FCTM	89
Total	673

Appendix 3: Percentage of cases reviewed by subject



Committee:	The Standards Committee
Date:	4 November 2024
Title:	Allegations against members
Author:	Siôn Huws, Propriety and Elections Manager
Purpose:	For information

1. Background

The purpose of this report is to inform the Committee of the Ombudsman's decisions on formal complaints against members.

2. Decisions

2.1 Summaries of the decisions received from the Ombudsman are attached as an **Appendix**.

4. Recommendation

3.1 The Committee is asked to note the information.

Standards Committee 04/11/24 - Allegations against members

Complaint 202400306

The conduct of a town council member at a Council meeting and in carrying out an allegedly unnecessary investigation into the conduct of officers who previously managed a business on behalf of the council.

Decision

Not to investigate. No sufficient evidence has been presented to support the allegations.

Complaint 202401290

That a town councillor failed to declare an interest at a meeting of the full council

Decision

Not to investigate. The issues raised in this complaint were already under investigation separately, and it would therefore not be in the public interest to investigate. The evidence will be considered as part of the existing investigation.

Complaint 202401291

That a town councillor failed to declare an interest and voted on a matter in which she was alleged to have a personal and prejudicial interest.

Decision

Not to investigate. The issues raised in this complaint were already under separate investigation, and would therefore not be in the public interest to investigate. The evidence will be considered as part of the existing investigation.

Complaint 202401342

Complaint that a town councillor disclosed confidential information during a council meeting by naming two council members under investigation by the Ombudsman.

Decision

While it was appreciated that the announcement may have caused concern and/or embarrassment to the members under investigation, in the Ombudsman's view, on balance, there was insufficient evidence to suggest that the Member shared private or confidential details of the complaints. The conduct described was considered not technically contrary to any provision of the Local Government Act and therefore did not contravene the Code.

Complaint 202403031

That a town council member had failed to leave the room when during a discussion on a matter on which he had declared an interest.

Decision

Although the conduct was suggestive of a breach of the Code it was decided not to investigate as a complaint against the member in relation to the interest was already under separate investigation, and would therefore not be in the public interest to investigate. The evidence will be considered as part of the existing investigation.

Complaint 202403620

That a town council member failed to declare an interest and participated in the discussion and vote on the matter.

Decision

Not to investigate. The issues raised in this complaint were already under separate investigation, and it would therefore not be in the public interest to investigate. The evidence will be considered as part of the existing investigation.

Complaint 202403617

A community council member pushed the complainant's front door open as he tried to close it and threatened physical violence.

Decision

Not to investigate. Despite being asked, the complainant did not provide sufficient evidence about the incident or to show whether the member was acting as a councillor or as a private individual at the time

Complaint 202404564

It was alleged by a member of the public that a town council member had breached the Code of Conduct by posting an inappropriate post on Facebook, on a community group page, which the complainant said was controlled by the member.

Decision

No supporting evidence had been provided to establish that the Member was responsible for the community page, or the post complained about. Although further evidence could have been sought, the issue was considered in the context of Article 10 of the Human Rights Convention, which protects freedom of expression. The Ombudsman did not condone the posting of controversial cartoon images of this nature, which appeared wholly out of

place and inappropriate on a community group page and could cause offence to members of the public. However, the post would not be considered so serious, highly offensive or rude to amount to a breach of the Code or to warrant a sanction being imposed, as this would not be considered a proportionate interference with the Member's freedom of expression under Article 10.

Committee:	The Standards Committee
Date:	4 November 2024
Title:	The Ombudsman's Annual Report
Author:	Siôn Huws, Propriety and Elections Manager
Purpose:	For information

Background

1. The Public Services Ombudsman for Wales has published its annual report for the year **2023 - 24**
2. A copy of the report is included as an **Appendix** to this report. A copy of the report, as well as an executive summary and short video, can be viewed on the Ombudsman's website (link below):

[Annual Reports and Accounts - Public Services Ombudsman for Wales](#)

Recommendation

3. The Committee is asked to note the report



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A New Chapter Unfolds

Annual Report and Accounts 2023/24

July 2024



We can provide a summary of this document in accessible formats, including Braille, large print and Easy Read.
To request, please contact us:

Public Services Ombudsman for Wales
1 Ffordd yr Hen Gae
Pencoed
CF35 5LJ

Tel: 0300 790 0203

Email: communications@ombudsman.wales

Mae'r ddogfen hon hefyd ar gael yn y Gymraeg.

This document is also available in Welsh.



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Ombudsman**
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A New Chapter Unfolds

Annual Report and Accounts of the Public Services Ombudsman for Wales for the year ended 31 March 2024

Laid before the Welsh Parliament under paragraphs 15, 17 and 18 of Schedule 1 of the Public Services Ombudsman (Wales) Act 2019.

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Foreword

A new chapter unfolds

This will be the first Annual Report I have produced since I published my first Strategic Plan last year. '[Strategic Plan 2023-2026 A new chapter](#)' sets out the vision for our work to have a positive impact on people and public services in Wales. I am pleased to see, from the evidence we have gathered for this Annual Report, that we have started to make good progress towards achieving this ambition.

In the last year, we saw another record increase in the number of people contacting us with concerns and complaints about public services and the behaviour of local councillors. Our caseload has increased by a staggering 37% since 2019. This year alone we handled over 10,000 cases, closing more than we ever have done before, and reducing the costs for each case and investigation. This is the most efficient we have ever been.

We started the year with a focus on reducing our aging cases, those over 12 months old, by 50% by the end of the year. These cases are often the

most complex and distressing for the people making the complaint. I am extremely pleased to say we exceeded this target, reducing our aged investigations by over 70%. We are now well on track to meeting our objective to reduce this proportion to zero by the end of March 2025.

Our investigation and support staff dug deep to meet this target. Our people are our most important asset and I have never been more proud of their commitment and hard work.

To have a meaningful and lasting impact, we have to make our services more accessible and inclusive for everyone. We have pro-actively engaged communities where we have low complaint numbers. Results from surveys show that there is greater awareness of our services with people from these communities. We now need to focus on growing the number of complaints from young people, people from diverse nationalities and people who face socio-economic hardship.

Research shows that people and public service providers believe we are independent and impartial and that we have a positive impact on improving public services in Wales. Regrettably, the actions of an individual, which fell far short of the standards of conduct we expect from our staff, prompted questions about our impartiality and marred what has been an extremely productive and positive year. We now must work hard to regain that trust. The current independent review, to determine whether our consideration of councillor Code of Conduct complaints has been free from political bias, is a vital step that moves us forward to restoring the reputation and standing of our Office.

Michelle Morris

Public Services
Ombudsman for Wales

July 2024



About ...

We have three main roles.



We investigate complaints about public services.

We can look at the services provided by devolved public bodies in Wales such as local councils, Health Boards, social landlords and others. We can also look at complaints about private social care and end-of-life care, as well as some private healthcare.

We consider complaints about councillors breaching the Code of Conduct.

We look at complaints about councillors at local councils, fire authorities, national park authorities. We also look at complaints about police and crime panels. We are also a “prescribed person” under the Public Interest Disclosure Act for raising whistleblowing concerns about breaches of the Code of Conduct by members of local authorities.



We drive systemic improvement of public services and standards of conduct in local government in Wales.

We can investigate on our own initiative, even if we have not received a complaint. We can also set complaints standards for public bodies in Wales, monitor how they handle complaints and provide training to them.

Key statistics

We received **17%** more enquiries and complaints.



49% of the public are aware of our service, an increase on last year.



We closed **6%** more complaints.



We intervened in **20%** of the complaints we investigated.



67% of our recommendations to public bodies were complied with in time.



55% of Code of Conduct complaints about promotion of equality and respect.

100% of our wider and extended Own Initiative recommendations were complied with.



4:

the average number of weeks we took to assess a complaint



8 Public Interest Reports issued



64:

the average number of weeks we took to investigate a complaint



Only **40%** of complainants were satisfied with our service, but this rose to **98%** when they were satisfied with the outcome.



93% of complaint reviews found that our original decision was appropriate.



83% of complainants found it easy to contact us



7.7 = average days our staff were sick and off work, a reduction on last year



6% of the complaints made to public bodies who operate our complaints standards policy were escalated to us



75% of our staff agree that we are a good place to work



85% of Code of Conduct breaches that we referred were upheld by Standards Committees or the Adjudication Panel for Wales



£432 average cost per case for total casework closure, a reduction on last year



62,630kg CO2e, reducing our carbon footprint

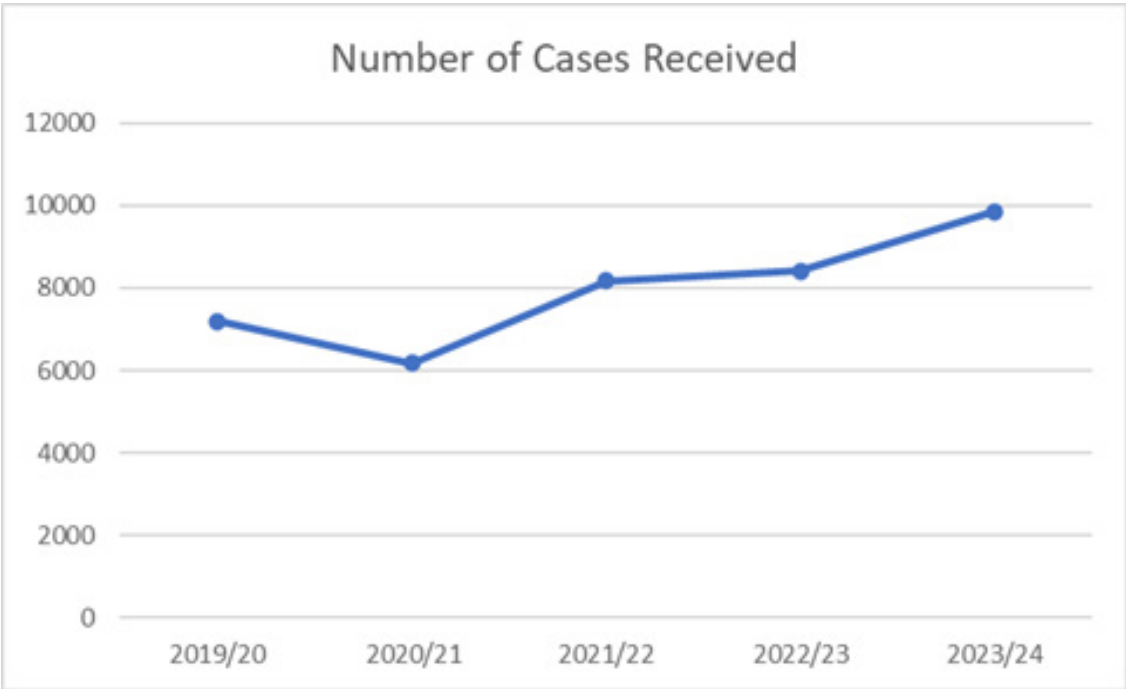
Strategic Aim 1: Delivering justice

Introduction

More people are contacting us than ever before.

9,863

We **received** 9,863 cases¹ (enquiries, pre-assessments and complaints about public services and Code of Conduct), up by 17% from the previous year's total of 8419. This continues an upward trend of our caseload, which has increased by 37% since 2019/20.



6,630

We received 6,630 enquiries and Code of Conduct pre-assessments. These are cases that we cannot look into because the issue or the organisation is not one we can investigate, or because we do not have enough information about the concern.

¹ In the Appendix we explain in more detail some terms that we use to describe our cases





3,233 of these were complaints about public services and the Code of Conduct; **5%** more than we received last year:

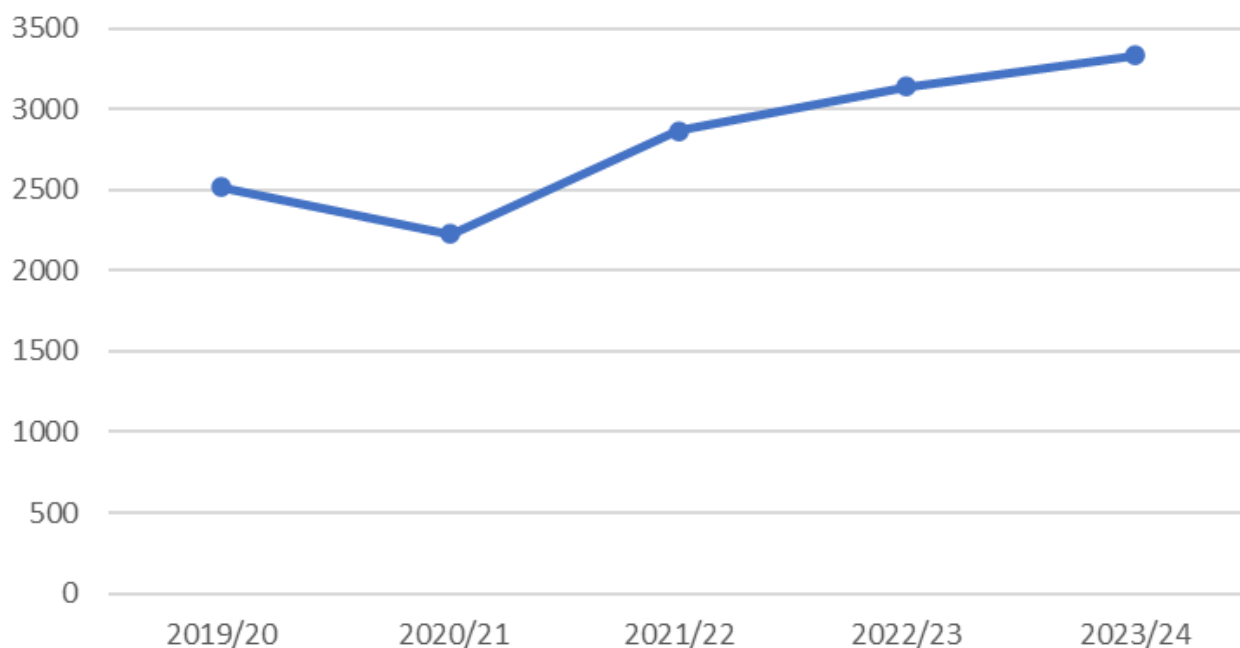
2,905 public service complaints, up by **4%**

328 Code of Conduct complaints, up by **16%**

We had 553 complaints that we did not close and were brought forward from the previous year. In total, we handled over 10,000 cases during the year; the highest we have ever handled.

We also **closed** the highest number of cases: 9,771, up by 15% from last year. Most of these are enquiries or complaints closed after we make an initial check and we offer advice or point complainants to another organisation for help.

Complaints Closed



3,331

We **closed** 3,331 complaints about public services or the Code of Conduct; a 6% increase on last year and a 24% increase since 2019/20:



3,020
(+6%) public service
complaints

311
(+11%) Code of
Conduct
complaints

We have reduced the number of cases that are open at the end of the year to **481** cases that we have not yet closed.

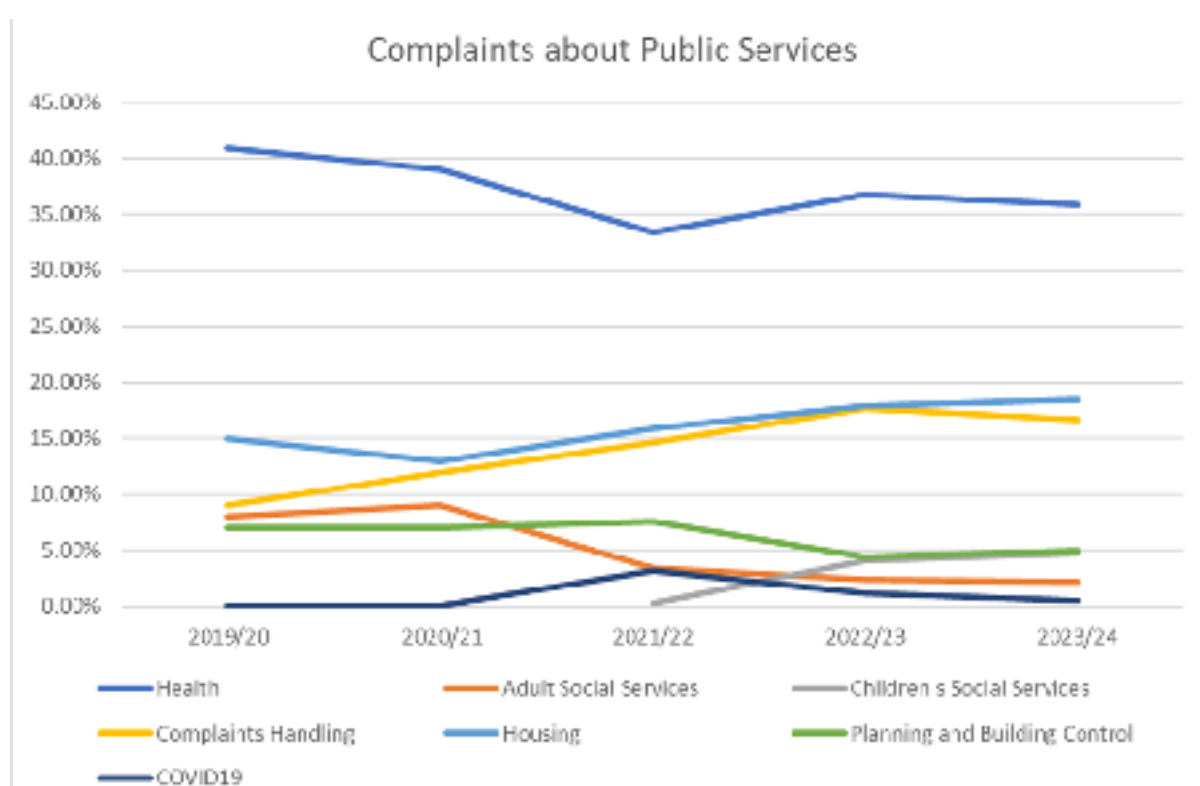
We reduced our aged investigation² cases by over **70%**.

² An aged case is a complaint we have been investigating for more than 12 months

Our complaints about public services

New complaints about public services

We received more complaints about public services than ever before. However, we are seeing proportionately fewer complaints about health and complaints handling.



Complaints about health remain the most common subject of our complaints overall. Although the total number of health complaints has risen, their proportion relative to the total number of complaints we received is decreasing.

Clinical treatment in hospital remains the category with the highest number, making up **44%** of all health complaints.



Complaints about GP treatment make up 16%.



Despite making up most of our health complaints, we have seen a reduction in the numbers we received about both these services from last year.



There has been an increase in complaints about adult and children's mental health services and appointment procedures, primarily in Health Boards.



We have worked with Housing Associations in improving the ways they signpost to us in our role as Complaints Standards Authority for Wales. As a result, housing complaints have increased rapidly over the past five years, although the rate has slowed in the last year.



Complaints about Adult Social Services have seen a decline over a five-year period. However, complaints about Children's Social Services have started increasing over the past three years.



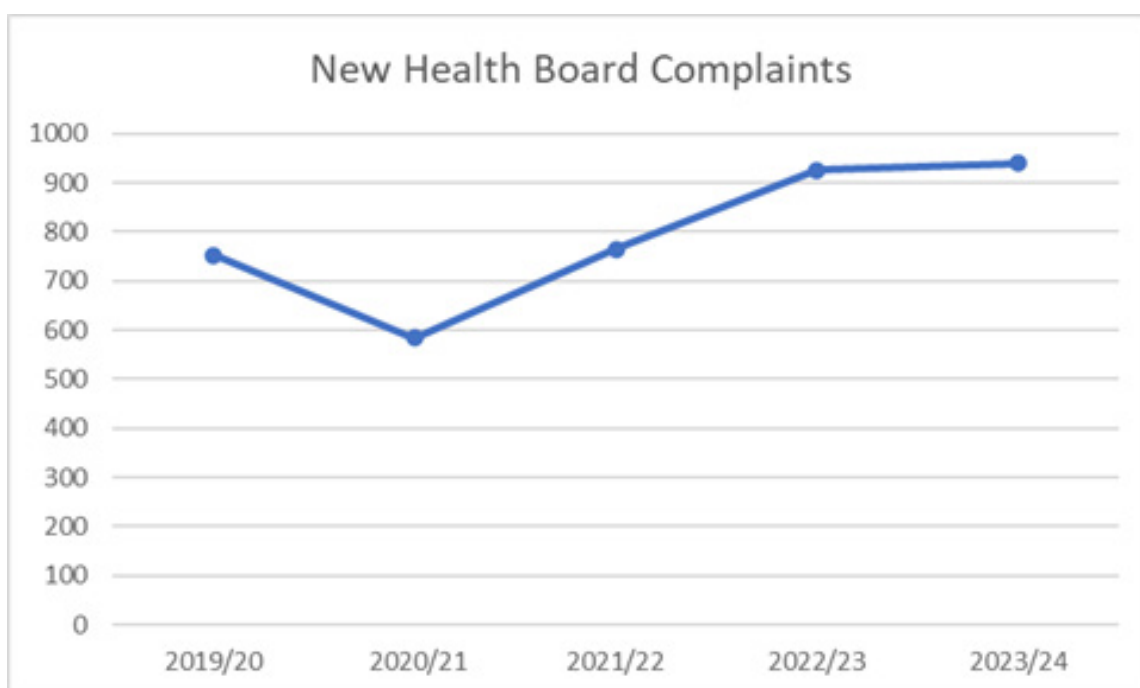
We received fewer complaints about complaint handling this year, following several years on the rise. This may be because of the work public bodies have put into action after attending our complaints standards training, but it is too early to say definitively if this is the case.

Health Boards



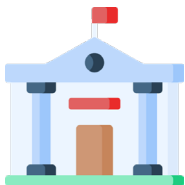
We received **939** complaints about Health Boards. This is a **31%** increase in complaints over the past 5 years. However, the 1% rise on the previous year, suggests the rate of increase in Health Board complaints has slowed down.

We still received more complaints about Betsi Cadwaladr University Health Board than any other Health Board, despite a small decrease in the overall number. However, when we consider the population figures for each Health Board, Hywel Dda University Health Board had the most complaints per 1000 residents³.

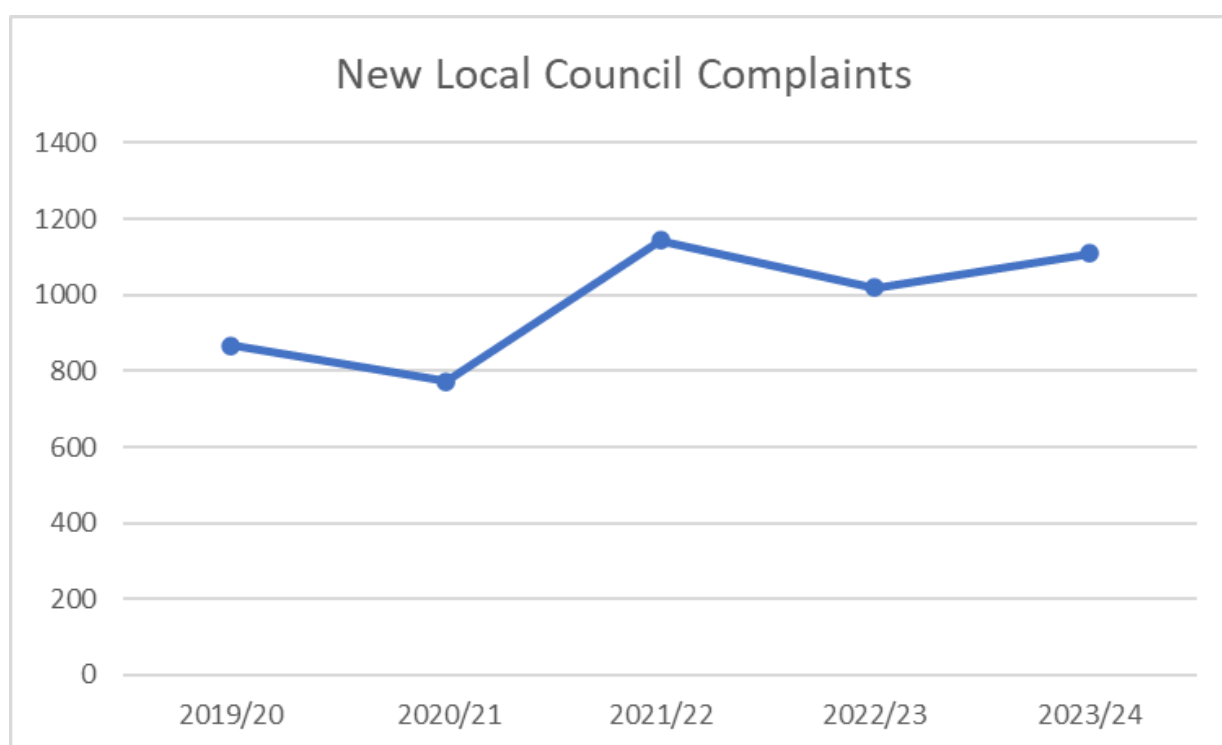


³ Population estimates by local health boards and age (gov.wales): <https://statswales.gov.wales/Catalogue/Population-and-Migration/Population/Estimates/Local-Health-Boards/populationestimates-by-lhb-age>

Local councils



People made **1,110** complaints about local councils, an increase of **9%** on the previous year and a **28%** increase over the last five years. Unsurprisingly, the councils with the largest number of residents generate the highest number of complaints. The council with the highest proportion of complaints per head of population was the Vale of Glamorgan⁴.

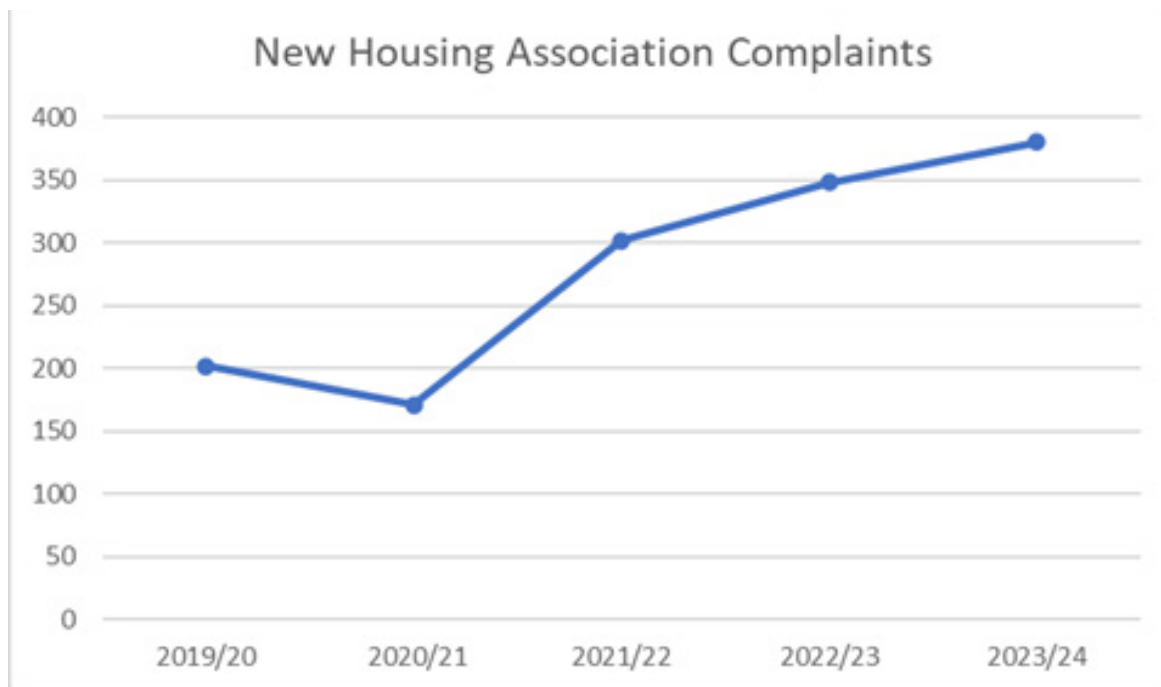


⁴ Population estimates by local authority and year (gov.wales): <https://statswales.gov.wales/Catalogue/Population-and-Migration/Population/Estimates/Local-Authority/populationestimates-by-localauthority-year>

Housing Associations



We received **380** complaints about Housing Associations. This is a **9%** increase from the previous year and a **47%** increase from 2019/2020. Repairs and maintenance still make up nearly half of the complaints we receive about Housing Associations, remaining at 48% for a second year.

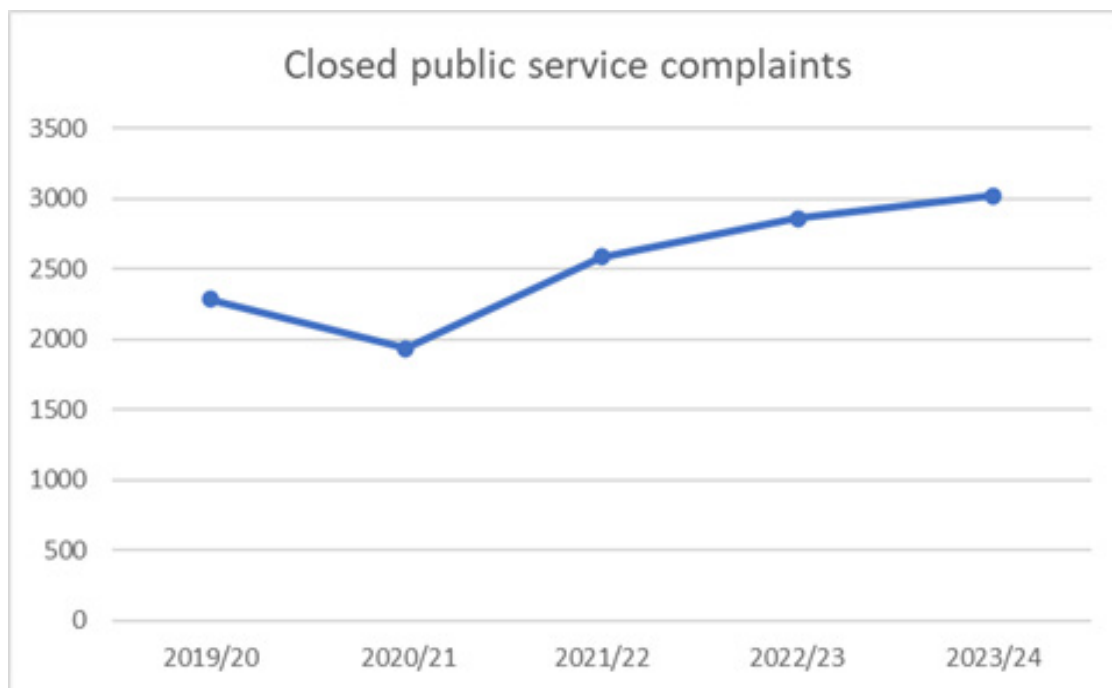


Closed complaints about public services

By tracking how many complaints we close, we can better understand our efficiency in handling cases. We once again closed a record number of complaints this year, closing 6% more, despite the increase in the number of cases received.

We know that people who complain to us often need urgent help. Our staff have worked hard this year to address complaints, to intervene quickly and minimise delays. Closing additional complaints means we were able to put things right for even more people this year.

Overall, we intervened in **596** or **20%** of the complaints that we closed. The proportion of our interventions was only slightly higher than last year (19%). However, because we increased the number of the complaints that we closed this year, we were able to put things right for many more people.



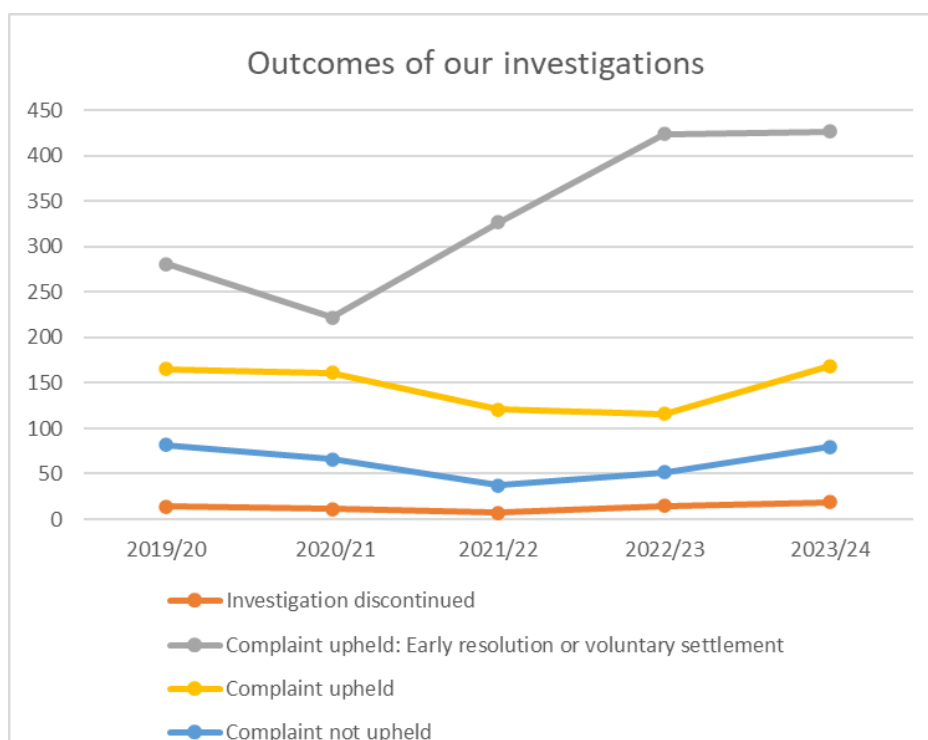
What is an intervention *i*

Intervention means that we found that the body made a mistake and it needs to put things right.

We can intervene without investigating or by suggesting an Early Resolution. We can also intervene after we investigated - by publishing a report which upholds a complaint, or by suggesting a settlement between the body and the person complaining.

In general, we would want our intervention rate to be low.

We understand that many people who complain to us want a swift resolution, as investigations can take significant time; they also use significant resources for us. Our goal is to close complaints promptly. This year, we achieved timely closures on 72% of our complaints when we agreed an Early Resolution or voluntary settlement without conducting full investigations to resolve cases.



Despite our increased workload, we exceeded our target of reducing our aged investigation (those over 12 months) cases by **50%**. We managed to reduce our aged investigations by over 70%.

We have also reduced the cost for each case and investigation we handle to the lowest cost to date.

How quickly we consider complaints

We understand that the people who come to us want their complaints resolved as rapidly as possible, and we are committed to dealing with them in a timely manner. We are pleased that we assessed incoming complaints or intervened with an Early Resolution, within 4 weeks; well within our target of 6 weeks.

The increasing number of investigations we carried out last year and the fact that many of these cases were aged cases, impacted our investigation time targets. Investigations took, overall, 15% longer than we had hoped for.

However, as we closed over 70% of our aged investigation cases, this has had the effect of reducing our individual Investigation Officers' case holdings to more manageable levels. This has placed us in a good position from which we can aim to improve the timeliness of our investigations during 2024/25.

Detailed performance information against our targets can be found in the Appendix.

3,020 We closed 3,020 complaints about public services – 6% more than last year.

Assessing complaints

2,739
(+3%)

We closed 2,739 complaints after we assessed them, 3% more than last year.

We look at all complaints carefully, to decide if we should investigate and whether things need to be put right.

There are many cases that we cannot - or decide not to - take further action on, or we may intervene by resolving the complaint early. However, assessing all these cases requires a lot of detailed work from our staff.

We closed **2,323** complaints at assessment because we did not have the powers to investigate them further, or they had come to us prematurely.

We closed **416** complaints by intervening early, a small increase on last year (1%) but a 52% increase since 2019/20.

Investigating complaints

281
(+38%)

We closed 281 complaints after we had investigated them, 38% more than year.

We only investigate in more complex cases that we cannot resolve in any other way. Most of our investigations related to health.

With our caseload increasing year on year, it is even more important that we investigate only when there is no other way for us to deliver justice.

99: We did not uphold the complaint, or we discontinued the investigation.

182: We upheld the complaint or agreed a voluntary settlement.

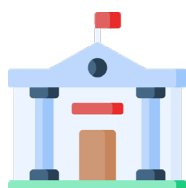
Health Boards



We intervened this year in **31%** of the complaints about the Health Boards that we closed – slightly higher than in the previous two years (30%).

The Health Board with the highest intervention rate was Aneurin Bevan University Health Board at **37%**, while we saw the lowest rate of intervention for Powys Teaching Health Board at **14%**.

Local councils



We intervened this year in **15%** of complaints about local councils. This was slightly higher than last year (14%).

The council with the highest intervention rate was Isle of Anglesey, at **24%**. We did not intervene in any complaints about Conwy County Borough Council.

Housing Associations



We intervened this year in **10%** of complaints about Housing Associations – compared to **13%** last year.

For many Housing Associations, we only investigate a small number of complaints, if any at all, and all our interventions were resolved early, at the assessment phase.

We include details of our performance against our targets in the Appendix.

Recommendations

When we find that something has gone wrong with public services, we recommend that the body that provided those services puts things right.

In 2023/24, we issued 1,679 recommendations to public service providers – a 33% increase compared to the previous year, because of the increase in complaints we have received and closed.

As in previous years, we most commonly recommended that the organisation should apologise – with this type of action making up almost a third of our recommendations.

Whilst it is not our primary remedy, we sometimes recommend financial redress – for example, for the complainant's time and trouble in bringing a complaint to the Ombudsman, or for distress caused to the complainant.

However, most people who approach the Ombudsman are not seeking financial remedies. Most people who complain to us want to make sure that others will not have to face the same injustice.

About 20% of our recommendations this year were about taking steps to make sure that services improve – for example, through training or feedback for staff, review of current practice, or us recommending that a procedure should change.

Compliance

Our recommendations aim to put things right, secure justice and improve services for the benefit of the public - not just for those who complain. In practice, public bodies routinely carry out the actions we suggest.

When we make recommendations, we agree a date by which the organisation needs to comply and we ask them to send evidence that they have complied. During the year, we have continued our efforts to ensure that organisations show us how they complied with our recommendations and changed the way we measure this to focus on timely action.

97% of our recommendations were complied with in 2023/24. 67% of these were in time with the target date agreed.

We now hold quarterly meetings with the largest public bodies to discuss compliance with our recommendations. We have also established a new way of measuring performance on compliance for public bodies in Wales and reviewed our escalation policy for when targets are missed. We have zero tolerance for public bodies not complying with the agreed targets.

If organisations do not comply with our recommendations, we can issue a 'Special Report', which is a public report. We issue very few Special Reports – none were issued in 2023/24.

Our complaints about the Code of Conduct

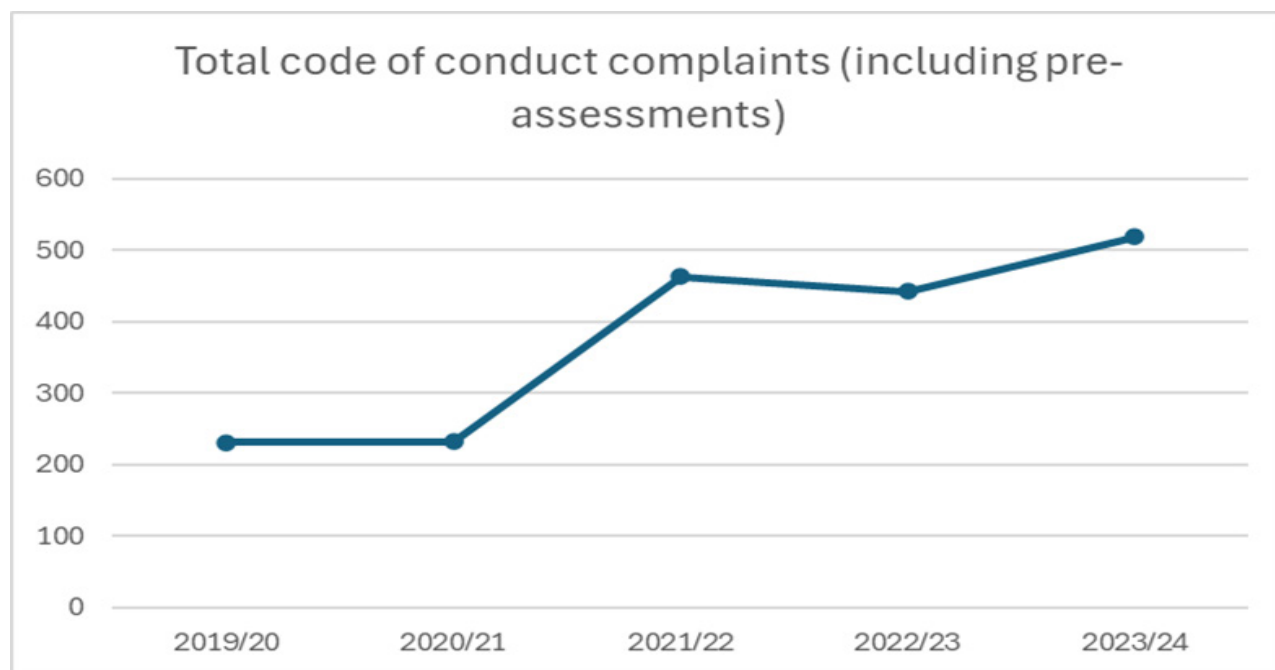
The Model Code of Conduct, introduced in Wales in 2008, sets out a set of enforceable minimum standards for the way in which councillors and members of some other public bodies⁵ should conduct themselves, both in terms of their official capacity and (in some instances) in their personal capacity as well.

New Code of Conduct complaints

We received more complaints about the Code of Conduct this year, following a small drop in the previous year.

Of these, 176 were complaints about town and community councillors, 151 about Principal council councillors and 1 regarding a national park councillor.

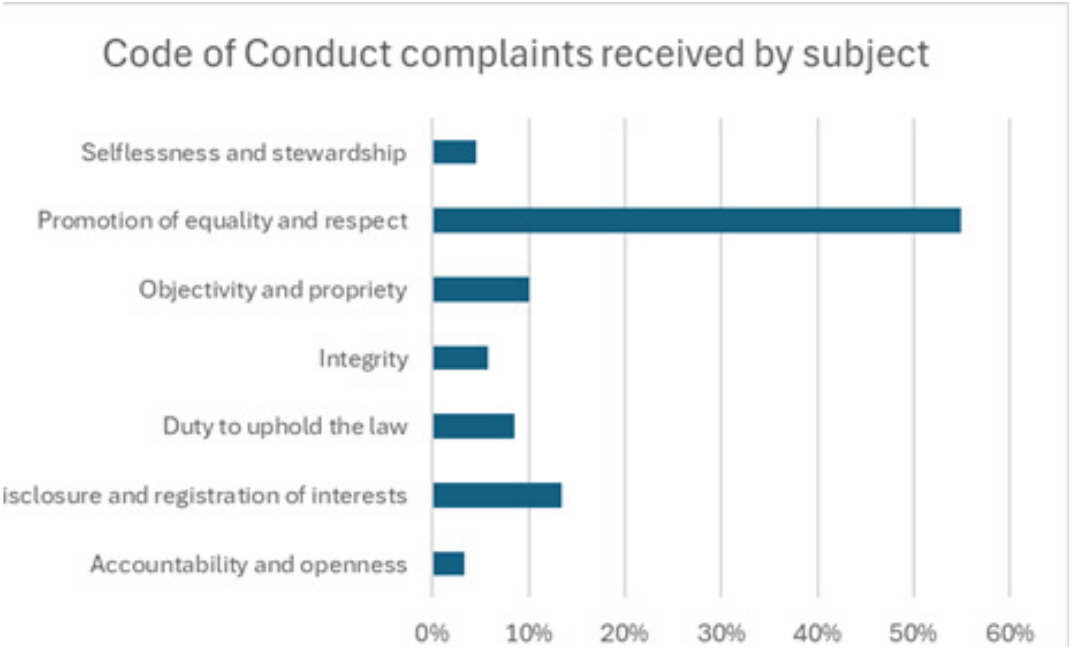
We received 518 complaints about the Code of Conduct but only had enough information to investigate 328. This was 16% more than last year.



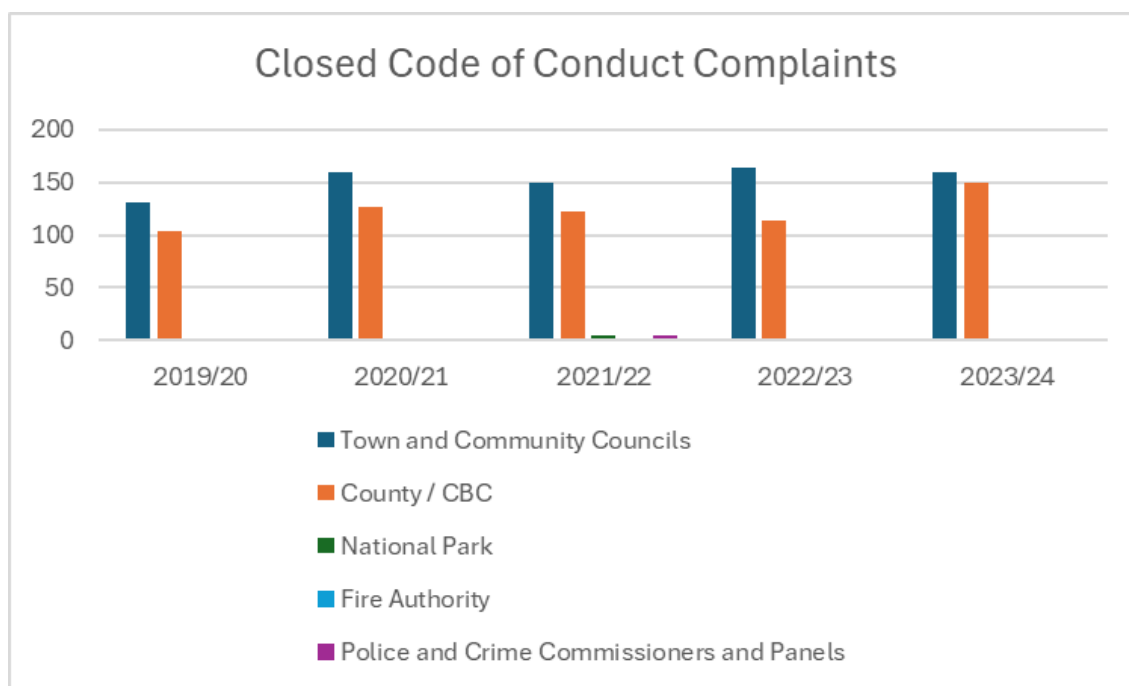
⁵ The public bodies that the Model Code of Conduct applies to include: local authorities; town and community councils; fire and rescue authorities; national park authorities and police and crime panels in Wales.

We analyse and report on the subject of the Code of Conduct complaints, based on the [Nolan Principles](#), which are designed to promote high standards in public life. 55% of the complaints that we could investigate were about the promotion of equality and respect. This was a lower proportion than last year (61%).

Generally, the cases that we categorise under 'respect' are lower-level complaints. These are the ones where we tend to decide quickly that we will not investigate or where we recommend the complaint is best resolved locally. The complaints that we categorise under 'equality' commonly involve more serious allegations of bullying or discrimination.



Closed Code of Conduct complaints



We investigated a higher proportion of Code of Conduct complaints this year than last year. We referred 21 Code of Conduct cases to either the relevant Standards Committee or the Adjudication Panel for Wales. 85% of our referrals were upheld.

We apply our 'public interest test' to decide which cases we should investigate. Public interest can be described as something which is of serious concern or benefit to the public.

Generally, we investigate only a small proportion of the Code of Conduct complaints we receive. This shows that the standards of conduct in local government are generally good.

In 2023/24, we assessed 311 complaints about the Code of Conduct - an increase of 11% on the previous year.

We investigated 48 of these complaints: 13 more than we investigated last year.

It is not up to us to decide whether a councillor has breached the Code. We investigate and consider that there may have been a serious breach of the Code of Conduct and we then refer the complaint and our findings to a local Standards Committee or to the Adjudication Panel for Wales to determine.

These bodies then independently look at the evidence we have gathered, together with any information put forward by the councillor concerned.

They then decide whether the councillor breached the Code of Conduct and if so, what sanction to impose.

In 2023/24, we referred 21 complaints to the Standards Committees of the relevant local authorities and to the Adjudication Panel for Wales. This was a 43% increase than the previous year. This reflects the larger number of Code of Conduct complaints we investigated and closed this year.

Here, we give examples of two decisions, following our referrals, that the Adjudication Panel for Wales issued this year.

Case example 1

It was found that a former member of Mumbles Town Council made a series of vexatious complaints to our office targeting a small group of the Council's members. She also covertly recorded a confidential session of a Council meeting and had offered to play the recording to a member of the public. Swansea Council's Standards Committee decided that the Former Councillor had failed to comply with the Code of Conduct and decided to censure the Former Councillor, whilst noting that, had they remained a member of the Council, it would have suspended them for 6 months.

The Former Councillor went on to appeal the decision of the Standards Committee to the Adjudication Panel for Wales, who endorsed the decision. Its decision can be found [here](#).

Case example 2

Whilst investigating a complaint about a member of Ceredigion County Council and Aberystwyth Town Council, the Ombudsman issued an interim report to the Adjudication Panel for Wales ('the APW'), recommending that it was in the public interest for the Councillor to be suspended immediately from his role as a councillor on both local authorities, pending the conclusion of the investigation of the complaint.

The [APW's Interim Case tribunal](#) agreed that it was in the public interest to suspend the Councillor for a period of up to 6 months, pending the outcome of the Ombudsman's investigation. The investigation has now been concluded and the case will be determined by the Adjudication Panel during 2024/25.

Independent review

On 26 March 2024, the Ombudsman was informed by a member of the public that a member of staff had been making inappropriate and unacceptable social media posts of a political nature. The member of staff was promptly suspended pending a disciplinary investigation and shortly afterwards resigned from her role.

The demonstrable independence, fairness and impartiality of the Office are core to our work and so the Ombudsman appointed Melissa McCullough (Standards Commissioner for the Northern Ireland Assembly and for the Jersey & Guernsey States Assemblies) to undertake an independent review of our handling of our Code of Conduct complaints.

The aim of the review is to provide assurance on whether our Code of Conduct processes, delegations and decisions have been sound, free from political bias and that any lessons are learned from what has happened. The Terms of Reference for the review can be found [here](#).

Once completed, we will share the final report on the review with the Senedd's Finance Committee and publish it on our website. At the time of writing, we anticipate that this will be in the Autumn of 2024.

The quality of our decisions

We do our best to make sure that we handle complaints fairly and in a transparent way. We have a process to deal with requests for a review of our decisions. Those reviews are considered by a member of staff who was not previously involved in the case.

Review requests

In 2023/24, we received 198 requests from complainants asking us to review our decision. This was 16% less than the previous year. In addition, we had carried forward 13 requests from the previous year. We managed to deal with 191 of these requests.

Once we have issued our review decision, we sometimes receive further correspondence from complainants. We log these as a 'follow-up'. Last year, we received 27 of these, which is 42% less than the previous year. We responded to all that we received.

We upheld 8% of the review requests that we dealt with – about the same proportion as in 2022/23. We include follow-ups in this calculation as we take care to consider everything sent to us. This is a very small number of our complaints overall (0.5%) and gives us confidence that our process is sound.

Where we upheld a review request, as in previous years, this was occasionally because we received more evidence from the complainant. However, our review sometimes concludes that we could have done more. When this happens, we take steps to make sure we learn any lessons.

Cases subject to judicial review

The Ombudsman is a Corporation Sole. This means that the person appointed to the role is fully responsible for casework decisions. Complainants can request an internal review of a casework decision that they are unhappy with (we talk about this in more detail in the 'Quality of Our Decisions' section of this Report). However, the appropriate route to challenge our decisions is through judicial review.

One application for permission to bring a judicial review to challenge a decision we took was made during 2022/23. This was refused by the High Court.

A case involving a former councillor who applied to the High Court for permission to appeal a decision of the Adjudication Panel for Wales to disqualify them from being a member of a local authority in Wales for 12 months in March 2022, remained ongoing during 2023/24. Permission has recently been refused. However, a further application will be considered by the Court in due course.

The quality of our service

We want to deliver an excellent service. We have 5 Service Standards that explain the service people can expect from us. Read more about our Standards [here](#).

To check how we are doing, every year we monitor and analyse our performance and gather feedback from our service users and from organisations that we look into.

What complainants think about our service

Every February, we organise a telephone survey of about 200 people who have complained to us during that year.

We are concerned that, despite an improvement in our feedback last year, the overall assessment of our customer service has declined. Only 40% of people said that they were happy with the service they received from us. This figure increased to 98% for those satisfied with the outcome of their complaint and dropped to 21% for people who were not satisfied with the outcome. Generally, people tend to be happier with our service if they are happy with the outcome of their complaint.

We take this feedback seriously and are considering ways we can provide a more personal, empathic and considerate service.



83% of respondents said we were easy to get in touch with

Complaints about our service

In 2023/24, we also handled 38 complaints about our service. Of those that we investigated and closed, we upheld or partially upheld 36%, the same as last year.

These complaints related to issues around how we communicated, how quickly we considered complaints and how we paid attention to detail. We communicated the findings internally to help ensure we do not make the same mistakes again.

To ensure that we are open and accountable, if people are unhappy with how we handled their complaint about us, they can ask for that complaint about our service to be considered by an external independent review service. During 2023/24, 12 people referred their complaints about our service to our external review service compared to 19 last year. These referrals often raise several issues that the complainants want reviewed. The external review service upheld 10% of issues raised in these complaints.

What organisations think about our service

We also invite comments on our work from the organisations that people complain about.

This year, we issued an online survey to 78 public bodies. We asked them for comments on their most recent complaint with us, as well as on our work in general. We received 22 complete responses. The results were broadly positive and showed improvement in critical areas. Overall satisfaction with our service scored 8/10 (the same as last year).

We also held three Sounding Board sessions in March and April 2024, with local councils, Health Boards and Housing Associations. We had feedback on the concerns public bodies had about the challenges they face and our deadlines, questions about the new own initiative investigation and we were able to provide advice on non-responsive complainants.

90% felt our findings positively influence their organisation, up from 84% last year.

Service quality

In the last year, we enhanced our focus on our Service Quality provision. The goal of this function was to provide feedback to our staff, and management, on how the actions of our investigation officers, in their day-to-day handling of complaints, impacted the level of service we provided to the general public.

Service Quality operates in real time – checking investigations which are still ongoing, giving us the opportunity to remedy poor service more quickly – as opposed to providing feedback on a closed case.

We created a multi-point check for every case we reviewed and, with a small Service Quality provision, completed 204 checks throughout the year. We set an ambitious target in the first year of operation – 75% of cases checked with little or no feedback.

Overall, our Service Quality checks highlighted the hard work and dedication of our investigation officers – providing a good service on often challenging and complex matters – with 67% of cases checked meeting our threshold.

We'll look to develop our Service Quality approach as time goes on, ensuring that the feedback we provide ensures that we give the best service possible to the people of Wales.

Whistle-blowing Disclosure Report

Since 1 April 2017, we are a 'prescribed person' under the Public Interest Disclosure Act 1998. The Act provides protection for employees who pass on information concerning wrongdoing in certain circumstances. The protection only applies where the person who makes the disclosure reasonably believes that:

1. They are acting in the public interest, which means that protection is not normally given for personal grievances.
2. The disclosure is about one of the following:
 - Criminal offences (this includes financial improprieties, such as fraud)
 - Failure to comply with duties set out in law
 - Miscarriages of justice
 - Endangering someone's health and safety
 - Damage to the environment
 - Covering up wrongdoing in any of the above categories.

As a 'prescribed person', we are required to report annually on whistleblowing disclosures made in the context of Code of Conduct complaints only.

In 2023/24, we received 30 Code of Conduct complaints that would potentially meet the statutory definition of disclosure from employees or former employees of a council. 18 of these complaints related to the promotion of equality and respect.

We investigated 11 of these complaints. We have not closed any of those investigations to date. We concluded 4 investigations that were

ongoing since 2021/22 and 8 that were ongoing from 2022/23. We found no evidence of breach in relation to one of those cases. Of the remaining, 7 were referred to Standards Committees and 4 to the Adjudication Panel for Wales.

Of the 4 referred to the Adjudication Panel for Wales, a member of Flintshire County Council was suspended from office by the Panel for a period of 4 months, following a hearing during 2024/25. The other 3 cases are awaiting hearing by the Panel.

5 of the investigations opened in 2022/23 and 11 from 2023/24 were still ongoing at the year-end.

Strategic Aim 2: Increasing Accessibility and Inclusion

We want to make sure that we offer a fair and equal service to all. We had some successes this year, but we will continue to work to improve how accessible we are.

We publish detailed information about the profile of people who complain to us in our Annual Equality Report. You can read our Annual Equality Reports [on our website](#).

Our Accessibility

Awareness of our service

Every two years, we commission research to check how many people in Wales know about our services. This year's results tell us that people are more aware about the work that we do and there is a high level of understanding and trust in our Office.

More people believed we are impartial (82%) and 87% of the people surveyed felt they could approach us if they needed to. However, there still is some confusion about the independence of our role, as a large proportion of people believe we can act on their behalf, whereas our role is to independently investigate complaints.

Contacting us

Some people may find it more difficult to complain than others and there are many ways in which we can help. 83% of our complainants said that we are easy to contact. This was a disappointing drop from the previous year (87%).

While most people complain to us online, by email or by post, we can accept complaints that are not in writing. This year, we took 103 oral complaints, a lower rate than in the previous two years. We know that this service is demand-led and we need to do more to make sure that we promote the option including on our social media and at engagement events.

Additional support

We always check if people who complain to us need additional help and support. When someone contacts us, we ask how they prefer to communicate: by phone, email, or post and if they need us to adjust our service to better meet their specific needs. This year, 79 people requested extra help using our service, the same number as last year.

This year, we reviewed our internal policy on additional support. We also provided training for our staff on learning disabilities and the specific access support that learning disabled people might need.

Website

We launched our new website with additional features to enhance accessibility and improve the user experience. The site was accessibility tested during its development by a group of neurodivergent testers, from All Wales People First. We have incorporated the feedback into the new site.

Accessible resources

We aim to make the information we publish and send to people as accessible as possible and we use Plain English / Cymraeg Clir unless it cannot be avoided for legal reasons. This year we also produced two new visually accessible [factsheets](#) about our public services and Code of Conduct work.

Including everyone

Diversity and Inclusion

We published our new Strategic Equality Plan 2023-2026 in November 2023. The plan explains our four Equality Objectives and where we plan to be in three years' time. More information about our Equality Objectives can be found on our [website](#).

The number of disabled people who use our services has continued to increase. People who identify as LGBTQ+, women and people who have diverse religious faiths are also well represented. However, people who are from poorer socio-economic groups are less represented in our complainants.

Outreach activities

The focus of our outreach work is to raise awareness of our services, especially amongst those who are under-represented in our complainants.

Our target communities are:

- young people – this is our priority group
- people from diverse ethnic backgrounds
- people from diverse national backgrounds
- disabled people
- Welsh speakers
- people experiencing socio-economic disadvantage



We attended several events to promote our services, including the Minority Ethnic Communities Health Fair, and the Mastering Diversity Conference.

We want to use social media to help us reach out to more people, especially younger audiences. We opened an [Instagram](#) account in 2023 and have trebled the number of accounts we reach from our [Facebook](#) posts.

We are really pleased to see that people from our target communities are more aware of services this year than in previous years and hope that this will translate into more complaints from them.

Advice and advocacy bodies

24% of people hear about our services by word of mouth. This figure rises to 40% with young people. As well as attending events, we have been reaching out to advice and advocacy bodies to help us engage with our target groups. This year we met with 9 advice and advocacy bodies. We also attended events organised by advice and advocacy bodies where we were able to promote our services directly to the public and to other stakeholders, which gave us opportunities to increase the visibility of the Office.

We held a Sounding Board for advice and advocacy bodies which gave them the opportunity to raise issues and provide us with valuable feedback.

Welsh Language

We support the Welsh language and ensure that this is treated no less favourably than English in our work. We aim to meet Welsh speakers' needs. You can see our [Welsh Language Policy](#) on our website.

This year, 61 people asked us to communicate with them in Welsh, more than double than the number last year. However, we remain concerned with the low number of people choosing to communicate with us in Welsh.

We asked Welsh speaking complainants what they thought of our service. Most told us they had submitted their complaint in English, despite being very confident in their ability to speak, read and write in Welsh. The main reasons why they had done this related to concerns they had that the complaint would not be considered as quickly and that their correspondence with public bodies, relating to their complaint, was in English.

We believe we fulfil all Welsh Language Standards and we dealt with one complaint, received via the Welsh Language Commissioner regarding website clarity, promptly.

We reviewed the way we measure our impact on the Welsh Language and have revised our impact assessments procedures to strengthen the focus on the Welsh Language.

Strategic Aim 3: Increasing impact of proactive improvement work

Complaints Standards

In 2023/24, we continued our important work to introduce Complaints Standards to public bodies in Wales. Following our successful roll out to all Local Authorities and Health Boards, we have turned our attention to Housing Associations.

Our Complaints Standards Team is now working with 23 Housing Associations – meaning that **56 Public Bodies across Wales currently operate the model complaints policy.**

These 56 public bodies – including all Local Authorities, all Health Boards, Welsh Ambulance and now most Housing Associations – represent about 85% of the complaints which the Ombudsman receives. We have targeted these bodies to adopt the policy first, to provide the most benefit to people using their services.

Eventually, our model policy will apply to the entire Welsh public service – realising our vision of one complaints journey, regardless of where you live or who you are complaining to.

We also continued our work on standardising recording practices – working with our colleagues in the NHS and local authorities – and continued to publish this information twice a year on our website here: www.ombudsman.wales/published-statistics.

Standardising, and publicising, this data is important; not only to ensure that public bodies comply with our model policy, but also to ensure that public bodies have an appropriate focus on using complaints information to improve service delivery for everyone, not just those with the means and ability to complain. Our use of Complaints Standards data also allows us to better scrutinise performance, by being able to understand how many complaints each service is handling and how long complainants typically have to wait for an answer.

Our offer of free complaints handling training has remained popular and we provided 94 training sessions to public bodies across Wales in the 2023/24 year. **We have now provided more than 500 training sessions since September 2020.**

Our training, which has reached about 10,000 people in the last 3 and half years, includes a detailed discussion on accessibility – and how public bodies can ensure they receive all the complaints they should, from all parts of society. This helps contribute to our Equality Plan objective to positively influence the accessibility of local complaints processes.

Own Initiative investigations

We can undertake two different types of own initiative investigations: extended and wider.

Our extended investigations

Extended investigations happen when we are already investigating a problem and we extend the investigation to other issues or complaints.

In 2023/24, we closed 3 extended investigations.

Our reference: 202205543

A complaint was made against Betsi Cadwaladr University Health Board about a delay in removing a patient's appendix in 2019. We extended this investigation to include the actions taken by the Health Board following a scan in 2017.

We found that the Health Board should have arranged to remove the patient's appendix following the 2017 scan. This was a missed opportunity to avoid deterioration of the patient's health and was a significant injustice. Had we not started an extended own initiative investigation, the patient and the complainant would have been entirely unaware of the missed opportunity. This significant failing led to serious injustice to the patient and the complainant and would otherwise not have come to light. The serious failings identified resulted in the publication of a [public interest report](#) with recommendations that the Health Board should apologise and pay the complainant and the patient £10,000.

Our reference: 202205146

We extended a complaint made against Hywel Dda University Health Board to include services received by the complainant from Swansea Bay University Health Board.

No evidence of maladministration or service failure relating to Swansea Bay University Health Board was found.

Our reference: 202207320

We extended a complaint made against a Dental Practice in the area of Swansea Bay University Health Board when it refused to provide the complainant with further treatment.

We found that the Dental Practice's decision to refuse the complainant further treatment was influenced by the escalation of the complaint to our office. The complainant was penalised for following the Dental Practice's own complaints policy. The Ombudsman recommended the Practice should apologise to Mr A and offer him £500 in recognition of the injustice caused to him. She also recommended that it should review its complaint handling practices to ensure that they are in-line with relevant Regulations and "Putting Things Right", and invited the Health Board to undertake an audit of those patients that the Practice has removed from its NHS list of patients.

Our wider investigations

Wider investigations happen when we conduct a stand-alone investigation which does not relate to a complaint made by an individual.

During the year, we consulted on our proposal to undertake a **wider own initiative investigation** into the **administration of carers' needs assessments** with the specific local councils that we planned to investigate – Caerphilly, Ceredigion, Flintshire and Neath Port Talbot. The investigation started last June. We have gathered evidence from the 4 councils, their commissioned service providers and their staff. We have also heard from carers with lived experience of having their needs assessed. The investigative stage is complete, and the investigation report will be published soon.

We published a follow-up report to our previous wider investigation report, [Homelessness Reviewed: Revisited.](#)

The report outlined progress made in homelessness services in local councils since our 2021 wider investigation into **the administration of homelessness assessments and reviews**. We found that, while some positive action has been taken by the local councils, there are some areas in which further action could be taken to improve homelessness services across Wales.



Sharing our findings and insights

We believe that it is very important that we share findings and insights from our casework as widely as possible to help improve public services. We publish summaries of all our investigations on our website and share our public interest reports with a wide range of organisations, including the Welsh Government.

Public interest reports

When we investigate a complaint and we think that something has gone wrong, we usually prepare a report which explains our findings.

Sometimes, we decide to issue a Public Interest report. We do this, for example, when:

- there are wider lessons from our investigation for other bodies
- what went wrong was very significant
- the problem that we found may be affecting many people, not just the person who complained to us, or
- we had pointed out the problem to the body in the past, but the body did not address it.

When we issue a Public Interest Report, we draw attention to it in the media. The body must also publish an announcement in the press about the Report.

This year, we issued 8 Public Interest Reports – compared to 6 in 2022/23. You can find them on our website [here](#).

We follow up on the recommendations in our public reports to ensure that public bodies put things right for individuals who have suffered injustice and to improve services by, for example, ensuring the body takes steps to change processes and procedures to ensure that any systemic maladministration or service failure we have found is not repeated.

For example, in relation to the report we published about Swansea Bay University Health Board (case refs 202200425, 202201496 & 202200361), we are following up and monitoring the actions the Health Board is taking to audit its orthopaedic waiting lists to ensure that other patients are not unfairly treated, as a result of errors in the way the waiting list was managed.

Our reference: 202107105

We found a failure by Betsi Cadwaladr University Health Board to provide a patient with the expected level of care following surgery, which could have avoided a subsequent cardiac arrest and admission to the Intensive Care Unit.

Our reference: 202106392

We found that the deterioration and death of a patient with an umbilical hernia might have been prevented, had Cwm Taf Morgannwg University Health Board not missed two opportunities to appropriately admit him.

Our reference: 202004800

We found that a patient in the care of Betsi Cadwaladr University Health Board suffered permanent sight loss and will need life-long treatment, due to failings by Betsi Cadwaladr University Health Board.

Our reference: 202301069

We found that Aneurin Bevan University Health Board failed to offer 'fampridine', a potentially life improving medication that may help to improve walking for some patients with multiple sclerosis, to eligible patients in its area.

Our reference: 202206003

We found that Welsh Government had failed to ensure that local authorities were carrying out their duties in respect of providing sufficient accommodation for Gypsies and Travellers.

Thematic Report

We issued a thematic report 'Groundhog Day 2: An opportunity for cultural change in complaint handling?' which highlighted learning from our casework on health complaints and the opportunity for cultural change arising from the new 'Duty of Candour' on health organisations in Wales. We recommended that Quality & Patient Safety Committees in Health Boards should consider whether the option to provide staff investigating complaints with independent medical advice, is considered on a case by case basis and that they should ensure that lessons learned from our findings and recommendations are included in their Health Board's annual report on the Duty of Candour and Quality. You can read the Thematic report [here](#).

Our Equality and Human Rights Casebook

This year we published our fifth Equality and Human Rights Casebook.

We do not make definitive findings about whether a public body has breached an individual's human rights. However, if we find that something has gone wrong in the delivery of public services, we consider whether a person's human rights may have been engaged. If we think it is relevant, we comment on how the body providing the service considered those rights.

Our Equality and Human Rights Casebook assembles a selection of cases where human rights or equality issues have either been raised as part of the complaint or have been central to our findings. You can read the Casebook [here](#).

Annual letters

Every year, we send letters to Health Boards and local councils about the complaints we received and considered about them during the year. We do this to help these organisations improve their complaint handling and the services that they provide. The organisations must report this information through their internal governance arrangements and use it to see how they can improve. We publish all annual letters on our website [here](#).

Public policy

We use our expertise and the evidence from our casework to contribute to the development of public policy in areas such as health, social care and local government.

In 2023/24, we responded to 5 public inquiries and consultations.

One of our key responses was about proposals for a new tribunal system for Wales.

We welcomed many of the proposals contained within the White Paper but stressed the importance of minimising disruption and ensuring there is no loss of expertise within the Adjudication Panel for Wales and that a uniformity of approach and transparency is taken. We asked that the new body works with us in our role as Complaints Standards Authority in adopting our model complaints policy and procedures.

We also responded to the recommendations of the Independent Review of the Ethical Standards Framework, also known as the Richard Penn Report, advocating strongly that training for all members on the Code of Conduct should be mandatory.

During the year, we were pleased to have the opportunity to provide information about our public service complaints casework to the UK Covid-19 Public Inquiry, in relation to its work on 'Module 3: Impact of the Covid-19 pandemic on healthcare systems in the 4 nations of the UK'.

Engagement with Public Bodies

It is important that we directly engage with the bodies in our jurisdiction and other stakeholders operating in the sectors which account for most of our complaints.

As part of this work during 2023/24, the Ombudsman met with chief executives and senior officials in several local authorities and health boards.

The Ombudsman also met with other key stakeholders responsible for the scrutiny of public services, such as Health Inspectorate Wales, Care Inspectorate Wales, and Audit Wales, as well as the Welsh Commissioners, the Equalities and Human Rights Commission and other Public Sector Ombudsmen across Ireland and the UK, to share relevant information and insights.

We use Memoranda of Understanding (MOUs) to set out how we communicate with organisations where we have shared responsibilities to ensure we work effectively and efficiently together. The general principles that underpin our agreements include recognising each other's statutory responsibilities and respecting each other's independent status. We have reviewed the MOUs with the following organisations this year:

- Dyfed Powys Police Authority
- Gwent Police Authority
- North Wales Police Authority
- South Wales Police Authority
- Llais Wales

Strategic Aim 4: Healthy, efficient and accountable organisation

Our people

We value and support our staff. We want to continue to support staff to develop the knowledge, skills and attitudes to continue to offer an efficient and professional service. We are also committed to creating a healthy, equal, diverse and inclusive workplace. We are proud of how our staff performed this year and our focus is on maintaining the health and well-being of staff.

Training and development

All staff are expected to complete 28 hours of training and development each year (pro rata for staff who work part time). In 2023/2024, 71% of our staff achieved this. This was lower than the proportion from last year (80%) and was primarily due to workload pressures.

Through our Performance Review & Development Process (PRDP), we make sure that each member of staff has clear objectives and priorities for the year ahead and that we review their progress regularly. New colleagues are set more immediate objectives and priorities. For staff returning from maternity leave or long-term sickness, we agree their objectives when they return. This year, all staff completed their PRDP

(except for those on long term sickness absence and those still on maternity leave).

This year, we have launched our new Graduate Trainee Programme and have advertised for a Welsh speaking Graduate Investigation Officer. The response has been promising and this three-year development programme will provide an excellent opportunity to a new Graduate whilst helping us meet our needs, especially in relation to Welsh language skills.

We are also looking to recruit an office apprentice and this, too, is a new initiative for us.

Health and wellbeing

We want our staff to be healthy and well.

The average percentage of working days lost through staff sickness decreased from 3.29% to 3%. This means that an average of 7.7 days per employee were lost because of sickness, compared to 8.59 days in 2022/23. However, this was mainly because of a small number of long-term sickness absences, with short term absences significantly lower than last year.

We have continued to offer our staff support to improve their wellbeing. This has included using stress risk assessments to help staff identify emerging issues. We also continued to offer Mental Health First Aider support to staff. We will continue to look for ways to handle work more efficiently and continue to recruit excellent staff when vacancies arise.

Equality, diversity and inclusion

Equality, diversity and inclusion are important to us – as a service provider and as an employer.

Every year we look at how well the profile of our staff reflects the population of Wales.

The proportion of people in our workforce who identified with diverse ethnic backgrounds is 6%, a drop from last year, but remains higher than the national proportion of the population of 5.4%⁶.

We do not have anyone under the age of 25 working for us at present but 4% of people identified as lesbian, gay, bisexual or other diverse sexuality, higher than the proportion of the population who identified as such in the latest census.

6% of our staff are disabled, a small increase from 5% in 2022, but significantly lower than the proportion of disabled people in Wales.

We also look at gender equality in our workplace. 77% of our current staff identified as female (compared to 70% last year).

Job applicants

For us to reflect the diversity in society, our aim is to attract more applicants from diverse backgrounds. Women, among our job applicants and staff, consistently outnumber men by a significant margin. 9% of people applying for our vacancies are from diverse ethnicities and 5% were sexually diverse, both higher than their population equivalents. However, only 4% speak Welsh as their main language and 9% told us that they were disabled, both much lower than population levels.

⁶ <https://statswales.gov.wales/Catalogue/Equality-and-Diversity/Ethnicity/1ethnicity-by-area-ethnicgroup>

Gender pay gap

We have further reduced our mean gender pay gap, from 12% to 8%. We can report, once again, that we do not have a median gender pay gap. For comparison, Chwarae Teg (the former charity supporting the economic development of women) estimated that the median Gender Pay Gap in Wales in 2021 was 12.3%.

Welsh language skills of our staff

Under the Welsh Language Standards, every year we measure the Welsh language skills of our workforce. In 2023/24, 8% of our staff said that Welsh was their main language. This was a reduction from 13% last year.

The proportion of people who spoke Welsh fairly well or fluently also declined from the previous year:

- Speaking: 21% (compared to 26%)
- Reading: 24% (compared to 31%)
- Writing: 21% (compared to 26%)
- Understanding: 21% (compared to 32%).

We supported 5 colleagues to undertake Welsh language training during the year.

Sustainability

We understand that we need to play our part in protecting the environment and continue to develop sustainable working practices. We produced 5,589 kg of waste. This was 68% less than last year and reflects the fact that, during the previous year, we downsized our office space and staff cleared their desks and cupboards. This figure now reflects normal waste flow. We were able to recycle 87% of waste and sent no waste to landfill.



We used 7% less electricity than last year.

The normal ways of working have been in place for a couple of years, allowing us to compare year on year figures for emissions produced by staff working at home, in the office or a mixture of both. We calculate this by considering how often people come to our office to work and how many hours they work at home. This year we saw an increase in these emissions of 5.8%. This could be because we have more people working for us and more frequent office attendance.

This was the first year we set a target for our carbon footprint, of 60,000kg of carbon dioxide equivalent (CO₂e) based on an estimation of our electricity use and staff emissions.

We produced 62,630kg of CO₂e slightly more than we had estimated. We aim to include waste in our emissions target for future years.

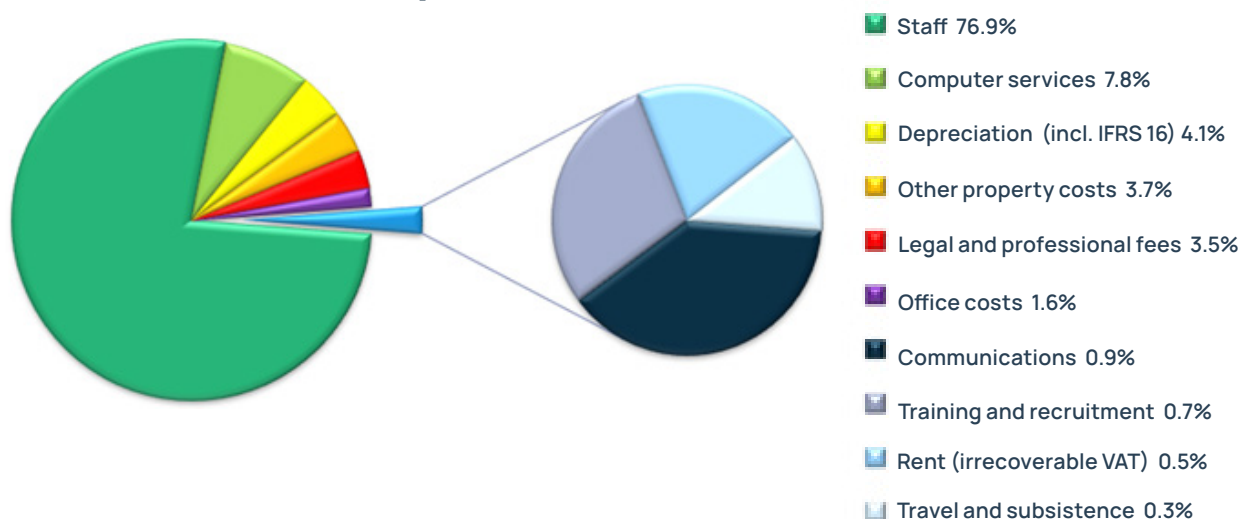
We are required by law to publish a report on our sustainability under the Biodiversity and Resilience of Ecosystems Duty (section 6 duty). We publish in that report detailed information on how we managed waste, used electricity and calculated commuting emissions.

Financial Management

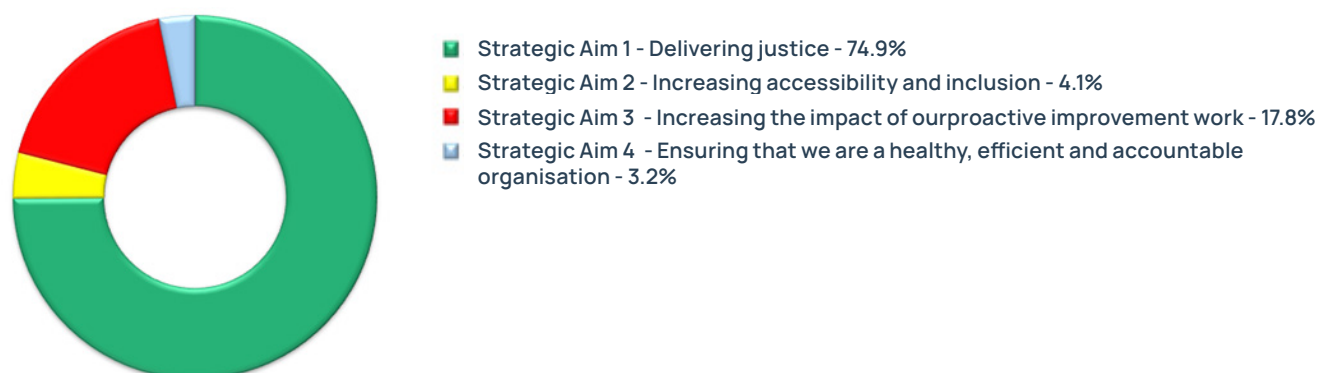
Overall resource and cash expenditure has increased as a result of the additional funding provided to us from the Welsh Consolidated Fund to fund pay awards, inflation and some investment in our strategic priorities.

	2023/24	2022/23	Change
Resource Out-turn	£000s	£000s	£000s
Total Resource	5,736	5,341	+395
Cash Requirement	5,729	5,308	+421

Gross Resource Expenditure 2023/24



Analysis of Spending by Strategic Aims



Casework Costs

As outlined in previous Annual Report & Accounts we present average costs as calculated for our main activity – receiving, considering, investigating and responding to enquiries and complaints. This is our activity under Strategic Aim 1, and we will use the analysis figures for Operating Costs by Strategic Aims, presented within these audited accounts.

The graphs below show firstly cost per case for the full enquiry and complaints work completed in the year and secondly for cases completed in the year.

Cost per Case for Total Office Casework Closure



Cost per Case for Total Office Complaints Closure



Note: These graphs are based on expenditure on this Strategic Objective and adjusted to 2023/24 prices. Figures reported in previous Annual Reports are not directly comparable due a change in approach during 2021/22.

The variation in costs per case reflects the fact that in 2023/24, case closures were the highest ever since the creation of the Ombudsman's office, whilst our costs were significantly lower when adjusted for CPI inflation as at March 2024.

Proactive powers

We identify expenditure related to the additional powers provided to the Ombudsman under the Public Services Ombudsman (Wales) Act 2019, and for 2023/24 this is as reported below.

PSOW Act 2019: Expenditure in 2023/24	£000s
Staff costs	334
Premises	19
Professional Advice for Own Initiative investigation	3
Computer Services	3
Office costs	1
Training and Recruitment	2
Communications	1
Total	363
Budget	368
Variance	5

The Senedd Finance Committee will conduct a review of the operation and effect of the Public Services Ombudsman (Wales) Act 2019 during 2024/25.

Expenditure to 31 March 2024 compared to previous year

	2023/24	2022/23	Reasons for significant changes
	£000	£000	
Salaries	3,211	3,017	Pay award of £1,925 for salaries less than £49,950, or 3.88%, for those above.
Social Security costs	326	314	
Pension costs	865	809	
Pension fund charges	38	28	
Total Pay	4,440	4,168	
Rent	28	28	
External Audit fee	21	17	
Legal and professional fees	180	243	Lower costs for professional advice
Other property costs	216	192	Air conditioning work carried out in 2023/24
Computer services	453	284	Hardware & security upgrades in 2023/24
Office costs	94	104	Reduced telephone & transcription costs
Travel and Subsistence	16	12	Increased travel post-pandemic
Training and Recruitment	40	42	
Communications	53	36	Increased engagement work in 2023/24
Depreciation	233	234	
Total other Administration Costs	1,334	1,192	
Gross Costs	5,774	5,360	
Income	(38)	(19)	Staff secondment to Senedd Commission
Net Expenditure	5,736	5,341	
Capital	-	-	
Net Resource	5,736	5,341	

More detailed financial information can be found in the financial statements and notes that support the accounts.

Michelle Morris

Accounting Officer

Public Services Ombudsman for Wales

23 July 2024

Accountability Report

2023/24



Corporate Governance Report

Under the Government of Wales Act 2006, the Office is financed through the Welsh Consolidated Fund (WCF) with any unspent cash balances repaid into the WCF after a certified copy of the accounts has been laid before the Welsh Parliament. This creates a further control, in that there is a need to effectively manage the budget on both a cash and a resource basis. The salary of the office holder of the Public Services Ombudsman for Wales and the related costs are a direct charge on the WCF and are administered through the Welsh Parliament.

As at 31 March 2024, the Office comprised 78 permanent full and part-time staff based in Pencoed, Bridgend including the Ombudsman, Chief Operating Officer & Director of Improvement, Chief Legal Adviser & Director of Investigations, as well as investigation and support staff.

The Welsh Parliament provided cash of £5.7 million for the funding of the Office. £17k of this overall funding is due to be returned to the WCF, being the unused cash balance at the year-end. The expenditure of the Office was kept within the Estimate agreed in November 2022 and amended by Supplementary Budgets during 2023/24.

As referred to previously in the report, our unit costs have fallen to their lowest levels and reflect the highest number of complaints and enquiries closed by the Office, whilst our costs were significantly lower, when adjusted for CPI inflation.

Remuneration and Pension Liabilities

Details of the pay and related costs of the Ombudsman and the Office are shown in the [Remuneration Report](#).

Pension obligations to present and past employees are discharged through the Principal Civil Service Pension Scheme (PCSPS) and the pensions paid directly to former Commissioners or their dependants.

Further details are given in the [Pensions Disclosures](#).

Corporate Governance

The office holder of the Public Services Ombudsman for Wales is a Corporation Sole.

The Audit & Risk Assurance Committee supports the Ombudsman by reviewing the comprehensiveness and reliability of assurances on governance, risk management, the control environment and on the integrity of financial statements and the annual report. Further details are set out in the Annual Governance Statement.

Register of Interests

A register of interests is maintained for the Ombudsman, Directors and members of the Advisory Panel and Audit & Risk Assurance Committee.

Accounts Direction

Under the Accounts Direction issued by HM Treasury dated 21 December 2006, the Ombudsman is required to prepare accounts for the financial year ended 31 March 2024 in compliance with the accounting principles and disclosure requirements of the edition of the Government Financial Reporting Manual (the FReM) issued by HM Treasury which was in force for 2023/24.

The accounts have been prepared to:

- Give a true and fair view of the state of affairs at 31 March 2024 and of the net resource out-turn, resources applied to objectives, recognised gains and losses and cash flows for the financial year then ended.
- Provide disclosure of any material expenditure or income that has not been applied for the purposes intended by the Welsh Parliament or material transactions that have not conformed to the authorities that govern them.

Auditors

The Auditor General for Wales is the External Auditor of the accounts of the PSOW as laid down in paragraph 18 of Schedule 1 to the Public Services Ombudsman (Wales) Act 2019.

The cost of the audit for 2023/24 was £21k (2022/23 = £17k).

As far as I am aware, I have taken all the steps necessary to make the auditors aware of any relevant audit information.

Michelle Morris

Accounting Officer

Public Services Ombudsman for Wales

23 July 2024

Statement of Accounting Officer's Responsibilities

Under the Public Services Ombudsman (Wales) Act 2019, as Public Services Ombudsman for Wales, I am required to prepare, for each financial year, resource accounts detailing the resources acquired, held or disposed of during the year and the use of resources by the PSOW during the year.

The accounts are prepared on an accruals basis and must give a true and fair view of the state of affairs of the PSOW and its net resource out-turn, Statement of Financial Position and cash flows for the financial year.

In preparing the accounts, as the Accounting Officer, I am required to comply with the requirements of the 'Government Financial Reporting Manual' and in particular to:

- Observe the Accounts Direction issued by the Treasury, including the relevant accounting and disclosure requirements and apply suitable accounting policies on a consistent basis.
- Make judgements and estimates on a reasonable basis.
- State whether applicable accounting standards as set out in the Government Financial Reporting Manual have been followed and disclose and explain any material departures in the accounts.
- Prepare the accounts on a going concern basis.
- Confirm that the annual report and accounts as a whole is fair, balanced and understandable.
- Take personal responsibility for the annual report and accounts and the judgements required for determining that it is fair, balanced and understandable.

My relevant responsibilities as Accounting Officer include the propriety and regularity of the public finances for which the Accounting Officer is answerable, for keeping proper records and for safeguarding the PSOW's assets, as set out in Managing Welsh Public Money and the Public Services Ombudsman (Wales) Act 2019.

As the Accounting Officer, I have taken all the steps that I ought to have taken to make myself aware of any relevant audit information and to establish that PSOW's auditors are aware of that information. So far as I am aware, there is no relevant audit information of which the auditors are unaware.

Annual Governance Statement 2023/24

Status of the Public Services Ombudsman for Wales

As laid down in Schedule 1 paragraph 2 of the Public Services Ombudsman (Wales) Act 2019, the Ombudsman is a Corporation Sole holding office under His Majesty. The Ombudsman discharges the functions set down in legislation on behalf of the Crown. Schedule 1 paragraph 19 states that the Ombudsman is the Accounting Officer for the office of the Ombudsman.

Scope of Responsibility

In undertaking the role of Accounting Officer, I have ensured that the office operates effectively and to a high standard of probity. In addition, the Ombudsman has responsibility for maintaining a sound system of internal control that supports the achievement of PSOW's policies, aims and objectives, whilst safeguarding the public funds and assets for which the Ombudsman is personally responsible, in accordance with the responsibilities set out in 'Managing Welsh Public Money'.

The Ombudsman is independent of the Senedd Cymru Welsh Parliament but is accountable to its Finance Committee for the use of resources provided. In determining the level of resources available to the office, the PSOW's budget proposals are considered by the Finance Committee of the Senedd Cymru Welsh Parliament in accordance with the process laid down in the Act. A combined Annual Report and Accounts is prepared for consideration by the Finance Committee.

I am required to include this Governance Statement with my annual report and accounts to explain how the governance of my office works and to ensure it meets the requirements of the Corporate Governance Code and The Orange Book: Management of Risk. To enable me to satisfy these requirements, I have maintained appropriate structures, systems and procedures that are comprehensive and provide me with evidence that the governance arrangements are working as intended across the whole organisation and its activities. Such arrangements include my Governance Framework, a comprehensive internal control environment, effective internal and external audit arrangements and robust financial management, risk planning and monitoring procedures.

Strategic Planning and Performance Monitoring

In my [Strategic Plan](#), which was launched in April 2023, for the three years 2023/24 to 2025/26, I established the following:

Our ambition for public services in Wales:

People of Wales feel that public services treat them fairly and respond when things go wrong; Welsh public services listen to individuals and use their complaints to learn and improve; Welsh local government is trusted to deliver the highest standards of conduct; and the Public Services Ombudsman for Wales continues to be an influential and respected voice in public service improvement.

Our Strategic Aims:

- **Strategic Aim 1: Delivering justice with a positive impact for people and public services**

We deliver an efficient, empathetic and proportionate service that supports justice and improves public services.

- **Strategic Aim 2: Increasing accessibility and inclusion**

People across Wales are aware of our office, understand how we can help them and our service is relevant and accessible.

- **Strategic Aim 3: Increasing the impact of our proactive improvement work**

We contribute to improvement in public services, through complaints standards work, wider learning from complaints and own initiative investigations and support high standards of conduct amongst councillors.

- **Strategic Aim 4: Ensuring that we are a healthy, efficient and accountable organisation**

We maintain and improve the efficient and effective use of our financial, staff and IT resources and ensure good governance, accountability and transparency.

Whilst individual teams within the office are charged with implementing the actions identified, the Management Team monitors progress made against targets and the outcomes achieved.

System of internal control

The system of internal control is designed to manage risk to a reasonable level, rather than eliminate all risk of failure, to achieve policies, aims and objectives; it can therefore only provide reasonable, and not absolute, assurance of effectiveness. It is based on an ongoing process designed to identify and prioritise the risks to the achievement of my policies, aims and objectives, to evaluate the likelihood of those risks being realised and the impact should they be realised and to manage them efficiently, effectively and economically. The system has been in place in the office of the PSOW for the year ended 31 March 2024 and up to the date of approval of these accounts and accords with HM Treasury guidance. No significant areas of internal control weaknesses have been identified from audit work and steps to improve controls further are implemented promptly and monitored by the Audit & Risk Assurance Committee.

Corporate Governance arrangements: Audit & Risk Assurance Committee

Governance arrangements include an Audit & Risk Assurance Committee (ARAC). The Committee's responsibilities are:

(A) Terms of Reference

The Committee supports me by reviewing the comprehensiveness and reliability of assurances on governance, risk management, the control environment and the integrity of financial statements and the annual report. The Committee has a scrutiny and advisory role and has no role or remit in relation to operational or casework decisions made by the PSOW.

(B) Membership

Membership comprises a minimum of four, and a maximum of eight, independent external members.

The membership of the Committee during 2023/24 was:

- Mr Ian Williams – Chair
- Mr Mike Usher – Vice Chair
- Mr John McSherry
- Mrs Joanest Varney-Jackson
- Dr Jane Martin CBE
- Mr Dave Tosh

More details on our independent members can be found on our [website](#).

(C) Training

Members of the Committee are invited to assess their training needs annually. An induction programme is provided for all new members of the ARAC. During 2023/24, members took part in two Workshops (July & November 2023) on Risk (facilitated by TIAA, who provide the internal audit service) and on PSOW finances, respectively. A further training session took place in January 2024 which allowed Members to observe staff and service delivery across a number of areas within the office (i.e. Intake, Assessments, Investigations, Review & Service Quality).

(D) Meetings

The Committee sets itself an annual work programme. There are generally four meetings of the Committee during the year.

The Ombudsman attends ARAC Meetings and the Chief Operating Officer acts as Secretary to the Committee. This year, the meetings were also regularly attended by internal and external auditors and appropriate members of the PSOW's Management Team.

At each meeting, the Committee received a number of standing agenda items. These included declarations of any identified fraud or losses, including any data losses.

At each meeting, the Committee received a copy of the latest Budget Monitoring report considered by the Management Team. This is intended to provide the Committee with an assurance that there is regular scrutiny of the financial position of the office.

During the year, the Committee also received reports on a number of other appropriate matters within its Terms of Reference. They included the 9 and 12 month accounts, internal audit plans, internal audit reports, a review of the Whistleblowing Policy, updates on major IT developments, relevant financial and corporate governance matters. The Committee considered cyber security risks and scrutinised arrangements in place to maintain cyber security. The Committee also reviewed the Office's counter-fraud and anti-corruption arrangements and policies, in the context of the Cabinet Office Counter-Fraud Framework.

The Committee provided advice to me to ensure that this 2023/24 Annual Governance Statement included appropriate information and complied with best practice.

A standing item is risk management. At each meeting, the Committee considered the full Risk Register, including a report on the greatest identified risks. The Committee explored and challenged the reported risks to satisfy itself that key risks had been identified. The overall approach to risk management and risk mitigation was discussed at a workshop facilitated by the internal auditors held in July 2023. In addition, the Committee undertook, at alternate meetings, an in-depth review of a specific risk selected from the risk register.

The Committee is chaired by an independent member and includes the Chair of the Advisory Panel. During the year, there was one other independent member of the Committee who also sits on the Advisory Panel. (This will end during 2024/25, after which only the Audit & Risk Assurance Committee Chair and the Advisory Panel Chair will sit on both the Audit & Risk Assurance Committee and the Advisory Panel.) There were 3 independent members who are not members of the Advisory Panel. The number of meetings attended, along with the number of meetings each member was eligible to attend, was as follows:

Committee Member	Maximum number of attendances possible	Actual number of attendances	% attended
Ian Williams (Chair)	4	4	100
Mike Usher (Vice Chair)	4	4	100
John McSherry	4	4	100
Joanest Varney-Jackson	4	4	100
Jane Martin	4	4	100
Dave Tosh	4	3	75

(E) Internal and External Audit

The Committee received regular reports from both the internal and external auditors. The work of internal audit during the year was planned, based on their overall needs assessment and carried out through their agreed annual programme. Their reports highlighted a satisfactory internal control framework within the organisation and made recommendations for improvement where necessary.

In all but one audit, the level of assurance was considered 'Substantial', the highest assurance level. A number of recommendations were made and these have either been completed or will be completed in accordance with agreed timescales.

The internal audits undertaken in 2023/24 and overall assessments were as follows:

	Assurance level
Governance – Corporate Planning	SUBSTANTIAL
People Strategy	SUBSTANTIAL
Business Continuity	SUBSTANTIAL
Health and Safety Management	REASONABLE
Key Financial Controls:	
Banking and Cash Management	SUBSTANTIAL
Budgetary Control	SUBSTANTIAL
Purchasing and Payments	SUBSTANTIAL

An advisory review was also carried out into risk management, which followed risk workshops held with both Management Team and with Audit & Risk Assurance Committee and Advisory Panel members.

In addition, an audit of previous internal audit recommendations was undertaken. This found that all previous recommendations had been implemented. The internal auditors' Annual Report for 2023/24 stated: 'TIAA is satisfied that, for the areas reviewed during the year, Public Services Ombudsman for Wales has reasonable and effective risk management, control and governance processes in place.' These findings also provide assurance that the arrangements in place are reducing the office's exposure to risk.

The Committee noted the thoroughness of the audit work, practicality of recommendations and the open and positive response of management to the recommendations made.

In respect of the previous financial year, the Committee considered the 2022/23 Annual Report and Accounts that included the Governance Statement of the office for 2022/23, together with the External Audit of Financial Statements Report and Management Letter. An unqualified opinion was given, following external audit work undertaken by Audit Wales, on the 2022/23 Accounts. There were no recommendations arising from the Audit.

Both Internal and External Auditors have the right to raise any matter through an open access policy to the Chair and, through that right, to bring any matter to the attention of the Committee. The Committee, by reviewing the programmes of both the External and the Internal Auditors, ensured that they were co-operating effectively with each other. The quality of the audit work has been evaluated during the year through consideration of the audit reports and recommendations and dialogue at meetings between Committee Members and the Auditors.

Before every formal Committee meeting, the Committee meets privately with representatives of the External and Internal Auditors. In addition, to ensure that appropriate matters can be raised in confidence, the Chair of the Committee holds an annual meeting with representatives of the External and Internal Auditors. Such a meeting was held on 1 May 2024.

(F) Monitoring processes

At each meeting during 2023/24, the Committee received a report on progress made on the implementation of External and Internal Audit recommendations. Committee members were satisfied that all the recommendations made had been implemented or would be implemented, in accordance with agreed timescales.

(G) Annual Review and Assessment

This annual review is undertaken to evaluate the work of the Committee and to ensure that the work of the Audit & Risk Assurance Committee continues to comply with the Good Practice Principles set out in the HM Treasury Audit Committee Handbook. To assist the Committee in determining that it was complying with good practice, each member was invited to complete the National Audit Office's 'The Audit Committee self-assessment checklist'. Comments received from Committee members were considered in preparing the Annual Review for 2023/24.

The ARAC Annual Review concluded that it had received comprehensive assurances and information that was reliable and sufficient to enable it to carry out its responsibilities. Those assurances demonstrated a satisfactory overall internal control environment, financial reporting and the management of risk and of the quality of both the Internal and External Audit work undertaken.

The Committee was therefore able to provide assurances to support me effectively, as Public Services Ombudsman for Wales, to comply with my Accounting Officer responsibilities. The Committee provided evidence to assist in the preparation of this Annual Governance Statement.

Corporate Governance arrangements: Advisory Panel

The Advisory Panel is a non-statutory forum whose main role is to provide support and advice to me in providing leadership and setting the strategic objectives of the office of the Public Services Ombudsman for Wales. The Panel also brings an external perspective to assist in the development of policy and practice. The Panel's work during the year included advising on the development of the new Strategic Plan and the Estimate for 2024/25, reviewing the organisation's performance and assessing the impact of the Ombudsman's proactive powers.

There have been no changes to the membership of the Panel in 2023/24.

The Advisory Panel has an advisory role and has no role or remit in relation to operational or casework decisions made by the PSOW.

Reporting of Personal Data Related Incidents

All incidents involving personal data are reported to the Audit & Risk Assurance Committee, regardless of whether PSOW is at fault. Where PSOW is at fault, guidance issued by the Information Commissioner's Office (ICO) is considered to establish whether it is necessary to report the incident to that office. In 2023/24, there was 1 incident which was reported to the ICO, involving data sent by PSOW but not received by the intended recipient and we are still waiting the ICO's outcome.

The Risk and Control Framework

As required by 'Managing Welsh Public Money', I am supported by a professionally qualified Financial Accountant who carries out the responsibilities of a Finance Director as set out in that document.

Risk management and the risk register are standing agenda items for the Audit & Risk Assurance Committee and the approach to risk management, together with risk appetite, is reviewed periodically.

I am continuing to enhance the robust internal control arrangements to ensure that the office has the capacity to identify, assess and manage risk effectively.

In undertaking this responsibility during the year ended 31 March 2024, I am supported by a Chief Operating Officer to whom some of my responsibilities have been delegated.

I am satisfied that the systems in place identify potential risks at an early stage and enable, through active management, the appropriate action to be taken to minimise any adverse impact on the office.

The Audit & Risk Assurance Committee receives regular reports on the risks relating to this office, explores the office's approach to those risks and provides comments and suggestions on current and emerging risks.

Risks are considered across a number of key areas or risk themes. These are:

- Casework
- Staffing
- Technology
- Financial
- Reputational
- Governance and Legal
- Data & Information Management

Key risks and issues

The last Annual Governance Statement (2022/23) highlighted two high risks. The first of these related to the impact of increasing numbers of complaints without a corresponding increase in resources. Progress in closing older complaint investigations and funding for an additional member of staff in 2024/25 mean that this risk has reduced and is now moderate/amber.

The other high risk was that future financial settlements might be insufficient to meet Strategic Plan priorities. Financial pressures continue, for the office and wider public services, but the 2024/25 estimate submission was approved and work is ongoing to secure efficiencies to mitigate financial pressures. The risk is currently moderate/amber.

The organisation, and the Audit & Risk Assurance Committee, have continued to recognise and work to reduce the risk of cyber-attack, malware, virus or ransomware on our IT systems. Whilst that risk remains, considerable work has been done during the year to reduce the likelihood and impact of a successful attack. This risk requires constant and active management, but the risk rating at the year-end was moderate/amber level.

However, events at the turn of the year (March/April 2024), involving the inappropriate social media posts of a (now former) member of staff, have had a significant impact on the reputation of the office and on staff. As the risks have materialised, they are issues with high/red rating. At the end of 2023/24, the two issues were:

Risk horizon	Risk and risk impact:	Risk management and mitigation:	Residual risk:
Reputation	<p>As a result of social media posts made by a (now former) member of staff and the negative media this has caused, there is a risk of a loss of public trust and confidence in PSOW and our ability to provide a service to complainants.</p> <p>Impact: significant damage to the perception of PSOW, with concerns that PSOW may not be impartial.</p>	<p>Extensive engagement with key stakeholders (including Finance Committee, key politicians, Monitoring Officers, Standards Committee chairs and Welsh Government), independent review into our Code of Conduct processes and past decisions.</p>	<p>The reputational damage caused by this incident means that the residual risk is considered RED.</p>

Risk horizon	Risk and risk impact:	Risk management and mitigation:	Residual risk:
Staffing	<p>As a result of the social media incident, there is a risk that this negatively impacts on the morale and wellbeing of current staff and that the repercussions will impact on their ability to perform their role.</p> <p>Impact: staff feeling under increased pressure, coming under increased scrutiny from complainants (sometimes publicly) and some staff feeling like their jobs are at risk as a result of comments made about PSOW.</p>	<p>Wellbeing is discussed with staff at all team meetings and all staff have access to trained Mental Health First Aiders. Staff are encouraged to debrief with their line manager and to report instances of negative complainant behaviour so that this can be addressed.</p>	<p>We will continue to protect and look after our staff, but the residual risk is considered RED.</p>

Risk Assurance Framework Arrangements

PSOW Framework			
<ul style="list-style-type: none">• Strategic objectives from Corporate Plan<ul style="list-style-type: none">• Work programme• Risk management• Anti-fraud policy• Governance framework• Policies, procedures and code of conduct			
Advisory Panel	Accounting Officer	Audit & Risk Assurance Committee	Management team
Provides support and advice on vision, values and purposes as well as strategic direction and planning.	Governance. Decision making. Financial management. Risk management.	Reviews and monitors governance, risks and internal controls. Agrees annual governance statement.	3-year Corporate Plan. Operational Plan. Performance monitoring. Corporate policies. Risk management. Value for money.
Central Guidance		PSOW policies, plans and risk register	Annual Governance Statement
HM Treasury. FReM. Managing Welsh Public Money. Public Sector Internal Audit Standards.			
Assurance Map Components			
1st line of defence Strategic and operational delivery reporting. KPI reporting. Financial controls / Budget monitoring.	2nd line of defence Risk register reviews. Quality assurance. Information security assurance.	3rd line of defence Internal audit reports. Finance Manager spot checks.	
Other assurances External audit. Scrutiny by Finance Committee.			



I and my Management Team will continue to work to manage and minimise the risks in these key areas in the year ahead and the risks will be considered at each meeting of the Audit & Risk Assurance Committee.

Budgeting Process

As Accounting Officer, I ensure that I have in place arrangements for tight control of the public money entrusted to me. The Management Team receives a monthly budget monitoring report setting out details of actual, against budgeted expenditure. Any unexpected expenditure issues that may arise during the year are considered so that appropriate action can be taken to remain within the budgeted expenditure where possible or to seek additional resources where cost pressures cannot be contained.

In producing the PSOW's financial estimate for 2024/25, a paper setting out initial budget criteria was considered by the Advisory Panel in July 2023. Overall, the submission sought an increase of 8.3% to reflect pay and price increases and investment in our strategic priorities. Following Finance Committee scrutiny in October, the Committee supported the submission and this was included in the Wales Annual Budget Motion in March 2024.

Conclusion

I am satisfied that there were no significant weaknesses in the office's system of internal controls in 2023/24 which would affect the achievement of the office's policies, aims and objectives and that robust Corporate Governance is in operation with no breaches of the Corporate Governance Code.

Michelle Morris

Accounting Officer

Public Services Ombudsman for Wales

23 July 2024

Remuneration Report

Public Services Ombudsman for Wales

The Government of Wales Act 2006 provides for my remuneration and associated national insurance and pension costs to be met from the Welsh Consolidated Fund, rather than being paid directly. These costs are included, for transparency, in the remuneration report.

Remuneration

The following sections provide details of the remuneration and pension interest of the most senior management of the Office: Michelle Morris - Ombudsman, Chris Vinestock - Chief Operating Officer & Director of Improvement and Katrin Shaw - Chief Legal Adviser & Director of Investigations.

Single Total Figure of Remuneration					
2023/24					
Officials	Salary (£'000)	Bonus payments (£'000)	Benefits in Kind (to nearest £100)	Pension benefits (to nearest £1,000)	Total (£'000)
Michelle Morris	150-155	-	-	58,000	210-215
Chris Vinestock	110-115	-	-	44,000	155-160
Katrin Shaw	100-105	-	-	58,000	160-165

Single Total Figure of Remuneration					
2022/23					
Officials	Salary (£'000)	Bonus payments (£'000)	Benefits in Kind (to nearest £100)	Pension benefits (to nearest £1,000)	Total (£'000)
Michelle Morris	145-150	-	-	57,000	205-210
Chris Vinestock	105-110	-	-	-47,000	60-65
Katrin Shaw	90-95	-	-	-12,000	80-85

Salary

Salary includes gross salary, overtime and any other allowances to the extent that they are subject to UK taxation.

Benefits in kind

The monetary value of benefits in kind, covers any expenditure paid by the PSOW and treated by HM Revenue and Customs as a taxable emolument. There was no such expenditure.

Bonuses

No bonus was paid during the year to me or to any staff within my office, as no bonus scheme is in operation.

Pay multiples

The banded remuneration of the highest-paid director in the financial year 2023/24 was £150-£155,000 (2022/23 = £145-£150,000).

The following section provide details of the required fair pay disclosures:

	2023/24	2022/23
25 th percentile remuneration	£36,648	£35,069
25 th percentile pay ratio	4.2	4.2
50 th percentile remuneration	£48,474	£46,551
50 th percentile pay ratio	3.1	3.2
75 th percentile remuneration	£50,799	£50,799
75 th percentile pay ratio	3.0	2.9

In 2023/24, no employee received remuneration in excess of the highest paid director (2022/23 = none).

Remuneration ranged from £26,000 to £155,000 (2022/23 = £23,000-£150,000). Total remuneration includes salary, non-consolidated performance-related pay and benefits-in-kind. It does not include severance payments, temporary payments, employer pension contributions and the cash equivalent transfer value of pensions.

Pay awards

Staff pay is linked to the pay awards made to employees within Local Government in England and Wales. In line with that procedure, a pay award of £1,925 for salaries less than £49,950, or 3.88% for those above, was awarded to staff in November 2023 backdated to April 2023.

Pensions

Pension entitlements for the persons shown earlier in the report are detailed on the next page.

Pension Liabilities

The pension obligations to present and past employees are discharged through the Principal Civil Service Pension Scheme (PCSPS) and the pensions paid directly to former Commissioners or their dependants.

Name	As at 31/03/24				As at 31/03/23
	Accrued pension at pension age and related lump sum	Real increase in pension and related lump sum at pension age	CETV	Real Increase in CETV	CETV
	£000	£000	£000	£000	£000
Michelle Morris	25-30	2.5-5	405	44	312
Chris Vinestock	25-30	2.5-5	430	33	346
Katrin Shaw	45-50	2.5-5	950	46	826

CETV refers to the Cash Equivalent Transfer Value, and further information can be found in the Pensions Disclosures.

Sickness

During the year, an average of 7.7 days per employee were lost through sickness, compared with 8.7 days in 2022/23. This is the equivalent of 3.1% (3.3% in 2022/23) of total possible workdays. This reflects typical short-term absences and a small number of staff incurring long-term sickness absence.

Reporting of Civil Service and other compensation schemes

No exit packages were paid in 2023/24 (2022/23 Nil).

Advisory Panel and Audit & Risk Assurance Committee

The following non-pensionable payments, based on a daily rate, were made to members of the Advisory Panel and Audit & Risk Assurance Committee:

	2023/24	2022/23
Jane Martin	3,350	2,500
Ian Williams	3,050	3,875
Mike Usher	2,950	2,475
John McSherry	1,900	1,550
Joanest Varney-Jackson	1,800	1,050
Carys Evans	1,400	2,050
Bernie Davies	1,400	500
Nia Roberts	1,400	500
Dave Tosh	1,100	500
Sue Phelps	1,100	500
Trevor Coxon	-	350

These figures also include payments made to members for attendance at risk workshops and training sessions during 2023/24. Mike Usher also assisted with Finance Manager recruitment in June 2023.

For staff reporting issues see the Annual Equality Report.

Michelle Morris

Accounting Officer

Public Services Ombudsman for Wales

23 July 2024



Welsh Parliament Accountability and Audit Report

In addition to the primary statements prepared under International Financial Reporting Standards (IFRS), the Government Financial Reporting Manual (FReM) requires the Ombudsman to prepare a statement and supporting notes to show resource out-turn against the Supply Estimate presented to the Senedd, in respect of each request for resource.

Summary of Net Resource Out-turn for year ending 31 March 2024

	Revised Estimate			Out-turn				2022/23
	Gross Expenditure	Income	Net Total	Gross Expenditure	Income	Net Total	Net total compared to estimate	Net Total
	£000	£000	£000	£000	£000	£000	£000	£000
Revenue	5,888	(38)	5,850	5,774	(38)	5,736	114	5,341
Capital	5	-	5	-	-	-	5	-
Resource DEL	5,893	(38)	5,855	5,774	(38)	5,736	119	5,341
Total Resources	5,893	(38)	5,855	5,774	(38)	5,736	119	5,341
Net Cash Requirement	5,784	(38)	5,746	5,767	(38)	5,729	17	5,308

The Ombudsman's salary is paid directly from the Welsh Consolidated Fund with only the reimbursement of actual business expenses included in the PSOW accounts.

Reconciliation of Net Resource to Net Cash Requirements

for the year ended 31 March 2024

	Note	2023/24			2022/23
		Revised Estimate	Net Total Out-turn	Net total out-turn compared to revised estimate	Out-turn
		£000	£000	£000	£000
Net Revenue	2-4	5,850	5,736	114	5,341
Net Capital	6	5	-	5	-
Total Resources		5,855	5,736	119	5,341
Depreciation	6	(292)	(233)	(59)	(234)
Movements in working capital	6-9	163	214	(51)	184
Movements in provisions	10	20	12	8	17
Net cash requirement		5,746	5,729	17	5,308

Michelle Morris

Accounting Officer

Public Services Ombudsman for Wales

23 July 2024

The Certificate and Report of the Auditor General for Wales to the Senedd

Opinion on financial statements

I certify that I have audited the financial statements of the Public Services Ombudsman for Wales for the year ended 31 March 2024 under paragraph 18 (2) of Schedule 1 of the Public Services Ombudsman (Wales) Act 2019.

The financial statements comprise the Statement of Comprehensive Net Expenditure, Statement of Financial Position, Statement of Cash Flows, Statement of Changes in Taxpayers Equity and related notes, including the significant accounting policies.

The financial reporting framework that has been applied in their preparation is applicable law and UK adopted international accounting standards as interpreted and adapted by HM Treasury's Financial Reporting Manual.

In my opinion, in all material respects, the financial statements:

- give a true and fair view of the state of the Public Services Ombudsman for Wales' affairs as at 31 March 2024 and of its net operating cost for the year then ended;
- have been properly prepared in accordance with UK adopted international accounting standards as interpreted and adapted by HM Treasury's Financial Reporting Manual and
- have been properly prepared in accordance with HM Treasury directions issued under the Public Services Ombudsman (Wales) Act 2019.

Opinion on regularity

In my opinion, in all material respects:

- the Statement of Resource Outturn properly presents the outturn against the sums authorised by the Senedd for the year ended 31 March 2024 and shows that those totals have not been exceeded; and
- the income and expenditure in the financial statements have been applied to the purposes intended by the Senedd and the financial transactions recorded in the financial statements conform to the authorities which govern them.

Opinion on arrangements for the economic, efficient and effective use of resources

In my opinion, the Public Services Ombudsman for Wales has made proper arrangements for securing economy, efficiency, and effectiveness in its use of resources throughout the financial year ended 31 March 2024.

Basis of opinions

I conducted my audit in accordance with applicable law and International Standards on Auditing in the UK (ISAs (UK)) and Practice Note 10 'Audit of Financial Statements of Public Sector Entities in the United Kingdom'. My responsibilities under those standards are further described in the auditor's responsibilities for the audit of the financial statements section of my certificate.

My staff and I are independent of the body in accordance with the ethical requirements that are relevant to my audit of the financial statements in the UK including the Financial Reporting Council's Ethical Standard, and I have fulfilled my other ethical responsibilities in accordance with these requirements. I believe that the audit evidence I have obtained is sufficient and appropriate to provide a basis for my opinions.

Conclusions relating to going concern

In auditing the financial statements, I have concluded that the use of the going concern basis of accounting in the preparation of the financial statements is appropriate.

Based on the work I have performed, I have not identified any material uncertainties relating to events or conditions that, individually or collectively, may cast significant doubt on the body's ability to continue to adopt the going concern basis of accounting for a period of at least 12 months from when the financial statements are authorised for issue.

My responsibilities and the responsibilities of the Accounting Officer with respect to going concern are described in the relevant sections of this certificate.

The going concern basis of accounting for the Public Services Ombudsman for Wales is adopted in consideration of the requirements set out in HM Treasury's Government Financial Reporting Manual, which require entities to adopt the going concern basis of accounting in the preparation of the financial statements where it anticipated that the services which they provide will continue into the future.

Other information

The other information comprises the information included in the annual report other than the financial statements and my auditor's report thereon. The Accounting Officer is responsible for the other information in the annual report.

My opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in my certificate, I do not express any form of assurance conclusion thereon. My responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or knowledge obtained in the course of the audit, or otherwise appears to be materially misstated.

If I identify such material inconsistencies or apparent material misstatements, I am required to determine whether this gives rise to a material misstatement in the financial statements themselves. If, based on the work I have performed,

I conclude that there is a material misstatement of this other information, I am required to report that fact.

I have nothing to report in this regard.

Opinion on other matters

In my opinion, the part of the Remuneration Report to be audited has been properly prepared in accordance with HM Treasury directions made under paragraph 17(1) of Schedule 1 of the Public Services Ombudsman (Wales) Act 2019.

In my opinion, based on the work undertaken in the course of my audit:

- the parts of the Accountability Report subject to audit have been properly prepared in accordance with HM Treasury directions made under paragraph 17(1) of Schedule 1 of the Public Services Ombudsman (Wales) Act 2019; and
- the information given in the Annual Report for the financial year for which the financial statements are prepared is consistent with the financial statements and is in accordance with the applicable legal requirements.

Matters on which I report by exception

In the light of the knowledge and understanding of the body and its environment obtained in the course of the audit, I have not identified material misstatements in the Annual Report.

I have nothing to report in respect of the following matters which I report to you if, in my opinion:

- I have not received all of the information and explanations I require for my audit;
- proper accounting records have not been kept or returns adequate for my audit have not been received from branches not visited by my team;
- the financial statements and the audited part of the Accountability Report are not in agreement with the accounting records and returns;
- information specified by HM Treasury regarding the remuneration and other transactions is not disclosed;

- certain disclosures of remuneration specified by HM Treasury's Government Financial Reporting Manual are not made or parts of the Remuneration Report to be audited are not in agreement with the accounting records and returns; or
- the Governance Statement does not reflect compliance with HM Treasury's guidance.

Responsibilities of the Accounting Officer for the financial statements

As explained more fully in the Statement of Accounting Officer's Responsibilities, the Accounting Officer is responsible for:

- maintaining proper accounting records;
- the preparation of the financial statements and Annual Report in accordance with the applicable financial reporting framework and for being satisfied that they give a true and fair view;
- ensuring that the Annual Report and financial statements as a whole are fair, balanced and understandable;
- ensuring the regularity of financial transactions;
- internal controls as the Accounting Officer determines is necessary to enable the preparation of financial statements to be free from material misstatement, whether due to fraud or error;
- assessing the body's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the Accounting Officer anticipates that the services provided by the Public Services Ombudsman for Wales will not continue to be provided in the future; and
- for putting in place proper arrangements for the economic, efficient and effective use of the Public Services Ombudsman for Wales resources.

Auditor's responsibilities for the audit of the financial statements

My responsibility is to examine, certify and report on the financial statements in accordance with paragraph 18 (2) of Schedule 1 of the Public Services Ombudsman (Wales) Act 2019.

My objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue a certificate that includes my opinion. Reasonable assurance is a high level of assurance but is not a guarantee that an audit conducted in accordance with ISAs (UK) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

Irregularities, including fraud, are instances of non-compliance with laws and regulations. I design procedures in line with my responsibilities, outlined above, to detect material misstatements in respect of irregularities, including fraud.

My procedures included the following:

- enquiring of management, and those charged with governance, including obtaining and reviewing supporting documentation relating to the Public Services Ombudsman for Wales' policies and procedures concerned with: identifying, evaluating and complying with laws and regulations and whether they were aware of any instances of non-compliance.
- detecting and responding to the risks of fraud and whether they have knowledge of any actual, suspected or alleged fraud.
- the internal controls established to mitigate risks related to fraud or non-compliance with laws and regulations.
- considering as an audit team how and where fraud might occur in the financial statements and any potential indicators of fraud. As part of this discussion, I identified potential for fraud in the following areas: revenue recognition, expenditure recognition, and posting of unusual journals.
- obtaining an understanding of the Public Services Ombudsman for Wales' framework of authority, as well as other legal and regulatory frameworks that the Public Services Ombudsman for Wales operates in, focusing on those laws and regulations that had a direct effect on the financial statements or that had a fundamental effect on the operations of the Public Services Ombudsman for Wales.
- obtaining an understanding of related party relationships.

In addition to the above, my procedures to respond to identified risks included the following:

- reviewing the financial statement disclosures and testing to supporting documentation to assess compliance with relevant laws and regulations discussed above;
- enquiring of management about actual and potential litigation and claims;
- reading minutes of meetings of those charged with governance and the Advisory Board; and
- in addressing the risk of fraud through management override of controls, testing the appropriateness of journal entries and other adjustments; assessing whether the judgements made in making accounting estimates are indicative of a potential bias; and evaluating the business rationale of any significant transactions that are unusual or outside the normal course of business.

I also communicated relevant identified laws and regulations and potential fraud risks to all audit team members and remained alert to any indications of fraud or non-compliance with laws and regulations throughout the audit.

The extent to which my procedures are capable of detecting irregularities, including fraud, is affected by the inherent difficulty in detecting irregularities, the effectiveness of the Public Services Ombudsman for Wales' controls, and the nature, timing and extent of the audit procedures performed.

A further description of the auditor's responsibilities for the audit of the financial statements is located on the Financial Reporting Council's website www.frc.org.uk/auditorsresponsibilities. This description forms part of my auditor's report.

Other auditor's responsibilities

I am required to obtain evidence sufficient to give:

- reasonable assurance that the Statement of Resource Outturn properly presents the outturn against the sums authorised by the Senedd for the year ended 31 March 2024 and shows that those totals have not been exceeded;
- reasonable assurance that the expenditure and income recorded in the financial statements have been applied to the purposes intended by the Senedd and the financial transactions recorded in the financial statements conform to the authorities which govern them; and
- assurance that the Accounting Officer has made appropriate arrangements for the economic, efficient and effective use of the Public Services Ombudsman for Wales resources.

I communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that I identify during my audit.

Report

I have no observations to make on these financial statements.

Ann-Marie Harkin

**Executive Director Audit Services for and
on behalf of the Auditor General**

**1 Capital Quarter
Tyndall Street
Cardiff, CF10 4BZ**

25 July 2024

Annual Accounts 2023/24

Statement of Comprehensive Net Expenditure

for the year ended 31 March 2024

Administration costs	Note	2023/24	2022/23
		£000	£000
Staff costs	2	4,440	4,168
Other non-staff administration costs	3	1,334	1,192
Gross Administration Costs		5,774	5,360
Operating Income	4	(38)	(19)
Net Administration Costs		5,736	5,341
Net Revenue Out-turn		5,736	5,341

Notes 1 to 18 form part of these statements.

All activities commenced in the period are continuing.

Statement of Financial Position

for the year ended 31 March 2024

	Note	31 March 2024	31 March 2023
		£000	£000
Non-current assets			
Property, Plant and Equipment	6a	77	113
Intangible assets	6b	66	93
Right of use asset	6c	231	401
Receivables due after more than 1 year	7	-	-
		374	607
Current Assets			
Trade and other receivables	7	325	280
Cash and cash equivalents	8	17	1
		342	281
Total assets		716	888
Current liabilities			
Trade and other payables	9	(446)	(594)
Provisions less than 1 year	10	(49)	(49)
		(495)	(643)
Total assets less current liabilities		221	245
Non-current liabilities			
Trade and other payables due after 1 year	9	(1)	(6)
Provisions greater than 1 year	10	(449)	(461)
		(450)	(467)
Total assets less liabilities		(229)	(222)
General Fund		(229)	(222)

Notes 1 to 18 and the Pension Disclosures form part of these statements.
The financial statements were approved by the Accounting Officer and authorised for issue on 23 July 2024 by:

Michelle Morris

Accounting Officer

Public Services Ombudsman for Wales

23 July 2024



Statement of Cash Flows

for the year ended 31 March 2024

	Note	2023/24 £000	2022/23 £000
Net cash outflow from operating activities	11	(5,729)	(5,308)
Net cash outflow from investing activities	12	-	-
Financing from Welsh Parliament	13	5,746	5,309
Prior year cash balance repaid		(1)	(120)
Net increase (decrease) in cash equivalents after adjustments for payments to Welsh Consolidated Fund		16	(119)
Cash and cash equivalents at beginning of period		1	120
Cash and cash equivalents at end of period		17	1

Notes 1 to 18 form part of these statements.

Statement of Changes in Taxpayers' Equity

for the year ended 31 March 2024

General Fund	2023/24	2022/23
	£000	£000
Balance as at 1 April	(222)	(189)
Net operating costs	(5,736)	(5,341)
Funding by Welsh Parliament	5,746	5,309
Due back to Welsh Consolidated Fund:		
Cash	(17)	(1)
Non-operating income	-	-
Total recognised income and expense for year	(7)	(33)
Balance as at 31 March	(229)	(222)

Notes 1 to 18 and the Pension Disclosures form part of these statements.

Notes to the Financial Statements

1. Statement of Accounting Policies

These financial statements have been prepared in accordance with the Government Financial Reporting Manual (the FReM) issued by HM Treasury which is in force for 2023/24. The accounting policies contained in the FReM apply International Financial Reporting Standards (IFRS) as adopted or interpreted for the public sector. Where the FReM permits a choice of accounting policy, the accounting policy which has been judged to be most appropriate to the particular circumstances of the PSOW for the purpose of giving a true and fair view has been selected. The particular accounting policies adopted by the PSOW are described below. They have been applied consistently in dealing with items considered material in relation to the accounts.

1.1. Accounting Convention

These accounts have been prepared under the historical cost convention modified to account for any revaluation of fixed assets, where material to their value to the business, by reference to their current costs.

1.2. Property, Plant and Equipment

Expenditure on property, plant and equipment is capitalised where the purchases are expected to have a useful life extending over more than 1 year and the cost exceeds £5k. Assets costing less than £5k may be capitalised providing they are capital in nature and are part of a larger scheme that is, in total, more than £5k. Assets are shown at cost less an allowance for depreciation. On initial recognition, fixed assets are measured at cost, including such costs as installation, which are directly attributable to bringing them into working condition for their intended use. In reviewing the costs of fixed assets previously acquired and the prices paid for new acquisitions during the year there is no material difference between the historic net book value of the assets and their replacement cost less depreciation.

1.3. Depreciation

Assets are depreciated at rates calculated to write them down to zero or, if applicable, estimated residual value on a straight-line basis over their estimated useful life following an initial charge of a full month's depreciation in the month of purchase. Assets in the course of construction are depreciated from the month in which the asset is brought into use.

Except where otherwise noted asset lives are assumed to be the following:

Plant	10 years or the lease term if shorter
Furniture and other fittings	10 years or in the case of fittings, the lease term
Computers and other equipment	3 to 10 years

1.4. Intangible assets

Purchased computer software licences and developed software are capitalised where expenditure of £5k or more is incurred, and the useful life is more than 1 year. Intangible assets costing less than £5k may be capitalised providing they are capital in nature and are part of a larger scheme that is, in total, more than £5k. Intangible assets are reviewed annually for impairment and are stated at amortised historic cost. Software licences are amortised over the shorter of the term of the licence and the useful economic life of the computer equipment on which they are installed. This would usually be from 3 to 5 years. Developed software is amortised over the estimated useful life. In the year of acquisition, amortisation charges commence when the asset is brought into use.

1.5. Value Added Tax

The PSOW is not registered for VAT. Expenditure is therefore disclosed gross of VAT.

1.6. Pensions

The pension obligations to present and past employees are covered by the provisions of the Principal Civil Service Pension Scheme (PCSPS) and by direct payment to previous Commissioners for Local Administration in Wales or any surviving beneficiaries. Full details are disclosed in the Pension Disclosures at the end of the Financial Statements. The costs of providing these pensions are charged through the Statement of Comprehensive Net Expenditure.

1.7. Early departure costs

Where the PSOW is required to meet the additional cost of benefits beyond the normal benefits payable by the appropriate pension scheme in respect of employees who retire early, these costs are charged to the Statement of Comprehensive Net Expenditure in full when the liability arises.

1.8. Leases

Expenditure on leased property and equipment is charged in the period to which it relates. IFRS 16 was implemented from 1 April 2022.

1.9. Staff Costs

In line with IAS 19, short-term employee benefits, such as wages, salaries and social security contributions, paid annual leave and paid sick leave, as well as non-monetary benefits for current employees, are recognised when an employee has rendered services in exchange for those benefits.

1.10. Provisions

These are sums which are of uncertain timing or amount at the balance sheet date and represent the best estimate of the expenditure required to settle the obligations. Where the effect of the time value of money is significant, the estimated risk adjusted cash flows are discounted using the recommended HM Treasury discount rate.

1.11. Income

All income is recognised in the Statement of Comprehensive Net Expenditure in accordance with IAS 18 and IFRS 15.

1.12. Impact of Standards Not Yet Effective

None.

2. Staff Costs and Numbers

The aggregate employment costs were as follows:

	2023/24	2022/23
	£000	£000
Permanent staff:		
Salaries	3,168	2,999
Social Security costs	325	314
Pension costs	865	809
Pension fund charges	38	28
Total	4,396	4,150
Temporary staff:		
Salaries	43	18
Social Security costs	1	-
Pension costs	-	-
Total	44	18
Total Staff Costs	4,440	4,168

The average number of whole-time equivalent persons employed (including senior management and fixed term appointments) during the year was as follows:

	2023/24	2022/23
	No.	No.
Directors	2	2
Communications and PA	3	3
Complaints and Investigations	50	50
Improvement Team	6	6
Support	8	8
Total	69	69

3. Non-Staff Administration Costs

	2023/24	2022/23
	£000	£000
Rent	28	28
External Audit fee	21	17
Legal and professional fees	180	243
Other property costs	212	187
IFRS 16 interest charge	4	5
Computer services	453	284
Office costs	94	104
Travel and Subsistence	16	12
Training and Recruitment	40	42
Communications	53	36
Sub-total	1,101	958
Depreciation	206	207
Amortisation charge	27	27
Loss on disposal	-	-
Sub-total	233	234
Total Other Administration Costs	1,334	1,192

4. Operating Income

	2023/24	2022/23
	£000	£000
Seconded staff	(37)	(18)
Other – Future Generations Commissioner	(1)	(1)
Total	(38)	(19)

5. Operating Costs by Strategic Aims

The costs of providing a first-class Ombudsman service to Wales are set out below. We have 4 strategic aims for delivering our mission and the allocation of costs to each of the aims has been based on the following:

- a an estimate of the staff time spent on the objective
- b direct allocation of expenditure where applicable
- c apportionment of other costs pro rata to the estimate of staff time.

	2023/24	
	£000	%
Strategic Aim 1: Delivering justice with a positive impact for people and public services	4,295	74.9
Strategic Aim 2: Increasing accessibility and inclusion	233	4.1
Strategic Aim 3: Expanding our proactive improvement work	1,023	17.8
Strategic Aim 4: Ensuring that we are a healthy, efficient and accountable organisation	185	3.2
Net Resources Out-turn	5,736	100.0

Our new Strategic Plan was implemented from 1 April 2023. Therefore, no prior year comparison is included as this was under a different Strategic Plan which contained different Strategic Aims, so a direct comparison is not possible.

The Aims analysis excludes capital expenditure.

6a. Property, Plant and Equipment

2023/24	Plant	Computers and other equipment	Furniture and other fittings	Surplus assets	Total
	£000	£000	£000	£000	£000
Cost or valuation at 1 April	156	147	353	137	793
Additions	-	-	-	-	-
Disposals	-	-	-	(137)	(137)
At 31 March	156	147	353	-	656
Depreciation as at 1 April	(156)	(97)	(290)	(137)	(680)
Charged in the year	-	(18)	(18)	-	(36)
Disposals	-	-	-	137	137
At 31 March	(156)	(115)	(308)	-	(579)
Carrying amount as at 31 March 2024	-	32	45	-	77
Carrying amount as at 31 March 2023	-	50	63	-	113

2022/23	Plant	Computers and other equipment	Furniture and other fittings	Surplus Assets	Total
	£000	£000	£000	£000	£000
Cost or valuation at 1 April	156	240	442	-	838
Additions	-	-	-	-	-
Reclassifications	-	(48)	(89)	137	-
Disposals	-	(45)	-	-	(45)
At 31 March	156	147	353	137	793
Depreciation as at 1 April	(156)	(171)	(361)	-	(688)
Charged in the year	-	(19)	(18)	-	(37)
Reclassifications	-	48	89	(137)	-
Disposals	-	45	-	-	45
At 31 March	(156)	(97)	(290)	(137)	(680)
Carrying amount as at 31 March 2023	-	50	63	-	113
Carrying amount as at 31 March 2022	-	69	81	-	150

6b. Intangible Assets

2023/24	Information Technology	Software Licences	Total
	£000	£000	£000
Cost or valuation at 1 April	518	52	570
Additions	-	-	-
Disposals	-	-	-
At 31 March	518	52	570
Amortisation as at 1 April	(425)	(52)	(477)
Amortisation charged in the year	(27)	-	(27)
Disposals	-	-	-
At 31 March	(452)	(52)	(504)
Carrying Value as at 31 March 2024	66	-	66
Carrying Value as at 31 March 2023	93	-	93

2022/23	Information Technology	Software Licences	Total
	£000	£000	£000
Cost or valuation at 1 April	518	52	570
Additions	-	-	-
Disposals	-	-	-
At 31 March	518	52	570
Amortisation as at 1 April	(398)	(52)	(450)
Amortisation charged in the year	(27)	-	(27)
Disposals	-	-	-
At 31 March	(425)	(52)	(477)
Carrying Value as at 31 March 2023	93	-	93
Carrying Value as at 31 March 2022	120	-	120

In the opinion of the Public Services Ombudsman for Wales there is no material difference between the net book value of assets at current values and at their historic cost.

6c. Right of Use Assets

2023/24	IFRS 16 right of use asset	Total
	£000	£000
Cost or valuation at 1 April	571	571
Additions	-	-
Disposals	-	-
At 31 March	571	571
Depreciation as at 1 April	(170)	(170)
Charged in the year	(170)	(170)
Disposals	-	-
At 31 March	(340)	(340)
Carrying amount as at 31 March 2024	231	231
Carrying amount as at 31 March 2023	401	401

2022/23	IFRS 16 right of use asset	Total
	£000	£000
Cost or valuation at 1 April	-	-
Additions	571	571
Disposals	-	-
At 31 March	571	571
Depreciation as at 1 April	-	-
Charged in the year	(170)	(170)
Disposals	-	-
At 31 March	(170)	(170)
Carrying amount as at 31 March 2023	401	401
Carrying amount as at 31 March 2022	-	-

7. Trade and other Receivables

	31 March 2024	31 March 2023
	£000	£000
Amounts falling due within 1 year		
Prepayments	288	280
Cash not drawn down	37	-
Trade debtors	-	-
Amounts falling due after more than 1 year		
Prepayments	-	-
Total	325	280

8. Cash and Cash Equivalents

Any bank balance held at the year-end must be returned to the Welsh Consolidated Fund. A figure of £17k (£1k in 2022/23) has been included within the accounts, being the net balance at the year-end on all the bank accounts operated by the Public Services Ombudsman for Wales, irrespective of whether the individual account is in debit or credit.

The year-end balance will be repaid to the Welsh Consolidated Fund in 2024/25 under the Government of Wales Act 2006.

9. Trade Payables and other Current Liabilities

	31 March 2024	31 March 2023
	£000	£000
Amounts falling due in 1 year		
Untaken annual leave	132	115
Deferred rent reduction	5	5
Welsh Consolidated Fund - unspent balances	17	1
Trade payables	6	8
IFRS 16 creditor	250	411
Accruals	36	54
	446	594
Amounts falling due in more than 1 year		
Deferred rent reduction	1	6
Total	447	600

10. Provisions for Liabilities and Charges

	2023/24				2022/23
	Pensions for Former Commissioners	Dilapidation Costs	Other Costs	Total	Total
	£000	£000	£000	£000	£000
Balance at 1 April	187	323	-	510	527
Additional provision required	41	-	-	41	43
Discount rate movement	(3)	-	-	(3)	(14)
Provisions utilised in the year	(50)	-	-	(50)	(46)
Balance at 31 March	175	323	-	498	510

Analysis of expected timings of payment of provisions:

	2023/24	2022/23
	£000	£000
Payable within 1 year	49	49
Payable within 2 to 5 years	449	461
Payable in more than 5 years	-	-
Balance at 31 March	498	510

Pension provisions are calculated based on the National Life Tables for England and Wales issued by the Office of National Statistics. Later year pension increases are in line with GDP deflator information issued by HM Treasury. The discount factor has been amended to 2.45% for the financial year (1.70% in 2022/23) in line with the guidance issued by the Treasury. Two surviving spouses of former Commissioners remain as a pension liability.

11. Reconciliation of Operating Cost to Operating Cash Flows

	Notes	2023/24	2022/23
		£000	£000
Net operating cost		(5,736)	(5,341)
Adjust for non-cash items	3	233	(337)
Decrease/ (Increase) in trade and other receivables	7	(45)	(25)
Increase/ (Decrease) in trade and other payables	9	(153)	293
Movement in provisions	10	(12)	(17)
Movement in cash repaid to Welsh Consolidated Fund	8	(16)	119
Net cash outflow from operating activities		(5,729)	(5,308)

12. Non-Current Asset Expenditure and Financial Investment

	2023/24	2022/23
	£000	£000
Purchases of property, plant and equipment	-	-
Proceeds of disposals of property, plant and equipment	-	-
Purchases of intangible assets	-	-
Net cash outflow from investing activities	-	-

13. Reconciliation of Net Cash Requirement to Increase/ (Decrease) in Cash

	2023/24	2022/23
	£000	£000
Net Cash Requirement:		
Operating activities	(5,729)	(5,308)
Capital Expenditure	-	-
	(5,729)	(5,308)
Financing from Welsh Parliament	5,746	5,309
Repayment to Welsh Consolidated Fund	(1)	(120)
Increase/ (Decrease) in cash and cash equivalents	16	(119)

14. Commitments under Operating Leases

	31 March 2024	31 March 2023
	£000	£000
Total future minimum operating lease payments on building:		
Payable within 1 year	220	198
Within 2 and 5 years	84	304
More than 5 years	-	-
	304	502
Other:		
Payable within 1 year	-	-
Within 2 and 5 years	-	-
More than 5 years	-	-
	-	-
Total of all operating leases	304	502

15. Contingent Liabilities

There are no claims or litigations that would affect the financial statements themselves. There is one Code of Conduct case where leave to appeal has been refused by the High Court, however an application to renew the application has been made. There is also one Employment Tribunal claim. The outcome of both matters are uncertain and the amount of any potential liability is unknown.

16. Capital Commitments

There were no capital commitments at 31 March 2024 (2022/23 = Nil).

17. Related Party Transactions

The PSOW is headed by the Public Services Ombudsman for Wales. The office was established under the Public Services Ombudsman (Wales) Act 2005 and is now governed by the Public Services Ombudsman (Wales) Act 2019. The Ombudsman is independent of Government and the funding arrangements of the Office are set up to ensure that the independence of the Office is secured. The PSOW has had a number of material transactions with the Welsh Parliament, HM Revenue and Customs (Tax and National Insurance) and the Cabinet Office (payments in respect of the Principal Civil Service Pension Scheme). During the year, no directors, key members of staff or their close relatives have undertaken any material transactions.

18. Events after the Reporting Period

On 22 April 2024, after the end of the reporting period, agreement was reached to surrender the lease on surplus office accommodation (first and second floors) and to enter a new lease for the remaining (ground floor) area. This has no effect on the financial position as at 31 March 2024 or these financial statements.

Pension Disclosures

One pension scheme was operated on behalf of current staff during 2023/24 – The Principal Civil Service Pension Scheme (PCSPS). There also remains an ongoing liability to meet the unfunded pensions of two dependant relatives of former Local Government Commissioners.

Civil Service Pensions

Pension benefits are provided through the Civil Service pension arrangements. From 1 April 2015 a new pension scheme for civil servants was introduced – the Civil Servants and Others Pension Scheme or **alpha**, which provides benefits on a career average basis with a normal pension age equal to the member's State Pension Age (or 65 if higher). From that date all newly appointed civil servants and the majority of those already in service joined **alpha**. Prior to that date, civil servants participated in the Principal Civil Service Pension Scheme (PCSPS). The PCSPS has four sections: 3 providing benefits on a final salary basis (**classic**, **premium** or **classic plus**) with a normal pension age of 60; and one providing benefits on a whole career basis (**nuvos**) with a normal pension age of 65.

These statutory arrangements are unfunded with the cost of benefits met by monies voted by Parliament each year. Pensions payable under **classic**, **premium**, **classic plus**, **nuvos** and **alpha** are increased annually in line with Pensions Increase legislation. Existing members of the PCSPS who were within 10 years of their normal pension age on 1 April 2012 remained in the PCSPS after 1 April 2015. Those who were between 10 years and 13 years and 5 months from their normal pension age on 1 April 2012 switch into **alpha** sometime between 1 June 2015 and 1 February 2022. Because the Government plans to remove discrimination identified by the courts in the way that the 2015 pension reforms were introduced for some members, eligible members with relevant service between 1 April 2015 and 31 March 2022 may be entitled to different pension benefits in relation to that period (and this may affect the Cash Equivalent Transfer Values shown in this report – see below). All members who switch to **alpha** have their PCSPS benefits 'banked', with those with earlier benefits in one of the final salary sections of the PCSPS having those benefits based on their final salary when they leave **alpha**. (The pension figures quoted for officials show pension earned in PCSPS or **alpha** – as appropriate.

Where the official has benefits in both the PCSPS and alpha the figure quoted is the combined value of their benefits in the two schemes.) Members joining from October 2002 may opt for either the appropriate defined benefit arrangement or a defined contribution (money purchase) pension with an employer contribution (partnership pension account).

Employee contributions are salary-related and range between 4.6% and 8.05% for members of **classic**, **premium**, **classic plus**, **nuvos** and **alpha**. Benefits in classic accrue at the rate of 1/80th of final pensionable earnings for each year of service. In addition, a lump sum equivalent to three years initial pension is payable on retirement. For **premium**, benefits accrue at the rate of 1/60th of final pensionable earnings for each year of service. Unlike **classic**, there is no automatic lump sum. **Classic plus** is essentially a hybrid with benefits for service before 1 October 2002 calculated broadly as per **classic** and benefits for service from October 2002 worked out as in **premium**. In **nuvos** a member builds up a pension based on his pensionable earnings during their period of scheme membership. At the end of the scheme year (31 March) the member's earned pension account is credited with 2.3% of their pensionable earnings in that scheme year and the accrued pension is uprated in line with Pensions Increase legislation. Benefits in **alpha** build up in a similar way to **nuvos**, except that the accrual rate is 2.32%. In all cases members may opt to give up (commute) pension for a lump sum up to the limits set by the Finance Act 2004.

The **partnership** pension account is an occupational defined contribution pension arrangement which is part of the Legal & General Mastertrust. The employer makes a basic contribution of between 8% and 14.75% (depending on the age of the member). The employee does not have to contribute, but where they do make contributions, the employer will match these up to a limit of 3% of pensionable salary (in addition to the employer's basic contribution). Employers also contribute a further 0.5% of pensionable salary to cover the cost of centrally provided risk benefit cover (death in service and ill health retirement).

The accrued pension quoted is the pension the member is entitled to receive when they reach pension age, or immediately on ceasing to be an active member of the scheme if they are already at or over pension age. Pension age is 60 for members of **classic**, **premium** and **classic plus**, 65 for members of **nuvos**, and the higher of 65 or State Pension Age for members of **alpha**. (The pension figures quoted for officials show pension earned in PCSPS or alpha – as appropriate.

Where the official has benefits in both the PCSPS and alpha the figure quoted is the combined value of their benefits in the two schemes, but note that part of that pension may be payable from different ages.)

Further details about the Civil Service pension arrangements can be found at the website www.civilservicepensionscheme.org.uk

Cash Equivalent Transfer Values

A Cash Equivalent Transfer Value (CETV) is the actuarially assessed capitalised value of the pension scheme benefits accrued by a member at a particular point in time. The benefits valued are the member's accrued benefits and any contingent spouse's pension payable from the scheme. A CETV is a payment made by a pension scheme or arrangement to secure pension benefits in another pension scheme or arrangement when the member leaves a scheme and chooses to transfer the benefits accrued in their former scheme. The pension figures shown relate to the benefits that the individual has accrued as a consequence of their total membership of the pension scheme, not just their service in a senior capacity to which disclosure applies.

The figures include the value of any pension benefit in another scheme or arrangement which the member has transferred to the Civil Service pension arrangements. They also include any additional pension benefit accrued to the member as a result of their buying additional pension benefits at their own cost. CETVs are worked out in accordance with The Occupational Pension Schemes (Transfer Values) (Amendment) Regulations 2008 and do not take account of any actual or potential reduction to benefits resulting from Lifetime Allowance Tax which may be due when pension benefits are taken.

Real Increase in CETV

This reflects the increase in CETV that is funded by the employer. It does not include the increase in accrued pension due to inflation, contributions paid by the employee (including the value of any benefits transferred from another pension scheme or arrangement) and uses common market valuation factors for the start and end of the period.

Compensation for loss of office

No staff left under Voluntary Exit or Voluntary Redundancy terms during the financial year.

Pensions for former Ombudsmen

With the agreement of the Secretary of State for Wales in 1991 and subsequent confirmation by Statutory Instrument 1993 No. 1367, Local Government Commissioners became eligible to join the Local Government Pension Scheme. However, the pensions of the three previous Local Government Commissioners remained the responsibility of the Public Services Ombudsman for Wales and are met through the Statement of Comprehensive Net Expenditure.

At 31 March 2024 two surviving spouses of former Commissioners continued to receive a pension.

Pensions are increased annually in line with other pension schemes within the Public Sector. The basis of calculations of the Annual Pensions Increase has been changed from using the annual movement based on the Retail Price Index (RPI) to the Consumer Price Index (CPI). The amount of the uplift applied is normally set out in the Statutory Instrument Pensions Increase (Review) Order. This uplift for 2023/24 was 6.7%.

The total payments during 2023/24 were £50k (£46k in 2022/23). The liabilities arising out of the obligation to finance these pensions together with any dependant pensions has been calculated to be £175k (£186k in 2022/23). The calculation to determine the overall liability has been carried out internally using life expectancy tables for males and females in Wales obtained from the website of the Government Actuary's Department. A discount rate, from PES (2023), of 2.45% (1.70% in 2022/23) has been applied in accordance with the Treasury guidance that all pension liabilities should be discounted.

Appendices

Some terms that we use in this report

Case: any matter raised with us by a member of the public	Caseload: all cases that we handle.
Enquiry: a case where a member of the public contacts us with a general query but is not yet ready to complain – or we know straight away that we cannot look into their issue. If that happens, we try to offer advice or direct people to another organisation that can help.	Pre-assessment: a Code of Conduct case which is not a duly made complaint. People who complain to us about the Code of Conduct need to sign a declaration to say that the details of the complaint are true and they are aware that their details and the complaint will be shared with the member. If they do not sign that declaration, we close the case as preassessment.
Complaint: a case where we have had enough information to start looking into an issue to see what we can do. Once we consider the information received, we can reject a complaint, suggest how it can be resolved quickly ('early resolution') or start an investigation.	
Outcome: our decision after we have considered a complaint.	
Intervention: a complaint outcome when we decided that something has gone wrong with public services and things must be put right. This could be by making recommendations or agreeing early resolution or settlement of a complaint.	Referral: a type of outcome in Code of Conduct cases where we refer a matter to a Standards Committee or the Adjudication Panel for Wales. We generally do this for cases which involve serious breaches of the Code.

The complaint journey

Check - we check that we can look into your complaint

What we will do

When you first contact us, we will check if we can look into your complaint. This includes checking that:

- we can look at the issue you are complaining about
- we can look into the organisation you are complaining about
- we have enough information about your complaint.

What can we decide?

If we can look into your complaint, we will let you know (see 'Assess').

If we cannot look into your issue further, we will let you know. We will do our best to suggest what you can do next. If we know of an organisation that could help, we will give you more information about it.

Assess – we take a closer look at your complaint to see if we can resolve it early or if we need to investigate

What we will do

We will look at your complaint in more detail. These are examples of the things we will think about:

- whether you complained to us within a year of knowing about the issue
- you have (or had) the option of taking legal action instead to put things right for you
- another organisation is better placed to deal with your complaint
- there are signs that the organisation potentially got things wrong and that it had a negative effect on you or the person you are complaining for
- there is more that the organisation could do to put things right for you.

What can we decide?

We are an independent decision-maker. To be fair to you and the organisation you have complained about, we will look at the evidence and the facts before we make a decision.

As we assess your complaint, we can:

- decide to investigate your complaint (see 'Investigate')
- arrange early action for the organisation to put things right for you. We will write to you to explain what we have arranged and we will close your complaint. We will make sure that the organisation did what it agreed to do (see 'Make sure').

If we can't do either of these things, we will write to you to tell you why.

We close most of our complaints at 'Assess'. We only investigate about 1 in 10 of our complaints, usually when the issue is very complicated or if it may affect other people.

How long will it take?

On average, it takes us about 25 days to assess a complaint. It can sometimes take longer, for example, if we are arranging early action for the organisation to put things right.

Investigate – we investigate some or all of your concerns

What we will do

We will talk to you about the investigation process. We will then write to you to let you know when the investigation starts and confirm what we are investigating.

We'll gather all the information we need, including from you and the organisation you have complained about. We will also often ask for advice from professional advisors. We will then make our decision on your complaint.

What can we decide?

As we investigate your complaint, we can:

- complete the investigation and decide to uphold your complaint
- complete the investigation and decide not to uphold your complaint
- decide to settle the complaint where the organisation can take action to put things right
- decide to end the investigation early if we find that there is not enough evidence to show that the organisation has done something wrong

If we uphold your complaint, we will recommend what the organisation should do to put things right.

At the end of the investigation we will explain what we found and why we did or did not uphold your complaint.

Of the complaints we investigate each year, we uphold or settle around 7 out of 10.

How long will it take?

An investigation can take around 12 months from when you first complain to us. When the complaint is very complicated it can take us longer to investigate it. We will keep in touch with you during the investigation.

Follow up – we check that the organisation did what it promised to do

What we will do

When we arrange early action for the organisation to put things right for you, or we settle or uphold your complaint after we investigated, we will recommend what the organisation should do to put things right for you.

We will tell the organisation how much time it has to show us that it did what it promised to do.

If the organisation does not show us that it acted on our recommendations, we will take further action.

Our Key Performance Indicators

We check how well we perform against a set of measures called Key Performance Indicators (KPIs). Below we explain how we aimed to perform and how we did.⁷

Strategic Aim 1: Delivering justice with a positive impact for people and public services.	Target	2023/24	2022/23
Average case closure time (once we have all the information we need from complainant)			
Assessment (weeks)	6	4	3
Investigation (weeks)	53.4	64	58
Proportion of complaint reviews in which we find that our original decision was appropriate	95%	92%	95%
Proportion of Service Quality reviews satisfactory or better	75%	67%	n/a
Proportion of recommendations due during the year complied with in line with set target cases closed within 12 months	55%	67%	50%
Proportion of people satisfied with our service:			
All respondents	50%	40%	48%
Respondents satisfied with the outcome	95%	98%	95%

⁷ The tolerances for our RAG rating are: GREEN: > 90%, AMBER: 70% - < 90%, RED: 0 - < 70%.

Strategic Aim 2: Increasing accessibility and inclusion.	Target	2023/24	2022/23
Level of awareness of our service	45%	49%	43%
Complainant assessment of our accessibility ('easy to get in touch') :			
All respondents	90%	83%	87%
Respondents satisfied with the outcome	95%	86%	95%
Representation of target groups among our complainants (number of 6 target groups well-represented)	1	1	1
Proportion of our complaints that are in our jurisdiction and not premature	65%	59%	59%

Strategic Aim 3: Increasing the impact of our proactive improvement work.	Target	2023/24	2022/23
Proportion of complaints handled by public bodies and then escalated to us			
Health Boards	5%	5.5%	5%
Local Authorities	7%	7.1%	7%
Proportion of recommendations as a result of our extended and wider investigations due during the year complied with in line with set target.	n/a	100%	Not available
Proportion of Code of Conduct breaches that we referred upheld by Standards Committees or Adjudication Panel for Wales	90%	85%	96%

Strategic Aim 4 - Ensuring that we are a healthy, efficient and accountable organisation.	Target	2023/24	2022/23
Sickness absence levels (average number of days)	5.0	7.7	8.59
Proportion of staff who agree that we are a good place to work	87%	75%	87%
Level of variance on expenditure from that set out in our Estimate for the current year (less than)	3%	0.50%	0.01%
Proper management of our budget	Unqualified accounts and substantial assurance	Unqualified accounts and substantial assurance	Unqualified accounts and substantial assurance
Average cost per case for total casework closure	n/a	£432	£473
Average cost per complaint for total complaints closure	n/a	£1,289	£1,279
Our carbon footprint (kg CO2e produced)	60,000kg CO2e	62,630kg CO2e	Not available

Complaints data

New complaints - subjects

Subject	2023/24	2022/23
Health	36%	37%
Housing	18%	18%
Complaints Handling	17%	18%
Social Services	7%	7%
Planning and Building Control	5%	4%
Other	17%	15%
Grand Total	100%	100%

New complaints - sector

Sector	2023/24	2022/23
NHS Bodies (including Health Boards, NHS Trusts, Dentist, GPs, Opticians and Pharmacists)	1279	1288
Local Authorities (including County/ County Borough Councils and School Appeal Panels)	1127	1032
Social Housing sector (housing associations)	380	348
Welsh Government and its sponsored bodies	76	61
Community Councils	19	30
Other	24	31
All sectors	2905	2790

New complaints

Health Board	2023/24		2022/23	% change from 2022/23
	Number	Received per 1000 residents	Number	
Aneurin Bevan University Health Board	175	0.30	166	5%
Betsi Cadwaladr University Health Board	214	0.31	225	-5%
Cardiff and Vale University Health Board	150	0.30	137	9%
Cwm Taf Morgannwg University Health Board	109	0.25	134	-19%
Hywel Dda University Health Board	138	0.36	104	33%
Powys Teaching Health Board	21	0.16	23	-9%
Swansea Bay University Health Board	132	0.34	137	-4%
All Health Boards	939	0.30	926	1%

County and County Borough Council	Number	2023/24 Received per 1000 residents	2022/23 Number	% change from 2022/23
Blaenau Gwent County Borough	15	0.22	16	-6%
Bridgend County Borough	59	0.40	55	7%
Caerphilly County Borough	56	0.32	49	14%
Cardiff Council (Incl. Rent Smart	149	0.40	142	5%
Carmarthenshire County	69	0.36	53	30%
Ceredigion County Council	32	0.45	35	-9%
Conwy County Borough Council	36	0.31	31	16%
Denbighshire County Council	31	0.32	32	-3%
Flintshire County Council	51	0.33	65	-22%
Cyngor Gwynedd	38	0.32	36	6%
Isle of Anglesey County Council	38	0.55	25	52%
Merthyr Tydfil County Borough	12	0.20	17	-29%
Monmouthshire County Council	29	0.31	23	26%
Neath Port Talbot Council	35	0.25	39	-10%
Newport City Council	52	0.32	42	24%
Pembrokeshire County Council	40	0.32	44	-9%
Powys County Council	54	0.40	38	42%
Rhondda Cynon Taf County Borough Council (Incl South Wales Parking Group)	64	0.27	54	19%
Swansea Council	82	0.34	94	-13%
Torfaen County Borough Council	15	0.16	16	-6%
Vale of Glamorgan Council	77	0.58	49	57%
Wrexham County Borough	76	0.56	65	17%
All County and County Borough Councils	1110	0.35	1020	9%

Housing Association	2023/24	2022/23	% change from 2022/23
Adra	14	15	-7%
Aelwyd Housing Association Ltd	3	1	200%
Ateb Group Ltd	1	2	-50%
Barcud	8	4	100%
Bro Myrddin Housing Association	2	0	
Bron Afon Community Housing Ltd	23	17	35%
Cadwyn Housing Association Ltd	2	6	
Cardiff Community Housing Association	4	7	-43%
Caredig	5	3	
Cartrefi Conwy	10	6	67%
Charter Housing Association (part of the Pobl	8	7	14%
Clwyd Alyn Housing Association	13	10	30%
Coastal Housing Group Ltd	8	6	33%
Cynon Taf Community Housing Group	2	4	-50%
Grwp Cynefin	7	5	40%
Hafod Housing Association	55	62	-11%
Linc Cymru Housing Association	17	14	21%
Melin Homes Ltd	6	3	100%
Merthyr Tydfil Housing Association Ltd	6	1	500%
Merthyr Valleys Homes	7	8	-13%
Monmouthshire Housing Association	1	2	-50%
Newport City Homes	16	19	-16%
Newydd Housing Association	13	9	44%
Pobl	43	23	87%

Stori Wales	2	9	-78%
Taff Housing Association	4	4	0%
Tai Calon Community Housing	10	10	0%
Tai Tarian	10	21	-52%
Trivallis	26	13	100%
Ty Gwalia (part of Pobl Group)	2	3	-33%
United Welsh Housing Association	12	16	-25%
Valleys To Coast Housing	24	19	26%
Wales & West Housing Association	16	14	14%
All Housing Associations	380	343	11%

Interventions - Health Boards

Health Board	2023/24			2022/23		
	No. of	No. of		No. of	No. of	Intervention rate
Aneurin Bevan University Health Board	73	195	37%	48	160	30%
Betsi Cadwaladr University Health Board	81	256	32%	80	231	35%
Cardiff and Vale University Health Board	34	158	22%	30	129	23%
Cwm Taf Morgannwg University Health Board	39	129	30%	37	141	26%
Hywel Dda University Health Board	55	154	36%	41	100	41%
Powys Teaching Health Board	3	21	14%	5	23	22%
Swansea Bay University Health Board	41	141	29%	33	134	25%
All Health Boards	326	1054	31%	274	918	30%

Interventions - local councils

County and County Borough Council	2023/24			2022/23		
	No. of	No. of		No. of	No. of	
Blaenau Gwent County Borough Council	1	16	6%	0	16	0%
Bridgend County Borough Council	8	59	14%	5	57	9%
Caerphilly County Borough Council	3	48	6%	6	52	12%
Cardiff Council (Incl Rent Smart Wales)	28	147	19%	26	154	17%
Carmarthenshire County Council	8	60	13%	7	60	12%
Ceredigion County Council	7	32	22%	13	44	30%
Conwy County Borough Council	0	37	0%	5	35	14%
Denbighshire County Council	6	39	15%	5	33	15%
Flintshire County Council	2	33	6%	2	33	6%
Cyngor Gwynedd	8	57	14%	5	70	7%
Isle of Anglesey County Council	10	41	24%	5	25	20%
Merthyr Tydfil County Borough Council	3	14	21%	1	18	6%
Monmouthshire County Council	3	32	9%	1	22	5%
Neath Port Talbot Council	5	34	15%	7	38	18%
Newport City Council	5	51	10%	8	48	17%

Pembrokeshire County Council	7	38	18%	3	45	7%
Powys County Council	7	53	13%	8	44	18%
Rhondda Cynon Taf County Borough Council (Incl South Wales Parking Group)	11	63	17%	2	56	4%
Swansea Council	12	77	16%	10	99	10%
Torfaen County Borough Council	2	14	14%	1	17	6%
Vale of Glamorgan Council	15	71	21%	15	53	28%
Wrexham County Borough Council	7	79	9%	6	67	9%
All County and County Borough Councils	158	1095	14%	141	1086	13%

Interventions - Housing Associations

Housing Association	2023/24			2022/23		
	No. of	No. of		No. of	No. of	
Adra	0	13		2	16	13%
Aelwyd Housing Association Ltd	0	3		0	1	
Ateb Group Ltd	0	1		0	2	
Barcud	0	8		0	4	
Bro Myrddin Housing Association	1	2		0	0	
Bron Afon Community Housing Ltd	1	20	5%	2	18	11%
Cadwyn Housing Association Ltd	0	2	0%	1	6	17%
Cardiff Community Housing Association	1	3		0	8	
Caredig	0	4		0	3	
Cartrefi Conwy	1	10	10%	2	7	29%
Charter Housing Association (Part of the Pobl Group)	2	9		0	7	
Clwyd Alyn Housing Association	1	14		0	9	
Coastal Housing Group Ltd	0	5		0	6	
Cynon Taf Community Housing Group	0	2		0	4	
First Choice Housing Association Ltd	0	0		0	1	
Grwp Cynefin	0	8		0	5	
Hafod Housing Association	8	57	14%	15	59	25%

Linc Cymru Housing Association	3	17	18%	2	13	15%
Melin Homes Ltd	0	4		0	3	
Merthyr Tydfil Housing Association Ltd	0	5		0	1	
Merthyr Valleys Homes	0	7	0%	1	8	13%
Monmouthshire Housing Association	0	1		0	4	
Newport City Homes	1	18	6%	2	18	11%
Newydd Housing Association	1	9	11%	1	10	10%
North Wales Housing	0	0		1	5	20%
Pobl	4	42	10%	3	22	14%
Rhondda Housing Association Ltd	0	1		0	8	
Stori Wales (formerly Hafan Cymru)	0	2		0	1	
Taff Housing Association	1	4	25%	2	5	40%
Tai Calon Community Housing	2	10		0	9	
Tai Tarian	2	9		0	22	
Trivallis	2	26	8%	2	15	13%
Ty Gwalia (Part Of Pobl Group)	0	2		0	3	
United Welsh Housing Association	1	13	8%	2	18	11%
Valleys To Coast Housing	3	23	13%	5	17	29%
Wales & West Housing Association	1	15	7%	1	14	7%
Grand Total	36	352	10%	44	352	13%

Code of Conduct - new complaints

Body	2023/24	2022/23	% change from 2022/23
Town and Community Councils	176	158	11%
County and County Borough Councils	151	122	24%
National Parks	1	3	-67%
Fire Authorities	0	0	n/a
Police and Crime Commissioners and Panels	0	0	n/a
Total	328	283	16%

Subjects	2023/24	2022/23
Accountability and openness	3%	10%
Disclosure and registration of interests	13%	9%
Duty to uphold the law	8%	8%
Integrity	6%	6%
Objectivity and propriety	10%	3%
Promotion of equality and respect	55%	61%
Selflessness and stewardship	5%	3%



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Committee:	THE STANDARDS COMMITTEE
Date:	4 November 2024
Title:	National Standards Committee Forum
Author:	Iwan Evans Head of Legal Services – Monitoring Officer
Purpose:	For Information

Background

The Forum meeting was held on 24 June 2024 – Minutes are attached for information

Decision

To Receive the information

Standards Committees Chairs Forum - Wales

Monday, 24th June 2024 @ 2pm, via Teams

Notes

1. Chairs Announcements

The chair welcomed:

- Judge Claire Sharp the outgoing president of the Adjudication Panel for Wales (APL) and her successor Judge Meleri Tudur.
- Paul Egan, Deputy Chief Executive of One Voice Wales (OVW) the principal organisation for community and town councils in Wales.
- Michelle Morris – Public Services Ombudsman for Wales (PSOW).

Newly appointed Standards Committee Chairs.

- Peter Easy, recently appointed as Chair of Standards Committee for Monmouthshire Council.
- Sue Maughan, recently appointed as Chair of Standards for Bridgend Council.
- Rhys Davies, recently appointed as Chair of Standards for the Isle of Anglesey Council.

2. Notes from the previous meeting – 29th January 2024.

The notes of the previous meeting were agreed, and actions confirmed as completed. The following points were highlighted.

- Chairs of Corporate Joint Committee Standards Committees to be invited to the Forum if they do not already attend as a member of one of their constituent councils' standards committees.
- Payments to co-opted members was a matter for local determination and the Forum must work within its terms of reference.
- Standards Committee Members are not required to be DBS checked.

3. Judge Claire Sharp, the outgoing president of the Adjudication Panel for Wales (APL) and her successor Judge Meleri Tudur.

Judge Claire Sharp talked about the issues she looked for when deciding whether to permit an appeal against a decision by a standards committee and common failings.

She did not discuss the reasons why certain Judgments were made. She said that the legal test was whether there was no reasonable prospect of success but noted that this was not defined within APW legislation or regulations. Judge Sharp adopted the tests from other jurisdictions using the same wording. Judge Sharp added that she took the Appellant's case at its highest when reviewing an application to appeal, unless it was conclusively disproved by the evidence before her, unsupported by reasonable argument or fanciful allegations have been made.

Her decision cannot be appealed other than JR. APW have recommended to the Penn Review that the process altered because timescales are not practical and excludes the PSOW.

Points to consider are:

When setting out a decision notice, state:

- what the committee decides are the key points and findings of fact,
- what arguments are put forward,
- what led you to that decision.

In other words, show your workings/reasoning.

- State who attended and if they left during the hearing. A summary of key points would be helpful.
- You cannot conflate two matters and only provide evidence of one e.g., you cannot state that there was bullying and harassment and just provide the reasoning for a finding of harassment. This could lead to an appeal.
- Helpful to state what are agreed facts and what are disputed and found by the committee.

- Remember the Sanctions Guidance is there to assist and it is sensible to refer to it – it will help the President to know if the correct process was followed.

APW cannot provide legal advice. All the information is on the website. Same as with the court service.

The judge was asked, if the standards committee meeting was recorded, would she look at the recording? She said that the appellant could forward it and it would be admissible however in reality she would not look at the whole meeting. Normally if it's key, a transcript should be provided, but that is unlikely at the permission to appeal stage. However, it was an option available if the recording was provided by the Appellant, and she would personally look at it if referred to the precise time code of whatever was being complained about and it related to an issue in the appeal. It is unlikely that the whole recording would be viewed.

Judge Meleri Tudur concurred with the points made and looked forward to taking up the role as president of the APW.

4. Paul Egan, Deputy Chief Executive of One Voice Wales (OVW) the principal organisation for community and town councils in Wales.

The presentation and Q&A were in response to a request made at a previous meeting of the Forum and included the following:

- Information about the support offered by One Voice Wales to its community and town councils.
- The resources and support it had to offer Town and Community Councils in relation to standards of behaviour.
- The training offered on behaviour / code of conduct for members. Including method of delivery, frequency of sessions held, and the cost.
- The support offered to community and town council clerks and members with reference to a local resolution protocol that is encouraged by the Public Services Ombudsman for Wales.

5. Michelle Morris, Public Services Ombudsman for Wales – Update

- Casework Update (2023/24 and Q1)

- Independent Review (update)
- Local Resolution Procedures (review)

Casework 2023/24

- Another busy year – more complaints than before across both Code and Public Service Complaints – but no additional resources to deal with them.
- Code Complaints form about 10% of total caseload for the office.
- 328 code complaints - 16% increase.
- Investigated a higher proportion of complaints than last year (48) up 13%.
- Referred 21 cases (most in one year) up 43%.
- 85% of breaches upheld (by SC or APW).
- Majority (55%) about 'Promotion of Equality & Respect' which is lower than last year (61%).

Current Year (end of May)

Caseload is 79 (highest caseload we have ever held) (10 Suspended e.g., police investigations, medical reasons).

Focus on reducing time taken to investigate (within 12 months) and closed significant number of Aged Cases last year.

However, caseloads remain high, and we are continuing to take action to reduce these and close cases within 12 months. (Bank Workers, Extra IOs).

Code Team also support Hearings & Appeals, so these too impact on investigation times.

Independent Review

- Terms of reference on PSOW Website.
- Lead by Dr Melissa McCullough (Standards Commissioner for NI Assembly).
- Aim to publish final report in Autumn.
- Final report to be presented to Senedd Finance Committee (likely report back to Senedd).
- Continue to engage with NSCF & MOG regarding outcomes and any actions arising – prior to publication of the report.

Local Resolution Procedures

- Plan to work with Councils and MOs to review existing LRPs and to review and reissue PSOW Guidance in Autumn.
- Intention is to ensure a consistent approach and understanding of issues which are appropriate for LR and the 'serious' issues which should be referred to PSOW.

6. AOB

Experiences to date indicated that the group leader's duty (and the need to report thereon) had been embraced. There was some complexity with independent members who were not part of a group.

7. Date of next meeting

- Monday, 27th January 2025, 2pm – 4pm on Teams.
- Monday 23 June 2025, 2pm – 4pm on Teams.