

# Complete Agenda

# CABINET



## CYNGOR GWYNEDD

<b>DATE</b>	Tuesday, 8th July, 2025
<b>TIME</b>	1.00 pm
<b>LOCATION</b>	Cyfarfod Rhithiol / Virtual Meeting
<b>CONTACT POINT</b>	Annes Sion 01286 679490 / Cabinet@gwynedd.llyw.cymru

### GWYNEDD COUNCIL CABINET MEMBERS

Members	
Nia Wyn Jeffreys	Council Leader
Craig ab Iago	Cabinet Member for Environment
Dilwyn Morgan	Cabinet Member for Adults, Health and Wellbeing
Paul John Rowlinson	Cabinet Member for Housing and Property
Menna Trenholme	Deputy Leader and Cabinet Member for Children and Supporting Families
June Jones	Cabinet Member for Highways, Engineering and Ymgynghoriaeth Gwynedd Consultancy
R Medwyn Hughes	Cabinet Member for Economy and Community
Dewi Jones	Cabinet Member for Education
Huw Wyn Jones	Cabinet Member for Finance
Llio Elenid Owen	Cabinet Member for Corporate Services and Legal and the Welsh Language

## AGENDA

	Item	Submitted by	Officer	Page
1	APOLOGIES			
2	DECLARATION OF PERSONAL INTEREST			
3	URGENT ITEMS			
4	MATTERS ARISING FROM OVERVIEW AND SCRUTINY			
5	MINUTES OF THE MEETING HELD ON 10 JUNE 2025			3 - 9
6	QUARTERLY REPORT - CHAIR OF THE RESPONSE PLAN PROGRAMME BOARD	Cllr. Nia Jeffreys	Dafydd Gibbard, Chief Executive	10 - 19
7	ANNUAL REPORT - FFORDD GWYNEDD 2024/25	Cllr. Nia Jeffreys	Geraint Owen, Corporate Director	20 - 35
8	CUSTOMER CARE PLAN	Cllr. Llio Elenid Owen	Catrin Love, Assistant Head of Corporate Services	36 - 92
9	STRATEGIC SAFEGUARDING PANEL ANNUAL REPORT 2024/25	Cllr. Menna Trenholme	Dylan Owen, Social Services Director	93 - 127
10	COMPLAINTS AND SERVICE IMPROVEMENT ANNUAL REPORT 2024/25	Cllr. Llio Elenid Owen	Ian Jones, Head of Corporate Services	128 - 139

**THE CABINET 10/06/25**

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**Present-**

Councillors: Nia Jeffreys, Menna Trenholme, R. Medwyn Hughes, Craig ab Iago, Dewi Jones, Huw Wyn Jones, June Jones, Dilwyn Morgan, Llio Elenid Owen and Paul Rowlinson.

**Also present-**

Dafydd Gibbard (Chief Executive), Geraint Owen (Corporate Director), Iwan Evans (Monitoring Officer), Llyr B Jones (Assistant Head of Economy and Community), Bryn Pritchard-Jones (Maritime Service Manager), Dafydd Wyn Williams (Head of Environment Department), Roland Thomas (Assistant Head of Environment Department), Gareth Jones (Assistant Head of Environment Department), Heledd Fflur Jones (Planning Policy Team Leader), Dylan Griffiths (Economic Development Service Manager), Sioned Williams (Head of Economy and Community Department), Ian Jones (Head of Corporate Services Department), Huw Ynry (Assistant Head of Finance – Digital) and Annes Sion (Democracy Team Leader).

**1. APOLOGIES**

Everyone was welcomed to the meeting, and it was highlighted that this week was Carers Week, and all the carers in the county were thanked for their work.

No apologies were received.

**2. DECLARATION OF PERSONAL INTEREST**

No declaration of interest was received, but Cllr. Llio Elenid Owen sat as a Local Member for item 6 – Dinas Dinlle Car Park Management Plan and as a result did not have a vote on the matter.

**3. URGENT ITEMS**

There were no urgent items.

**4. MATTERS ARISING FROM OVERVIEW AND SCRUTINY**

There were no matters arising from overview and scrutiny.

**5. MINUTES OF THE MEETING HELD ON 13 MAY 2025**

The minutes of the meeting held on 13 May 2025 were accepted as a true record

## 6. DINAS DINLLE CAR PARK MANAGEMENT PLAN

The report was submitted by Cllr. R. Medwyn Hughes.

### DECISION

Agreed to commence a process to make a permanent off-street parking order at Dinas Dinlle Car Park and delegate the authority to the Head of Economy and Community in consultation with the Cabinet Member and the Head of Legal Services, to prepare an order which will make the experimental order permanent, and then place a notice of this in the press in accordance with Regulations 22 and 23 of the Regulations.

### DISCUSSION

A report was submitted stating that it was for the establishment of new arrangements for the permanent payment for parking at Dinas Dinlle Car Park. It was explained that Cabinet had approved moving forward with the implementation of savings schemes which included the introduction of parking charges on Dinas Dinlle beach.

It was expressed back in 2022/23 that the department had identified resources to carry out work to upgrade the car park and was successful in attracting a grant from the Welsh Government's Brilliant Basics programme. It was noted that work had been carried out to resurface, adapting the entrances, marking parking bays, providing a bus stop, landscaping and upgrading facilities. It was stressed that the investment was very important as the beach as very popular and attracted many local visitors and tourists.

It was explained that a trial period had been held in the summer of 2024 where parking fees were to be paid for a temporary period, and following the trial a public consultation had been organised to invite feedback from residents, local businesses, users, statutory organisations and local groups. Llandwrog Community Council was thanked for its input throughout the period. The main points following this period and the recommendations for developing better arrangements were highlighted which included

- Introduction of seasonal fees between 1 March and 31 October
- Introduction of a season ticket for a reasonable fee
- Introduction of a free hour as a part of the proposed fees structure.

The next steps on the journey were highlighted which were to commence legal action for the introduction of an Off-Street Parking Order, and as part of the process consultations with statutory and local organisations as well as a public consultation period would be undertaken.

The Local Member noted that the beach was extremely popular, and thanked Llandwrog Community Council for responding to all consultations. Thanks were given that the recommendations following the trial period included an affordable season ticket and that fees would be charged between 9:00 and 17:00. The upgrades that had been done were highlighted emphasising that the facilities were much better. The need to ensure that funds were earmarked to maintain the standard of the car park was noted. The need for a cycle path that would be



useful and safe for people to be able to get to Dinas Dinlle by bike or on foot was noted.

Observations arising from the discussion:

- The decision was supported stating the need to maintain the standard of the site and ensure that funds were earmarked to do this.
- It was expressed that the decision was not an easy one but part of a number of difficult decisions to secure services across the county. It was welcomed that the standard of the car park was much higher and ensured that the location was more accessible for users. Thanks were given for making the first hour free, which gave people the opportunity to go for some fresh air on the beach without having to pay.

## **7. WASTE AND RECYCLING STRATEGY**

The report was submitted by Cllr. Craig ab Iago.

### **DECISION**

Approve the right to take the Waste and Recycling Strategy to public consultation, so that we receive feedback from the residents of Gwynedd.

### **DISCUSSION**

The report was submitted stating that the document was a request for permission to enter a public consultation. Pride was noted about the content of the document, explaining that the strategy had been led by former Cabinet member Cllr. Dafydd Meurig. It was explained that the strategy highlighted what the department's principles were on waste and recycling along with how it would be possible to act in accordance with these principles. It was stressed that there was an environmental crisis and that there was a need to look more widely than the Council to solve it.

It was expressed that there were obvious problems seen internationally with clothing companies dumping tonnes of waste annually. It was explained that the national target was to recycle 70% but it was questioned why more should not be recycled.

Looking nationally, it was noted that there was no obvious plan to be seen, but that north Wales councils were working together to incinerate non-recyclable waste to generate electricity. The need to see waste as a resource was highlighted.

The Head of Department added that the strategy set out the principles of the service following a change of department about a year and a half previously. Priorities were identified which included improving customer care, tackling sickness levels, managing overspend and meeting the national target of 70%. It was explained that sickness levels were now falling, the level of customer care had increased, and the number of complaints and service overspending had decreased.

It was noted that the Council had failed to meet its target this year and therefore needed the strategy in order to set a clear path on how to achieve the target next year. It was highlighted that 57% of the county's waste currently was bin waste that could be recycled. It was noted that there were 6 objectives within the strategy to assist in reducing waste and meeting targets. It was stressed that presenting the strategy today was the start of the journey in order to be able to go to public consultation.

Observations arising from the discussion:

- The report was supported by stating the emphasis needed on educating residents, highlighting that residents needed to be a partner with the Council. Thanks were given for the equality report which gave fair and considerate representations of the needs of older people or people with disabilities.
- Thanks were given for a simple and easy to read and understand report.
- It was asked how the department was going to carry out the consultation and asked if the recycling boxes remained fit for purpose as more and more cardboard reached people's homes. It was noted that the department was working with the communications department to try to get a high number of responses, and they would also go to communities and to specific groups as well. With regard to recycling carts, it had been noted that recycling vehicles were designed for the size of the boxes currently available, and it may be necessary to educate which cardboard to put in the cart and when the recycling centres needed to be used.

**8. SUPPLEMENTARY PLANNING GUIDANCE (CONSULTATION VERSION):  
MANAGING THE USE OF DWELLINGS AS HOLIDAY HOMES (SECOND  
HOMES AND SHORT-TERM HOLIDAY LETS)**

The report was submitted by Cllr. Craig ab Iago.

**DECISION**

To approve the suggested changes to the Supplementary Planning Guidance (SPG) following a period of public consultation as included in the Consultation Report (Appendix 1), incorporated in the amended version of the Guidance (see Appendix 2).

To adopt the SPG: Managing the Use of Dwellings as Holiday Accommodation (Second Homes and Short-term Holiday Lets), to be used as a material planning consideration when making planning decisions in the Gwynedd Local Planning Authority Area.

To delegate powers to the Head of Environment Department to make any non-

material modifications that may be required to the SPG before it is published in its final form.

## **DISCUSSION**

The report was submitted noting that it required approval of the recommendations from the public consultation carried out and the adoption of the Supplementary Planning Guidance (SPG). It was explained that the item had been discussed back in February, and the officers had been asked to further explain what had been identified in the consultation and what the department was adopting.

The Assistant Head of the Environment Department noted that a public consultation had now taken place, and consideration had been given to the comments submitted. It was clarified that the SPG needed to be adopted in order for it to be used in determining planning applications.

It was clarified that since the Article 4 direction had come into force in September last year, a planning application was required when converting a main dwelling space into a second home or short-term holiday accommodation. It was reiterated that the Article 4 direction had come into force after the Council had adopted the Local Development Plan. As a result of this, it was noted that the SPG was an interim guide to fill the policy gap until a Local Development Plan had been created and adopted in order to address the issues.

It was expressed that a public consultation had taken place over a six-week period, and that 28 valid comments had been received from 24 respondents. It was noted that many of the comments focused on the Article 4 direction rather than the guidance specifically. It was explained that the type of comments included the suitability of some houses as a primary dwelling and consequently flexibility in terms of second homes. It was noted that giving flexibility so soon could lead to the undermining of Article 4. It was explained that each comment had been carefully considered but that none of the comments had resulted in fundamental changes to the guidance, only minor changes. It was explained that the responses to the consultation as well as the draft guidance had been further considered by the Policy Working Group which had indicated support for the response to the responses and for the draft supplementary plan.

Observations arising from the discussion:

- The challenge of finding a balance between supporting the tourism economy and protecting local people's access to housing was highlighted and it was asked how it would be possible to strike the right balance. It was noted that such comments had permeated through the public consultations and that this needed to be given close consideration when creating a new Local Development Plan along with the more detailed policies that would be required. The need to intertwine the two objectives was explained.

## **9. 2025-26 SHARED PROSPERITY FUND PLANS IN GWYNEDD**

The report was submitted by Cllr. R. Medwyn Hughes

## **DECISION**

To agree to commit up to £7,901,000 from the Gwynedd 2025/26 allocation from the UK Shared Prosperity Fund to the 14 schemes listed in the report.

To authorise the Head of Economy and Community Department - in consultation with the Head of Legal Service, the Head of Finance Department and the Chief Executive - to confirm the details and the financial contribution.

## **DISCUSSION**

The report was presented stating that the fund was financed by the UK Government in order to develop the economy and communities as part of the schemes created to secure funding after leaving Europe. It was highlighted that the Council had 3 roles in dealing with the fund; the Council was the lead body for north Wales, it decided on which schemes were funded here in Gwynedd and led on projects as well. It was noted that £8.19m was available for Gwynedd, with £7.9m available for projects.

It was explained that the projects that had been presented had been before the fund panel and had been discussed in the Leadership Team, and as a result had been scrutinised in detail. It was expressed that the projects brought the greatest value to the residents of Gwynedd.

The Economic Development Services Manager added that the package of projects that had been proposed were ones that build on what had been learned along with the successes over the past three years. It was explained that this year was a period of financial transition and that the schemes had been fairly spread geographically and in terms of cohorts of society in Gwynedd. It was noted that seven schemes were in operation in Gwynedd alone with a further seven schemes operating in conjunction with other counties. Attention was drawn to projects that were smaller funds to support a range of smaller schemes for people across Gwynedd.

Observations arising from the discussion:

- Thanks were given for the report and pride was noted in seeing specific schemes to work with young people along with partnerships with communities in order to grow and develop them.
- It was highlighted that the schemes had clearly been scrutinised and that it was good to see balanced projects. The need for funding for more than short periods of time was noted as well as the need for long-term projects.
- It was asked if the language had been taken into account when deciding on plans. It was explained that the language was central to all decisions and that there were conditions in terms of receiving funding from the fund to comply with the Council's language policy as well as the promotion of the language. It was noted that many of the schemes were to develop employment opportunities, and therefore the language was an integral part as well as contributing to the development of the

language.

## **10. CABINET FORWARD WORK PROGRAM**

The report was submitted by Cllr. Nia Jeffreys.

### **DECISION**

To approve the Forward Work Programme included with the meeting papers.

## **11. EXCLUSION OF PRESS AND PUBLIC**

RESOLVED that the press and public should be excluded from the meeting during the discussion on the following item due to the likely disclosure of exempt information as defined in paragraph 14, Schedule 12A of the Local Government Act 1972 - information about the financial or business transactions of any specific person (including the authority that retains that information). It was explained that there was an acknowledged public interest in openness in relation to the use of public resources and related financial issues. It was also acknowledged that there are occasions, in order to protect the financial interests of public authorities that matters related to commercial information need to be discussed without being publicised. This would be contrary to the wider public interest of securing value for money and the best overall outcome.

## **12. GUIDANCE ON THE ENTERPRISE RESOURCE PLANNING SYSTEM**

The report was submitted by Cllr. Huw Wyn Jones and Cllr. Llio Elenid Owen.

### **DECISION**

To approve the implementation of the first step of the DSB5 - Organisation Management System in the Digital Plan project, in order to meet the needs of Human Resources and Payroll, but to delay the development of a new financial management system until further approval is received from the Cabinet.

To approve the release of £1.2m of resources from the Transformation Fund as a one-off contribution towards the costs of developing the new Payroll / Human Resources system.

### **DISCUSSION**

The item was discussed

The meeting commenced at 1.00 pm and concluded at 2.10 pm

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**CHAIRMAN**

## GWYNEDD COUNCIL – Report to Gwynedd Council's Cabinet

<b>Item title:</b>	Quarterly Report – Chair of the Response Plan Programme Board (July 2025)
<b>Aelod Cabinet:</b>	Cllr. Nia Jeffreys, Leader of the Council
<b>Relevant officer:</b>	Dafydd Gibbard, Chief Executive
<b>Date of meeting:</b>	8 July 2025

### 1. Resolution Sought:

The Cabinet is asked to accept the report which is a quarterly report from the Chair of the Response Plan Programme Board.

### 2. What is the reason why the Cabinet needs to make the decision:

A Response Plan was adopted by Gwynedd Council's Cabinet in January 2025 to collate all support, reviews, audits and other workstreams relating to the response to crime by the Head Teacher, Neil Foden.

There was a pledge to report quarterly to Cabinet Members on the progress of the Response Board's work programme and operation.

The report is shared by the Chair of the Response Plan Programme Board, with the intention of raising awareness of the developments and what has and needs to be achieved by the Response Plan Programme Board.

### 3. Introduction and Logic

#### 3.1 Background/ Introduction

The Chief Executive was commissioned to put arrangements in place for the implementation of the content of this Response Plan including the establishment of a dedicated Programme Board and regular reporting on progress to Cabinet.

Professor Sally Holland has been appointed to take up the role of Independent Chair of the Board in February 2025. Sally is Professor of Social Work at the Children's Social Care Research and Development Centre (CASCADE) at Cardiff University and a former Children's Commissioner for Wales (2015-2022).

As promised, Sally will report quarterly to Cabinet Members on the progress of the Response Board's work programme and operation. This is the first of these reports.

#### 3.2 Next Steps

The Board's work continues with the intention of reporting back to Cabinet on progress in 3 months' time.

#### **4. Comments of Statutory Officers.**

##### **4.1 Chief Finance Officer**

The decision sought will not create a new spending commitment and I have no further comments to add.

##### **4.2 Monitoring Officer**

The Programme Board has been established by the Cabinet to co-ordinate and ensure progress on the Response Plan which it adopted. It is key to this governance arrangement that the Cabinet receives regular updates on progress in this all-important work. A report by the Independent Chair, Professor Sally Holland is a transparent and robust method of providing that assurance. I welcome the report.

## Introduction

A Response Plan was adopted by Cyngor Gwynedd's Cabinet in January 2025 to collate all support, reviews, audits and other work streams responding to the crimes relating to the head teacher, Neil Foden.

## Objectives

Six main objectives were identified for this Plan when it was presented to Cabinet in January 2025. An additional seventh objective of 'accountability' has since been adopted by the Board and there may well be additional objectives as the situation becomes clearer after reviews and investigations are completed over time.

1. **Acknowledge** openly and publicly that such offences should never have happened, and that no child should suffer such experiences.
2. **Apologise** sincerely to the victims and survivors and their families for what they have had to suffer.
3. **Support** the victims and survivors, the school and the wider community to seek to recover their situations.
4. **Establish** all the facts of the case, the history around the situation and the wider context.
5. **Learn** all lessons identified as part of the findings and recommendations of all investigations.
6. **Improve** by responding in full and at pace to all findings and recommendations with the aim of giving confidence to the public that we are doing everything possible to ensure that no one will suffer in the same way ever again.
7. **Accountable** by being open and transparent about our improvement progress and committing to measuring the impact of the changes we implement.

## Response Plan Programme Board – Terms of Reference

The Cabinet commissioned the Chief Executive, Dafydd Gibbard to make arrangements to implement the contents of this Response Plan including establishing a specific Programme Board and to regularly report progress to the Cabinet.

I was appointed by the Chief Executive to take on the role of Independent Chair in February 2025. I am a Professor of Social Work at the Children's Social Care Research and Development Centre (CASCADE) at Cardiff University and a former Children's Commissioner for Wales (2015-2022).

The Response Plan Programme Board has since been established and is made up of Cabinet Members, Officials from Cyngor Gwynedd, representatives from Ysgol Friars and External Representatives/Active Observers including representatives from Estyn, Care Inspectorate Wales, Welsh Government, Children's Commissioner for Wales and the Regional Safeguarding Board (See [Appendix 1](#) – Terms of Reference). The full terms of reference continues to be reviewed to ensure that the right representation is around the table and the Response Board works effectively. I am grateful to everyone for taking the time to consider the content and direction of the workplan and for their ongoing contribution to this important work.

An important addition to the Terms of Reference has been an agreement that the Programme Board may collate observations and learning points that have implications beyond Gwynedd, and will report these to the appropriate national authorities – some of whom are represented on the Board.



A further amend is that the external representatives will meet each quarter in advance of the Board to discuss the Cyngor's progress and key questions arising. In this way, I am aiming to ensure that the Board maintains an important balance between advice-giving and challenge.

I will report on a quarterly basis to Cabinet Members on the progress of the Response Board workplan, and the functioning of the Response Board. This is the first of such reports.

### **Timescales**

Timescales have been discussed with Board members upon its establishment and it has been agreed that the Board should continue to meet until all actions in the response plan are completed and Board members are satisfied that evidence in relation to the listed impact measures demonstrates effectiveness of these actions.

As Chair, I will review the likely timescales of the Response Board in the autumn of 2025, when the complexity and scale of work required following the publication of the Child Practice Review has been assessed, and report on this to the Board.

On the implementation of the Board's plan, it was noted that it is essential that neither this Response Plan nor any issue that feeds into any part of this Plan undermines any other work, such as the Children's Practice Review set up by the North Wales Safeguarding Board chaired by Jan Pickles. For that reason, I continue to liaise with the Chair of the Safeguarding Board and the Chair of the Child Protection Review (CPR) on an ongoing basis in the remit of my role.

### **Response Plan Progress**

Since establishing the Programme Board in February 2025, four meetings have taken place and there has been regular correspondence in between meetings to ensure action is being taken.

I can report that Cyngor Gwynedd is making positive progress on several of the workstreams in the Response Plan.

As Chair, I have observed that senior officials who are part of the Board are keen to make genuine progress in the areas of work they are responsible for, and they have shown a willingness to hear and act on the advice of external members and the rest of the Board. In my assessment there is a commitment to learn and make meaningful changes. There is also an acknowledgement that this will not be a quick or easy process.

Several additions and amends have been made to the Response Plan on the advice of the Response Board since it was last presented to the Cabinet. Significant changes are:

- More emphasis given to children and young people's views and experiences being routinely sought at a school and county level.
- Measures being added to each of the workstreams so that the impact of each workstream can be measured, qualitatively and quantitatively.

Positive progress has already been made on several of the workstreams with 32 out of 63 of the tasks completed. This includes receiving and responding to the recommendations of a specialist safeguarding barrister (2019 Report) which is a key milestone and likely to be one of the most challenging aspects to date. Following discussion in the Board meeting in May, I am satisfied that the Council has made a suitable plan to respond to the recommendations in that report.

I anticipate that a significant point will be reached in the workplan when the CPR recommendations are presented to the Board in September 2025. There are likely to be significant additions and amends to the current Response Plan following this.

Although the Cabinet gave authority to the Chief Executive to establish and organise temporary resources and necessary staffing capacity to realise the contents of this Plan, resources continue to be one of the main challenges and I have been informed that there are continued discussions with Welsh Government around this.

We anticipate that the issue of adequate resourcing will become more prominent depending on the recommendations arising from the CPR review.

The Board will continue to ensure that a clear communication plan is in place in order to updating everyone involved - most importantly the victims and survivors, their families and the wider community, as well as elected members and other key stakeholders. Media scrutiny has been significant to date and Gwynedd representatives have found value in holding briefing sessions with the media in order to ensure there is an honest dialogue in terms of the messages reaching the wider public. There is a continued awareness of the need to ensure the right balance between safeguarding the victims and survivors and the need to update the public on matters arising.

Looking ahead, I am confident that the Board, will be able to navigate the evolving workplan and play a part in ensuring recommendations are delivered.

### Workstream updates

The Response Plan is a working plan that is reviewed regularly by the Board. The Response Plan includes many tasks and sub-tasks and follows four key workstreams including;

<b>Work Stream A</b>	Supporting the victims and survivors	Do everything within our ability to support the victims and survivors. Establish a caring relationship with the victims and survivors and ensure that the Council and the victims and survivors are "on the same side"
<b>Work Stream B</b>	Ensuring we have the best possible safeguarding arrangements today so that the public has trust and confidence in them.	Ensure that our safeguarding arrangements are robust and of the best possible standard
<b>Work Stream C</b>	Establish what has happened, learn and improve	Do everything possible to ensure that we fully understand everything that has happened and have identified any weaknesses. Embrace and implement the recommendations in order to learn and improve.
<b>Work Stream Ch</b>	Supporting and stabilising Ysgol Friars	Ensure that the current standard of education continues to be maintained, that staff are confident and that the school's Governing Body leadership is stable and effective.

The Education and Economy Scrutiny Committee also have a key role in continuing to scrutinise the Plan as part of their work programme.

Actions are closely monitored within the Response Plan and are split into two categories;

- a. Actions that were time-limited in nature, completed and closed
- b. Actions that have led to changes to practices that will continue and become embedded in the local authority's work.

This will build over time into a running record that will form a record of embedded changes and ongoing safeguarding efforts that result from the response plan.

There are currently 63 tasks on the work programme, and they are varied in terms of priority level and the nature of timescales. 32 of these have been completed, 24 are being either worked on or are premature and 5 will be carried over as continuous actions.

Actions that are ongoing and integrated into Cyngor Gwynedd's regular work will be gathered and reported in this series of quarterly updates. The following are currently listed as ongoing actions that will become embedded into the local authority's work to ensure long term impact;

1. Ongoing offer of support to the victims and survivors with continuous guidance through the Support Workers and specialist organisations, e.g. Rape and Sexual Abuse Support Centre North Wales (RASASC North Wales).
2. Ensuring robust safeguarding arrangements in all Council departments to ensure the safety and welfare of children and adults who are at risk of being abused or neglected.
3. Visits to monitor and support safeguarding arrangements for individual schools annually
4. Training and support for Governors.
5. Continuing to improve performance in order to comply with the statutory deadlines for responding to Freedom of Information requests.

The following is a list of key milestones within the Response Plan over this first quarter. These milestones include the recommendations from the 2019 Barrister's Safeguarding Review Report, which Cyngor Gwynedd recently received and are now addressing the recommendations.

- a) **Recommendations from the Barrister's safeguarding review report (2019)** – Cyngor Gwynedd commissioned an independent barrister who specialises in safeguarding investigations to carry out an investigation into the specific incidents in 2019 highlighted during Neil Foden's criminal trial. This detailed work is now complete and the following recommendations noted;
  1. **Arrangements for investigating safeguarding concerns** – The Council will put in place arrangements for dealing with concerns which do not reach the formal child safeguarding thresholds and is taking the opportunity to create a new system which could benefit this important field.
  2. **Record keeping** – Although the Barrister identified good practice in terms of keeping records of meetings, opportunities for improvements were also identified. As a result, record keeping arrangements for safeguarding matters across the Authority are being strengthened and a central recording keeping management system put in place. In addition, the record-keeping element within staff safeguarding training is also being strengthened.
  3. **Whistleblowing** – Whistleblowing arrangements for staff across the organisation is being strengthened.
  4. **Safeguarding training** – While staff in the Council's Children and Education Departments already receive a higher level of safeguarding training, arrangements are now in place to ensure that all staff in each department receive relevant training.
  5. **School safeguarding policy** – Steps have been taken to strengthen the procedures for school staff to follow in challenging safeguarding cases, including when to share information with governing bodies.
- b) **Freedom of Information Audit Report** - The Information Commissioner had been commissioned by Cyngor Gwynedd to carry out a specific audit into response arrangements. A report has been received and it has been acknowledged that there was a level of assurance already in place with experienced staff handling requests, and guidelines and documents already in place. There is some room for improvement and a detailed work plan will be put in place to address the recommendations arising including improving response rates to freedom of information requests and training provision. The work plan will be received and discussed at a future Board meeting.
- c) **Arrangements at Ysgol Friars** - Margaret Davies has started in the role as Temporary Head of Ysgol Friars since Easter and has ensured support to try and provide stabilisation at the school in terms of the staffing levels and support to the senior management team. Margaret is a member of the Board and will report to the Board on progress in the school. There are a number of matters in this workstream that are likely to take time to implement and will remain as continuous actions. e.g. school governance, the curriculum and ensuring that learners' voice and experience are heard.

**Anticipated milestones:**

- d) **Review of the response to a report by an Independent Complaints Panel in 2019** – full report is anticipated before the end of this term.
- e) **Child Practice Review** - A statutory CPR is being carried out by the North Wales Safeguarding Board, which is independent of Cyngor Gwynedd. It is anticipated that the workstream will adopt these recommendations once published in September 2025.

*Note* - All relevant documentation, e.g. the recommendations from the Barrister's safeguarding review report (2019) have been shared with the Child Practice Review as it is anticipated that similar recommendations could arise from different investigations.

## Measuring Impact

The Board will continue to monitor and measure the impact of each of the workstreams, ensuring they align with strategic objectives and deliver meaningful outcomes for stakeholders. The following measures have been proposed but continue to be reviewed based on the recommendations of different reports.

<b>Workflow</b>	<b>Title</b>	<b>Measures</b>
A	Supporting the victims and survivors	<ul style="list-style-type: none"> <li>a. Complete all work tasks</li> <li>b. Response from the victims and survivors through the support workers</li> </ul>
B	Ensure that we have the best possible safeguards in place today so that the public has trust and confidence in them.	<ul style="list-style-type: none"> <li>a. Complete all work tasks</li> <li>b. Department for Education Annual Inspections - % schools inspected and compliant</li> <li>c. Estyn Schools Inspections - % of schools exhibiting appropriate safeguarding culture</li> <li>d. Feedback on satisfaction with support on safeguarding arrangements in schools by the Gwynedd Headteachers' Forum and the Gwynedd Youth Forums.</li> </ul>
C	Research, learn and improve	<ul style="list-style-type: none"> <li>a. Complete all work tasks</li> <li>b. Performance measure - Freedom of information requests</li> <li>c. Review and revise the impact of the measures for this workstream following the findings of each review or investigation</li> </ul>
Ch	Supporting and stabilising Ysgol Friars	<ul style="list-style-type: none"> <li>a. Complete all work tasks</li> <li>b. SHRN (School Health Research Network) results - Measuring self-reported learners' confidence in relevant questions in the 2025-26 school year compared to the baseline in 2023-4. Outcomes have influenced a whole-school approach to health and wellbeing'</li> <li>c. Feedback from meetings with the School Council</li> <li>e. Feedback from Union Representatives</li> <li>f. Questionnaires with different School stakeholders</li> </ul>

## Closing Remarks

Since the Response Plan was adopted by the Cabinet in January 2025, I am satisfied that progress has been made across each of the work streams, including improvements to monitoring arrangements for safeguards in schools and initiating multiple investigations.

Despite this, significant work remains to ensure the highest standards of child protection are in place and the Board will continue its detailed work of scrutiny and advice-giving to ensure that Cyngor Gwynedd delivers on this.

Whilst the Response Plan can seem formal in nature, we cannot for a moment forget about the most important ones in the midst of this, namely the girls who should have been safe in their school. The whole purpose of this Response Plan and every action we take is to do everything possible to prevent such crimes being committed by persons in positions of trust in Gwynedd, and that should always be at the top of our considerations.

*Further information:*

- [North Wales Safeguarding Board – Safeguarding children and adults across North Wales](#)
- [21.01.25 Cynllun Ymateb Adroddiad Cabinet S.pdf](#) and the full plan can be found here: [Appendix 1 - Response Plan.pdf](#)

*Members of the public who have new information relating to possible child abuse are urged to report the matter directly to the Police or contact the Social Services Department of their local council.*

## **Appendix 1 - TERMS OF REFERENCE – RESPONSE PLAN**

### **Purpose:**

- To verify and challenge the appropriate and timely progress of the four workstreams within the Response Plan.
- To verify and challenge whether the implementation of individual issues within each workstream is thorough and appropriate.
- To review the contents of the Response Plan as the situation develops and ensure that the Plan is adapted appropriately and in a timely manner to respond to the recommendations of the Child Practice Review.
- To report back to the Council's Cabinet regularly on the appropriate and timely progress of the workstreams.
- The Programme Board may collate observations and learning points that have implications beyond Gwynedd, and will report these to the appropriate national authorities – some of whom are represented on this Board.

### **Meeting organisation:**

- Wherever possible, please arrange for a suitable senior-enough substitution who is able to report on your behalf, if you are unable to attend.
- Status of minutes and information shared at the meeting: confidential until in the public domain.
- All participants will be asked to declare any personal interest at the beginning of each meeting should it be necessary
- External members will meet quarterly for half an hour before the meeting starts to discuss satisfaction with progress and any questions we may wish to raise. This pre-meeting is to be attended by Gwynedd secretariat and notes taken, for transparency.
- Most meetings will include one or more substantial item per meeting, such as looking at one workstream in detail or considering a report (eg CPR).

### **Membership:**

#### **a. Chairperson:**

Sally Holland, Chair

#### **b. Elected Members:**

- Nia Jeffreys (Council Leader) – CYNG/COUN
- Menna Trenholme (Deputy Council Leader) – CYNG/COUN
- Dewi Jones (Councillor) – CYNG/COUN
- Llio Elenid Owen (Councillor) – CYNG/COUN

#### **c. Officials:**

- Dafydd Gibbard (Chief Executive) – Leadership Team
- Dylan Owen (Corporate Director and Statutory Director of Social Services) – Leadership Team
- Geraint Owen (Corporate Director) – Leadership Team
- Gwern Ap Rhisiart (Head of Education) – Education Department
- Ian Jones (Head of Corporate Services) – Corporate Services Department
- Nia Grisdale (Legal Services Manager) – Legal Services
- Sharron Williams Carter (Assistant Head – Supporting Families) – Children and Family Support Department
- Sion Gwynfryn Williams (Communications and Engagement Manager) - Corporate Services Department
- Sarah Marion Jones (Communications Team Leader) - Corporate Services Department
- Margaret Davies (Head of Ysgol Friars)
- Rhian Parry Jones (Representative - School Headteachers Chairpersons Group)

#### **d. External Representatives (Active Observers):**

- Dyfrig Ellis, Estyn

- Sian Roberts, Care Inspectorate Wales
- Taryn Stephens, Welsh Government
- Nicola Edwards, Welsh Government
- Georgina Haarhoff, Welsh Government
- Rocio Cifuentes, Children's Commissioner
- Sara Jermin, Children's Commissioner
- Rachel Thomas, Children's Commissioner
- Geraint Davies, Regional Safeguarding Board

**Note** - Board membership may allow flexibility for others to join for specific items (depending on the agenda).

**Reporting Arrangements:**

The Programme Board – Response Plan will report to the Cabinet once every quarter on the development of the workstreams.

The Programme Board– Response Plan may collate observations and learning points that have implications beyond Gwynedd, and will report these to the appropriate national authorities.

**Timeline:**

The Programme Board will continue to meet until all actions in the response plan are completed and Board members are satisfied that evidence in relation to the listed impact measures demonstrates effectiveness of these actions. The Chair will review the likely timescales in the autumn of 2025, when the complexity and scale of work required following the publication of the Child Practice Review has been assessed, and report on this to the Board.

## GWYNEDD COUNCIL – Report to Gwynedd Council's Cabinet



<b>Item title:</b>	<i>Annual Report – Ffordd Gwynedd 2024-25</i>
<b>Aelod Cabinet:</b>	<i>Cllr. Nia Jeffreys, Leader of Gwynedd Council</i>
<b>Relevant officer:</b>	<i>Geraint Owen, Corporate Director</i>
<b>Date of meeting:</b>	<i>8 July 2025</i>

### 1. Resolution Sought:

Approval of the Ffordd Gwynedd Annual Performance Report 2024/25 (**Annex 1**).

### 2. What is the reason why the Cabinet needs to make the decision:

The Ffordd Gwynedd Plan was identified as one of the key priorities of the Council's Plan 2023-28 and committed to publishing an annual report on the progress of the works into the future. This is the second in a series of reports that are planned to be published in each of the next five years.

The report is shared with the intention of raising awareness of the developments being covered within the nine work streams set out in the Plan.

### 3. Introduction and Logic

#### 3.1 Background/ Introduction

In order to foster the best possible working environment for our staff and transform the services we provide, the Ffordd Gwynedd Plan focuses on developing the Council's culture and organisation, i.e., the "way we work".

The Ffordd Gwynedd Plan is a priority in the Council's Plan 2023-28 and has been put in place to weave together workflows within the Council that cater to our workforce and seek to ensure that we have a workforce that thrives at work and can deliver the best possible services to the public.

This report provides information on the progress against what is reported during the second year of the current Plan. The intention is to provide a balanced report, which addresses the aspects that have not yet been achieved as well as the positive aspects.

#### 3.2 Rationale and presentation for recommending the decision



The Plan's governance arrangements for 2023-28 state that we will submit an annual report to Cabinet on the progress of the "way of working". The rationale for recommending the decision sought is included in that report.

### **Equality Act 2010**

As part of the preparation of the Ffordd Gwynedd Plan 2023-28, an Equality Impact Assessment was prepared (submitted to Cabinet on 07/03/2023). The assessment of the Plan as a whole does not find any impact that would justify a deviation from the recommendation and anticipates elements that would have a positive impact.

### **Well-being of Future Generations (Wales) Act 2015**

In order to meet the requirements of the Well-being of Future Generations Act we need to report on what we have done to contribute towards the principles of the Act and in particular the well-being objectives that we have adopted. This report has been compiled on the basis of our well-being objectives (the seven priority areas) and outlines what has been achieved in the period in question.

### **3.3 Next Steps**

The priorities for driving the work forward during the third year of the Scheme are set out in the Annual Report.

## **4. Comments of Statutory Officers.**

### **4.1 Chief Finance Officer**

Nothing to add from the perspective of financial propriety.

### **4.2 Monitoring Officer**

I am satisfied with the propriety of the report and recommendation.

### **Attachment List:**

1. Annual Report 2024-25

### **Background Document List:**

- a. [Ffordd Gwynedd Plan](#)

# Ffordd Gwynedd Plan 2023-28

## Annual Report 2024/25



## CONTENT

Introduction	03
Learn, Experiment and Act to Improve	04
Leadership	05
Understand and Improve Performance	06
Support and Develop	07
Digital Transformation	08
Workforce Planning and Talent Development	09
Continious Appraisal	10
A Satisfied and Healthy Workforce	11
Customer Contact	12
Conclusions	13

# INTRODUCTION

The Ffordd Gwynedd Plan and Work Programme for the 2023-28 period was adopted by the Council Cabinet at its meeting on 7 March, 2023. Nine work streams were confirmed as priorities for the development of the organisation within the Council in that Plan with a commitment to publishing an annual report on the future progress of the work.

This is the second in a series of reports due to be published in each of the five years of the Plan period.

As part of a new governance structure for the implementation of the Plan, the Ffordd Gwynedd Lead Group (comprising all members of the Council's Corporate Management Team) was established. That Group was only able to meet on two occasions during the first year of the current Plan and as a result, it was decided to incorporate that lead function as a fixed item on the monthly agenda of the Corporate Management Team meetings. It was arranged to focus on one of the individual workstreams at each monthly meeting since November 2024 and that has allowed for a better opportunity to keep a constant overview of progress.

Furthermore, a Practitioners' Group was established to share best practice in relation to developing the culture and reviewing work systems. That Group has a strong and numerous membership but it is continuing to get to grips with the objectives for which it was established. The Group has now been redesignated as an Experimentation and Improvement Group and efforts are being made to convene the Group more regularly in the future in order to seek to take full advantage of the experiences of different services in developing the "way of working".

The Officers' Group continues as part of the governance structure. This is the Group that includes officers who lead on the individual work streams and offer departments the support for promoting the culture and associated work methods including the learning and development support that is key in all this.

The real success of this Plan in reality is to be assured, through the performance measures and feedback received, that the developments and work realised lead to improved services. This report is based on two main information sources on which to base the conclusions.

The most recent departmental self-assessments have largely identified issues such as rooting the practice of conducting ongoing evaluations, extending the basic "way of working" training, improving contact with the frontline and ensuring that performance monitoring is not seen as the need to report solely to others.

The Council places considerable emphasis on gathering the opinion of staff to identify how the Council is perceived as an employer. The results are shared with Heads of Department and management teams across the Council, so that they have the opportunity to respond to the main messages or any specific challenge at corporate and departmental level.

The latest annual Voice of Staff Survey has therefore clearly informed what is to be prioritised in the year ahead, with specific comments arising from responses on celebrating success and appreciating work, raising awareness about staff benefits, promoting work-life balance and providing opportunities to voice opinions on developments.

Here is more detail on the developments and feedback in relation to the nine individual work streams.



## Learn, Experiment and Act to Improve

The Practitioner Group was re-established as an Experimentation and Improvement Group during the year with the intention of stimulating greater sharing of best practice and lessons learned. A register of reviews is kept which is carried out across the Council and that register shows that reviews of systems and processes are being carried out in certain service units in all departments within the Council.

The emphasis in the current Plan on carrying out reviews on smaller pieces of work systems, as well as carrying out reviews on whole systems, appears to have borne fruit and every Council Department is able to provide examples of reviews that have led to improvements during the year e.g. two comprehensive reviews being carried out within the Finance Department (Income and Council Tax) while there are several examples within the Economy and Community Department which demonstrate how many services have learned, experimented and taken action to improve in the past year. A number of the improvements relate to the use of technology with developments relating to the use of artificial intelligence becoming increasingly evident e.g. The Licensing Team within Public Protection has seen an improvement in the handling time of taxi licence applications following the development and introduction of a specific electronic system.

It was highlighted in the feedback from the self-assessment that gaining true ownership of the need to learn, experiment and improve amongst sections of the front-line workforce can be challenging and there is a need to recognise that the expected progress is not consistently realised in this context and that the Experimentation and Improvement Group needs to lead the efforts to promote this work and highlight the robust improvements resulting from the reviews being undertaken.





## Leadership

All Departments without exception recognises that “leading” rather than “managing” is the aim and practice of most managers but there is a recognition that change is less well-embedded in all services. In that regard, the need for training is being seen as part of the further movement to ensure that leadership is the norm and expectation when one joins the Council.

The Corporate Management Team has held two full-day sessions during the year to develop as a team of leaders in the Council and Cabinet members have invested their time in personal development and as a team during the year with a clear intention to further build on that development during 2025/26. The Senior Leadership Programme, which has been delivered to the Corporate Management Team, adds to the support available to develop leadership skills and knowledge – this includes working with Academi Cymru and taking advantage of development materials from SOLACE.

The new Ffordd Gwynedd training programme has been reintroduced for managers during the year while the Manager Development Programme is going from strength to strength with the positive feedback from attendees, and the fact that a number of the 36 (who have already completed the programme) have subsequently been promoted speaks for itself. The Women in Leadership Programme, which continues to be offered, has seen the same success, with the percentage of women in management positions in the Council having increased to 43% (from 41% in 23/24).

Two series of the Managers and Team Leaders Network took place with items and discussions on issues such as cross-departmental collaboration, well-being strategy, celebrating success, understanding and improving performance, managing absences and the practice of carrying out reviews of work systems.

A Forum for Assistant Heads of Services was first established within the Council as a result of identifying a gap in the opportunities for this cohort of senior managers to come together, again to share experiences and contribute to the development of the organisation. The Forum has met on three occasions during 2024/25 with a number of the items submitted to the Managers Network also being addressed there.

A growing number of departments are running developmental activities for managers and leaders and all of this is an additional contribution to embedding the way of working and, crucially, to promoting leadership rather than management e.g. “Rising Leaders” in the museums sector, “SOCItM Leadership Academy” within IT





## Understand and Improve Performance

It was highlighted last year that several departments highlight the need to ensure an understanding, among officers, of the difference between reporting and performance management. The emphasis remains within a number of services on the need to collect and analyse performance details in preparation for meetings to challenge and support the Cabinet Member rather than for improving provision. A short presentation was organised in the November 2024 series of the Managers Network to raise awareness of this difference and encourage managers to discuss performance with their teams on a regular basis.

An example of how some departments are trying to promote this further is inviting members of individual services to attend performance challenging and support meetings with their manager in order to contribute to the discussion and showcase their understanding of how the service unit is performing e.g. Corporate Services.

However, the feedback from the self-assessment and voice of staff survey confirms that not all staff are aware of what is reported on their Service performance or do not receive feedback from the performance challenging and support meetings, where progress and developments within their area of work are being dealt with and discussed.

There are other examples where a discussion on performance is a constant part of individual team meetings but it is accepted that further effort is needed to embed these best practices and ensure that all staff understand and accept responsibility for improving performance within their Service.

Furthermore, the formal Cabinet Member performance reports will be submitted to meetings of the appropriate Scrutiny Committee rather than to meetings of the Cabinet itself from June 2025 onwards, with the performance measures of each Service being regularly published on the Council's website as a result. This development is again seen as another means of promoting ownership of performance within teams across the Council.



## Support and Develop

There is significant investment within the Council into staff development at corporate, departmental and individual service level. Several departments report that there is a focus on supporting specialist and professional training more often than not and that awareness needs to be raised of the training provided corporately in order for individuals to take greater advantage of what is offered.

It is considered by several Departments that one reason why the culture of Ffordd Gwynedd has not been fully rooted everywhere to date is the fact that not all officers have had the opportunity to undertake training on the “way of working”. That refreshed training has now been piloted with different cohorts of staff and Members and an intensive programme of training will be offered from September 2025 which will be a combination of face-to-face training sessions and e-learning.

A new Learning and Development Framework has been launched with the programme for the first year focusing on basic training such as finance management, well-being and digital skills.

The content of this framework is primarily based on the needs identified within the departments with a programme over the next three years in the pipeline to further develop the programme and add to what is offered.

The Senior Leadership Programme, the Manager Development Programme and the Women in Leadership Programme continue to demonstrate their value with a large number of officers eager to sign up on each occasion when a new series is announced.

There is also strong evidence from the departments demonstrating that the continuous development of staff is a priority within the services with specialist development opportunities at local, regional and national level. A particular appreciation of the support to develop Welsh language skills was noted by more than one Department.

One frustration identified in this area is the lack of availability of digital accounts in order to facilitate frontline staff access to e-learning provision. It is recognised that this needs further attention and the Digital Transformation Board's work programme has identified the task as one of its priorities for the next period. The Workforce Sub-Group has already gathered the necessary details from staff with a view to taking action in the coming year.







## Digital Transformation

The corporate Digital Plan for 2023-38 was approved by the Cabinet on 7 November, 2023. The period of this Plan coincides with the period of the Council Plan and Digital Transformation has been identified as an improvement priority in that Plan. Funding has already been secured to drive the first two-year work programme of the Digital Plan with priorities for that period including a new integrated telephone system, a new organisation and payroll management system, upgrading the corporate website, ensuring access to a digital account for all Council staff and developing the responsible use of artificial intelligence.

Furthermore, events during the year have identified the need for us to add cyber security to those priorities and attention has already been given to corporate governance arrangements in that regard i.e. two groups have been established that will consider specific aspects of this threat – one will look at defence against attacks on our systems and will be accountable to the Digital Transformation Board and the other will focus on our response to a cyber security attack in relation to continuity of service and reporting to the Strategic Panel on Emergency Plans. The Corporate Management Team and the Leadership Team, in turn, will receive regular updates on the work of both groups to assure us of our ability to cope with this growing threat.

As for the other priorities, the following progress can be reported;

- A new telephone system has already been purchased and released to a cohort of staff with forecasts that the whole Council (including schools) will have transitioned to the new system by October 2025.
- Preparatory work for ordering a new organisation management and payroll system has been completed with the intention of determining a system provider by September 2025 and implementing the system from October 2026.
- Accessibility as well as the ability to search for information on the corporate website has been significantly upgraded with the launch of the redesigned website and intranet to follow during the first half of 2025/26.

Beyond these priorities, developments within individual departments/services have taken place e.g.

- Promote the use of credit cards instead of cash accounts and move away from cheques altogether using the BACS electronics method within the Finance Department
- develop 'Power app' to record and create school support visit reports and a dashboard to present, monitor and evaluate learner group data in the Education Department.



## Workforce Planning and Talent Development

7 work sub-streams have been identified for driving this work forward. They range from conducting a “Ffordd Gwynedd” exercise on the whole process of attracting staff to work for the Council to the need to establish specific training plans that address rare skills and expertise, as well as the appropriate behaviours that are necessary to the future continuity of service.

The work carried out during the year includes the establishment of a new Work Experience Scheme and ensuring up-to-date information on mandatory training for all members of staff.

Furthermore, the talent development schemes that the Council has are going from strength to strength. With over 20 new jobs available in the year, there were almost 130 unique applications for apprentice and professional trainee job opportunities. The quality of the applications received was better than ever. The offer of diverse opportunities across different areas within the Council has meant that the Council has 43 apprentices and 18 professional trainees during 2024/25.

The majority of individuals who have completed these schemes are now in full-time positions in various fields, including systems engineering, electrical, digital programming, legal, events and accounting. The success of these schemes continues to strengthen the Council's talent base and are recognised as a key strategic tool in planning the workforce for the future while the arrival of the Care Academy during the year has enriched the provision even further.

A number of Council Services have taken advantage of these schemes, with the applications approved being those that can demonstrate the need to invest in order to fill anticipated gaps thereby ensuring continuity of service.

However, it is recognised that a number of the other sub work streams under this heading have not been realised and that is subject to a significant additional time investment at the beginning of 2025/26, in particular the work relating to identifying progression to key posts and undertake a review of staff recruitment arrangements for the Council's workforce.







## Continuous Appraisal

The adopted Plan states that we want to ensure timely and effective evaluation in all services across the Council.

Regular conversations and meetings between a manager and a member of staff take place in most services, but it cannot be stated that those conversations are tantamount to an evaluation of performance and needs on a personal level. The practice of evaluation has not been embedded and there is no regular discussion on an individual's conduct, even within those services where it is considered that continuous evaluation takes place.

It is clear that further guidance is needed on how to get the most out of an evaluation discussion, how to record the actions agreed and also how to tie the conclusions with staff development plans. The management teams of each Department have received a presentation on the guidance available i.e. it is proposed that an evaluation discussion be divided into three parts – the well-being of the member of staff, work programme and personal development. Access to that guidance is available to all officers on the Council's intranet.

There will be an official launch of all supporting materials in September 2025 with the requirement of ongoing evaluation for all officers in the Council.





## A Satisfied and Healthy Workforce

The health and well-being of staff is at the core of our ability as a Council to meet the needs of the people of the County. There is comprehensive support available to promote and support health and well-being but it was highlighted in the feedback from the 23/24 Voice of Staff Survey that the provision is not obvious to everyone and the information needs to be disseminated and permeated into all parts of the Council's activity. The responses to the latest Voice of Staff Survey confirm that the efforts to raise awareness in this context have borne fruit and that more staff are now aware of the support that is now available.

A new Well-being Strategy was approved by Cabinet at its meeting on December 17, 2024. The Strategy is based on three pillars, namely leadership and management, sustainable support and a work environment with mental, physical, social and financial well-being at the heart of what is sought to be achieved.

The corporate Occupational Health Unit leads and drives the programme of supporting health and well-being but we all have the responsibility to look after our own health and to support colleagues when situations require it. The Unit has continued to undertake a tour around frontline workplaces such as Depos, Residential Homes etc, raising awareness of the support available and carrying out health checks. But, crucially, the activity to support well-being is not confined to the corporate effort and there are several examples of trying to promote well-being within the departments e.g.

- the Environment Department has carried out a 16-week exercise plan with the specialist support of leisure centre staff
- the Children and Supporting Families Department has held workshops for employees on staff well-being

The level of absences has increased again however on a whole-Council basis, increasing from an average of 10.29 days per head in 2023/24 to 12.94 days per head at the end of 2024/25. New absence management arrangements have been introduced during the year while an Absences Group has been established and is focusing on the main reasons for sickness absences with a view to introducing and implementing the proactive actions set out in the Well-being Strategy as well as providing timely data to managers.

Addressing this area has been identified as one of the top priorities of the Organisation Development Plan in the year ahead.





## Customer Contact

A cross-departmental Group has been established to draw up a Customer Contact Charter. That Charter, in its final draft form, will be submitted to Cabinet for adoption on 8 July, 2025. There has been comprehensive consultation on the content of the Charter across Council services and this is a good example of seeking views on developments with staff.

A communication plan is in place to ensure awareness of the content across the Council with training to follow as a result of the approval of the Charter. The standards that can be expected will be a gauge of our future performance and will be monitored regularly in an effort to offer guidance and a timely response to queries on all occasions.

Several consultations have taken place during the year and there is widespread use of the corporate expertise available within the Communications and Engagement Service e.g. Residents Survey, Single Transferable Vote system, Flooding Strategy and Dinas Dinlle Car Park

Furthermore, some of the frontline services are seeking views on some of our day-to-day services through questionnaires in the workplaces e.g. country parks, museums, records office and the maritime service while central services have introduced a number of performance measures based on the satisfaction of the internal customers for whom support is provided.

Securing numerous responses to the bulk of public consultations continues to prove difficult but a group of officers meet monthly to try to anticipate the consultation requirements and reduce the number of individual consultations held.

Also noted here is the feedback from the Staff Voice Survey regarding the need to celebrate successes and recognize the special work by the Council's staff. We consulted on the best methods in order to do this at the Corporate Management Team meetings, the Assistant Heads' Forum and in the October 2024 series of the Managers and Team Leaders Network.

The overwhelming majority within each of these groups were in favour of introducing less formal arrangements than what had been done in the past and visits to individual teams, by the Leader and the Chief Executive for example, in order to congratulate individuals and recognize successes. This arrangement will be trialled during the coming year while short videos relating to some of the successes of our services are already being displayed before the full Council meetings in order to raise the awareness of the Elected Members.



## CONCLUSIONS

The content of the report demonstrates that the culture and “way of working” is moving in the right direction, with a number of examples where departments are taking proactive steps to promote the objectives of the Organisation Development Plan

However, progress and efforts to embed the culture remain mixed, and there are variations to be seen within individual departments as well as the Council as a whole.

The role of technology, and artificial intelligence in particular, is key if we are to succeed in implementing systems and processes that enable us to achieve the goal of putting “the people of Gwynedd at the centre of everything we do” and thereby providing the services it deserves in the current challenging financial climate.

The need to extend basic training on the “way of working” and to embed the practice of continuous evaluation is noted, as well as to facilitate the existing contact with field officers. The need to implement the objectives of the new Well-being Strategy, aimed at reducing existing levels of absences has to be a particular focus in the year ahead while encouraging ownership of performance among all Council staff is an issue that we as an organisation have not yet been able to address.

The success of the various talent development schemes is something to be proud of and an important contribution to the future of the Council's services but the slippage in the implementation of two streams within the work programme relating to identifying a progression to key posts and carrying out a review of arrangements to attract staff for the Council's workforce are matters of concern and require a significant investment of time in the year ahead.

There is a vision here that, if realised, will ensure the continuity of quality services. Much of the work to lay the foundations needed to achieve this has been, or is being, addressed and therefore the main challenge, above all else, during the remainder of the term of this Plan, is to multiply and accelerate efforts to deliver work arrangements as effectively and efficiently as possible within all Service units within the Council.



CYNGOR**GWYNEDD**

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## CYNGOR GWYNEDD CABINET



### Report to the Cabinet

**Meeting Date:** 8th July 2025  
**Cabinet Member:** Councillor Llio Elenid Owen  
**Contact Officer:** Catrin Love, Pennaeth Cynorthwyol Gwasanaethau Corfforaethol  
**Contact Number:**  
**Item Title:** Customer Care Plan

#### 1 DECISION SOUGHT

*Approval of the Customer Service Plan.*

#### 2 REASON WHY DECISION IS NEEDED

*Customer Care is one of the 9 priority work streams of Ffordd Gwynedd. The plan sets clear standards on how we as a Council will realise the vision of providing excellent customer service to the residents and customers of Gwynedd.*

*The consultation process has clearly confirmed that Managers are currently unclear about the expected response standards.*

#### 3 INTRODUCTION

*Adopting a new Customer Care Plan has been identified as a priority for the coming year, as it has been recognised by several Departments in the Ffordd Gwynedd self-assessment as needing attention. It aligns with the Well-being of Future Generations Act and supports strategic plans such as the Gwynedd and Môn Well-being Plan, the Digital Plan, and the Complaints Policy.*

*Putting the people of Gwynedd at the center of everything we do is fundamental to our way of working in the Ffordd Gwynedd culture. To ensure we do this, it is important that we engage with our residents to clearly understand their needs and demands, form a charter and clear standards based on that, and ensure that staff understand the standards. All of this will meet the requirements of the Well-being of Future Generations Act by implementing the five ways of working.*

*The equality impact assessment has identified that the objectives of the Customer Care Plan provide a better service to residents, and that there is an*



*opportunity to remove any barriers faced by people due to socio-economic disadvantage.*

*The annual engagement with residents will measure the extent to which the Council is achieving this."*

#### **4 REASON AND JUSTIFICATION BEHIND THE DECISION**

*The main considerations are the proposed Charter and the Standards within the new plan, which relate to response times whether on the phone, in writing, or when responding to a complaint. We will use feedback to continuously improve services and ensure that the needs of residents are understood and met. The purpose of the Customer Care Plan is to ensure consistency and improvement across Departments in our contact with customers and residents. By doing this, the Equality Impact Assessment will be positive.*

#### **6 NEXT STEPS & TIMETABLE**

*Once the plan is approved, we will engage with residents, establish new customer care training so that staff are proficient in the latest customer care practices, and ensure they are clear on our internal standards. Dashboards will need to be created to monitor the Council's performance as we handle calls.*

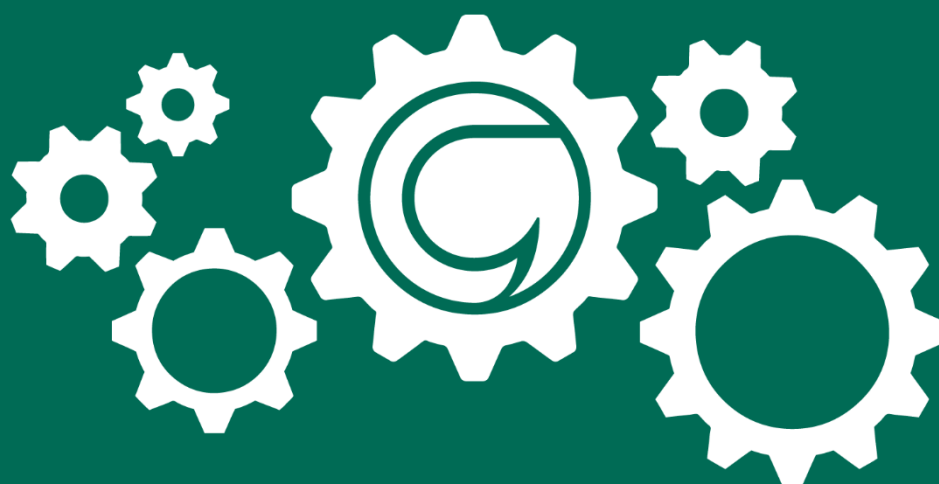
#### **7 ANY CONSULTATIONS UNDERTAKEN PRIOR TO MAKING THE DECISION**

*Here are the comments from the Head of Finance:*

*"I welcome the Customer Care Plan. I have no concerns regarding the decision sought from the perspective of financial propriety."*

*Here are the comments from the Monitoring Officer:*

*"I welcome this report and have no observations to add in relation to propriety"*



**GWASANAETHAU  
CORFFORAETHOL**  
CYNGOR GWYNEDD

Customer Care Plan

March 2025  
Page 38

## **Content**

<b>1.</b>	<b>Purpose of the Plan</b>	<b>2</b>
<b>2.</b>	<b>Our Vision</b>	<b>3</b>
<b>3.</b>	<b>The Strategic Context</b>	<b>5</b>
<b>4.</b>	<b>Our Approach</b>	<b>7</b>
	<b>4.1 Our Customer Care Charter</b>	<b>8</b>
	<b>4.2 Our Corporate Standards</b>	<b>9</b>
<b>5.</b>	<b>Our Work Programme</b>	<b>10</b>
<b>6.</b>	<b>How do we know if we are succeeding?</b>	<b>13</b>
<b>7.</b>	<b>Criteria for the Standard of Excellence in Customer Care</b>	<b>16</b>

# 1. Purpose of the Plan

“Ffordd Gwynedd” is the name given to the “way of working” adopted by Cyngor Gwynedd to place the people of the county at the heart of everything we do. To do the right things in the right way, we must understand the needs of residents as our customers in this context, to meet those needs. This is addressed through various projects in the Ffordd Gwynedd Plan, especially through the Customer Contact Project.

Our ambition is to create an excellent experience for residents that builds long-term trust and satisfaction, ensuring that their needs and expectations are consistently met, and using resident feedback to drive continuous improvement.

The purpose of this Customer Care Plan is to highlight our priorities for the period between 2025 and 2028, and how we will act and measure success.

## 2. Our Vision

Our vision is to create an exceptional experience for residents that sets the standard for customer care excellence. We are committed to delivering services that exceed customer expectations, ensuring we consistently and effectively meet their needs. By engaging with our customers and using their feedback to drive continuous improvement, we aim to create an organisational culture where top-tier customer care is central to everything we do.

We are committed to:

**Understanding and meeting customer needs** through ongoing research and communication.

**Promoting an organisational culture** focused on residents and customers, ensuring every team member is committed to delivering excellent service.

**Providing accurate and accessible information** through various channels, ensuring our services are available to all.

**Continuously improving our services** through performance measurement, effective complaint handling, and mapping the customer and resident journey.

**Ensuring timeliness and quality** in service delivery, balancing speed with quality.

By achieving this vision, we aim to create a future where our customers feel valued, respected, and receive the best possible service within the resources available.

What are we going to do?

### 1. Understanding Our Customers

- **Identifying Customers:** Using research methods to identify customer needs and expectations.
- **Consulting with Customers:** Conducting surveys and focus groups to gather valuable feedback.
- **Measuring Outcomes:** Using performance measures to assess customer satisfaction and drive continuous improvement.

## 2. Organisational Culture

- **Customer Focus:** Ensuring every member of the organisation is committed to delivering excellent service.
- **Staff Training:** Provide regular training for staff on customer care and complaint management skills.

## 3. Information and Access

- **Accurate Information:** Ensuring information is correct and easily accessible through various channels.
- **Accessibility:** Improving access to services using new technologies and ensuring services are available to all.

## 4. Delivery

- **Achieving Business Goals:** Ensuring business objectives are met through the customer of high-quality service.
- **Problem Management:** Implementing an effective system for managing complaints and making adjustments based on customer feedback.

## 5. Service Quality and Timeliness

- **Initial Contact:** Ensuring initial contact is made promptly.
- **Meeting Deadlines:** Adhering to agreed timelines when delivering services, ensuring a balance between speed and quality.

### 3. The Strategic Context

Our intention with this Customer Care Plan is to align with the objectives of the Well-being of Future Generations Act, some of our main strategic plans, and our corporate policies:

**Well-being of Future Generations Act:** The Plan supports the well-being goals by promoting a customer-focused organisational culture, improving service accessibility, and ensuring decisions are made with the future in mind. It also reflects the five ways of working, e.g., Collaboration and Involvement.

**Gwynedd and Môn Well-being Plan 2023–28:** This plan emphasises the need to work together to improve community well-being, including engaging with customers and using their feedback for continuous improvement. It refers to understanding the characteristics of hard-to-reach and disadvantaged people and tailoring services to better reach them.

**Cyngor Gwynedd Plan 2023–28:** This plan highlights the importance of always having the highest standard of internal operational arrangements so that Gwynedd residents receive the best possible services.

**Ffordd Gwynedd Plan 2023–28:** The principles of Ffordd Gwynedd include promoting a culture where people are central to everything we do, improving work processes, and providing staff training on customer care skills.

**Cyngor Gwynedd Strategic Equality Plan 2024–28:** The aim of this plan is to ensure the Council treats everyone fairly, regardless of their equality characteristics, background, or needs.

**Cyngor Gwynedd Digital Plan 2023–28:** This plan aims to improve the experience of Gwynedd residents with front-line and back-office services through the use of digital technology, in line with changing expectations and trends.

**Cyngor Gwynedd Complaints and Service Improvement Policy:** This policy outlines our arrangements for managing complaints and measuring performance.

**Cyngor Gwynedd External Correspondence Response Policy:** This policy outlines the need for officers to respond to letters and emails promptly.

**Cyngor Gwynedd Data Protection Policy:** This policy highlights the legal and ethical expectations when staff handle personal information.

By aligning with these plans and policies, the Customer Care Plan contributes to creating a future where our customers feel valued, respected, and receive the service they need.

### Phone Performance Data

Year	Number of direct calls to Council staff extensions (DDI)	Percentage of calls answered (the Council)	Total Calls to Galw Gwynedd's number	Percentage of calls answered (GG)
2022-2023	318,025	62.0%	158,736	87.4%
2023-2024	283,880	64.5%	138,597	92.5%
2024- (31.1.2025)	196,316	63.0%	104589	83.2%

### Corporate Complaints 2024/25

Lack of answer	Ombudsman	Error	Language and Equality	Unhappy with Decision	Officer Conduct
34	13	11	2	1	1



## 4. Our Approach

- Our Customer Care Charter outlines how we will work.
- Our Customer Care Standards define what our customers can expect from us.
- We will use the Customer Service Excellence Standard\* to drive continuous improvement.

*\* This is a recognised standard for assessing the quality of customer care in organisations. It can be used to drive continuous improvement, as a skills development tool, and as independent validation of achievement. It highlights the factors that lead to quality customer care and includes criteria we can use to assess our progress – see Appendix 2.*

## 4.1 Our Customer Care Charter

This Charter reflects our commitment to delivering the highest quality service to our customers. These are our promises and expectations:

### Our promises to you:

- **Acknowledge your contact promptly.**
- **Listen and respond.**
- **Treat you with respect.**
- **Provide clear information.**

### Our expectations of you:

- **Provide relevant information.**
- **Treat us with respect.**
- **Behave appropriately.**
- **Accept the final response and respect the decision.**

Thank you for your cooperation as we strive to provide you with the best possible service. If you have any questions or concerns, please feel free to contact us.

## 4.2 Our Corporate Standards

- **We will** answer your phone call as soon as possible and within 1 minute.
- **We will** acknowledge receipt of your correspondence within 5 working days unless it is possible to provide a full response within that timeframe. When acknowledging the correspondence, we will advise on the expected timescale for a full response.
- **We will** respond to correspondence from an Elected Member of this Council, as well as Members of Parliament / Members of the Senedd, within 5 working days.
- **We will** resolve formal complaints within 20 working days.

### Our Departmental Standards

- Individual departments will report on their relevant standards through the Challenge and Performance Support process.

## 5. Our Work Programme

We have identified six priorities for our Customer Care Project during 2025/2026:

- Engage with the people of Gwynedd to seek their views on our performance during the year as part of the Council's annual self-assessment.
- Introduce a new customer care training programme.
- Introduce a new training programme in responding to enquiries from Elected Members, the public, and service delivery partners.
- Publish performance measures, aiming to develop a corporate performance dashboard showing how the Council is performing against our customer care standards.
- Identify and develop digital solutions to improve service delivery for users.

As shown in Table 1, the above commitments reflect several elements of the Customer Service Excellence Standard. The criteria also align well with the priorities identified across all Ffordd Gwynedd projects, except for the "Healthy and Satisfied Workforce" workstream, as shown in Table 2.

It should be noted that the Standard does not specifically reference staff well-being. As a Council, we recognise that staff well-being is central to the success of this plan. Therefore, we commit to providing training and support to staff, so they are equipped with the appropriate skills to meet the expectations of this plan.

**Table 1: The relationship between the 2025/26 Customer Contact Project priorities, Ffordd Gwynedd, and the criteria of the Customer Care Excellence Standard**

Priorities 2025-/2026	Customer Service Excellence Standard				
	Criterion 1 Understanding our Customers	Criterion 2 Culture of the Organisation	Criterion 3 Access and Information	Criterion 4 Delivering	Criterion 5 Timeliness and Quality of Service
Engaging with the people of Gwynedd to seek their views on our performance during the year as part of the Council's annual self-assessment.	✓				
Introduce a new customer care training programme, with a particular focus on the wellbeing of staff who have to deal with difficult situations.					
Introduce a new training programme on responding to enquiries from Elected Members, the public, and partner service providers.		✓		✓	✓
Publish performance measures aiming to develop a corporate performance dashboard showing how the Council is performing against our customer care standards.	✓			✓	✓

**Table 2: The relationship between the priorities of Ffordd Gwynedd projects and the criteria of the Customer Service Excellence Standard.**

	Customer Service Excellence Standard				
	Criterion 1	Criterion 2	Criterion 3	Criterion 4	Criterion 5
Ffordd Gwynedd Projects	Understanding our Customers	Culture of the Organisation	Access and Information	Delivering	Timeliness and Quality of Service
Learn, Experiment and Act to Improve	✓	✓			
Leadership					
Understanding and Improving Performance	✓				
Support and Develop	✓	✓			
Digital Transformation			✓		
Workforce Planning and Talent Development		✓			
Continuous Evaluation		✓			
A satisfied and Healthy Workforce					
Customer Contact	✓	✓	✓	✓	✓

## 6. How do we know if we are Succeeding?

### 6.1. Our Measures

To ensure our Customer Care Plan is successful and meets the needs of our customers, we will adopt successful measurement methods aligned with the Customer Service Excellence Standard. This standard provides a comprehensive framework for improving customer services by focusing on five key areas. We will review our measures over time to ensure we have an accurate and comprehensive picture of our performance.

**Table 3: Our Proposed Performance Measures**

Area and measure	Source	Frequency
<b>Understanding Our Customers:</b> In general, how satisfied or dissatisfied are you with how Cyngor Gwynedd runs things?	National Residents Survey	Yearly
On the most recent occasion, even if the outcome or final decision wasn't what you wanted, how satisfied were you with how the Council handled your inquiry? (if you have tried to contact Cyngor Gwynedd in the last 12 months)	National Residents Survey	Yearly
<b>Organisational Culture:</b> Residents feel they can influence decisions in their local area.	National Survey for Wales	Yearly
Indicate to what extent you believe the council generally takes residents' opinions into account when making decisions.	National Residents Survey	Yearly
Council staff are friendly and approachable.	National Residents Survey	Yearly
The number and percentage of leaders who have completed Customer Care training.	Internal information	Quarterly

The number and percentage of staff who have completed Customer Care training.	Internal information	Quarterly
<b>Information and Access:</b>		
In general, how well do you think Cyngor Gwynedd communicates information to residents about the services and benefits it provides?	National Residents Survey	Yearly
Satisfaction with the ability to access local services and facilities.	National Survey for Wales	Yearly
Indicate to what extent you believe council services are available in your chosen language.	National Residents Survey	Yearly
Indicate to what extent you believe council services are available in a format that is accessible to you	National Residents Survey	Yearly
Contacting the Council is simple	National Residents Survey	Yearly
Accessing up-to-date information about Council services is easy	National Residents Survey	Yearly
<b>Achievement:</b>		
Indicate to what extent you believe the council generally provides high-quality services.	National Residents Survey	Yearly
Indicate to what extent you believe the council generally provides services that represent good value for money	National Residents Survey	Yearly
The Council lets people know how it is performing	National Residents Survey	Yearly
How much do you trust Cyngor Gwynedd	National Residents Survey	Yearly



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Indicate to what extent you believe the council generally acts on the concerns of local residents	National Residents Survey	Yearly
The number and percentage of complaints resolved within 20 days	Internal information	Every 6 months
Satisfaction with our complaint management arrangements?	Internal information	Yearly
<b>Timeliness and Quality of Service:</b>		
The number and percentage of phone calls answered within 1 minute.	Internal information	Live Dashboard

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By adopting these measurement methods, we will be able to continuously assess our success and make improvements where necessary, ensuring that our customers receive the best possible service.

## 6.2 Our Governance Arrangements

We will provide regular performance updates to the Ffordd Gwynedd Officers Group and submit an annual report to the Council Cabinet and the Corporate Management Team.

## 7. Criteria for the Standard of Excellence in Customer Care

We will conduct an annual self-assessment based on the following criteria to measure our progress over time and to create future work programs.

### Criterion 1 Understanding our Customers

#### 1.1 Knowing our Customers

	Element	Guidance
1.1.1	We have a detailed understanding of the characteristics of our current and potential customer groups based on recent and reliable information.	<ul style="list-style-type: none"><li>• Profile of the organisation's main customer groups and their characteristics.</li><li>• Details on how these groups were identified and categorised.</li><li>• Details on the frequency and reliability of the research used to identify customer groups</li></ul>
1.1.2	We have developed customer insight into our customer groups to better understand their needs and preferences	<ul style="list-style-type: none"><li>• Methods used to develop understanding include focus groups, one-to-one interviews, surveys, observation, customer journey mapping, and other ways of gathering information about customers.</li><li>• Details of how you improved your services as a result of the understanding you gained about your customers' needs.</li></ul>
1.1.3	We make specific efforts to identify hard-to-reach and disadvantaged groups and individuals, and we have developed our services in response to their specific needs.	<ul style="list-style-type: none"><li>• Methods used to consult and engage with hard-to-reach and disadvantaged groups and individuals, especially people with multiple needs and customers whose views are not often heard.</li><li>• Examples of how you identified unmet needs and the changes</li></ul>

		you made to avoid excluding or underrepresenting certain people.
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## 1.2 Engagement and Consultation

	Element	Guidance
1.2.1	We have a strategy for engaging and involving customers using a range of methods that are appropriate to the needs of the identified customer groups	<ul style="list-style-type: none"> <li>• Policies, strategies and leadership for engaging, consulting and involving customer groups.</li> <li>• Evidence of how you use a wide range of tools, including feedback from customers and staff (letters, emails, comments, complaints, forums, focus groups, etc.) as well as research</li> </ul>
1.2.2	We have made customer consultation an integral part of continuously improving our service, and we inform customers of the outcomes and the actions taken.	<ul style="list-style-type: none"> <li>• Findings and analysis of engagement activity, consultation exercises, and other methods for capturing feedback.</li> <li>• Details of the actual improvements, with evidence of how these are directly linked to the ways in which customers were consulted and involved</li> <li>• Examples of how you involved customers in the design and delivery of services (for example, by allowing them to participate).</li> <li>• Information about how you inform customers about the changes you make as a result of their involvement.</li> <li>• Current service improvement and development plans that demonstrate how your policies, projects, and activities are shaped by how you consult and involve customers.</li> </ul>

1.2.3	We regularly review our strategies and opportunities for consulting and engaging with customers to ensure that the methods used are effective and deliver reliable and representative outcomes.	<ul style="list-style-type: none"> <li>• Outcomes of reviews on the effectiveness of engagement and participation, showing levels of participation, assessing how representative the results are, and the quality of the information gathered</li> <li>• How mechanisms, processes, and methods are adapted in response to emerging issues, service priorities, demographic changes, and so on.</li> <li>• Examples of innovation, learning from best practice or benchmarking, staff suggestions, and so on.</li> </ul>
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### 1.3 Customer Satisfaction

	Element	Guidance
1.3.1	We regularly use reliable and accurate methods to measure customer satisfaction.	<ul style="list-style-type: none"> <li>• The methods used in most cases would include survey work and other types of feedback and qualitative information</li> <li>• Information about survey methodology, for example sample sizes, possible biases, margin of error, and any advice taken on design.</li> <li>• Reasons for the decisions you made on how to measure customer satisfaction.</li> <li>• Details about how often you collect information.</li> </ul>
1.3.2	We analyse and publicise satisfaction levels for the full range of customers across all main areas of our service, and	<ul style="list-style-type: none"> <li>• Assess and analyse satisfaction within each (identified) group.</li> <li>• If you provide a range of different services, you should assess how satisfied customers are with each of them.</li> </ul>

	we have improved services as a result.	<ul style="list-style-type: none"> <li>• Evidence of any differences in satisfaction levels between groups, or any unexpected outcomes.</li> <li>• Publish information about the steps you intend to take or have taken as a result of measuring customer satisfaction with your service.</li> <li>• Examples of other methods you use.</li> </ul>
1.3.3	In our measurement of satisfaction, we include specific questions related to key areas including delivery, timeliness, information, access, and the quality of customer care, as well as specific questions informed by customer insight.	<ul style="list-style-type: none"> <li>• Satisfaction surveys and other ways to gather feedback that include these specific questions.</li> <li>• Evidence of researching into customers' priorities and local key driver priorities.</li> </ul>
1.3.4	We set challenging and ambitious targets for customer satisfaction, and our levels are improving.	<ul style="list-style-type: none"> <li>• The satisfaction levels of each customer group for all the main areas of your service, and the targets you want to achieve.</li> <li>• Evidence of how satisfaction levels have improved over time.</li> </ul>
1.3.5	We have made positive changes to services as a result of analysing customer experience, including improved customer journeys.	<ul style="list-style-type: none"> <li>• Examples of how you analyse customer experience.</li> <li>• Specific information about how you map customer journeys and the steps you have taken to improve these (for example, by limiting the amount of unwanted contact they have with people in your organisation).</li> <li>• Any evidence of savings or reinvestment (or both) as a result</li> </ul>

		of making your systems and processes more efficient.
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## Criterion 2 Organisational Culture

### 2.1 Leadership, Policy and Culture

	Element	Guidance
2.1.1	There is a corporate commitment to putting the customer at the heart of service delivery, and leaders in our organisation actively support this and advocate for customers.	<ul style="list-style-type: none"><li>• Corporate vision and value statements.</li><li>• Examples of how your organisation's leaders have demonstrated that they recognise the importance of customer focus and promote activities that allow your organisation to gain an understanding of its customers.</li></ul>
2.1.2	We use our understanding of customers to inform policy and strategy and to prioritise service improvement activities.	<ul style="list-style-type: none"><li>• Customer and staff views on how your knowledge of customer groups guides your policies.</li><li>• Examples of how customer insight drives your policies and how this influences the way you design your services.</li></ul>
2.1.3	We have policies and procedures that support every customer's right to expect excellent levels of service.	<ul style="list-style-type: none"><li>• Customer care, equal opportunity, disability and other policies and procedures relating to fair treatment.</li><li>• Information you give customers about what they are entitled to.</li></ul>
2.1.4	We ensure that all customers and customer groups are treated fairly, and this is confirmed through feedback and the measurement of customer experience.	<ul style="list-style-type: none"><li>• Evidence from mystery shoppers (where relevant and appropriate)</li><li>• Customer and staff testimonials and other feedback.</li></ul>
2.1.5	We protect customer privacy in face-to-face discussions and when	<ul style="list-style-type: none"><li>• Procedures for ensuring that you protect customer privacy, including having secure computer</li></ul>



	transferring and storing customer information.	<p>systems and carrying out customer identity checks.</p> <ul style="list-style-type: none"> <li>• Data protection policies and staff guidance on this.</li> </ul>
2.1.6	We empower and encourage every employee to actively promote and participate in our organisation's customer-focused culture.	<ul style="list-style-type: none"> <li>• Examples of evidence of customer and staff participation and empowerment.</li> <li>• Staff policies and procedures manual.</li> <li>• Examples of your methods to promote customer focus throughout the organization</li> </ul>

## 2.2 Professionalism and Staff Attitude

	Element	Guidance
2.2.1	We demonstrate our commitment to developing and delivering customer-focused services through our recruitment, training, and staff development policies.	<ul style="list-style-type: none"> <li>• Job specifications and recruitment procedures.</li> <li>• Details of the training you have given to all your employees, and the opportunities for them to develop further.</li> </ul>
2.2.2	Our staff are polite and friendly to customers and understand customer needs.	<ul style="list-style-type: none"> <li>• Customer care policies and staff guidance.</li> <li>• Evidence from mystery shoppers (where applicable) and internal monitoring.</li> <li>• Customer views and other feedback, including comments on the service provided by individual members of staff.</li> </ul>
2.2.3	We prioritise customer focus at all levels of our organisation and evaluate individual and team commitment through the	<ul style="list-style-type: none"> <li>• Examples of how customer feedback relates to your assessment of staff.</li> <li>• Include staff recognition and reward schemes, if relevant and appropriate.</li> </ul>

	performance management system.	
2.2.4	We can demonstrate how the insights and experiences of customer-facing staff are embedded in internal processes, policy development, and service planning	<ul style="list-style-type: none"> <li>• Ways in which staff give their opinions and details on how you use their feedback.</li> <li>• Details of the improvements you have made because of staff feedback.</li> <li>• Examples of how you have improved the processes for the transfer of customer information throughout your organisation.</li> </ul>
2.2.5	We value the contribution our staff make to delivering customer-focused services, and leaders, managers, and staff all demonstrate these behaviours.	<ul style="list-style-type: none"> <li>• Examples of how your organisation values the role of customer service staff, by recognising and rewarding the contributions of individual members of staff and teams.</li> <li>• Evidence that the delivery of customer centric services is a priority at all levels of the organisation, from the front line (staff members dealing with the public) to senior management and all levels in between.</li> </ul>

## Criterion 3 Information and Access

### 3.1 Range of Information

	Element	Guidance
3.1.1	We provide information about the full range of services we offer that are available to our customers and prospective customers, including how and when people can contact us, how our services are run, and who is in charge.	<ul style="list-style-type: none"><li>• Examples of contact and service information, for the range of communication methods used.</li></ul>
3.1.2	Where a charge is made for services, we tell our customers how much they will have to pay.	<ul style="list-style-type: none"><li>• Publish information about any payments for services.</li><li>• Details of how and when customers can make payments.</li></ul>

### 3.2 The Quality of the Information

	Element	Guidance
3.2.1	We provide the information our customers need in ways that meet their needs and preferences, using a variety of appropriate channels.	<ul style="list-style-type: none"><li>• Guidance for staff on clear communication, including testing information with customers.</li><li>• Customer views on the communication methods you use.</li></ul>
3.2.2	We take reasonable steps to ensure that our customers have received and understood the information we provide.	<ul style="list-style-type: none"><li>• Details of how you check that individual customer have received and understood the information.</li><li>• Examples of the changes you will make to your communication methods to meet customer needs.</li></ul>
3.2.3	We have improved the range, content, and quality of the information	<ul style="list-style-type: none"><li>• Examples of changes to the way you provide information after receiving feedback.</li></ul>

	provided verbally, in print, and online to ensure it is relevant and meets customer needs.	<ul style="list-style-type: none"> <li>• A timetable for when you review the information you provide.</li> </ul>
3.2.4	We can demonstrate that the information we provide to our customers is accurate and complete, and when this is not the case, we inform customers when they will receive the information they requested.	<ul style="list-style-type: none"> <li>• Customer opinions and feedback on the accuracy of the information.</li> <li>• Details of the service standards for responding the customer enquiries.</li> <li>• Customer complaints and comments.</li> <li>• Examples of when you provide the incorrect information and how this was corrected.</li> </ul>

### 3.3 Access

	Element	Guidance
3.3.1	We make our services accessible to all customers by providing a variety of alternative channels.	<ul style="list-style-type: none"> <li>• Details of the range of options available for contacting the organisation.</li> <li>• Different ways of communicating with specific arrangements and sample materials.</li> <li>• Details of how you've reviewed services to make life easier for people.</li> <li>• The results of the reviews and improvements planned and made by you as a result.</li> </ul>
3.3.2	We evaluate how customers interact with the organization through access channels and use this information to identify possible service improvements and offer better choices.	<ul style="list-style-type: none"> <li>• Data and analysis relating to channel usage and the actions taken to improve services as a result.</li> <li>• Details of how you use information to improve the choice of services.</li> </ul>

3.3.3	We ensure that, where customers can visit our site in person, the facilities are as clean and comfortable as possible.	<ul style="list-style-type: none"> <li>Information about how you have reviewed the physical environment of your site, arrangements for quality maintenance and details of any recent improvements you have made.</li> </ul>
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### 3.4 Collaboration with Providers, Partners and Other Communities

	Element	Guidance
3.4.1	We have made arrangements with other providers and partners to offer and deliver integrated services, and these arrangements have clear benefits for our customers.	<ul style="list-style-type: none"> <li>Formal and informal partnerships and plans for improving access and services.</li> <li>Information on the success of collaborative arrangements, including improvements you have made to services as a result.</li> <li>Customer feedback on the services provided through partnerships, including the quality and range of services and how these are tailored to the needs of the individual customer.</li> </ul>
3.4.2	We have developed collaborative arrangements with our partners that ensure customers have clear lines of accountability for the quality of the service.	<ul style="list-style-type: none"> <li>Information about how you monitor and assess services you provide in partnership with other organisations.</li> <li>Evidence of any service level agreements, particularly transfer arrangements and other measures that ensure the customer receives a 'seamless' service.</li> <li>Details of how customers can complain about the services you provide in partnership with other organisations.</li> <li>Details of how you publicise collaborative working</li> </ul>

		<p>arrangements, including clear information to customers about who is responsible.</p> <ul style="list-style-type: none"> <li>• Examples of how you help customers access services, where appropriate.</li> </ul>
3.4.3	We interact within wider communities and can demonstrate the ways in which we support those communities.	<ul style="list-style-type: none"> <li>• Information about how your organisation works with the contributes to the wider community, beyond the direct service it provides to customers.</li> </ul>

## Criterion 4 Achieving

### 4.1 Delivery Standards

	Element	Guidance
4.1.1	We have challenging standards for our main services, which take into account our responsibility for meeting national and statutory standards and targets.	<ul style="list-style-type: none"><li>• Details of all standards, performance indicators and targets set for key services.</li><li>• Include national, statutory and local standards and targets.</li></ul>
4.1.2	We monitor and meet our standards, key departmental targets, and performance, and we inform our customers about our performance.	<ul style="list-style-type: none"><li>• Details of how often you monitor your performance and the methods you use.</li><li>• Current performance against all standards, key departmental standards, statutory inspections and audits and internal performance targets for the last full year.</li></ul>
4.1.3	We consult and involve customers, citizens, partners, and staff in setting, reviewing, and raising our local standards.	<ul style="list-style-type: none"><li>• Methods you use to consult and engage customers and others about local standards and targets.</li><li>• The results of your consultation on standards and targets.</li><li>• Information that shows past and present standards and targets that you can use to compare your performance with previous years.</li></ul>



## 4.2 Achieving and Results

	Element	Guidance
4.2.1	From the outset, we agree with our customers about what they can expect from the service we provide.	<ul style="list-style-type: none"><li>• Demonstrate that you are using the promises and goals to make appropriate commitments to each customer.</li></ul>
4.2.2	We can demonstrate that we are delivering the service we promised to individual customers and that outcomes are positive for most of our customers.	<ul style="list-style-type: none"><li>• Customer views and feedback on their experiences of the service.</li><li>• Include responses to specific survey questions and information and figures for positive results.</li></ul>
4.2.3	We can demonstrate that we benchmark our performance against that of similar or complementary organisations and have used that information to improve our service.	<ul style="list-style-type: none"><li>• Information from benchmarking exercises (where this information is available).</li><li>• Exercises may include comparing functions as well as entire services.</li><li>• Evidence of peer reviews, discussion groups, participation in forums or other methods for comparing your performance with other organisations.</li></ul>
4.2.4	We have developed and learned from best practices identified within our organisation and beyond, and we publish our examples externally where appropriate.	<ul style="list-style-type: none"><li>• Show how you share and apply best practice within your organisation and how you use examples of best practice from outside the organisation.</li><li>• Examples of best practices you've recently published.</li></ul>

### 4.3 Dealing Effectively with Problems

	Element	Guidance
4.3.1	We identify any declines in performance against our standards and explain these to customers, along with the actions we are taking to put things right and prevent further recurrence	<ul style="list-style-type: none"> <li>• Results of monitoring processes.</li> <li>• Details of any action you have taken.</li> <li>• Examples of how you explain performance reductions to customers.</li> <li>• Examples of effective procedures you have put in place to notify customers of exceptional circumstances such as emergencies.</li> </ul>
4.3.2	We have an easy-to-use complaints procedure, which includes a commitment to fully address issues and resolve them wherever possible within a reasonable timeframe	<ul style="list-style-type: none"> <li>• Customer complaint procedure as provided for use by customers.</li> </ul>
4.3.3	We provide training and guidance to staff on handling and investigating complaints objectively, and we can demonstrate that we empower staff to put things right	<ul style="list-style-type: none"> <li>• Complaints policy.</li> <li>• Guidance and training you give staff on how to respond to and deal with complaints.</li> <li>• Assess the effectiveness of your complaint handling training.</li> <li>• Examples of where staff have been given the authority to resolve complaints.</li> </ul>
4.3.4	We learn from any mistakes we make by identifying patterns in formal and informal complaints and feedback from customers, and we use this information to improve services and publicise the actions taken.	<ul style="list-style-type: none"> <li>• Records of formal and informal complaints and comments relating to problems.</li> <li>• Information that you regularly publish that shows trends in complaints, both formal and informal, and the action you have taken as a result.</li> </ul>

4.3.5	We regularly review and improve our complaints procedure, taking into account the views of customers, complainants, and staff	<ul style="list-style-type: none"> <li>• Customer and staff feedback on the effectiveness of the complaints procedure.</li> <li>• A process for reviewing your complaints procedure and the improvements you have made.</li> </ul>
4.3.6	We ensure that the outcome of the complaints process for customers (whose complaints are upheld) is satisfactory to them.	<ul style="list-style-type: none"> <li>• Customer feedback on the outcome of the complaints processes.</li> <li>• Details of procedures for staff and feedback processes.</li> </ul>

## Criterion 5 Timeliness and Quality of Service

### 5.1 Standards for Timeliness and Quality

	Element	Guidance
5.1.1	We set appropriate and measurable standards for response times for all types of customer contact, including phone calls, letters, e-communications, and in-person visits.	<ul style="list-style-type: none"><li>• Details of the standards and targets set for the timeliness of responses to customer contact for each access channel.</li></ul>
5.1.2	We set comprehensive standards for all aspects of customer care quality to be expected when dealing with our organisation.	<ul style="list-style-type: none"><li>• Full customer care standards – including the quality of your response to phone calls, letters, e-communications and personal callers – for every stage of the customer journey.</li></ul>

### 5.2 Timely Results

	Element	Guidelines
5.2.1	We inform our customers and prospective customers about our commitments to timeliness and the quality of customer care.	<ul style="list-style-type: none"><li>• Publish information on all methods for advising customers and potential customers of standards for timeliness and quality of customer care.</li></ul>
5.2.2	We identify the needs of individual customers at the first point of contact with us and ensure that an appropriate person is available to address the reason for dealing with the customer.	<ul style="list-style-type: none"><li>• Examples of the processes you use when you first come into contact with the customer – for example, interview techniques, mapping customer journeys, reviewing information you already have about the customer.</li><li>• Demonstrate an understanding of how customers use the different methods to contact you, and the problems you face in providing a successful service.</li></ul>

5.2.3	We share customer information promptly with colleagues and partners within our organisation whenever appropriate, and we can demonstrate how this has reduced unnecessary contact for customers	<ul style="list-style-type: none"> <li>Processes you have in place to ensure that complete information is passed on promptly and to all relevant people inside and outside the organisation.</li> <li>Examples of how you have shared information promptly and in a useful and appropriate way, whilst adhering to the regulations on data protection and confidentiality</li> <li>Examples of where you have shared information about customer groups (for example, with service managers, frontline staff and partners) to provide more efficient services.</li> </ul>
5.2.4	When the service is not completed at the first point of contact, we discuss the next steps with the customer and identify the likely general timeframe for achieving outcomes.	<ul style="list-style-type: none"> <li>Customer opinions show how the service is tailored to consider their individual circumstances.</li> <li>Details of how you've communicated the likely timelines with customers</li> </ul>
5.2.5	We respond promptly to initial enquiries, and if there is a delay, we inform the customer and take steps to resolve the issue.	<ul style="list-style-type: none"> <li>Information about waiting times for initial responses to phone calls, e-mails, text messages and callers.</li> <li>Information about your procedures to tell customers about any problems.</li> </ul>

### 5.3 Timely Delivery of Services

	Element	Guidelines
5.3.1	We monitor our performance against standards for timeliness and quality of customer care, and we take action if issues are identified.	<ul style="list-style-type: none"><li>• Methods used for monitoring performance in relation to standards for timeliness and quality of customer care.</li><li>• Steps taken to address delivery timeliness where this does not meet customer expectations.</li></ul>
5.3.2	We meet our current standards for timeliness and quality of customer care, and we publicise our performance against these standards.	<ul style="list-style-type: none"><li>• Actual current performance against all standards and targets for timeliness and quality of service and evidence of publication</li><li>• Customer feedback on the delivery of service provision within agreed timescales</li><li>• Examples of 'mystery shoppers' evidence where relevant.</li></ul>
5.3.3	Our performance in terms of timeliness and quality of service compares well with that of similar organisations."	<ul style="list-style-type: none"><li>• Comparative performance data relating to the timeliness and quality of customer care obtained from benchmarking exercises.</li></ul>



**GWASANAETHAU  
CORFFORAETHOL**  
CYNGOR GWYNEDD

# Assessing the Impact on the People of Gwynedd

This document assesses the impact that the policy, procedure, plan etc. will have on the population of the county and acts based on a number of laws.

- **Equality Act 2010.** This document places a duty on public bodies to give due regard to the impact that any new (or revised) policy, procedure, plan etc. will have on people with protected characteristics. We are required to:
  - eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Act.
  - advance equality of opportunity between people who share a relevant protected characteristic and those who do not.
  - foster good relations between people who share a protected characteristic and those who do not..

In Wales, the specific duty sets out the need to carry out an impact assessment following specific guidance to consider the effect that any change to a policy or procedure (or the creation of a new one) will have on people with protected equality characteristics. An assessment must be carried out in a timely manner before making any relevant decision (i.e. one that affects people with a protected characteristic)

- **Socio-Economic Duty.** Wales has now implemented this duty, which is part of the Equality Act 2010, placing a duty to address socio-economic disadvantage in strategic decisions.
- **Welsh Language Standards (Section 44 Welsh Language (Wales) Measure 2011).** The Council is required to consider the impact that any change to a policy or procedure (or the creation of a new one) will have on opportunities for people to use the Welsh language, and to ensure that the Welsh language is not treated less favourably than the English language. This document therefore ensures that these decisions protect and promote the use of the Welsh language.



- **Well-being of Future Generations Act 2015.** The Council has a duty to implement the five ways of working and to respond to the seven national well-being goals.
- **Armed Forces Act 2021.** Councils must give due regard to the impact of this proposal on those who are serving or have served in the Armed Forces, as well as their families.

# Equality Impact Assessment of the Customer Care Plan

**Author: Joanne Parry (GC)**

**Date: 26/06/2025**

**Version: Equality Impact Assessment – Customer Care Plan Version 1**

## **STEP 1 – Main Aims and Objectives of the Policy or Practice**

### **1. What type of document or procedure is being assessed?**

- Decisions affecting service users, employees, or the wider community, including commissioning/decommissioning or reviewing services.
- Medium- to long-term plans (e.g., corporate plans, development plans, service delivery and improvement plans).

### **2. What are the aims, objectives, and intended outcomes of the policy or practice?**

"Ffordd Gwynedd" is the name given to the “way of working” adopted by Gwynedd Council to place the people of the county at the heart of everything we do. To do the right things in the right way, we must understand the needs of residents as our customers in this case, in order to meet those needs. This is addressed through various projects in the Ffordd Gwynedd Plan, especially through the Customer Contact Project.

The ambition of the Customer Care Plan is to create an excellent experience for residents that builds trust and long-term satisfaction, ensuring their needs and expectations are consistently met, and using resident feedback to drive continuous improvement.

The purpose of this Customer Care Plan is to highlight our priorities for the period 2025 to 2028, set expected standards, and outline how we will operate and measure success.

### **3. Who are the main consultation groups (stakeholders)?**

So far, we have consulted internally with Heads of Department, the Leadership Team, the Assistant Heads Forum, the Managers and Team Leaders Network, and frontline staff workshops. There is an intention to use an annual resident opinion survey to monitor the progress of the Customer Care Plan.

## STEP 2 – Engagement Data and Impact Assessment

### 4. Has an effort been made to comply with the duty to engage as described above, and has enough information been gathered to proceed?

Yes, there is sufficient information to proceed with engagement. We will fulfill the engagement duty as part of the Plan.

**Details of the engagement. Please note any consultation or engagement you have done or intend to do:**

Activity	Dates	Information
Leadership Team	24/06/2025	Views on the Customer Care Plan, Standards, and Customer Charter
Assistant Heads Forum	22/05/2025	Views on the Customer Care Plan, Charter, and Standards
Corporate Management Team	05/03/2025	Views on the content of the Customer Care Plan, Standards, and Charter
Managers and Team Leaders Network	Managers and Team Leaders Network	Managers and Team Leaders Network
Staff discussion groups	Various dates in 2024	Content of the Charter and Standards documents

**5 What information is available about the impact on each of the following characteristics and topics?**

	<b>Tystiolaeth, Gwybodaeth a Data Perthnasol</b>	<b>Effaith Posib Gadarnhaol a/neu negyddol</b>
<b>Race</b>	<p>The Customer Care Plan is integrated with several Acts and Plans, such as the Gwynedd Council Plan 2023–28, the Well-being of Future Generations Act, Gwynedd Council’s Strategic Equality Plan, the Gwynedd and Anglesey Well-being Plan 2023–28, the Ffordd Gwynedd Plan 2023–28, Gwynedd Council’s Digital Plan 2023–28, the Complaints Policy, the Data Protection Policy, and the Council’s Correspondence Response Policy. To ensure continuous improvement and to meet the needs of all Gwynedd residents and customers, we will adopt success measurement methods aligned with the Customer Service Excellence Standard. This Standard provides a comprehensive framework for improving customer services by focusing on five key areas: Understanding our Customers, Organisational Culture, Information and Access, Timeliness, Quality of Service. We will engage with the people of Gwynedd annually to gather their views on our performance as part of the Council’s self-assessment and will review our measures over time to obtain an accurate and comprehensive picture of our performance. This information will be used to create future work programmes.</p> <p>We will consider the needs of this characteristic when preparing the engagement.</p>	Premature, as we have not yet engaged with residents.
<b>Disability</b>	The Customer Care Plan is integrated with several Acts and Plans, such as the Gwynedd Council Plan 2023–28, the Well-being of Future Generations Act, Gwynedd Council’s Strategic Equality Plan, the Gwynedd and Anglesey Well-	Premature, as we have not yet engaged with residents.

	<p>being Plan 2023–28, the Ffordd Gwynedd Plan 2023–28, Gwynedd Council's Digital Plan 2023–28, the Complaints Policy, the Data Protection Policy, and the Council's Correspondence Response Policy. To ensure continuous improvement and to meet the needs of all Gwynedd residents and customers, we will adopt success measurement methods aligned with the Customer Service Excellence Standard. This Standard provides a comprehensive framework for improving customer services by focusing on five key areas: Understanding our Customers, Organisational Culture, Information and Access, Timeliness, Quality of Service. We will engage with the people of Gwynedd annually to gather their views on our performance as part of the Council's self-assessment and will review our measures over time to obtain an accurate and comprehensive picture of our performance. This information will be used to create future work programmes.</p>	
<b>Sex</b>	<p>The Customer Care Plan is integrated with several Acts and Plans, such as the Gwynedd Council Plan 2023–28, the Well-being of Future Generations Act, Gwynedd Council's Strategic Equality Plan, the Gwynedd and Anglesey Well-being Plan 2023–28, the Ffordd Gwynedd Plan 2023–28, Gwynedd Council's Digital Plan 2023–28, the Complaints Policy, the Data Protection Policy, and the Council's Correspondence Response Policy.</p> <p>To ensure continuous improvement and to meet the needs of all Gwynedd residents and customers, we will adopt success measurement methods aligned with the Customer Service Excellence Standard. This Standard provides a comprehensive framework for improving customer services by focusing on five key areas: Understanding our Customers, Organisational Culture, Information and</p>	Premature, as we have not yet engaged with residents.

	Access, Timeliness, Quality of Service. We will engage with the people of Gwynedd annually to gather their views on our performance as part of the Council's self-assessment and will review our measures over time to obtain an accurate and comprehensive picture of our performance. This information will be used to create future work programmes.	
<b>Age</b>	<p>The Customer Care Plan is integrated with several Acts and Plans, such as the Gwynedd Council Plan 2023–28, the Well-being of Future Generations Act, Gwynedd Council's Strategic Equality Plan, the Gwynedd and Anglesey Well-being Plan 2023–28, the Ffordd Gwynedd Plan 2023–28, Gwynedd Council's Digital Plan 2023–28, the Complaints Policy, the Data Protection Policy, and the Council's Correspondence Response Policy.</p> <p>To ensure continuous improvement and to meet the needs of all Gwynedd residents and customers, we will adopt success measurement methods aligned with the Customer Service Excellence Standard. This Standard provides a comprehensive framework for improving customer services by focusing on five key areas: Understanding our Customers, Organisational Culture, Information and Access, Timeliness, Quality of Service.</p> <p>We will engage with the people of Gwynedd to seek their views on our performance annually as part of the Council's self-assessment, and we will review our measures over time in order to obtain an accurate and comprehensive picture of our performance. This information will be used to create future work programmes.</p> <p>Gwynedd Council is an Age-Friendly Council, and it is essential to ensure that our services are accessible to everyone within our communities.</p>	Premature, as we have not yet engaged with residents.
<b>Religion and Belief</b>	The Customer Care Plan is integrated with several Acts and Plans, such as the Gwynedd Council Plan 2023–28, the	Premature, as we have not yet engaged with residents.

	<p>Well-being of Future Generations Act, Gwynedd Council's Strategic Equality Plan, the Gwynedd and Anglesey Well-being Plan 2023–28, the Ffordd Gwynedd Plan 2023–28, Gwynedd Council's Digital Plan 2023–28, the Complaints Policy, the Data Protection Policy, and the Council's Correspondence Response Policy.</p> <p>To ensure continuous improvement and to meet the needs of all Gwynedd residents and customers, we will adopt success measurement methods aligned with the Customer Service Excellence Standard. This Standard provides a comprehensive framework for improving customer services by focusing on five key areas: Understanding our Customers, Organisational Culture, Information and Access, Timeliness, Quality of Service.</p> <p>We will engage with the people of Gwynedd to seek their views on our performance annually as part of the Council's self-assessment, and we will review our measures over time in order to obtain an accurate and comprehensive picture of our performance. This information will be used to create future work programmes.</p>	
<b>Sexual Orientation</b>	<p>The Customer Care Plan is integrated with several Acts and Plans, such as the Gwynedd Council Plan 2023–28, the Well-being of Future Generations Act, Gwynedd Council's Strategic Equality Plan, the Gwynedd and Anglesey Well-being Plan 2023–28, the Ffordd Gwynedd Plan 2023–28, Gwynedd Council's Digital Plan 2023–28, the Complaints Policy, the Data Protection Policy, and the Council's Correspondence Response Policy.</p> <p>To ensure continuous improvement and to meet the needs of all Gwynedd residents and customers, we will adopt success measurement methods aligned with the Customer Service Excellence Standard. This Standard provides a comprehensive framework for improving customer services by focusing on five key areas: Understanding our</p>	Premature, as we have not yet engaged with residents.

	<p>Customers, Organisational Culture, Information and Access, Timeliness, Quality of Service.</p> <p>We will engage with the people of Gwynedd to seek their views on our performance annually as part of the Council's self-assessment, and we will review our measures over time in order to obtain an accurate and comprehensive picture of our performance. This information will be used to create future work programmes.</p>	
<b>Gender reassignment</b>	<p>The Customer Care Plan is integrated with several Acts and Plans, such as the Gwynedd Council Plan 2023–28, the Well-being of Future Generations Act, Gwynedd Council's Strategic Equality Plan, the Gwynedd and Anglesey Well-being Plan 2023–28, the Ffordd Gwynedd Plan 2023–28, Gwynedd Council's Digital Plan 2023–28, the Complaints Policy, the Data Protection Policy, and the Council's Correspondence Response Policy.</p> <p>To ensure continuous improvement and to meet the needs of all Gwynedd residents and customers, we will adopt success measurement methods aligned with the Customer Service Excellence Standard. This Standard provides a comprehensive framework for improving customer services by focusing on five key areas: Understanding our Customers, Organisational Culture, Information and Access, Timeliness, Quality of Service.</p> <p>We will engage with the people of Gwynedd to seek their views on our performance annually as part of the Council's self-assessment, and we will review our measures over time in order to obtain an accurate and comprehensive picture of our performance. This information will be used to create future work programmes.</p>	Premature, as we have not yet engaged with residents.
<b>Marriage and Civil Partnership</b>	<p>The Customer Care Plan is integrated with several Acts and Plans, such as the Gwynedd Council Plan 2023–28, the Well-being of Future Generations Act, Gwynedd Council's Strategic Equality Plan, the Gwynedd and Anglesey Well-being Plan 2023–28, the Ffordd Gwynedd Plan 2023–28,</p>	Premature, as we have not yet engaged with residents.



	<p>Gwynedd Council's Digital Plan 2023–28, the Complaints Policy, the Data Protection Policy, and the Council's Correspondence Response Policy.</p> <p>To ensure continuous improvement and to meet the needs of all Gwynedd residents and customers, we will adopt success measurement methods aligned with the Customer Service Excellence Standard. This Standard provides a comprehensive framework for improving customer services by focusing on five key areas: Understanding our Customers, Organisational Culture, Information and Access, Timeliness, Quality of Service.</p> <p>We will engage with the people of Gwynedd to seek their views on our performance annually as part of the Council's self-assessment, and we will review our measures over time in order to obtain an accurate and comprehensive picture of our performance. This information will be used to create future work programmes.</p>	
<b>Pregnancy and Motherhood</b>	<p>The Customer Care Plan is integrated with several Acts and Plans, such as the Gwynedd Council Plan 2023–28, the Well-being of Future Generations Act, Gwynedd Council's Strategic Equality Plan, the Gwynedd and Anglesey Well-being Plan 2023–28, the Ffordd Gwynedd Plan 2023–28, Gwynedd Council's Digital Plan 2023–28, the Complaints Policy, the Data Protection Policy, and the Council's Correspondence Response Policy.</p> <p>To ensure continuous improvement and to meet the needs of all Gwynedd residents and customers, we will adopt success measurement methods aligned with the Customer Service Excellence Standard. This Standard provides a comprehensive framework for improving customer services by focusing on five key areas: Understanding our Customers, Organisational Culture, Information and Access, Timeliness, Quality of Service.</p> <p>We will engage with the people of Gwynedd to seek their views on our performance annually as part of the Council's</p>	Premature, as we have not yet engaged with residents.

	self-assessment, and we will review our measures over time in order to obtain an accurate and comprehensive picture of our performance. This information will be used to create future work programmes.	
<b>Welsh Language</b>	<p>The Customer Care Plan is integrated with several Acts and Plans, such as the Gwynedd Council Plan 2023–28, the Well-being of Future Generations Act, Gwynedd Council’s Strategic Equality Plan, the Gwynedd and Anglesey Well-being Plan 2023–28, the Ffordd Gwynedd Plan 2023–28, Gwynedd Council’s Digital Plan 2023–28, the Complaints Policy, the Data Protection Policy, the Language Policy, and the Council’s Correspondence Response Policy. To ensure continuous improvement and to meet the needs of all Gwynedd residents and customers, we will adopt success measurement methods aligned with the Customer Service Excellence Standard. This Standard provides a comprehensive framework for improving customer services by focusing on five key areas: Understanding our Customers, Organisational Culture, Information and Access, Timeliness, Quality of Service.</p> <p>We will engage with the people of Gwynedd to seek their views on our performance annually as part of the Council’s self-assessment, and we will review our measures over time in order to obtain an accurate and comprehensive picture of our performance. This information will be used to create future work programmes.</p>	Premature, as we have not yet engaged with residents.
<b>Socio-Economic Considerations</b>	<p>The Customer Care Plan is integrated with several Acts and Plans, such as the Gwynedd Council Plan 2023–28, the Well-being of Future Generations Act, Gwynedd Council’s Strategic Equality Plan, the Gwynedd and Anglesey Well-being Plan 2023–28, the Ffordd Gwynedd Plan 2023–28, Gwynedd Council’s Digital Plan 2023–28, the Complaints Policy, the Data Protection Policy, and the Council’s Correspondence Response Policy.</p>	Premature, as we have not yet engaged with residents.

	<p>To ensure continuous improvement and to meet the needs of all Gwynedd residents and customers, we will adopt success measurement methods aligned with the Customer Service Excellence Standard. This Standard provides a comprehensive framework for improving customer services by focusing on five key areas: Understanding our Customers, Organisational Culture, Information and Access, Timeliness, Quality of Service.</p> <p>We will engage with the people of Gwynedd to seek their views on our performance annually as part of the Council's self-assessment, and we will review our measures over time in order to obtain an accurate and comprehensive picture of our performance. This information will be used to create future work programmes.</p>	
<p><b>Those Serving or who have served in the Armed Forces, including their Families</b></p>	<p>The Customer Care Plan is integrated with several Acts and Plans, such as the Gwynedd Council Plan 2023–28, the Well-being of Future Generations Act, Gwynedd Council's Strategic Equality Plan, the Gwynedd and Anglesey Well-being Plan 2023–28, the Ffordd Gwynedd Plan 2023–28, Gwynedd Council's Digital Plan 2023–28, the Armed Forces Act, the Complaints Policy, the Data Protection Policy, and the Council's Correspondence Response Policy.</p> <p>To ensure continuous improvement and to meet the needs of all Gwynedd residents and customers, we will adopt success measurement methods aligned with the Customer Service Excellence Standard. This Standard provides a comprehensive framework for improving customer services by focusing on five key areas: Understanding our Customers, Organisational Culture, Information and Access, Timeliness, Quality of Service.</p> <p>We will engage with the people of Gwynedd to seek their views on our performance annually as part of the Council's self-assessment, and we will review our measures over time in order to obtain an accurate and comprehensive</p>	<p>Premature, as we have not yet engaged with residents.</p>

	picture of our performance. This information will be used to create future work programmes.	
<b>Human Rights</b>	<p>The Customer Care Plan is integrated with several Acts and Plans, such as the Gwynedd Council Plan 2023–28, the Well-being of Future Generations Act, Gwynedd Council’s Strategic Equality Plan, the Gwynedd and Anglesey Well-being Plan 2023–28, the Ffordd Gwynedd Plan 2023–28, Gwynedd Council’s Digital Plan 2023–28, the Complaints Policy, the Data Protection Policy, and the Council’s Correspondence Response Policy.</p> <p>To ensure continuous improvement and to meet the needs of all Gwynedd residents and customers, we will adopt success measurement methods aligned with the Customer Service Excellence Standard. This Standard provides a comprehensive framework for improving customer services by focusing on five key areas: Understanding our Customers, Organisational Culture, Information and Access, Timeliness, Quality of Service.</p> <p>We will engage with the people of Gwynedd to seek their views on our performance annually as part of the Council’s self-assessment, and we will review our measures over time in order to obtain an accurate and comprehensive picture of our performance. This information will be used to create future work programmes.</p>	Premature, as we have not yet engaged with residents.
<b>Other</b>	<p>The Customer Care Plan is integrated with several Acts and Plans, such as the Gwynedd Council Plan 2023–28, the Well-being of Future Generations Act, Gwynedd Council’s Strategic Equality Plan, the Gwynedd and Anglesey Well-being Plan 2023–28, the Ffordd Gwynedd Plan 2023–28, Gwynedd Council’s Digital Plan 2023–28, the Complaints Policy, the Data Protection Policy, and the Council’s Correspondence Response Policy.</p> <p>To ensure continuous improvement and to meet the needs of all Gwynedd residents and customers, we will adopt success measurement methods aligned with the Customer</p>	Premature, as we have not yet engaged with residents.

	<p>Service Excellence Standard. This Standard provides a comprehensive framework for improving customer services by focusing on five key areas: Understanding our Customers, Organisational Culture, Information and Access, Timeliness, Quality of Service.</p> <p>We will engage with the people of Gwynedd to seek their views on our performance annually as part of the Council's self-assessment, and we will review our measures over time in order to obtain an accurate and comprehensive picture of our performance. This information will be used to create future work programmes.</p>	
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**6. Are there any data or information gaps, and if so, what are they and how are they intended to be addressed?**

We have not engaged so far, and we will do so as part of the programme for 2025/26.

**7. When considering other key decisions that affect these groups, is there a cumulative impact?**

Premature, as we have not yet engaged with residents.

**8. What does the proposal include to show that you have given due regard to the Public Sector Equality Duty (to promote equal opportunity; help eliminate unlawful discrimination, harassment or victimisation, and foster good relations and wider community cohesion) as encompassed by the 3 aims of the General Duty in the Equality Act 2010?**

A better service for residents that will address a, b and c.

**9. How does the proposal show that due regard has been given to the need to address inequality arising from socio-economic disadvantage? (Note that this relates to closing inequality gaps rather than simply improving outcomes for everyone)**

A better service for residents and a chance to remove any barriers faced by people due to socio-economic disadvantage

**10. How does the proposal demonstrate action in accordance with the requirements of the Welsh Language Standards (Welsh Language (Wales) Measure 2011), to not treat the Welsh language less favourably than English, and to ensure opportunities for people to use the Welsh language? Also, how will it be implemented in line with the Council's language policy and strategy to take every opportunity to promote the Welsh language (beyond providing bilingual services) and to increase opportunities to use and learn the language in the community**

Staff are expected to follow the Council's Language Policy and Strategy when delivering services. The engagement will measure the extent to which we, as a Council, are achieving this.

**11. How does this proposal meet the requirements of the Well-being of Future Generations Act by putting the five ways of working into practice, and respond to the 7 national well-being goals, including creating a More Equal Wales??**

The Well-being Plan emphasises the need to work together to improve the well-being of communities, including engaging with customers and using their feedback to make continuous improvements for the future. It refers to understanding the characteristics of people who are hard to reach and disadvantaged, and to tailoring services in order to reach them more effectively.

Our intention with this Customer Care Plan is to align with the objectives of the Well-being of Future Generations Act, some of our main strategic plans, and our corporate policies. By aligning with these plans and policies, and working across Service boundaries, the Customer Care Plan contributes to creating a future where our customers feel valued, respected, and receive the service they need.

We will engage with residents in order to carry out an annual self-assessment based on the criteria of the Customer Service Excellence standard, with the aim of measuring progress and creating future work programmes.

Our work programme for 2025/26 is to engage with the people of Gwynedd, introduce a new customer care and response to Members training programme, publish performance measures, and identify and develop digital solutions to improve service delivery for users.

## **STEP 3 – Procurement and Partnerships**

**12. Will this policy or practice be delivered fully or partly by contractors or in partnership with other organisation(s)?**

No

**What steps will be taken to comply with the General Equality Duty, Human Rights, Welsh language legislation, and the Socio-economic Duty in relation to procurement and/or partnerships?**

**Procurement:**

-

**Partnership:**

-

## STEP 4 - Addressing Negative or Unlawful Impact and Strengthening the Policy or Practice

**13. When considering proportionality, does the policy or practice cause a significant positive or negative impact or create unequal outcomes**

**Significant Positive Impact:**

The purpose of the Customer Care Plan is to ensure consistency across Departments in our contact with residents/customers. By doing this, the impact will be positive.

**Significant Negative Impact:**

Premature due to the need to engage annually

**14. Any intentional negative impact should be explained, along with why it is believed there is justification for acting in this way (for example, on the basis of improving equality of opportunity or fostering good relations between those who share a protected characteristic and those who do not, or due to objective justification or positive action).**

Not relevant

**15. Will any of the identified negative impacts count as unlawful discrimination even if they are unavoidable (e.g. funding cuts)?**

No

**Note the reason for saying this and the justification for continuing**

Not relevant

**16. What other measures or changes could be included in order to strengthen or amend the policy/practice to demonstrate that due regard has been given to promoting equality of opportunity; helping to eliminate unlawful discrimination, harassment or victimisation; and fostering good relations and broader community cohesion, as addressed by the aim of advancement in the General Duty of the Equality Act 2010?**

Premature at this time, further information will be available following engagement with residents

**17. What other measures or changes could be included in order to strengthen or amend the policy/practice to demonstrate that due regard has been given to the need to reduce unequal outcomes resulting from socio-economic disadvantage?**

Premature at this time, further information will be available following engagement with residents

**18. What other measures or changes could be included in order to strengthen or amend the policy/practice to demonstrate that due regard has been given to the need to increase opportunities for people to use the Welsh language and to not treat the Welsh language less favourably than English, in accordance with the Welsh Language (Wales) Measure 2011, and to reduce or prevent any adverse effects the policy/practice may have on the Welsh language?**

Premature at this time, further information will be available following engagement with residents

**19. Is there enough information to form a balanced judgement and move forward?**

Yes

## **STEP 5 – Deciding to Proceed**

**20. Considering the information gathered in Stages 1–4, is it possible to proceed with the policy or practice or not, and if so, on what basis? Choose from:**

Continue with the policy or practice in its current form

## **STEP 6 - Actions and Arrangements to Monitor Outcomes and Review Data**

**The EIA process is continuous and does not end once the policy/practice and the EIA have been agreed and implemented.**

There is a specific legal duty to monitor the impact of policies/practices on equality on an ongoing basis, to identify whether outcomes have changed since the introduction or revision of the policy or practice. If you do not currently hold the relevant data, you should take steps to address this in your action plan. To view EHRC guidance on data collection, you can review their [Measurement Framework](#).

**21. What actions identified in Stages 1–5 or any additional data collection work will help to monitor the policy/practice once it is implemented?**

<b>Implementation</b>	<b>Dates</b>	<b>Timeline</b>	<b>Assigned Responsibility</b>	<b>Add to the Service Plan</b>
Initial engagement in order to identify a baseline	2025/26		Rheolwr Gofal Cwsmer a Cofrestru	<b>Tes</b>

**22. What arrangements will be put in place to monitor and review the ongoing impact of this policy or practice, including timelines for when it should be formally reviewed?**



<b>Monitoring and Review Arrangements</b> (including where the results will be recorded)	<b>Timeline and Frequency</b>	<b>Assigned Responsibility</b>	<b>Add to the Service Plan</b>
Annual Engagement	Annually	Rheolwr Gofal Cwsmer a Cofrestru	Yes

## GWYNEDD COUNCIL CABINET



### Report to a meeting of Gwynedd Council Cabinet

**Date of meeting:** 8 July 2025  
**Cabinet Member:** Councillor Menna Trenholme  
**Contact Officer:** Dylan Owen, Social Services Director  
**Title of Item:** Strategic Safeguarding Panel Annual Report 2024/25

#### 1. THE DECISION SOUGHT

- 1.1 The Cabinet is asked to accept the report presented that reports on the work of the Strategic Safeguarding Panel for the year 2024/25.

#### 2. THE REASON FOR THE NEED FOR A DECISION

- 2.1. It is essential that Cabinet members are aware of the Panel's work on safeguarding and are satisfied that the Panel has undertaken the required work thoroughly and conscientiously.
- 2.2. The Statutory Director is required to report consistently and regularly to Elected Members on safeguarding matters.

#### 3. BACKGROUND

- 3.1. The purpose of this report is to provide an update on what has been achieved by the Strategic Safeguarding Panel during the year.
- 3.2. It is considered that the report accurately and fairly summarises the work of the Panel, and also includes references to reports or observations made by external auditors on this work.

#### 4. Views of the Statutory Officers:

##### i) The Monitoring Officer:

As a member of this Panel, I welcome this report that appropriately summarises its work. It provides the Cabinet with assurance about this key responsibility.

##### ii) Head of Finance:

Nothing to add from the perspective of financial propriety.

# **STRATEGIC SAFEGUARDING PANEL REPORT**

## **2024/25**

## 1. INTRODUCTION

- 1.1. The report gives an overview of the work of the Strategic Safeguarding Panel over the period April 2024 until March 2025, outlining the work undertaken by the Council themselves, and by the Council in partnership with others.

## 2. RESPONSIBILITIES AND ACCOUNTABILITY

- 2.1. The aim of the Strategic Safeguarding Panel is to ensure that appropriate arrangements and procedures are in place at a corporate level across the Council to ensure the safety of children, young people and adults. Since 2017/18 the Panel is also responsible for maintaining an overview of wider safeguarding issues across Gwynedd, such as Community Safety.
- 2.2. The Panel in turn is accountable to the Statutory Director of Social Services, who has the final accountability for safeguarding issues.
- 2.3. The Chair of the Panel is Councillor Menna Trenholme, Cabinet Member for Children and Supporting Families. The new Terms of Reference is seen in **Appendix 1**.
- 2.4. A Safeguarding Operational Group supports the Strategic Panel to implement its priorities and to deal with practical issues in its remit. This is an internal group of officers, with the safeguarding champion of each department serving on it, to ensure whole-Council ownership of safeguarding issues. The new Terms of Reference for the Safeguarding Operational Group is seen in **Appendix 2**.
- 2.5. Parts of the Council's performance in the safeguarding field are assessed in performance challenge meetings with the relevant Cabinet Members and by independent external inspectors as part of their work in assessing wider performance.

## 3. SAFEGUARDING POLICY

- 3.1. During 2023, a review of the Council's Safeguarding Policy was undertaken, which states how we intend to fulfil our statutory responsibilities for safeguarding children and adults who are at risk in accordance with the Social Services and Well-being (Wales) Act (2014). The policy is seen in Appendix 3.

## 4. PROGRESS AGAINST SAFEGUARDING ISSUES

### 4.1. Safeguarding Children

4.1.1. **7774** references were received to the children services in 2024-25. This is an increase of **8%** in the number of references compared with 7230 last year. It must be noted that this figure could increase as we cannot get a final figure until the end of May this year. Once again, these figures are higher than the figures prior to the COVID-19 pandemic.

4.1.2. Once again, the workload on the service is overwhelming and the workforce has been extremely busy supporting our county's children and families. It is noted that the cases seen were much more intensive and complex than what was seen in the past, we intend to do work to understand the trends affecting the children services during 2025/26. At the end of the year a financial bid was agreed for increasing the department's workforce to ensure effective action with these directions.

4.1.3. There were also cases during the year of crime against children. Whilst legal proceedings and the courts are doing their work, it is important that, as social services, we consistently learn from these incidents through reviews and improve our services to ensure the safety of those who are most vulnerable in our community.

4.1.4. On 6 September 2023 the head of Ysgol Friars was arrested for crimes against female school pupils. He was found guilty in May 2024 of 19 charges, including 12 charges of sexual activity with a child and two charges of sexual activity with a child while in a position of trust. Five victims gave evidence to the court. He was sentenced to 17 years in prison. It is quite likely that other victims were abused by the former head, Neil Foden, as well, but there have been no further court cases to date. It is clear that safeguarding systems in this case have failed over a period of several years and that individuals have suffered as a result.

Since September 2023 a lot of work has gone on to consider and modify the safeguarding arrangements the Council has. The Council's safeguarding policy and the procedures of the Strategic Safeguarding Panel together with the Safeguarding Subgroup were reviewed and presented to the Council's meeting. A Former Director of Social Services was commissioned to carry out a desktop review of Social Services' involvement with the individual over the period in order to understand if changes needed to be made to safeguarding systems. That review was shared with the Child Practice Review (CPR) established by the

North Wales Safeguarding Board under Independent Chair, Jan Pickles, to understand the circumstances of the whole matter, and to establish what lessons are to be learned in order to prevent similar cases in the future. A specialist barrister in the field of child safeguarding was commissioned to look at a specific part of what was raised in the court case and that was also shared with the CPR.

Although there was no specific connection, it is worth noting that the Education Scrutiny Committee decided to carry out a review of safeguarding arrangements in schools across Gwynedd. Work has begun and will continue during the year 2025-26.

It is expected that the Children's Practice Review will draw all the work together providing lessons to be learned and recommendations to the relevant organisations during the summer of 2025.

4.1.5. The Part 5 work is progressing and continues to increase. Part 5 relates to safeguarding concerns about practitioners and those in positions of trust, and these procedures set out arrangements for responding to safeguarding concerns about those whose work, either employed or voluntary, brings them into contact with children or adults who are at risk.

4.1.6. **82% (↑3%)** of child protection reviews were held within the statutory timetable during the year. The percentage of risk assessments submitted to Case Conferences which were considered as exhibiting quality in decision making remained high at **99%**.

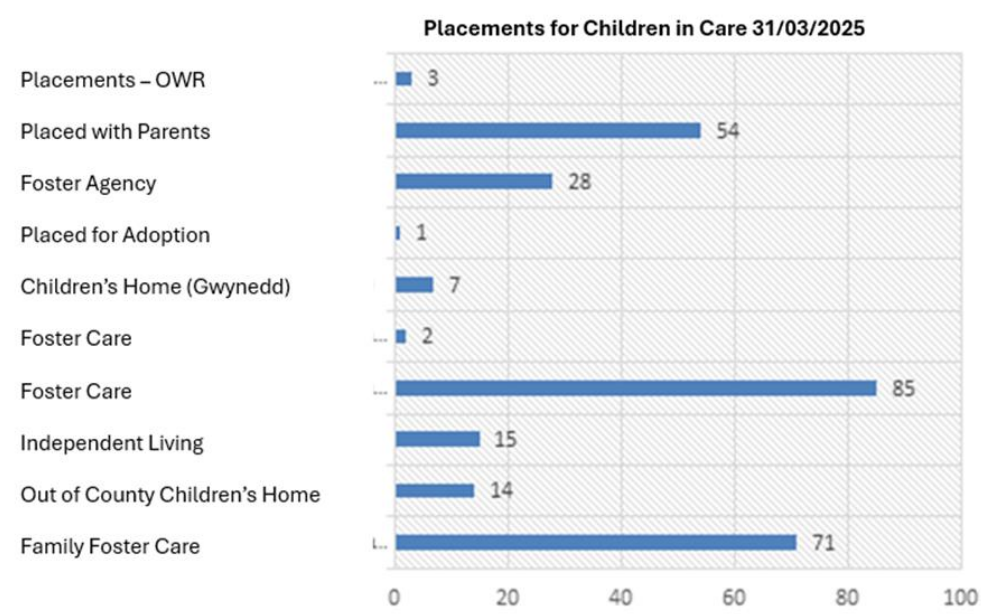
4.1.7. At the end of March, there were **280** looked after children. **43%** of the children who entered care during the year were young babies under the age of 1, with the majority of them having been on the Child Protection Register as part of safeguarding processes before entering care. Asylum seekers represent **2%** of the children who entered care this year.

- 12 children entered care under urgent arrangements (EPO / PPO) during the year, with 7 still in care.

- 21 children entered care under voluntary arrangements (Section S76), with 15 still in care on 31 March.

4.1.8. Of the total number of looked after children, **66%** were in foster placements, **21 (8%)** were in residential placements and **54 (19%)** were placed with their

parents. There was one child in an adoptive placement at the end of the period, with 15 young people living independently with support (3 of them are Asylum Seekers).



4.1.9. During 2024/25, unregistered placements arrangements (OWR) were used for 5 young people in care.

4.1.10. As noted last year, historically our use of unregistered placements arrangements has been very rare, and for short periods of a few days or weeks at most, until a placement identified for the young person was ready. However, the situation nationally is much more serious by now, with the majority, if not all authorities having to ensure that such an arrangement is available due to the lack of registered placements across the United Kingdom. This is especially true of teenagers with intensive and complex needs or who have experienced a placement breakdown due to challenging behaviour.

4.1.11. We strive to respond to the challenge by developing our own residential provision through the Small Group Homes Scheme, which is a priority in the Council Plan 2023-28. The three properties were purchased in 2024/25, and the first home is now operational. In addition, our Placements Commissioning Strategy notes that placements adequacy for looked after children is a priority and we have a clear strategy to recruit foster carers through the Foster Wales Gwynedd Service.

4.2. **Safeguarding Adults**



- 4.2.1. **750** Adult reports were received during 2024/25, this was an increase from the **719** reports received during 2023/24. On average, **91.8% (↓2.2%)** of the initial **126** enquiries from safeguarding referrals have been completed within the statutory period of 7 days.
- 4.2.2. Although it was not possible to identify a trend in the reports received, most of the reports related to allegations of physical abuse and neglect.
- 4.2.3. From the reports of Adults at Risk received, the risk was managed in **98.9% (↓1.1)** of the cases.
- 4.2.4. The type of Adults safeguarding reports received become more complicated annually and we saw that completing the **126** enquiries within the statutory timetable of 7 days became increasingly difficult. It was decided to provide a temporary resource to work with the Safeguarding Officer to ensure that it is possible to complete all the enquiries within the timetable. The additional resource will also help to ensure that safeguarding is included in the work to remodel the front door to services.
- 4.2.5. Regular visits were undertaken to monitor the county's nursing and residential care homes. A small number of providers have been under the 'Escalating Concerns' procedure due to various reasons, these most often include lack of management, documentation problems and lack of overview. The work of monitoring the domiciliary care provision across the county has commenced. The work of the Quality Assurance Officers is prioritised based on safeguarding reports or concerns raised by the workforce/families.
- 4.2.6. Concern about the DoLS service (Deprivation of Liberty Safeguards) remains. A small number of individuals are on the waiting list for up to 3 years. At the end of March 2024, there were **356** waiting for a DoLS assessment. The individuals must be prioritised according to risk. 100 of those on the waiting list are individuals living in supported accommodation and there is a need to make an application to the Court of Protection to deprive these individuals of their liberty.
- 4.2.7. A successful bid was made to employ two Best Interest Assessors on a permanent basis. It is hoped that this significant investment will be conveyed in the 2025/26 data.

- 4.2.8. An additional grant was received from the Senedd to support the work, and the money will be used to commission an agency to undertake many assessments.

#### 4.3. Education

4.3.1. In 2024/25 the Designated Lead Officer for Safeguarding in Education has visited 62 schools to check safeguarding arrangements, policies and procedures. This closes the circle of having visited every school in the last 18 months. A new cycle of visits has started since January 2025 where it is intended that all schools receive a safeguarding quality visit within a one-year cycle. Almost all schools visited are 24/25 compliant with appropriate safeguarding arrangements. Of these visits, 2 schools have received a second visit in order to check aspects such as arrangements for recording attendance / absence and the inclusion of Safeguarding posters.

4.3.2. An Annual Safeguarding Review is completed by every school annually. The latest findings demonstrate:

- **94% (↑2%)** of the “Main Safeguarding Persons” in schools had received specific safeguarding training during the past two years;
- **85% (↑1%)** of Designated Governors in Gwynedd schools had also received the relevant training for their role in the last two years;
- **97% (↑2%)** of Gwynedd Schools had introduced Basic Safeguarding Training to all staff before the end of the Winter term;
- **100% (remains the same)** of Gwynedd Schools noted that they were confident that all school staff and volunteers know what to do if a child should disclose information on abuse.

4.3.3. Since September 2024, the Designated Lead Officer for Safeguarding in Education (SADDA) has conducted:

- 2 Safeguarding training sessions for designated Safeguarding Governors and Chairs
- 11 basic safeguarding training sessions (Supply teachers, occasional staff etc.)
- 11 Designated Safeguarding Person training sessions.

In addition, the Designated Lead officer has held training sessions for supply teachers, early years staff, the education modernisation team and Additional Learning Needs (ALN) staff.

4.3.4. Following a regional effort to review the Reasonable Force Policy for schools, the example policy has been shared with schools for the Governors to adopt it.

4.3.5. By now, the new Safeguarding and Well-being Service has been established within the education department. There is a leader and two officers supporting schools with safeguarding matters, as well as supporting schools with groups of vulnerable pupils.

4.3.6. The Safeguarding and Wellbeing Team has provided a simple flow chart on how to respond if there is a safeguarding concern as well as a flow chart on how to respond to allegations against staff. It is possible for the schools to enter the details of the school's Designated Person as well as the chair. These posters are available for schools to display for the use of Governors, staff and parents. In addition, a new safeguarding poster template has been shared with schools for them to display around the school, in reception and on their websites. This poster contains details of the designated safeguarding person, the deputy designated person and the Chairman as well as how to contact each. The training of Staff, Designated Person and Governors has been modified so that all the above information is included as well as the duty of the Designated Governor to check that the school uses them.

4.3.7. At the end of March 2025, there was a total of **269 (↑30%)** children receiving their education at home, through parents' choice. this figure includes 135 children who have historically been on the register and 134 new since September. Not all children on the register have previously been registered at a school, with some moving into the County but not wanting to register at a school and others making the decision very soon to be taught at home from the statutory education age.

4.3.8. The main reasons for a parent's choice to homeschool is their lifestyle/ideology but over-anxiety and mental health problems are on the rise. We managed to maintain constant contact with the majority of these families with a small number refusing any contact (in accordance with their rights).

#### 4.4. **Domestic Abuse**

4.4.1. There is good co-operation between the Council and the relevant organisations, and efforts continue to promote the importance of reporting and identifying signs of domestic abuse. Following an application prepared by officers from the Corporate Support Department, the Council received a 'White Ribbon' accreditation in May 2022. The accreditation ensures that organisations use a strategic approach to put an end to violence against women, by changing the

culture and raising awareness. There is close co-operation between Community Safety and Corporate Support to monitor and report on the action plan.

- 4.4.2. A recent example of this work was the 'Bystander Intervention' training sessions for Council staff. This was provided by the Welsh Government, with the aim of helping individuals to deal with potentially harmful situations such as sexual harassment, giving them confidence to have discussions with friends and colleagues about these matters. The sessions were held on last year's White Ribbon Day, and more sessions have been arranged for staff in July 2025.
- 4.4.3. The Gwynedd and Anglesey Community Safety Partnership (CSP) is responsible for commissioning Domestic Homicide Reviews (DHR) in Gwynedd. During the past year, one review was published and one was presented to the Home Office for approval. Unfortunately, a new review had to be commissioned following a death during Summer 2024. This review is currently on hold until the criminal case has been concluded. We are continuing to implement and monitor the recommendations from the reviews that have already been completed.
- 4.4.4. The CSP will be working with the Regional Safeguarding Board in any DHR case in the future, following the introduction of the new Single Unified Safeguarding Review (SUSR) process in Wales. This process simplifies the previous arrangement by combining the current Adults Practice Review, Children's Practice Review, Mental Health Homicide Review, Domestic Homicide Review and Offensive Weapons Homicide Review processes.
- 4.4.5. The focus recently has been on responding to the learning from the DHRs that have already been completed, and the recent statistics which show that the deaths of victims through suicide was higher than homicide. A bid for funding was prepared by the NHS Wales Executive Suicide Prevention Programme. With this funding, a multi-agency workshop facilitated by renowned experts in this field was held to raise awareness and give confidence to professionals to ask the difficult questions when they suspect that individuals are victims of domestic abuse.
- 4.4.6. This grant also made it possible for us to order a large number of safety resources and information about support to ensure that we are able to do more engagement work with the public. We will be working with the Police and the regional support service DASU (*Domestic Abuse Safety Unit*) on a pilot project to conduct 'drop-in' sessions. Our aim is to try to increase the likelihood of being able to intervene sooner.

- 4.4.7. We continue to share information regularly regarding the 'Live Fear Free' Helpline and 'Clare's Law', which gives people the right to know whether their current partner or previous partner has any previous history of violence or abuse.
- 4.4.8. Nationally, a lot of discussion and attention has recently been given to matters relating to online influences, toxic masculinity and the impact on boys and young men. This resulted from the *Netflix* drama 'Adolescence'. Six training sessions have been arranged during the Summer for Education staff and the Youth Service by Michael Conroy / Men at Work CIC. The purpose of this training is to support professional workers to facilitate a constructive dialogue regarding healthy relationships, gender stereotypes, online influences and the impact of behaviours on women.
- 4.4.9. By now, the Domestic Abuse e-module is mandatory for all members of staff. It is vital that the workforce receives the training to ensure that the Council is doing everything within its ability to support individuals and to raise awareness. 'Ask and Act' training is also promoted to give staff confidence to help individuals experiencing violence, domestic abuse or sexual violence. **59.9 %** of Council staff (including Permanent, Occasional and Fixed-term staff) have completed the training.
- 4.4.10. We must remember that not all Council staff members have access to the Council's IT systems, and this creates a barrier. The Corporate Support Department is looking at the induction programme to try and ensure that everyone completes the e-modules in the first days of starting their job.

#### 4.5. Crime

- 4.5.1. The year's data to date for 2024/25 shows an increase of **11.5%** in Stalking and Harassment offences, compared to the same period in 2023/24. North Wales Police, as well as other police forces across the UK, have been tasked with creating a profile problem focusing on Stalking offences, to better understand the matter.
- 4.5.2. The level of Sexual Offences recorded to date in 2024/25 in Gwynedd has seen an increase compared to 2023/24. There can be significant variations in crimes reported from week to week, partly because of reporting on historical offences. From the 163 suspects in sexual offences between April and December 2024, over 90% were men.

- 4.5.3. Acquisitive offences include the categories of Residential Burglary, Business and Community Burglary, Theft, Vehicle Crime and Thefts and Handling. Residential Burglary and Business and Community Burglary are exactly the same this year as last year, with reductions seen in the number of Vehicle Crimes and Theft and Handling. Only Theft has seen an increase to date in 2024/25, however this is only equivalent to one additional incident only in comparison with last year.
- 4.5.4. Antisocial behaviour in Gwynedd has seen a reduction to date of **-8.8%** in 2024/25, compared with the same period in 2023/24. This equates to over 150 fewer incidents being reported to the Police.
- 4.5.5. The Serious Violence Duty came into force nationally in January 2023. The duty makes it a requirement for specified authorities to work together to prepare and implement a strategy for preventing and reducing serious violence in the area. The North Wales final Strategy was published in January 2024. The Council has been part of this work since the beginning and continues to be part of the Regional Steering Group to implement the Duty. Further information is available here: [Serious Violence Duty | North Wales Police and Crime Commissioner Officer <https://www.northwales-pcc.gov.uk/cy/dyletswydd-trais-difrifol>](https://www.northwales-pcc.gov.uk/cy/dyletswydd-trais-difrifol)
- 4.5.6. As part of the duty, the Partnership received £82k of funding for preventative and early intervention projects to reduce serious violence by children and young people. Every element of this work was completed successfully by April 2025.

#### 4.6. **Modern Slavery**

- 4.6.1. Modern slavery spans several types of exploitation, namely labour, criminal, sexual exploitation and domestic slavery. In North Wales, Modern Slavery cases in the area mainly relate to drugs exploitation, where the victims are often young males who are forced to trade drugs, usually through county lines. Regionally, promoting contextual safeguarding to work with children and young people at risk of exploitation and/or modern slavery is a priority within the North Wales Serious Violence Strategy.
- 4.6.2. The Police is raising awareness of Modern Slavery amongst authorities and businesses across the region, and conducting regular visits to hotels and holiday sites, as well as providing literature in sexual health surgeries and clinics.

#### 4.7. Counter Terrorism

4.7.1. Cyngor Gwynedd holds a Public Places Group: Preparedness to Protect and Safeguard, and is also a member of the equivalent regional groups. The purpose of the Group is to:

- Respond to the new statutory duty Safeguarding / Martyn's Law which will be implemented in the next 24 months. The new legislation will ensure that the public will be better protected from terrorism, by making it a requirement for some public locations and events to prepare and be ready to keep people safe should there be an attack.
- Collaborate with organisations to provide effective and efficient protective security arrangements in Gwynedd;
- Provide an integrated security approach, that corresponds with the national standards and guidelines, to identify and provide proportionate actions to keep communities safe in Gwynedd;
- Improve and support the preparedness to safeguard and protect in accessible public locations in Gwynedd.

#### 4.8. Prevent

4.8.1. **26.9%** of Council staff (including Permanent, Occasional and Fixed-term staff) have completed the Prevent e-learning training. The Home Office has created a new training package for Prevent, and the e-module is mandatory for the whole workforce by now. The above figure shows that there is work to be done in terms of increasing the number of people who have completed it, but it is important to remember that not every Council staff member has easy access to the Council's IT system, which creates a barrier.

4.8.2. However, in the past year, the Home Office has also published a new package of resources which allows us to prepare bespoke face-to-face training sessions. Welsh-medium resources are expected soon and once these are available, we will go ahead to organise pilot sessions. The ability to conduct our own sessions will ensure that training can be provided to officers who have no access to the e-learning portal.

4.8.3. The Council undertakes a quality assurance process annually with the Home Office, to ensure that we meet our statutory requirements under the Prevent duty. In 2024, the following strengths were identified by the Council:

- The Council takes an active part in the regional Prevent Delivery Group which works jointly to deliver Prevent duties.

- The Council's Prevent officers have taken long strides in working to manage threats and risks in relation to radicalisation during the last reporting period and beyond.

4.8.4. As a result of this process, the Council received two recommendations, namely:

- Develop a policy for hiring venues to reduce the opportunities for radicalists to influence, and this should include briefs for relevant staff members in relation to due diligence.
- Develop a Prevent training strategy, to include provision tailored according to staff roles and cohorts.

4.8.5. In response, a corporate policy for venue hiring is in the process of being drafted, and once the Welsh training resources are available, we will be in a position to implement a new training scheme. The Strategic Safeguarding Panel will focus on these over the next period.

#### **4.9. Disclosure and Barring Service (DBS)**

4.9.1. The Disclosure and Barring Service (DBS) is responsible for processing criminal checks. The purpose of DBS checks is to help employers make safer recruiting and licensing decisions, although the check is only one part of the recruitment process. When the check has been processed and completed by the DBS, the applicant will receive a DBS certificate.

4.9.2. The Operational Group has undertaken some significant work to check, challenge and revisit the corporate procedure in respect of the DBS. As a result, Departments now have greater ownership of the DBS procedures and this has transformed how the Operational Group reports on its conformity on departmental disclosures.

## **5. WORKING IN PARTNERSHIP**

5.1. Although the Strategic Safeguarding Panel focuses on corporate responsibilities regarding safeguarding issues within Gwynedd, it also receives information and guidance via Regional Safeguarding Boards for Safeguarding Vulnerable Children and Adults working across north Wales. These are Statutory Boards with cross-agency membership and specific statutory and legal responsibilities. The Council is a member of these Boards and contributes to implementing their plans. Further information



regarding the work of the Boards can be seen here - <https://www.bwrdddiogelugleddcymru.cymru/>

5.2. The Gwynedd and Anglesey Community Safety Partnership has also shown that working in partnership across county borders is proving to be a success. The Partnership's work in areas such as Atal/Prevent is essential if the Panel is to ensure the quality of safeguarding arrangements in Gwynedd.

5.3. Several organisations have a statutory duty to be part of the partnership, including Local Authorities, Police, Probation Services, Fire and Rescue Service and the Health Board. Information on all aspects of community safety that the Council deals with is on our [website](#).

## **6. THE FUTURE**

6.1. In terms of the Panel's priorities for the coming year, it is intended to concentrate on the following priorities:

- Understand and learn lessons from Practice Reviews published during the year.
- Implement all recommendations that come from Practice Reviews published during the year.
- Completing an internal audit on the awareness and understanding of the Council's workforce of safeguarding systems and how to refer.
- Ensure that the Council's workforce has completed the mandatory and statutory training courses in safeguarding.
- Promote the revised Safeguarding Policy among all Council staff.
- Ensure that the Designated Persons understand their role and take it seriously.

### **APPENDIX 1: Gwynedd Safeguarding Strategic Panel Terms of Reference**

### **APPENDIX 2: Terms of Reference of the Gwynedd Safeguarding Executive Group**

### **APPENDIX 3: Gwynedd Council's Safeguarding Policy**

## **Safeguarding Children and Adults Strategic Panel Terms of Reference**

## **SAFEGUARDING CHILDREN AND ADULTS STRATEGIC PANEL TERMS OF REFERENCE**

### **1. INTRODUCTION**

- 1.1. Safeguarding children and adults is a priority for Cyngor Gwynedd. To ensure that suitable and appropriate safeguarding procedures are in force, the Statutory Director of Social Services convenes a Strategic Panel for Safeguarding Children and Adults, which represents Members and senior managers from all the Council's departments.
- 1.2. The Safeguarding Children and Adults Strategic Panel is expected to lead and advise on the safeguarding requirements contained in paragraphs 64-69 of Part 8 of the Social Services and Well-being Wales Act (2014).
- 1.3. All agencies also need to establish internal arrangements for ensuring that the counter-terrorism agenda, prevention of radicalisation, and community safety issues, receive the appropriate attention.
- 1.4. For the purpose of this Panel, the term 'safeguarding' applies to adults, children and young people and means preventing them from being abused or neglected and educating those around them to recognise the signs and dangers. Safeguarding, and promoting the welfare of individuals, is a broader term than 'protecting' individuals from being abused. It is about individuals and services recognising the risk factors and taking steps to prevent vulnerable individuals from being abused. Protection is part of the safeguarding and promoting well-being work. It refers to the activity of protecting children, young people and adults who suffer or are at risk of suffering significant harm because of abuse or neglect.

### **2. SAFEGUARDING STRATEGIC PANEL TERMS OF REFERENCE**

- 2.1. The aim of the Panel is to give assurance to Members and to the Statutory Director of Social Services, as the senior officer within the Council who has full final responsibility for safeguarding children, young people, and adults, that suitable arrangements and procedures are in place at a corporate level to ensure the safeguarding of children, young people and adults. The Panel will fulfil 3 statutory duties, namely:
  - 2.1.1. general corporate duty to safeguard,
  - 2.1.2. Social Services statutory duty
  - 2.1.3. And the Community safety duty.
- 2.2. To meet these duties, the Panel is expected to:
  - 2.2.1. Identify any gaps in relation to safeguarding at corporate level and approve work programs to respond to these. Collaborate with the Safeguarding Operational Group to respond to any identified gaps.
  - 2.2.2. Identify lessons to be learned, at a corporate level, from reviews of serious cases and from other relevant reviews and ensure action on these. (Adult Practice Review, Child Practice Review and Domestic Homicide Review).

2.2.3. Identify lessons to be learned from external and internal audits and ensure action on these.

2.2.4. Inform relevant lead members of key issues/developments in the field of safeguarding children, young people, and vulnerable adults.

2.2.5. Be a vehicle to raise the awareness of all members of the Council's staff and all elected members of their responsibilities in relation to safeguarding.

2.2.6. Be a vehicle to ensure that staff members and elected members receive suitable training (for example the two mandatory VAWDASV and Prevention) in a timely manner, and monitor attendance at this training.

2.2.7. Ensure inter-departmental work correlation and effective communication within the Council in the field of safeguarding.

2.2.8. Ensure inter-departmental work correlation and effective communication within the Council in the field of safeguarding.

2.2.9. Ensure an overview of wider Safeguarding issues including counter-terrorism procedures, modern slavery, domestic violence, and community safety.

### **3. PERFORMANCE MONITORING**

3.1. The Safeguarding Strategic Panel will have a responsibility to monitor and challenge performance relating to the Safeguarding field.

### **4. CHAIRSHIP**

4.1. The Panel shall appoint a Chair and a Vice-Chair every two years.

### **5. FREQUENCY OF MEETINGS**

5.1. The Panel will meet three times per year.

### **6. GOVERNANCE AND ACCOUNTABILITY**

6.1. The Safeguarding Strategic Panel is accountable to Cabinet. An Annual Report will be submitted to Cabinet on an annual basis. The Annual Report will also be submitted to the Full Council on an annual basis.

6.2. Business management [i.e. formulating a work programme, meetings programme, 'secretariat', central communication point, organising additional professional advice (if necessary)] is the responsibility of the Corporate Support Department.

## 7. MEMBERSHIP

Title
Children and Supporting Families Cabinet Member
Adult, Health, and Wellbeing Cabinet Member
Education Cabinet Member
Cabinet Member with responsibility for Community Safety
Corporate Support Cabinet Member
Chief Executive
Corporate Director
Statutory Director of Social Services
Head of Department for Children and Family Support
Head of Education
Head of Adults, Health, and Wellbeing
Head of Corporate Support
Chair of the Operational Safeguarding Group
Head of Legal Service
Anglesey and Gwynedd Safety Partnership Manager
Senior Child Protection and Quality and Family Support Manager
Senior Safeguarding, Quality Assurance and Mental Health Manager

## **Safeguarding Adults and Children Operational Group Terms of Reference**

## **1. INTRODUCTION**

- 1.1. Safeguarding children and adults is a priority for Cyngor Gwynedd. To ensure that suitable and appropriate safeguarding procedures are in force, the Statutory Director of Social Services convenes a Strategic Panel for Safeguarding Children and Adults, which represents Members and senior managers from all the Council's departments.
- 1.2. The Safeguarding Operational Group reports to, and works for, the Safeguarding Strategic Panel.
- 1.3. For the purpose of this Panel, the term 'safeguarding' applies to adults, children and young people and means preventing them from being abused or neglected and educating those around them to recognise the signs and dangers. Safeguarding, and promoting the welfare of individuals, is a broader term than 'protecting' individuals from being abused. It is about individuals and services recognising the risk factors and taking steps to prevent vulnerable individuals from being abused. Protection is part of the safeguarding and promoting well-being work. It refers to the activity of protecting children, young people and adults who suffer or are at risk of suffering significant harm because of abuse or neglect.

## **2. OPERATIONAL SAFEGUARDING GROUP TERMS OF REFERENCE**

- 2.1. The Operational Safeguarding Group operates in accordance with the guidance and requirements of the Safeguarding Strategic Panel.
- 2.2. The Operational Safeguarding Group will monitor the performance across the services from a child and adult safeguarding perspective. The Group will report to the Safeguarding Strategic Panel at each meeting, clearly outlining any concerns or obstacles. The Panel will work together with the Group to respond to any identified gaps.
- 2.3. The Operational Safeguarding Group will ensure:
  - A clear understanding in the Council's workplace, and those who work on behalf of the Council, of the policies and guidelines for protecting children and adults at risk of harm and/or abuse.
  - That each department in the Council has its own safeguarding procedures documented and used appropriately, and compatible with the Council's Safeguarding Policy.
  - Staff and volunteers receive appropriate and timely safeguarding information and training.
  - Safer recruitment takes place and that the Disclosure and Barring Service (DBS) is used consistently and effectively.
- 2.4. The Designated Safeguarding Officers will undertake the role of raising awareness within their departments.

## **3. CHAIRSHIP**

- 3.1. The Group shall appoint a Chair and a Vice-Chair every two years

#### **4. FREQUENCY OF MEETINGS**

- 4.1. The Group will meet four times per year.

#### **5. GOVERNANCE AND ACCOUNTABILITY**

- 5.1. The Operational Safeguarding Group reports to the Safeguarding Strategic Panel.
- 5.2. Business management [i.e. drawing up a work programme, meeting agenda, 'secretariat', central communication point, organising additional professional advice if necessary]] is the responsibility of the Corporate Support Department.

#### **6. MEMBERSHIP**

- 6.1. The membership of the Operational Group is Designated Officers for the field of safeguarding children and adults within each Council Department.
- 6.2. A list of Designated Safeguarding Officer for each Department can be found on the staff self-service (Hunanwasanaeth).



# Cyngor Gwynedd

## Policy and Guidelines for Safeguarding Children and Adults at risk of abuse and neglect

(Referred to as the Safeguarding Policy for Cyngor Gwynedd)



Reviewed October 2023

**Safeguarding children and adults is the responsibility of everyone who represents or works on behalf of the Council. We are all responsible for reporting any concern or suspicion that a child or adult is at risk of being abused and/or neglected.**

### 1. INTRODUCTION

- 1.1. Every individual has a right to be kept safe from harm.
- 1.2. Cyngor Gwynedd's main priority is to ensure that children and adults at risk are safeguarded from abuse, neglect, radicalisation, slavery, domestic abuse, and exploitation.
- 1.3. The whole of Cyngor Gwynedd has a responsibility to create the environment that assures this, making it less likely that a child or adult is abused. These are the safeguarding arrangements that are outlined in this policy and are the responsibility of every service within Cyngor Gwynedd.
- 1.4. In contrast, Social Services has the lead responsibilities for protecting children and adults who may be suffering harm and neglect.
- 1.5. Employees of Cyngor Gwynedd and elected members are expected to act according to the principles set out in this policy at all times, whether during work hours or otherwise.

### 2. DEFINITIONS

- 2.1. "**Safeguarding**" is a wider concept than the protection of children and adults. It is the prevention of abuse or harm, a general function that deals with promoting:
  - physical, emotional, and mental health
  - safeguarding from harm and neglect
  - education, training, and leisure
  - their contribution to society
  - social and economic well-being
- 2.2. "**Protection**" is the response to concerns about the likelihood of significant harm of an individual, meaning a person at risk of abuse and neglect. The arrangements for protecting children and adults from abuse are outlined in the Wales Safeguarding Procedures.

### 3. LEGISLATION

- 3.1. Section 28 of the Children Act 2004:

Cyngor Gwynedd has a duty to ensure that it undertakes its functions from the perspective of the need to safeguard and promote the welfare of children.

3.2. Section 17 of the Crime and Disorder Act 1998:

Cyngor Gwynedd has a duty to ensure that every reasonable step is taken to protect adults and prevent crime and disorder when it undertakes its functions.

3.3. Section 7 of the Social Services and Well-being (Wales) Act 2014:

Cyngor Gwynedd has a duty to promote the well-being of people who require care and support. The Act defines well-being as something which has eight common aspects, one of which involves protection from abuse and neglect.

3.4. Section 2 of the Wales Safeguarding Procedures 2020:

Cyngor Gwynedd employees and volunteers have a duty to report about any child or adult considered to be at risk of abuse, neglect and/or harm.

#### **4. PRINCIPLES**

- 4.1. Safeguarding children and adults is the responsibility of everyone who represents or works on behalf of the Council.
- 4.2. It is never acceptable for a child or adult to be abused or be harmed in any way.
- 4.3. Every child and adult (whatever their background, culture, age, disability, gender, ethnicity, religious belief) has a right to participate in a safe society without any violence, fear, abuse, exploitation, bullying and discrimination.
- 4.4. Every child and adult have the right to be safeguarded from harm, exploitation, and abuse.
- 4.5. Cyngor Gwynedd will put the safeguarding and well-being of children and adults centrally in our policies and procedures.
- 4.6. Cyngor Gwynedd will work closely in partnership with children, their parents, carers and adults and other agencies to safeguard and promote the well-being of children and adults.
- 4.7. Cyngor Gwynedd recognises the importance of preventative work and early intervention to reduce the likelihood that abuse, or harm may occur.

#### **5. ROLES AND RESPONSIBILITIES**

- 5.1. All Councillors, members of staff, volunteers and contracted service providers are responsible for adhering to the guidance and guidelines noted in this Policy.

#### **5.2. FUNCTIONS OF OFFICERS AND KEY MEMBERS**

##### **5.2.1. Statutory Director of Social Services**

Name:	Telephone:	Email address:
Huw Dylan Owen	01286 679387	<a href="mailto:DylanOwen@gwynedd.llyw.cymru">DylanOwen@gwynedd.llyw.cymru</a>

- 5.2.1.1. The Statutory Director (Social Services) has the final and indivisible responsibility for safeguarding issues. The Statutory Director of Social Services will ensure that the Council has appropriate safeguarding measures and arrangements and is responsible for reporting to Councillors regularly on these arrangements.
- 5.2.1.2. The Statutory Director (Social Services) must remain aware of any potential conflict of interest between their role within social services' investigations and their responsibility for corporate safeguarding issues. If such a conflict arises the Director should recuse themselves from one of the roles for the duration of the situation which causes the conflict of interest.

#### 5.2.2. Lead Director for Children and Young People

5.2.2.1. The Statutory Director of Social Services also holds the role of Lead Director for Children and Young People. This role, created by The Children Act (2004) is responsible for offering leadership and promoting a partnership when planning for implementing the United Nations' Convention on the Rights of the Child across the Council and with partners.

#### 5.2.3. Elected Members

5.2.3.1. Every Councillor must act in accordance with the principles of this Policy and must follow the guidelines and procedures attached to the Policy in order to safeguard children and adults from harm and abuse.

5.2.3.2. Every elected member (Councillor) is expected to undertake training on safeguarding children and adults. A register will be kept of those attending and this will be reported as part of the performance monitoring arrangements co-ordinated by the Safeguarding Strategic Panel.

#### 5.2.4. Cabinet Members

5.2.4.1. The Cabinet Members for Adults, Health and Wellbeing; for Education; and for Children and Families will lead on safeguarding across the Council.

Name:	Email address:
Cllr Menna Trenholme <i>Cabinet Member - Children and Young People</i>	<a href="mailto:Cynghorydd.MennaTrenholme@gwynedd.llyw.cymru">Cynghorydd.MennaTrenholme@gwynedd.llyw.cymru</a>
Cllr Dilwyn Morgan <i>Cabinet Member - Adults Health and Wellbeing</i>	<a href="mailto:Cynghorydd.DilwynMorgan@gwynedd.llyw.cymru">Cynghorydd.DilwynMorgan@gwynedd.llyw.cymru</a>
Cllr Dewi Jones <i>Cabinet Member - Education</i>	<a href="mailto:Cynghorydd.DewiJones@gwynedd.llyw.cymru">Cynghorydd.DewiJones@gwynedd.llyw.cymru</a>

5.2.4.2. These Cabinet Members will be standing members on the Safeguarding Strategic Panel. Cabinet Members will report on the work of the Strategic Panel to the Care Scrutiny Committee, to the Cabinet and to the Full Council annually.

#### 5.2.5. Care Scrutiny Committee

5.2.5.1. Members of the Care Scrutiny Committee will scrutinise and receive information regarding the work programme of the Strategic Panel.

#### 5.2.6. Full Council

5.2.6.1. All Members of the Council will receive an Annual Report on the work of the Safeguarding Children and Adults Strategic Panel.

### **5.3. FUNCTIONS OF COUNCIL DEPARTMENTS, MANAGERS AND STAFF**

5.3.1. Every Department within the Council must take full ownership of their safeguarding responsibilities and have clear arrangements and procedures in place to ensure that enquiries to allegations / concerns that children and adults may be suffering harm and/or neglect receive due consideration.

5.3.2. The Council is committed to train all staff in the field of safeguarding.

#### 5.3.3.All Members of Staff and Volunteers

5.3.3.1. All members of staff and volunteers are responsible for undertaking their duties in a manner which safeguards and promotes the welfare of children and adults. They must also act in a way which protects them against false allegations of abuse as far as possible and in accordance with this Policy. They must bring issues of concern regarding the safety and welfare of children and adults to the attention of the Designated Safeguarding Individual within their Department.

#### 5.3.4.Line Managers

5.3.4.1. Every Line Manager is responsible for ensuring that the staff for which they are responsible receive the safeguarding training they require and that the training is proportionate to their responsibilities. There are guidelines regarding which members of staff should receive training and to which level available by the Corporate Support Department.

#### 5.3.5.Designated Safeguarding Individual

5.3.5.1. Every Department within the Council has nominated a “Designated Safeguarding Individual” which are responsible for:

- acting as a key source of advice and support for other staff in the Department on all safeguarding issues;
- familiarising themselves with Cyngor Gwynedd’s Policy and Guidelines for Safeguarding Children and Adults along with the Wales Safeguarding Procedures and Child Protection Guidelines;
- ensuring that there are effective internal procedures for dealing with concerns within the Department, working in close collaboration with Social Services to achieve this;
- representing the Department on the Council’s Operational Panel for Safeguarding Children and Adults;
- ensuring that the process of conforming with this Policy and Procedure is monitored by reporting regularly to the Departmental Management Team;
- attending the relevant training for “Designated Safeguarding Individuals”;
- ensuring that staff within their Department are compliant with all relevant training.

5.3.5.2. The Designated Safeguarding Individual for each department shall be a member of the Operational Safeguarding Group, which is aligned to the Strategic Safeguarding Panel. A list of all Designated Safeguarding Individual is available on Cyngor Gwynedd’s intranet.

#### 5.3.6.Heads of Department

5.3.6.1. Every Head of Department – through their Management Teams – will be jointly responsible for an understanding of, and compliance with all statutory requirements in terms of safeguarding and promoting the welfare of children and adults. This includes quality, content and frequency of the training provided and maintaining sufficient staff training records.

- 5.3.6.2. Every Head of Department must ensure that all staff members in relevant posts are checked by means of the Disclosure and Barring Service (DBS) and that their staff conform with the Policy and Guidelines for Safeguarding Children and Adults. Every Head of Department must establish arrangements to ensure that they comply with the requirements of the Council's Disclosure of Offences and Checking Criminal Records Policy. Every Head of Department must ensure that records are kept of every check undertaken by the DBS. Compliance in this area will be reported and scrutinised by the Safeguarding Strategic Panel
- 5.3.6.3. Every Head of Department must ensure that this Policy is employed, and that appropriate departmental procedures for Safeguarding Children and Adults are adopted. These procedures are expected to be prepared to highlight the Department's arrangements to respond to issues that could arise in the safeguarding field. The procedures will be required to fully comply with the Safeguarding Policy and Guidelines.
- 5.3.6.4. Every Department in the Council will be expected to report on their safeguarding procedures to the Safeguarding Children and Adults Strategic Panel. The Council's Management Group will convene all Heads of Department, Directors, and the Chief Executive on a monthly basis. There will be an opportunity at these meetings for any of the Heads to refer to safeguarding issues.

#### 5.3.7. Contractors, Sub-contractors or Other Organisations funded by or on behalf of Cyngor Gwynedd

- 5.3.7.1. Contractors, sub-contractors or other organisations funded by or on behalf of the Council are responsible for arranging checks through the Disclosure and Barring Service (DBS) and ensuring that their staff comply with the appropriate Policy and Procedures for Safeguarding Children and Adults. They are also responsible for informing relevant managers of the Council about any concerns they may have and to refer to protection issues. It is the responsibility of the manager of the contract to ensure compliance with these requirements.
- 5.3.7.2. This responsibility, as set out in 5.3.7.1 should be included within all tender documents, agreements and contracts.

## **6. CORPORATE GOVERNANCE FRAMEWORK**

### 6.1. Safeguarding Strategic Panel

- 6.1.1. The responsibility for undertaking an overview of the children and adults safeguarding arrangements has been delegated to the Safeguarding Strategic Panel by the Cabinet.
- 6.1.2. The main responsibilities of the Panel are to ensure that:
  - 6.1.2.1. there are robust corporate and departmental arrangements in place to safeguard children and adults in Gwynedd.
  - 6.1.2.2. there are clear and unambiguous communication arrangements in place across the organisation, including information about the key officers in each service who are responsible for children and adult safeguarding issues.
- 6.1.3. The Panel meets three times a year. Further details on the Safeguarding Strategic Panel can be found within its terms of reference.

### 6.2. Operational Safeguarding Group

6.2.1. The Operational Safeguarding Group is accountable to the Safeguarding Strategic Panel and acts in accordance with the guidance and requirements of that Panel.

6.2.2. The Operational Safeguarding Group will monitor performance across the services from the perspective of safeguarding children and adults. The Operational Safeguarding Group reports to the Safeguarding Strategic Panel at each of panel's meetings, highlighting any concerns or obstacles clearly.

6.2.3. The Operational Safeguarding Group will ensure that:

- There is a clear understanding amongst the Council's workforce, elected members and those working on behalf of the Council, of the policies and guidelines for the safeguarding of children and adults at risk of harm and/ or abuse.
- Each department within the Council has its own safeguarding procedures documented and utilised appropriately, aligned to the Council's Safeguarding Policy.
- Members, staff and volunteers receive appropriate and timely safeguarding information and training.
- Safer recruitment is undertaken and that the Disclosure and Barring Scheme is used consistently and effectively.

## **7. PROCEDURE FOR REFERRING A CONCERN**

7.1. The Police must be contacted immediately if the child or adult is in immediate danger.

7.2. It is crucial not to delay.

7.3. Any member of staff or Elected Member with concerns regarding the safety of a child or adult should immediately contact:

**The Children Services Duty Team on 01766 772577 (press option 1)**

Or

**The Adults Service Advice and Assessment Team on 01766 772577 (press option 2)**

7.4. For any concerns regarding the safety of a child or adult outside usual office hours, **after 5.00 pm Monday to Friday and on weekends and Bank Holidays**, they should contact:

**The Social Services Out of Hours Team on 01248 353551**

7.5. If a member of staff has concerns regarding the behaviour of a colleague or needs advice about a concern/doubt about the safety of a child or adult, they should contact the Designated Safeguarding Individual in their Department. If the Designated Safeguarding Individual is unavailable, then the matter must be referred immediately to the Teams noted above.

## **8. REPORTING, MONITORING AND REVIEWING**

8.1. The Annual Report of the Safeguarding Children and Adults Strategic Panel will report on the Council's performance in complying with the Safeguarding Policy and Guidelines. The Annual Report will be submitted to the Corporate Management Team, the Cabinet and to the Full Council.

- 8.2. This Safeguarding Policy will be reviewed annually or if any amendments occur in legislation or in consideration of changes in working practices which may stem from events or allegations.
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**ATTACHMENTS (TO BE REVIEWED BY THE OPERATIONAL SAFEGUARDING GROUP)**

- Signs of Abuse
- Code of Conduct and Safe Working Practices
- Training on Safeguarding
- Disclosure of Offences and Checking Criminal Records
- List of Departmental Designated Managers
- Good Practice Guidelines for Councillors: Safe Contact with Children and Vulnerable Adults
- The Referral Process
- Dealing With Allegations of Professional Abuse
- Measuring Effect and Monitoring
- All Wales Safeguarding Procedures

## CYNGOR GWYNEDD – Report to Cyngor Gwynedd’s Cabinet



<b>Title of report:</b>	Complaints and Service Improvement Annual Report 2024/2025
<b>Cabinet Member</b>	Cynghorydd Llio Elenid Owen
<b>Contact Officer</b>	Ian Jones, Head of Corporate Services
<b>Date of meeting:</b>	8th July 2025

### 1. Decision sought

Cabinet is asked to approve the report and offer any relevant comments or suggestions about the Council's performance in dealing with complaints in an appropriate and timely manner.

### 2. The reason why the Cabinet needs to make the decision

The purpose of the report is to provide an overview of the Council's performance in relation to dealing with complaints and improving services, highlighting successes, challenges, and developments. This is to ensure that the Cabinet is satisfied with the performance over the periods in question.

An analysis of quantitative and qualitative data is presented, which is a measure of the Council's performance in this context for the period 1 April 2024 to 31 March 2025 together with preliminary information about the previous years.

### 3. Introduction and Reasoning

#### 3.1 Background

The Council's "Complaints and Service Improvement procedure" was introduced in 2015, drawn up under the supervision of the Public Services Ombudsman for Wales. It corresponds with Welsh Government guidelines and is therefore in line with the complaint's procedures of other public bodies.

The Cabinet adopted the procedure with the aim of bringing specific benefits to the citizen by focusing on the solution instead of the process and allow Officers to deal quicker with complaints.

The ownership over responding to complaints was moved to the individual Departments, but with the function of harmonizing and offering guidance continuing under the leadership of the Monitoring Officer with the support of the Service Improvement Officer.

The Concerns and Complaints Policy was updated on 1 April 2021, and responsibility for the implementation of the Complaints and Service Improvement procedure was transferred to the Corporate Support Department under the care of the Service Improvement Officer within the Organisational Learning and Development team. The role and has since been moved to the Support Service since 7<sup>th</sup> April 2025.



It should be noted that this procedure is not relevant to Social Services users as there is a statutory procedure for them. Schools also implement their own complaints procedures.

### **3.2 Responding to Complaints - An explanation of the terminology that is used**

#### **3.2.1 Resolving Informal Complaints**

Complainant informally contacts the Service Improvement Officer or the relevant service to resolve the concern.

#### **3.2.2 Investigating Formal Complaints**

Complainant presents a formal complaint through the complaints procedure. An investigation is undertaken by an officer within the Service, who is senior enough and is independent from the source of the complaint.

#### **3.2.3 Complaint to the Ombudsman**

The complainant could go to the Ombudsman if they are not satisfied with the Council's formal response.

After looking at the complaint, the Ombudsman may decide on one of the following:

- *No Investigation* – where the Ombudsman is satisfied with the way the authority has dealt with the matter and feels that there is no need for a further investigation. It could also be a matter beyond its jurisdiction.
- *Premature* - if the Ombudsman is of the opinion that the authority has not yet had an opportunity to consider the matter.
- *Hold a further investigation* - where the Ombudsman feels that further investigation is needed, to assess how the authority has dealt with the matter.
- *Settlement* – where there is an agreement with the complainant, and they accept the resolution.

### **4. Frequency of the Report**

The Annual Report for 2024/2025 is presented to the Cabinet. Unfortunately, the Ombudsman's Annual Letter will not be available until September 2025, therefore it was not possible to include it with this Annual Report.

'Live' data is available to Heads of Department, the Senior Leadership Team and the Cabinet at any time upon request.

This Report summarises the developments for the period 01/04/2024 – 31/03/2025, focusing on Valid Formal Complaints and complaints submitted to the Ombudsman.

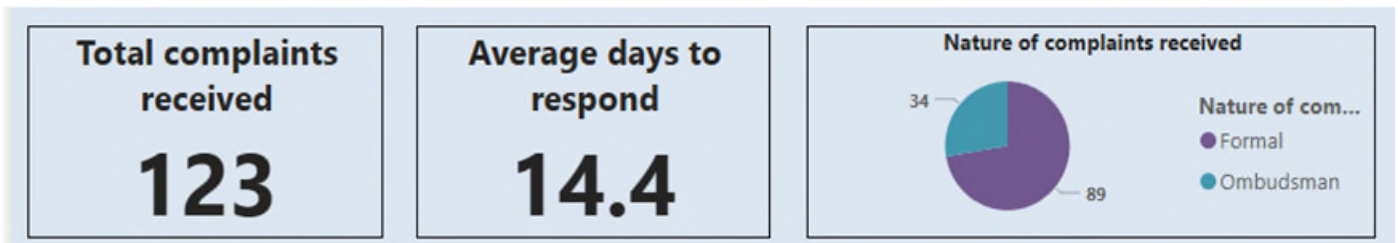
The figures to date for this year are noted below -

- 61 Valid Formal Complaints between 01/04/2024 and 31/03/2025
- 45 Ombudsman Complaints between 01/04/2024 and 31/03/2025  
(29 No Investigation; 11 No Investigation – Premature; 4 Settlement; 1 – Enquiry)

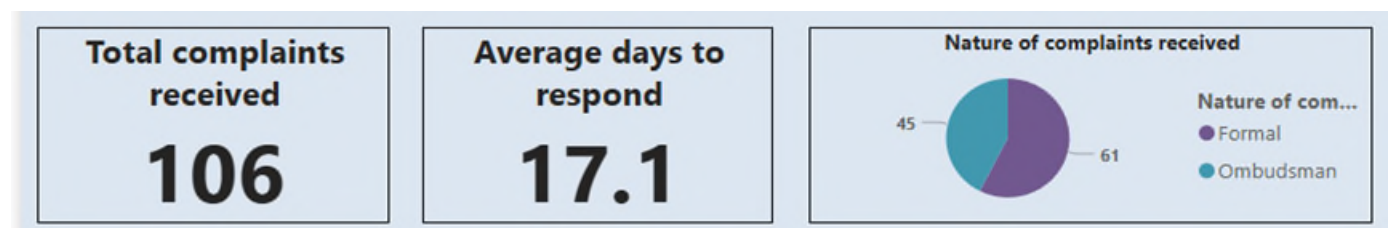
## 5. Quantative Data

Number of Complaints :

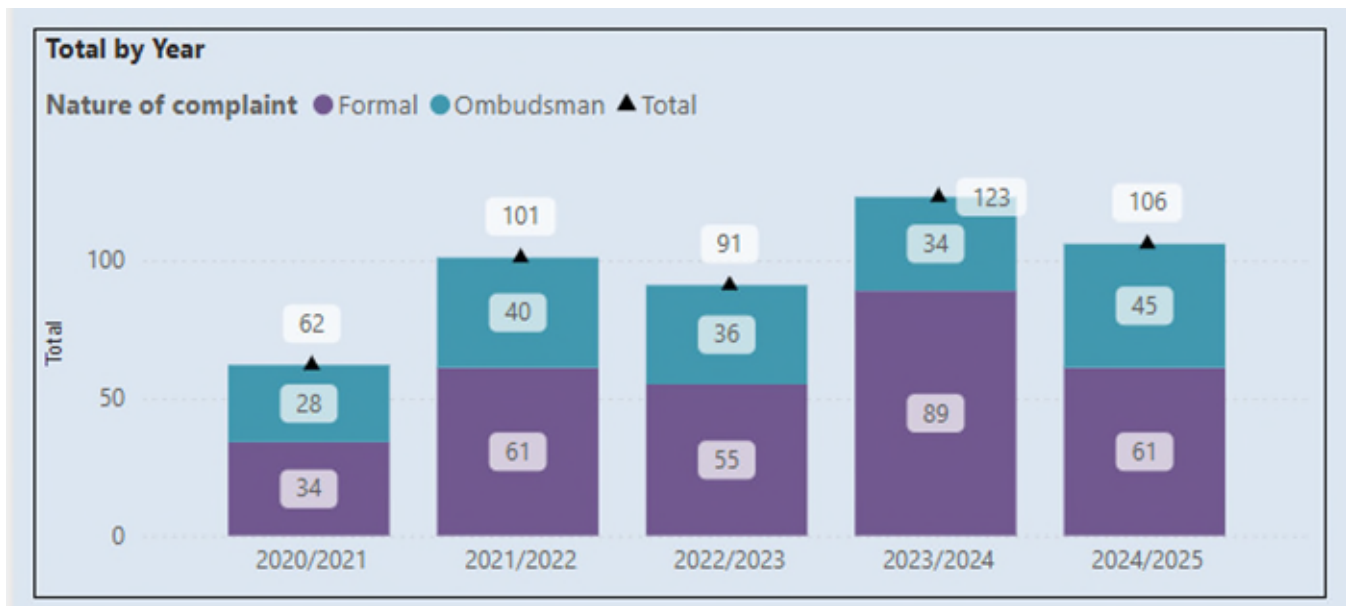
2023/24 Quarter 1-4



2024/25 Quarter 1-4



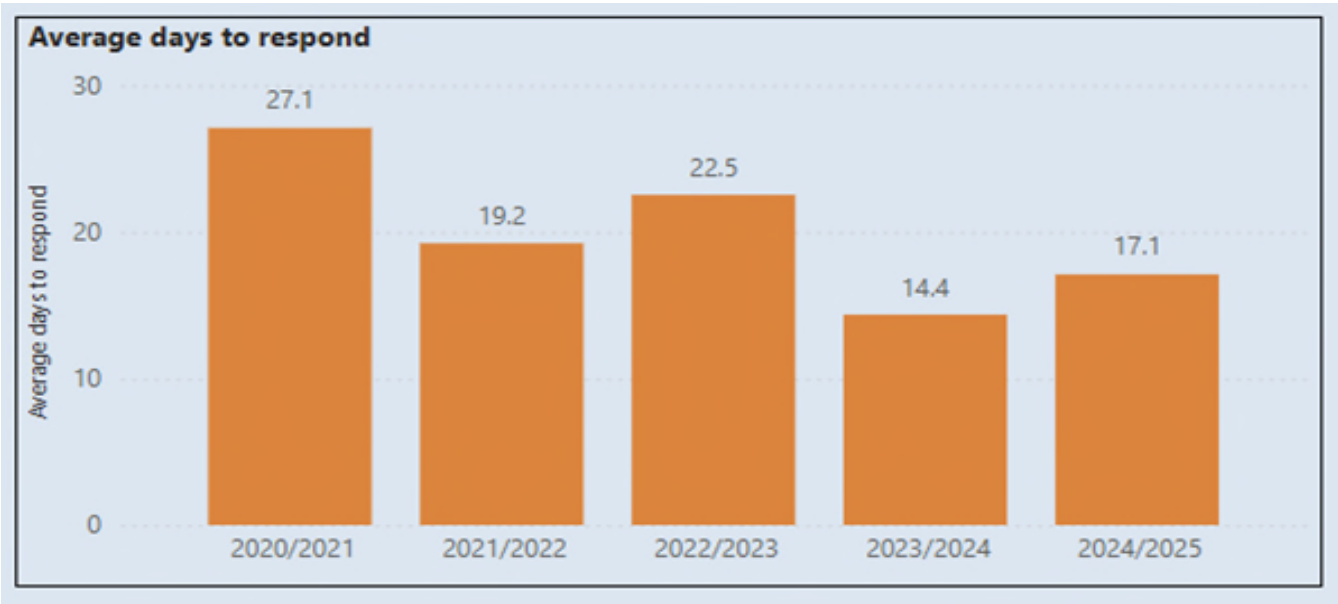
## 5.2 Number of complaints: Situation over a period since 2020-21



# Formal Upheld Complaints and Complaints to the Ombudsman per Section, and Service

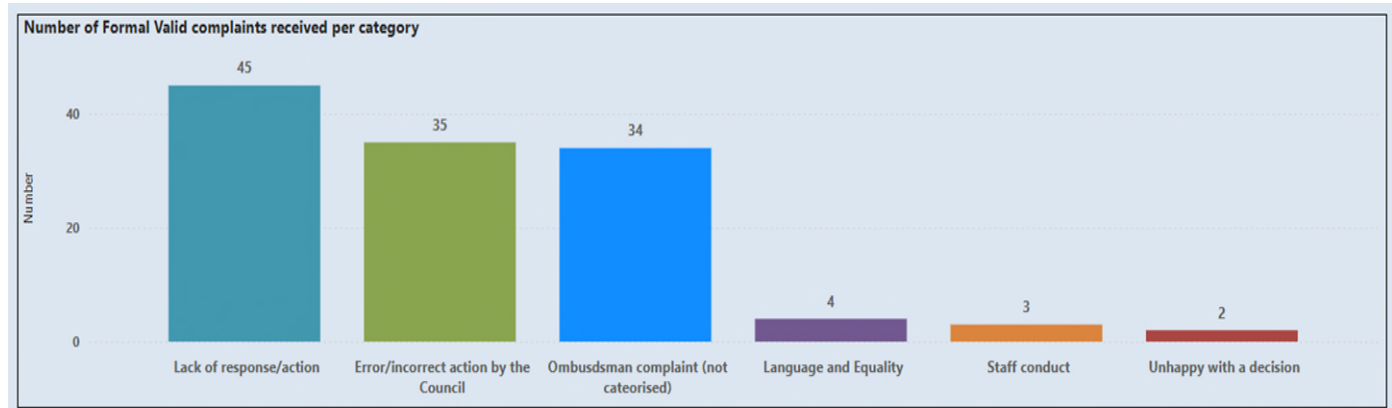
Nature of complaint	Formal		Ombudsman		Total	
Department	Number	As %	Number	As %	Number	As %
<b>Environment</b>	<b>31</b>	<b>50.8%</b>	<b>14</b>	<b>31.1%</b>	<b>45</b>	<b>42.5%</b>
Planning	16	26.2%	6	13.3%	22	20.8%
Refuse	13	21.3%			13	12.3%
Public Protection			4	8.9%	4	3.8%
Building Control	2	3.3%	1	2.2%	3	2.8%
Transport			2	4.4%	2	1.9%
Footpaths			1	2.2%	1	0.9%
<b>Housing and Property</b>	<b>11</b>	<b>18.0%</b>	<b>6</b>	<b>13.3%</b>	<b>17</b>	<b>16.0%</b>
Housing	10	16.4%	5	11.1%	15	14.2%
Property	1	1.6%	1	2.2%	2	1.9%
<b>Finance</b>	<b>7</b>	<b>11.5%</b>	<b>9</b>	<b>20.0%</b>	<b>16</b>	<b>15.1%</b>
Revenue	7	11.5%	8	17.8%	15	14.2%
Benefits			1	2.2%	1	0.9%
<b>Adults, Health and Wellbeing</b>	<b>2</b>	<b>3.3%</b>	<b>4</b>	<b>8.9%</b>	<b>6</b>	<b>5.7%</b>
Social Services	2	3.3%	4	8.9%	6	5.7%
<b>Highways, Engineering and YGC</b>	<b>2</b>	<b>3.3%</b>	<b>4</b>	<b>8.9%</b>	<b>6</b>	<b>5.7%</b>
Highways	1	1.6%	3	6.7%	4	3.8%
Land charges			1	2.2%	1	0.9%
Municipal	1	1.6%			1	0.9%
<b>Children and Supporting Families</b>			<b>5</b>	<b>11.1%</b>	<b>5</b>	<b>4.7%</b>
Social Services			3	6.7%	3	2.8%
Children			2	4.4%	2	1.9%
<b>Corporate Management Team and Legal</b>	<b>3</b>	<b>4.9%</b>	<b>1</b>	<b>2.2%</b>	<b>4</b>	<b>3.8%</b>
Legal	3	4.9%	1	2.2%	4	3.8%
<b>Education</b>	<b>3</b>	<b>4.9%</b>	<b>1</b>	<b>2.2%</b>	<b>4</b>	<b>3.8%</b>
Education	3	4.9%	1	2.2%	4	3.8%
<b>Corporate Services</b>	<b>2</b>	<b>3.3%</b>	<b>1</b>	<b>2.2%</b>	<b>3</b>	<b>2.8%</b>
Corporate Services	1	1.6%			1	0.9%
Language			1	2.2%	1	0.9%
Registration	1	1.6%			1	0.9%
<b>Total</b>	<b>61</b>	<b>100.0%</b>	<b>45</b>	<b>100.0%</b>	<b>106</b>	<b>100.0%</b>

5.3 Response Time over a Period Since 2018-19

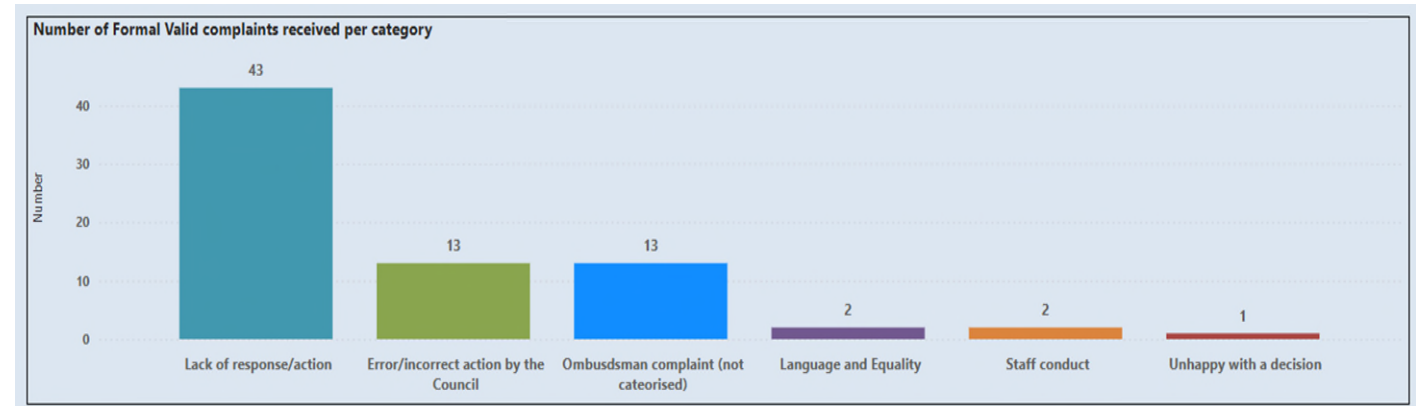


6. Analysis of the Complaints (General)

Per Category for 2023/24 Year Quarter 1-4



Per Category for 2024/25 Year Quarter 1-4



Analysis per Department – See Appendix 1

Detailed information can be provided about specific Complaints if needed.

## **7. Main Messages**

- There have been fewer Upheld Formal Complaints this year but the complaints to the Ombudsman have risen in 2024/2025 compared to the same period in 2023/2024.
- The pattern / trend over a longer period shows that the number of Formal Complaints reduced gradually between 2018/2019 and 2021/2022 when it increased significantly.
- Again, a change in culture can be seen, with most Services accepting complaints in a more positive and constructive way, in order to learn from them, the response time has increased slightly compared to last year.

## **8. Next Steps**

The intention in going forwards is to continue to work with Departmental Management Teams and Officers within the Services to ensure an understanding of the Complaints procedure and their commitment to adhering to it. In light of this, we hope to reduce the time we take to respond to Complaints and continue to Improve Services.

The Complaints process naturally aligns with the work that's taken place on the new Customer Service Plan which forms one of the Ffordd Gwynedd work streams. The new Customer Charter and Standards that form part of the Plan, in terms of response times to Elected Members, responding to general correspondence and responding to complaints, will provide clear guidance to staff. It is hoped that this will avoid a number of complaints about, Non-Response/Action into the future, as staff will have been equipped with the information they need to adhere to the response requirements.

The Successes Wall is still growing, and it is very good to see that a large number of Thanks/Compliments, have come in from the public 1437 since being established in 2015. Seeing the public's appreciation as well as colleague's appreciation is a great help in raising staff morale, especially front-line staff.

## **9. The comments of the Statutory Officers**

### **Head of Finance Department:**

Nothing to add to the report from the perspective of financial propriety.

### **Monitoring Officer:**

The complaints process includes provision that the Cabinet receives reports on the Councils Complaints and Service Improvement arrangements from the perspective of maintaining the quality of services. I note that the Governance and Audit Committee will be considering the effectiveness of the arrangements in accordance with their statutory duties. No observations to add in relation to propriety.

**List of Attachments**

**Attachment 1 Table Showing Analysis of Complaints**

APPENDIX 1

	DEPARTMENT	SERVICE	PERIOD	CATEGORY OF COMPLAINT	NATURE OF THE COMPLAINT / OBSTACLE	RESPONSE TO THE COMPLAINANT	LESSONS LEARN/ SERVICE IMPROVEMENT STEPS	OBSERVATIONS Please note that the Complaints have been noted under a "Category", not necessarily because their nature are all exactly the same
1	Housing and Property	Housing	01/04/2024 – 31/03/2025	Unhappy with a decision	Complaint received as a Premature one from the Ombudsman. Customer complaining that she and her child were allocated an unsuitable property. (She is on the top floor with a child and is also pregnant). She also highlighted other issues at the Hostel.	Service Manager responded and acknowledged that the customer's situation had changed and therefore moved her to a ground floor flat. The other issues the customer had highlighted at the Hostel were also addressed in the response.	Remember the importance of responding in a timely manner to any enquiry or complaint, and always try and explain things to a customer in a way they will understand.	1
2	Housing and Property	Housing	01/04/2024 – 31/03/2025	Lack of response/action	Customer complained that they felt they were not given support by the Homeless Service. They had clients in their property who were refusing to leave. They had asked the Service for support, but they were not given timely support.	The Manager phoned the customer to explain the procedure etc. Customer really appreciated this contact. However, the customer had to make contact again to enquire about a response as it had not been given. Manager then responded and apologised for the delay in making a timely payment.	It is important to make any payment that is due to a customer as soon as is practically possible. A customer should not have to contact the Service to chase the matter.	6
3	Housing and Property	Property	01/04/2024 – 31/03/2025	Language/Equality Issues	Customer complaining that she was treated differently due to her disabilities. She had been visiting a client in a local Hostel at the time. The client too had suffered similar issues, which were not being able to access the Hostel in a wheelchair. The client did not wish to make a complaint herself. Customer had already discussed the matter in the Equality Group meeting. She had noted that this was not good enough and that no improvements had been made even though the matter had been raised several times.	Assistant Head of Service acknowledged the complaint and noted that a separate investigation was underway, therefore he was unable to give the customer a full response at present unfortunately. He would however ensure that he would report back once the investigation had been completed. Equality Officer kept in the loop about the complaint. Assistant Head of Service gave an update to the customer in case she wanted to take the matter on to the Ombudsman. .	It is always important to try and ensure that a customer never feels they are being treated differently due to any disability. The Service need to inform the customer when the Investigation has been completed.	2

**APPENDIX 1**

4	Housing and Property	Housing	01/04/2024 – 31/03/2025	Staff Conduct	Customer complained that she did not feel that her allocated Support Worker, was actually offering her any support. She wants a new Support Worker please as she feels the one, she has, is targeting her.	Manager tried to phone the customer to discuss the matter. Unfortunately, there was a delay in responding fully to the complaint. The reason given for this was due to staff being on annual leave, therefore it was not possible to investigate fully earlier.	If a Service is aware that they are unable to keep to the response timeline, they should keep the customer and Cwynion in the loop about that. If a customer is aware that there might be a delay in getting a response, they are much more willing to accept that fact. Manager to remind all the Team members of this.	1
5	Housing and Property	Property	01/04/2024 – 31/03/2025	Lack of response/action	Customer complaining about the lack of communication. He stated that he had started communication in January, but he has still not received a response, and it is now March.	In his response the Officer apologised for the delay and explained why there had been a delay. He explained the situation to the customer about the offer and it is now up to the customer to discuss the matter further with the officer.	It's important that the Service always try and keep to the timeline to respond to correspondence. If they are unable to respond fully at the time, they should let the customer know this and let them now when they may expect a response.	1
69	Finance	Revenue	01/04/2024 – 31/03/2025	Error/incorrect action by the Council	Complaint by a customer about the lack of response and the errors made by the Service. He had noted that they had been given details, but they had not acted on them. The Manager had sent an apology and promised that the situation would be rectified, but another problem has arisen now.	The Head of Service arranged to respond to the customer. He apologised for the problems that had occurred. The Customer responded and the Head of Service had duly responded to him again.	The importance of ensuring that all data held is up to date on all the systems and that officers respond to customers in a timely manner. Officers should not be defensive and should apologise if there is a need to do so.	2
7	Finance	Revenue	01/04/2024 – 31/03/2025	Lack of response/action	Customer sent a complaint in noting that the Council Tax Service had not acted on his request regarding Council Tax Premium.	The Manager had responded straight away, apologising for the delay, and explaining the current situation, and he had confirmed that the changes had been made.	Remember to respond to customers in a timely manner, to both enquiries and complaints.	4
8	Finance	Revenue	01/04/2024 – 31/03/2025	Staff Conduct	Customer complained about a staff member, he felt the member of staff had not given his complaint the attention it should receive.	The matter was passed to the Assistant Head of Service, who acknowledged receipt of the complaint and explained that the account would be put on “hold” until the matter had been investigated fully. Complaint currently still open. The customer had also complained about elements regarding GDPR, this part of the complaint has been addressed by the relevant Service.	Remember to respond to customers in a timely manner, to both enquiries and complaints. Also try and ensure that matters are explained to customers in a way they will understand.	1
9	Corporate Services	Registration Service	01/04/2024 – 31/03/2025	Error/incorrect action by the Council	Customer complained that an error was made by the Registrar	The Team Leader for the Service apologised to the customer for the	Very important to check and ensure all details are correct at all times.	1



APPENDIX 1

					recording their child's birth. The child had been noted as Female instead of Male. Customer admitted that she and her partner had not noticed this when they were asked to check the document, they only noticed the error when they got home. Customer had phoned in to explain about the error and was told she would have to pay for a new certificate. She did not feel this was fair as she was not the one responsible for the error.	error and arranged for a new certificate to be prepared through the Registration Office. The customer would not have to pay for the new Certificate.		
10	Corporate Services	Support Service	01/04/2024 – 31/03/2025	Error/incorrect action by the Council	A customer, who was previously a member of staff complained that he had a bill from the Council for £9,000 without any explanation that he had been overpaid his wages for the last 3 months after he had left.	The Head of Service responded to the Complaint by apologising for the situation. He explained what had happened and apologised further that nobody had explained this previously. The customer should have been contacted about the matter so that he was aware of what was happening.	If such an incident occurs again, remember that staff should always be given clear information about the situation. Staff should not be expected to enquire about the situation.	1
11	Environment	Building Regulations	01/04/2024 – 31/03/2025	Lack of response/action	Complaint from a customer that he had not been given an update as promised by the Service. He had previously complained about the matter and at the time it was noted that the Service would arrange to update him on the situation this hasn't happened.	The Assistant Head of Service responded in full to the customer and apologised for the delay in sending him an update. He also explained that he could not give further information as that would mean breaking Data Security. He could however confirm that an application was in place and would soon be addressed.	Always important to keep to promises made to update customers and to keep them in the loop on matters they had previously raised with the Service.	2
12	Environment	Planning	01/04/2024 – 31/03/2025	Lack of response/action	Customer complaining about the lack of response from the Service, 5 months have passed, and he hasn't had any response from them.	A Team member acknowledged the complaint, and apologised for the lack of previous timely response, and gave an update of the situation.	Always try and ensure that a customer receives an acknowledgement/response as soon as possible and certainly in accordance with the Council's response policy.	16
13	Environment	Waste and Recycling	01/04/2024 – 31/03/2025	Lack of response/action	Customer complained that it had been over 50 days since she ordered recycling equipment. She had phoned several times and even though she left messages, nobody phoned her back. Even though the person on the phone assured her somebody would respond within 48 hours.	An Officer contacted the customer by phone and arranged for the equipment to be delivered to her.	It is always important to be honest with customers and manage their expectations. Always important to give customers updates if it's not possible to respond fully or to deliver equipment within the given timescale.	7
14	Environment	Waste and Recycling	01/04/2024 – 31/03/2025	Error/incorrect action by the Council	Customer complained about continuous missed business waste collections. She had not received the correct equipment	The Commercial Waste Collection Team has responded to the customer, but she had asked to make a formal complaint. The	It is always important that the Service understands and accepts that complaints they receive directly in the Service should be dealt with as complaints. A Complaint	5

APPENDIX 1

					and had suffered several missed collections, since starting the contract. She noted that the business next door kept putting their bins out next to theirs, but they did not have a contract. The other company's bin was emptied but theirs wasn't.	complaint had been passed on to the Assistant Head of Service for attention.	doesn't have to come through the Complaints Inbox, for it to be considered as a complaint. The Service should be open to receiving complaints and not be defensive towards them.	
15	Environment	Finance Environment	01/04/2024 – 31/03/2025	Lack of response/action	Complaint about a lack of a timely response to communications by the customer. He is not happy to have now received a Final Demand. He had previously asked that the total be shared between himself and the new owner.	The Service Manager investigated the matter and responded to the customer by apologising for the situation and she confirmed that the bill had now been corrected.	Always important that notes, information and facts are kept current and that the Service always acknowledge customer contact in a timely manner.	1
16	Education	Education	01/04/2024 – 31/03/2025	Lack of response/action	Customer complained about the lack of response by the Services to her correspondence relating to a fall her mother had near a school. She was injured and had to visit the Hospital. The customer didn't want anyone else to fall and be injured due to the situation.	Head of Service apologised to the customer for any delay in responding to her correspondence, he wished her mother a speedy recovery and ensured her that the work had been completed. He also explained that her claim for damages had been sent to the Insurance Team.	Always important to acknowledge/respond to a customer as soon as possible, and especially within the timescale of the Council's response Policy.	2
17	Education	Education	01/04/2024 – 31/03/2025	Error/incorrect action by the Council	Customer complaining that he had not been informed about an assessment/report that had been prepared, on his daughter. He noted that the Service had not mentioned this in discussions with himself and his partner. He heard of it afterwards. He also complained about data security issues and mentioned that he would take those up with the Commissioner.	The relevant Assistant Head of Service was assigned to investigate the complaint but due to the customer's request a new Assistant Head of Service was appointed to investigate the matter. The matter was investigated, and a response given, and the Assistant Head of Service responded to further questions by the customer.	It is good to see the Service being open to the customer's request and on receiving his concerns they have arranged for a different officer to investigate and respond to the complaint.	1
18	Highways, Engineering and Consultancy Service	Municipal Services	01/04/2024 – 31/03/2025	Error/incorrect action by the Council	Complaint by customer that Council staff went to her home to erect a new lamp post on her land, this was without her consent. Nobody had contacted her about this beforehand. Council staff were assisting an Energy Company with the work. Customer wanted an apology, and also wanted to see a Wayleave form etc.	Service Manager contacted the customer and apologised for the situation and explained he would get back to her after he had investigated the matter. As a result, an Officer from the Legal Service arranged to respond to the customer explaining the situation and offering a chat if required or advising her to contact her own Solicitor.	It was good to note that the Service Manager wanted to ensure the process was correct, and that he had asked the Legal Service to look at the situation too, so as to ensure the customer was given the correct information in the response.	1
19	Highways, Engineering	Highways	01/04/2024 – 31/03/2025	Lack of response/action	Customer complained about a lack of response when she had	The relevant Officer investigated and responded to the customer,	Always important to acknowledge/respond to a customer as	1

# APPENDIX 1

	and Consultancy Service				contacted the Service about the lack of grass cutting near her home.	apologising and explaining, why there had been a delay in responding. The matter related to two Services. He explained that the land in question had been cut 3 times as per the Council's schedule.	soon as possible, and especially within the timescale of the Council's response Policy.	
20	Legal Services	Legal	01/04/2024 – 31/03/2025	Lack of response/action	Complaint about a lack of a timely response by the Service with regards to land that was to be transferred to him as per the agreement made. Unfortunately, the matter had been ongoing for some time.	The Service followed up the matter and reported back to the customer. Some of the delay was due to the Service waiting for a response from the current owner's Solicitors.	Always important to acknowledge/respond to a customer as soon as possible, and especially within the timescale of the Council's response Policy. Customer has been kept in the loop now regarding the progress.	3
21	Social Services	Children's Services	01/04/2024 – 31/03/2025	Unhappy with a decision	Customer unhappy with the response given by the Service, the response did not have a name on it, and it was not sent out on headed notepaper. She felt that her complaint had not been taken seriously, as a response was given within a few days, she felt it had not been investigated properly.	The initial complaint had been responded too by the Service, but the SIO had noted at the time that she did not consider the response, which was not on official headed notepaper and did not have an officer's name on it, adequate as a formal response. She had brought this to the attention of the Monitoring Officer who referred both services to consider the Ombudsman's Guidance on responding to complaints and attributing responses. The Head of Service was asked to intervene.	It is important for Services, to take ownership of Complaints. Also to respond to customers in a timely manner.	2