

Item No. 8.	Classification: Open	Date: 1 February 2022	Meeting Name: Cabinet
Report title:		Residential Care Charter	
Ward(s) or groups affected:		All	
Cabinet Member:		Councillor Evelyn Akoto, Health and Wellbeing	

FOREWORD – COUNCILLOR EVELYN AKOTO, CABINET MEMBER FOR HEALTH AND WELLBEING

Care homes provide care to the most vulnerable members of our community. The council is seeking to increase our local provision so that our residents can stay close to their families and benefit from local services across the Partnership Southwark agencies. For these two reasons, it is therefore fitting that we ensure that the expectations of the workforce and for the residents and families is high and reflects what we would expect as though they are a valued member of our family. We currently have 16 care homes in the borough, soon to be 17 with the opening of the nursing home on the Burgess Park site, and the 17 homes support over 450 people and these residents are supported by over 630 staff.

I have had the opportunity of visiting care homes over December, to deliver gift vouchers on behalf of the Council as a way of thanking staff for the work that they have done during the pandemic and continue to provide care during the Omicron wave, as well as a precursor to the anticipated adoption of our Residential Care Charter.

This report proposes the Council adopting a Residential Care Charter that sets out our expectations for the experiences of residents living in the care homes and their families. It equally sets out our expectations for the workforce in these care homes, how they should be valued and supported in the important work they do on behalf of us all. We want safe, high quality and ethical care for all. Whilst care is a vocation, this does not mean that the staff should not be properly rewarded for providing care, and they have particularly demonstrated their commitment in the last 18 months during the pandemic.

I am delighted that Unison has endorsed our Charter and joining us in our plan for promoting the Charter with other local authorities. Like the Southwark Ethical Care Charter, our Residential Care Charter will be a trailblazer for other organisations to follow.

The report proposes that our co-produced Residential Care Charter is introduced in 2022 in all new care home contracts and via phased implementation, including pilot and live evaluation, throughout 2022/23. This

will be in the context of our London Living Wage commitment which will be fulfilled from April 2022.

RECOMMENDATIONS

1. That Cabinet agree to the implementation of a Southwark Residential Care Charter as set out in paragraph 7 of the report.
2. That Cabinet agree to the introduction of a Southwark Supplement for staff in Southwark care homes to ensure that staff are paid at least the London Living Wage, as set out in paragraph 11 of the report.

BACKGROUND INFORMATION

3. The Borough Plan 2020-22 commits to introducing a 'Residential Care Charter that protects vulnerable residents and the people who are working to keep them safe'. This commitment relates to adult social care services.
4. Appendix 1 sets out the detailed considerations by officers in relation to developing the Residential Care Charter.

KEY ISSUES FOR CONSIDERATION

5. The council, through the 'Fairer Future, A Healthier Life' priorities, has reiterated its commitment to deliver a residential care charter for home care services and be at the forefront of tackling poor working conditions in care in order to improve the quality of care people receive. Drawing on, engagement with the residents, families, providers, reviewing Unison's Residential Care Charter, Southwark's Residential Care Charter has been developed.
6. As the following constituent organisations and individuals have an interest in ensuring it is successful, it is proposed that the Southwark residential care charter be developed as a four-way compact between:
 - The council
 - Local care home providers
 - The workforce; and
 - Service users and their families and supporters.
7. Southwark's Residential Care Charter has three domains – Safe Care; High Quality Care; and Ethical Care and is set out as follows:

Safe Care	
1	Employers will maintain adequate staff ratios that enable quality care to be delivered.
2	Employers will plan well in advance to ensure adequate staffing levels and adequate time for handover between shifts allow planned time off for staff.
3	Providers will carry out thorough risk assessments to ensure the safety of residents and care home staff.
4	Employers will provide residents and care home staff with safe equipment.
5	Care home staff, including bank and relief staff, will be regularly trained to meet the needs of all residents, as set out in their care plans.
6	Employers will ensure that Disclosure and Barring checks are undertaken and that they pay for these checks.
High Quality Care	
7	Care is about more than personal care. It should include a social dimension that seeks to improve the wellbeing of residents.
8	Families and friends will be involved, at least annually, in the care planning of the residents.
9	Visits to residents will be accommodated by care home providers to maintain the mental and emotional wellbeing of residents.
10	At least quarterly, family and friends forums should take place to meet with care home representatives. Such meetings should include discussions about food and social activities in the home.
11	<p>Residents, families and care home staff must be given information about how to raise concerns and complaints.</p> <p>Care homes will investigate complaints by residents and their families in a swift and robust manner.</p> <p>All complaints will be acknowledged by care homes within 3 working days of receipt and responded to within 10 working days.</p> <p>Complaints will be investigated with a view to understanding the underlying issues that are being raised and any lessons that need to be learned for service improvement.</p>

12	Care homes will enable third parties such as Healthwatch Southwark and the Volunteers from the Independent Calling and Visiting Service, which is managed by Age UK Lewisham and Southwark to enter their premises at least once a year.
Ethical Care	
13	All care home staff will be paid at least the London Living Wage and time spent in the handover between shifts.
14	Zero hour contracts will not be used in place of permanent contracts unless requested by staff.
15	Extra payment will be made for working unsocial hours, including weekends and bank holidays and holiday periods must also be paid as if at work.
16	Care home staff will be given adequate breaks during their working day.
17	Care home staff will be paid occupational sick pay.
18	Care home staff will be paid for the time it takes to carry out a proper handover between shifts, which ensures safety and continuity of care for residents.
19	Training must be free and carried out in work time, so cover for staff must be arranged.
20	Care homes will recognise and respect the rights of their employees to associate freely and to organise and bargain collectively in accordance with the local laws relevant to their employment.

8. By including Southwark's Residential Care Charter in the council's care home contracts, both providers and the council as the commissioner will be transparent about expectations regarding safe, high quality and ethical care. It should be noted that the domains of Safe Care and High Quality Care are over and above (ie more defined than) the standards set by the Care Quality Commission (regulator of health and care services). For example, regulation 16 in the CQC standards only specifies a timescale for informing the CQC about the outcome of an investigation when requested to do so; in the Charter we expect that the complainant receives a response within 10 working days. By setting standards over and above legal requirements, the council ensures that it delivers on its broader duties under the Care Act 2014 to manage the social care market for both council funded social care placed residents and self-funders.
9. Skills for Care data in the fiscal year 2020/2021 indicated that there was a vacancy rate of 12.7% amongst direct care staff in nursing homes in Southwark. There was no data for residential care. For 2020/2021, the

turnover rate for direct care staff was 38% in nursing homes and 29% in residential care homes. The introduction of the Charter should lead to a reduction and stabilisation in these percentages.

10. The adoption of Southwark's Residential Care Charter will place Southwark at the forefront of improving the recruitment and retention of care home staff in the borough, building on the ethical care charter for homecare workers. Recognising staff by paying them a real living wage and improving their work conditions will create the conditions for a more stable workforce that will provide high quality and continuity of care for residents as well as support the development of trusting and long-lasting relationships between care home staff and the families or friends of residents.
11. Given the considerations in Appendix 1, officers propose paying a Southwark Supplement to care home staff, to ensure that all staff in a care home are paid at least the London Living Wage (LLW). It will apply to staff paid below or up to 20% above the LLW. The Southwark Supplement will require a separate agreement between council and the care home provider (as employer of the care home workers). The funding will be ring-fenced with an annual uplift and regular monitoring to ensure compliance. By investing a supplement for care home staff rather than renegotiating fees, there is transparency about value for money. The council can also have increased confidence that this investment in the workforce is being directly received by the staff for whom the money is intended. The council will seek assurances from providers on the number of staff the LLW will apply to in each care home. The council will also monitor and audit its implementation in the care homes.

Policy framework implications

12. The Borough Plan 2020-22 commits the council to raise standards in care homes with a residential care charter that protects vulnerable residents and the people who are working to keep them safe. It also commits the council to increase the number of care homes in the borough.
13. The Charter should benefit:
 - Residents of care homes
 - Family and friends who visit care homes
 - The staff who support the residents.
14. The Charter describes the culture and conditions in a high performing care home. The benefits of a charter are expected to lead to:
 - Improvement in quality of care experienced by residents in care in homes
 - Improvement in care home staff retention and reduction in staff turnover

- Greater emphasis on providing training for staff to maintain their knowledge and skills
- Optimising the independence of vulnerable people living with complex needs or challenging developmental ability.

Community, equalities (including socio-economic) and health impacts

Community impact statement

15. The demographics of people who receive social care commissioned by the council in Southwark can be summarised as follows:

- Southwark has a population of 313,300, of these 25,100 (8%) are aged 65 and over. The number of people aged 65 and over will grow by 13,700 by 2030, which is an increase of 55%. The ageing population and increased prevalence of certain long-term conditions has a significant impact on health and social care provision locally.
- Of the 215 people who receive nursing care, approximately 82% are 65 years of age and over, and of the 175 people who receive residential care, 78% are 65 years of age and over with the remainder being people with learning disabilities, mental health problems or physical disabilities.
- Amongst the nursing care home residents, 59% of these are women and for general care home residents, 57% are women, which is linked to longer life expectancy for women.
- 27% of nursing care residents and 23% of general residents are from Black, Asian and Minority Ethnic groups in Southwark. This is lower than the overall proportion of people (32%) from Black, Asian and Minority Ethnic communities in the borough.
- 362 people are currently accommodated in older people nursing and residential care homes and 95 people in care homes with adults of working age based in Southwark, making a total of 457 residents.

Equalities (including socio-economic) impact statement

16. According to provider self-reporting in the Capacity Tracker, the adult social care workforce data, in 2020/21 includes 625 care home staff working in Southwark. Of these 425 staff worked in residential care homes with 300 direct care roles and 200 staff worked in nursing care homes with 125 direct care roles.

17. In addition, it is worth noting that the Skills for Care data about care home staff in Southwark is such that:

- Gender – 85% female and 15% male

- Age profile – a mean age of 50 years residential care and 46 years in nursing homes
 - Ethnicity data was not available for either setting
 - Nationality data was not available for residential care homes but for nursing homes it showed that 55% were British nationals; 36% were non-EU foreign nationals; and 9% were EU foreign nationals.
18. A full equalities impact on the delivery of the Southwark Ethical Care Charter has been considered throughout the development of this charter. Any changes to the delivery of residential care services will particularly affect older people and those with a disability as they represent the largest group of service users. The implementation of the Southwark Residential Care Charter will also include an equality impact assessment.

Health impact statement

19. The implementation of a Resident Care Charter in Southwark will help to improve the health and wellbeing of both residents and staff in the care homes. It will achieve this by setting out the minimum standards and employment conditions required to deliver high quality residential care in the borough. It will ensure that some of the lowest paid staff are paid the London Living Wage and that they receive adequate, free, on the job training to fulfill their roles. It will aim to assure the safe ratio of staff to residents that will have a direct bearing on the quality of care received by residents in care homes. The charter will also reduce health inequalities in Southwark by ensuring people from socio-economic disadvantage are better remunerated for their work. It will lead to a more stable, well-equipped workforce that is able to deliver high quality, consistent care.

Climate change implications

20. This policy has no direct implications for climate change. The charter's primary focus is on improving standards in care homes and conditions of employment for staff. It does not aim to reduce carbon emissions by, for example, encouraging sustainable travel, attracting green jobs or reducing waste. However, we will work with the providers to ensure they are maintaining good climate practice as part of our commissioning process.

Resource implications

21. Detailed financial modelling based on 6 care homes has been undertaken to determine the likely extra costs of implementing a Residential Care Charter in Southwark. One of the key aspects of the charter is that staff in nursing and residential care homes would be paid at least the London Living Wage (LLW).
22. The modelling was based on financial data provided by 6 in-borough care homes and information on the staff numbers in each of the in-borough homes. The 6 homes provided a breakdown of the number of staff posts needed and staff hours worked in an average week as well as the hourly

base rate of pay for posts earning up to 20% above the LLW. From the data we extrapolated the current staff costs and potential increase in staff cost if the LLW uplift were applied.

23. The total weekly staff cost to the home was calculated as base pay with on-costs multiplied by the number of weekly hours. The new hourly rate of staff following a LLW was determined by calculating the percentage increase needed to bring the staff with the lowest hourly rate up to the LLW and increasing the base pay of all staff in the group by this percentage.
24. The total current weekly staff cost was subtracted from the LLW total weekly cost to give the additional cost of the uplift to the care homes. The total additional weekly cost was divided by the number of staff in the home to give an additional cost per staff in each home. The average additional cost across the 6 homes was then multiplied by the reported number of staff in each of the in-borough care homes to give an estimated staff cost increase for all homes.
25. Further financial modelling will look at direct outgoings but also the wider benefits that can be delivered by the strategy. There are a number of funding sources available including Better Care Fund monies.
26. The Director of Commissioning for Children and Adults will work with the Director of Adult Social Care and Departmental Finance Manager through the budget setting process for 2022/23 and beyond to ensure the sustainability of the new approach to commissioning residential care services.

Legal implications

27. Please see the concurrent report of the Director of Law and Governance below.

Financial implications

28. The proposed implementation of the residential care charter would ensure that all residential and nursing care homes operating within the borough comply with London Living Wage (LLW) commitments. The current LLW rate is £10.85 per hour.
29. Compliance with LLW would result in an increased cost for the care homes as it would effectively require them to alter their salary structure and inflate hourly rates for non-management staff members. Consequently, this would result in the care homes increasing their care rates with the council to accommodate for their increased expenditure.
30. Financial modelling has been executed based on the financial data submitted by 6 of the care homes in Southwark, highlighting their salary structure. The data has been extrapolated to determine the potential

increase in costs to the home by uplifting staff who are currently being paid less than LLW and those who are being paid just above the LLW rate and determining that as a percentage of the total cost to the home. This percentage would then be applied to the council's total cost with the home, consequently determining the estimated additional cost to the council.

31. The estimated additional cost to the council as a result of LLW being applied to all in borough nursing and residential care homes would be approximately £1.40m-£1.75m. However, if the council intend on compliance of LLW for the contracted providers only i.e. only covering the council's client base and no other non-council clients such as self-funders and clients with specific spot arrangements, this would result in an additional cost to the council of an estimated £1.08m-£1.33m.
32. It should be noted that these are estimated cost ranges based on financial data submitted by the care homes, hence there is not sufficient evidence to accurately determine the full cost of implementing the residential care charter. Additionally, LLW has increased by approximately 3% year on year, hence there would be annual recurring costs to the council in accordance with the annual LLW rate increases.

Year	London Living Wage
2018/19	10.20
2019/20	10.55
2020/21	10.75
2021/22	10.85
2022/23	11.05

33. There is no provision within existing budgets in children's and adult's services to cover the additional costs of implementing the residential care charter. However, the department have applied for corporate funding as part of budget challenge as this is a council commitment. Additional funding streams are due to be utilised such as the potential use of future years Better Care Fund increases.

Consultation

Unison

34. Officers met with Unison about the development of the Unison Residential Care Charter in the borough at the beginning of 2021. Unfortunately, the take up of Unison's Charter has been low, primarily because councils have reported that they have not identified a way to influence the delivery of residential care services in the same way that they can with homecare contracts. Only one local authority in the UK had adopted Unison's residential care charter – Hartlepool Borough Council - for their in-house care homes.

35. In December 2021, Officers met with Unison to discuss implementation of the Southwark Residential Care Charter in the borough. Unison confirmed that Southwark's Residential Care Charter is compliant with their charter and that they were satisfied with how Southwark will be monitoring provider compliance with the charter. This would include reviewing staff payroll and meeting directly with staff to ensure that the non-financial benefits of the charter are being realised.
36. Unison confirmed that the council's compliance with Unison's Residential Care Charter will be recognised on their website. A certificate of compliance will also be issued by Unison, formally recognising local authorities that adopt their charter.
37. Unison agreed to jointly promote the advantages of the charter with the council as much as possible. This would take the form of issuing a joint press release as well seeking to present at the spring Association of Directors of Adults Social Services (ADASS) conference and the National Children and Adult Services Conference (NCASC).

Public consultation

38. Consultation with the public and different stakeholders was carried out through presentations at forums, surveys and interviews. Colleagues and members of the public were also engaged through the Care Well Forum and the Care Home Provider Forum. Unfortunately, the Covid-19 pandemic significantly limited our ability to effectively engage with residents, carers/family, care home staff and other key partners. Face-to-face surveys and meetings could not be held and most engagement exercises had to be carried out virtually or over the phone which reduced their efficacy.

Residents and families

39. As part of the consultation work, two surveys and interviews were carried out to gauge the views of Southwark care home residents and staff on how local care homes standards could be improved with the development of a residential care charter in the borough. The following paragraphs sets out the outcomes of these consultation exercises.
40. Between January and March 2021, residents and their families living in residential and nursing care homes based in Southwark were surveyed by an external organization on behalf of the council and in September 2020 staff employed in the local care homes were sent questionnaires to obtain the management/organisational perspective of these care homes.
41. Thirteen interviews with residents were conducted over the phone between January and March 2021 by Age UK Lewisham and Southwark on behalf of the council. The original intention was to interview more residents and their carers, but the Covid-19 pandemic prevented this. Respondents (or their family/carers) came from a total of seven older

people's care homes in Southwark. Only three of the respondents were residents of homes with the remainder being family/carers of residents. Furthermore, 4 out of the 13 respondents were living in homes out of the borough. The full report can be found in the appendices.

42. Key findings from the interviews were:
- Four family members interviewed felt that the homes in borough did not meet their family member's needs.
 - Though most were happy with the professional manner and training of care staff, the term "hit and miss" kept on being used; there were excellent examples of care alongside 'adequate' care.
 - Night-time staff were more likely to be agency or locum staff and did not know the residents as well as the day-time teams.
 - Three respondents said that they thought that there was sufficient staff on duty to deliver the ideal level of care sought.
 - Although eight respondents were positive about their key worker, there seemed to be an inconsistency in the calibre of key workers.
 - Two residents without dementia expressed feelings of being isolated in the home, having no one to talk to other than busy staff.
 - The area of greatest development opportunity was in relation to activities and social contacts.
43. The lower number of respondents made it difficult to draw conclusions from this survey. Despite this, it has highlighted the varied standard of care made available to residents, particularly those with dementia. Much of this seems to be attributed to residents feeling isolated because of the restrictions imposed by the lockdown on their and their family's movement. As the lockdown eases, reengaging residents in social and physical activities will be important.
44. In September 2020, a questionnaire was circulated to staff and managers from Southwark's care homes in order to get feedback on how support and services at the care homes are being currently delivered and how they could improve in the future.
45. Questionnaires were distributed to employees working in Southwark care homes for older people and adults with physical or learning disabilities. Engagement sessions were held in four homes in late 2020 to encourage feedback. In the end, 56 questionnaires were returned. A full report of the findings has been published and can be found at the appendices. A short summary of the main headings is set out below.
- On the positive side, 88.4% were aware of procedures to follow if concerns were concerned and 79.1% said the organisation acted on concerns raised by service users (with one respondent saying they didn't).
 - However, only 55% said there are enough staff to resident ratios for them to do their job properly.

- 72% of respondents were happy with the frequency of their shift patterns but some staff mentioned that the 30m minutes handovers between shifts were often challenging.
- Staff suggested how trust and recognition could be improved in the staff engagement sessions; these included both informal and formal ideas ranging from a simple 'thank you' by the management to better pay for staff and lunch vouchers.
- Respondents came up with a number of ideas for improving services and care to the residents, including better food provision, modernising the premises, more social activities for residents, and better use of technology that frees up staff time to provide care.
- 72% of staff said they are provided with free training in work time with cover to enable them to attend.
- However, each care home seemed to have different rules around payment for training; many staff did e-learning at home for which they were not paid.
- Partly due to the pandemic, e-learning was the method of training most used in the last 12 months, although most staff (69%) preferred face-to-face training.
- Dementia and mental capacity were amongst the top 10 requested training sessions needed in the survey, alongside end-of-life and dealing with challenging behaviours.

46. The surveys and interviews demonstrate that while the quality and standard of services are generally high in Southwark, improvements are still required to deliver consistently good services that meet the needs of all residents in a suitably rewarding and educative work environment for staff.

Other stake holders

47. Feedback from the Care Well Forum and Care Home provider forum was positive. Members of the forums supported the implementation of the Charter because it would lead to an improvement in the quality of care provided by Southwark care homes as well as the recruitment and retention of staff in the nursing and residential care sector, replicating the impact of the Ethical Care Charter.

SUPPLEMENTARY ADVICE FROM OTHER OFFICERS

Head of Procurement

48. Not applicable

Director of Law and Governance

49. This report requires the Cabinet to note and agree several recommendations relating to the introduction of a residential care charter as further detailed in paragraphs 1-3. There are no specific legal implications arising from these recommendations, however in agreeing them Cabinet should have regard to the council's obligations to carry out its duties in accordance with the principles of best value. Cabinet is advised that the council may include workforce conditions as part of its contract/procurement requirements but should only do so when the inclusion of these requirements will achieve best value. This report details the implications and benefits in agreeing the residential care charter which Cabinet should consider.

50. The council is required under the Public Services (Social Value) Act 2012 to consider how what it is proposed to be procured may improve the economic, social and environmental well-being of an area, and consider the additional benefits to the community from the procurement process over and above the direct purchasing of services. These benefits can include investing in employees for improved outcomes to meet the needs of the community and promoting compliance with social and labour law.

51. Cabinet will be aware of the Public Sector Equality Duty (PSED) as set out in section 149 of the Equality Act 2010, and in making decisions the duty to have regard to the need to:

- (a) Eliminate discrimination, harassment, victimisation or other prohibited conduct
- (b) Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not
- (c) Foster good relations between persons who share a relevant protected characteristic and persons who do not.

52. The relevant protected characteristics are age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex and sexual orientation. The PSED General Duty also applies to marriage and civil partnership, but only in relation to (a).

53. Cabinet should also note and take account of paragraphs 34 to 47 which describe the nature, scope and findings of the consultation which has been undertaken in order to inform and develop the proposed residential care charter.

Strategic Director of Finance and Governance (REF: 50EN202122)

54. The Strategic Director of Finance and Governance notes the recommendations of this report detailed in para. 1-2. The implementation of the residential care charter and the introduction of Southwark supplement will require additional financial commitment as detailed in the finance implications section para 28-33 Recommendations of funding streams will need to take into account financial constrains in other part of the council as well as the benefits of the charter to the wider community within Southwark as detailed in the report. As well as the initial investment, this charter will have ongoing financial commitments in line with LLW increases in future years. As the proposed supplement will be dependent on providers being compliant with requests around salary structure, information it is imperative that officers work closely with providers and implement contingency planning to mitigate possible future financial risk.

BACKGROUND DOCUMENTS

Background Papers	Held At	Contact
Unison’s Residential Care Charter	Older People and Adults with Complex Needs Team, 160 Tooley Street London SE1 2QH	Jonathan McInerny 020 7525 1687
Link: https://www.unison.org.uk/content/uploads/2017/03/24230.pdf		
Fairer Future, A Healthier Life – Southwark Council	Older People and Adults with Complex Needs Team, 160 Tooley Street London SE1 2QH	Jonathan McInerny 020 7525 1687
Link: https://www.southwark.gov.uk/council-and-democracy/fairer-future		
Southwark Ethical Care Charter	Older People and Adults with Complex Needs Team, 160 Tooley Street London SE1 2QH	Jonathan McInerny 020 7525 1687
Link (please copy and paste into browser): https://moderngov.southwark.gov.uk/documents/s52528/Appendix%201%20Southwark%20Ethical%20Care%20Charter.pdf		
Southwark Council Plan 2018-2022	Older People and Adults with Complex Needs Team, 160 Tooley Street London SE1 2QH	Jonathan McInerny 020 7525 1687
Link (please copy and paste into browser): https://moderngov.southwark.gov.uk/documents/s90466/Appendix%201%20Council%20Plan%202018-2022%20refresh%20updated.pdf		

APPENDICES

No.	Title
Appendix 1	Considerations by officers about the implementation of the Residential Care Charter within the care home sector
Appendix 2	Southwark Care Home Charter: Summary of Survey of residents of care homes and their family/supporters (V1) – Age UK Lewisham and Southwark
Appendix 3	Residential Care Charter summary of staff engagement – Older People and Adults with Complex Needs Team in Southwark

AUDIT TRAIL

Cabinet Member	Councillor Evelyn Akoto, Health and Wellbeing	
Lead Officer	David Quirke-Thornton, Strategic Director of Children's and Adults' Services	
Report Author	Jonathan McInerny, Programme Manager	
Version	Final	
Dated	20 January 2022	
Key Decision?	Yes	
CONSULTATION WITH OTHER OFFICERS / DIRECTORATES / CABINET MEMBER		
Officer Title	Comments Sought	Comments Included
Director of Law and Governance	Yes	Yes
Strategic Director of Finance and Governance	Yes	Yes
Cabinet Member	Yes	Yes
Date final report sent to Constitutional Team		20 January 2022