ANNEX 4



City of York Council Freedom of Information (FOI) and Environmental Information Regulation (EIR) Improvement Plan

The main objectives of the improvement plan are to:

- address volume of FOI/EIR with no responses
- improve the rate of responses within statutory time scales

Governance

| Statement | Actions | Priority | Owner | Start date | Target implementation date | Date last reviewed | Status |
|---|--|----------|-------------------------------|------------|----------------------------|--------------------|--|
| Council Management Team renew commitment to FOI/EIR compliance across the council including swift action where there's identified blockers and bottlenecks. | Issue commitment statement. Emails sent by Chief Operating Officer. Council Management Team report. | High | Council Management Team | 24/08/2023 | 13/09/2023 | Not applicable | Action Completed - solution in place. |
| There is governance oversight in place to ensure compliance with FOI/EIR. | Governance Risk and Assurance Group (GRAG) 6 weekly meetings. Regular report to Council Management Team starting 25/10/2023. | High | Director of Governance | 13/09/2023 | Ongoing | Not applicable | Action Completed - solution in place. |

| Statement | Actions | Priority | Owner | Start date | Target implementation date | Date last reviewed | Status |
|---|---|----------|---------------------------|------------|----------------------------|--------------------|---|
| Responsibility has been assigned to ensure compliance with FOI/EIR. | Corporate Governance Team (CGT) responsibilities will be reviewed. Responsibilities will be reviewed across directorates. | High | Director of Governance | 13/09/2023 | 30/11/2023 | - | Solution in place but improveme nts are required. |
| Sufficient resources are assigned to the handling of requests for information to ensure response within the statutory timescales. | Corporate Governance Team structure will be reviewed. Resources will be reviewed across directorates. | High | Director of Governance | 13/09/2023 | 30/11/2023 | - | Solution in place but improveme nts are required. |

Processes and procedures

| Statement | Actions | Priority | Owner | Start date | Target implementation date | Date last reviewed | Status |
|---|---|----------|---------------------------|------------|----------------------------|--------------------|--|
| Processes and procedures are in place which explain the council's approach to, and responsibilities for, FOI and EIR. | FOI/EIR handling procedure will be reviewed. This will continue to be monitored and reported to Governance Risk and Assurance Group (GRAG), Council Management Team and Audit and Governance Committee. | High | Director of Governance | 13/09/2023 | 29/09/2023 | 29/09/2023 | Action Completed - solution in place. |
| Processes and procedures are easily accessible by staff. | Updated and approved procedures will be made available to all staff via the corporate Intranet. | High | Director of Governance | 13/09/2023 | 30/11/2023 | - | Solution in place but improvements are required. |
| Processes and procedures are easily accessible by customers. | Updated and approved procedures are available to all customers via the council website. | High | Director of Governance | 13/09/2023 | 29/09/2023 | 29/09/2023 | Action Completed - solution in place. |

| Statement | Actions | Priority | Owner | Start date | Target implementation date | Date last reviewed | Status |
|---|--|----------|---------------------------|------------|----------------------------|--------------------|--|
| The council ensures that staff are informed of any changes to processes and procedures regarding FOI/EIR. | Communications are cascaded via the 'Leading Together' Group, training and additional communication via other all staff methods. | Medium | Director of Governance | 13/09/2023 | Ongoing | Not applicable | Action Completed - solution in place. |
| Staff know who to contact for advice or assistance regarding processes and procedures for FOI/EIR. | Published on the Intranet and Council website. Any changes will be communicated in a timely manner. | Medium | Director of Governance | 13/09/2023 | Ongoing | Not applicable | Action Completed - solution in place. |
| Processes and procedures for FOI/EIR account for personal information and how it should be dealt with. | FOI/EIR handling procedure review. This will continue to be monitored. | Medium | Director of Governance | 13/09/2023 | 30/11/2023 | - | Solution in place but improvements are required. |

Compliance and assurance

| Statement | Actions | Priority | Owner | Start date | Target implementation date | Date last reviewed | Status |
|---|--|----------|---------------------------|------------|----------------------------|--------------------|--|
| There are reporting mechanisms in place to provide oversight of requests and ensure that statutory deadlines are met. | Real time compliance reporting is available for monitoring through KPI machine. Review of automated reports and distribution to be completed. Ongoing monitoring will be provided through reports to Governance Risk and Assurance Group, Council Management Team and Audit and Governance committee has been completed and will continue to be monitored. | Medium | Director of Governance | 13/09/2023 | 30/11/2023 | - | Solution in place but improvements are required. |

| Statement | Actions | Priority | Owner | Start date | Target implementation date | Date last reviewed | Status |
|---|--|----------|---------------------------|------------|----------------------------|--------------------|--|
| There are mechanisms to monitor the quality of responses to requests and ensure that any reasons for refusal/application of exemptions or exceptions are valid. | Current quality monitoring process of responses will be reviewed to ensure that exemptions or exceptions valid. This will include review of previous internal audit recommendations. | Medium | Director of Governance | 13/09/2023 | 29/12/2023 | - | Solution in place but improvements are required. |
| Contracts with third parties do not restrict the release of information that should be available to the public and provide for access to information, by the public authority, when needed. | Review and update current contracts and agreements clauses that mean third parties must support the council when responding to requests for information. | Low | Director of Governance | 13/09/2023 | 29/12/2023 | - | Solution in place but improvements are required. |

| Statement | Actions | Priority | Owner | Start date | Target implementation date | Date last reviewed | Status |
|--|--|----------|---|------------|----------------------------|--------------------|--|
| Documented governance arrangements exist where the authority works in partnership with other organisations in relation to the handling of requests and/or the management of records. | Information Sharing Arrangements are in place and include relevant clauses about supporting the council when responding to requests for information. | Low | Director of Governance | 13/09/2023 | 29/12/2023 | - | Solution in place but improvements are required. |
| The council has cleared the FOI/EIR overdue backlog. | Backlog is being reduced. | High | Council Managemen t Team and/or Director of Governance | 24/08/2023 | 27/10/2023 | - | Solution in place but improvements are required. |

| Statement | Actions | Priority | Owner | Start date | Target implementation date | Date last reviewed | Status |
|---|--|----------|--|------------|----------------------------|--------------------|--|
| The council is complying with statutory timescales for FOI/EIR. | Corporate priority that time scales are adhered to. Ongoing monitoring will be provided through reports to Governance Risk and Assurance Group, Council Management Team and Audit and Governance committee has been completed and will continue to be monitored. Live monitoring via Key Performance Indicators. Focused targeting at areas continuing to not meet necessary timescales. | High | Council Managemen t Team and/or Director of Governance | 24/08/2023 | ongoing | | Solution in place but improvements are required. |

| Statement | Actions | Priority | Owner | Start date | Target implementation date | Date last reviewed | Status |
|--|--------------|----------|---------------------------|------------|----------------------------|--------------------|--|
| Internal review procedures comply with the relevant Codes of Practice and ensure that timely responses are provided to complaints. | follows best | High | Director of Governance | 13/09/2023 | 30/11/2023 | | Solution in place but improvements are required. |

| Statement | Actions | Priority | Owner | Start date | Target implementation date | Date last reviewed | Status |
|--|--|----------|---------------------------|------------|----------------------------|--------------------|--|
| Exemptions/Exce ptions should be applied on a case-by-case basis, by appropriately trained staff, with no evidence of the use of blanket exemptions. | Corporate Governance Team undertake refresher training as overall specialists. Continue to keep skills up to date and undertake refresher training where gaps are identified. Service Areas given awareness training to apply exemptions relevant to their information. Obtaining further advice from the Corporate Governance Team when required. | Medium | Director of Governance | 13/09/2023 | 29/12/2023 | | Solution in place but improvements are required. |

| Statement | Actions | Priority | Owner | Start date | Target implementation date | Date last reviewed | Status |
|---|--|----------|---------------------------|------------|----------------------------|--------------------|--|
| There is evidence of an oversight or approval process for the use of exemptions or exceptions. | Review of Corporate Governance Team Structure and procedures will address any identified gap. Current quality monitoring process of responses will be reviewed to ensure that exemptions or exceptions valid. This will include review of previous internal audit recommendations. | Low | Director of Governance | 13/09/2023 | 29/12/2023 | - | Solution in place but improvements are required. |
| Redactions should be applied on a case-by- case basis, by appropriately trained staff, and records should be maintained of what has been redacted. | Redaction software and procedures for using it, is available to teams requiring them. Advice and support on what to redact provided by Corporate Governance Team. | Low | Director of Governance | 24/08/2023 | 29/09/2023 | 29/09/2023 | Action Completed - solution in place. |

Training and awareness

| Statement | Actions | Priority | Owner | Start date | Target implementation date | Date last reviewed | Status |
|---|---|----------|------------------------|------------|----------------------------|--------------------|--|
| There is an induction training programme, with input from Corporate Governance Team, Workforce Development Unit etc which includes general training on how FOI/EIR applies to the council, what they currently do to comply, and how to recognise an FOI/EIR request. | Review training materials and training requirements and ensure this is included in the Induction Package. | Medium | Director of Governance | 13/09/2023 | 29/12/2023 | - | Solution in place but improvements are required. |

| Statement | Actions | Priority | Owner | Start date | Target implementation date | Date last reviewed | Status |
|--|--|----------|---------------------------|------------|----------------------------|--------------------|--|
| refresher training in the requirements of FOI/EIR, including, where appropriate, | Link to guidance included with all requests sent to service areas. Guidance and specific advice provided by Corporate Governance Team. | Medium | Director of Governance | 13/09/2023 | Ongoing | Not applicable | Solution in place but improvements are required. |

| Statement | Actions | Priority | Owner | Start date | Target implementation date | Date last reviewed | Status |
|--|--|----------|---------------------------|------------|----------------------------|--------------------|--|
| There is specific training for staff with responsibility for handling requests for information, on FOI, EIR and Codes of Practice. | Corporate Governance Team to complete ICO FOI/EIR online training. Continue to refresh Corporate Governance Team skills where gaps are identified during review of Corporate Governance Team structure and appropriate training provided with ongoing mentoring. Service Areas will be given ongoing awareness training to apply exemptions relevant to their information. Obtaining further advice and guidance will continue to be provided to service areas from the Corporate Governance Team. | Medium | Director of Governance | 13/09/2023 | Ongoing | Not applicable | Solution in place but improvements are required. |

| Statement | Actions | Priority | Owner | Start date | Target implementation date | Date last reviewed | Status |
|---|--|----------|------------------------|------------|----------------------------|--------------------|--|
| Records are maintained by Corporate Governance Team and Workforce Development Unit of the FOI/EIR training received by staff. These records are monitored to ensure that all staff receive or attend all relevant training. | Review of training material will include modules on a platform that allows training to be monitored. | Medium | Director of Governance | 13/09/2023 | Ongoing | Not applicable | Solution in place but improvements are required. |

| Statement | Actions | Priority | Owner | Start date | Target implementation date | Date last reviewed | Status |
|---|--|----------|---------------------------|------------|----------------------------|--------------------|--|
| Staff receive regular reminders of how to recognise FOI/EIR requests. | Review of procedures includes a requirement for Corporate Governance Team to arrange regular communications about recognising request. | Low | Director of Governance | 13/09/2023 | Ongoing | Not applicable | Solution in place but improvements are required. |