

Present: Councillor McLaren (in the Chair)
Councillors Chauhan, Lancaster, Marland, Rustidge and Wahid
(Substitute for Councillor Ibrahim)

Also in Attendance:

Councillor Abdul Jabbar - Deputy Leader and Cabinet Member for Finance, Corporate Services and Sustainability.
Councillor Holly Harrison – Deputy Cabinet Member for Resident Focus.
Alexander Bougatef – Director of Legal Services.
Matthew Gratton – Director of Digital.
Fran Lautman – Assistant Director of Customer Experience.
Adam Parsey – Head of Revenues
James Postle – Senior Finance Manager
Nicola Harrop – Finance Manager
Gail Stott – Performance Improvement Lead
Lorna Urwin – Performance Improvement Advisor
Peter Thompson – Constitutional Services

1 APOLOGIES FOR ABSENCE

Apologies for absence were received from Councillor Aslam, Azad, Cosgrove, Councillor Ibrahim and Councillor Kenyon.

2 URGENT BUSINESS

There were no items of urgent business received.

3 DECLARATIONS OF INTEREST

There were no declarations of interest received.

4 PUBLIC QUESTION TIME

There were no public questions for this meeting of the Scrutiny Board to consider.

5 MINUTES OF PREVIOUS GOVERNANCE, STRATEGY AND RESOURCES SCRUTINY BOARD MEETING

Resolved:

That the Minutes of the meeting of the Governance, Strategy and Resources Scrutiny Board, held 9th October 2025 be approved, as a correct record.

6 PERFORMANCE ASSURANCE REPORT - 2025/26 Q2

The Scrutiny Board received a report of the Executive Director of Resources, which presented the Council's performance assurance report for the first and second quarters of 2025/26 (April – June 2025 and July – September 2025).

The Council's Performance Management Framework (PMF) underpinned how the Council measured progress and monitored the impact of the Corporate Plan objectives. It was aligned to the Council's Medium-Term Financial Strategy, and the outcomes

were increasingly becoming the focus for the budget, Directorate and Service Plans.



The Framework provided measurable evidence of progress against objectives, as part of a systematic process of robust corporate performance reporting to provide assurance:

- That services are aligned to corporate priorities and the needs of the Borough's residents.
- That services are good or are on track to good.
- That any services that are not on track, or have identified risks, are being supported or challenged appropriately.
- That any demand indicators or resource pressures are noted, and service provisions are being re-assessed accordingly.

The purpose of the Executive Director's report was to provide an overview of directorate performance against agreed service plan measures and in the context of related reports and open (public) data. The intention therefore was to support the scrutiny process through open and transparent discussion and challenge.

The reporting format was being developed as various overarching frameworks (national, regional and local) and digital reporting and data storytelling options continued to emerge. The aim was to achieve a level of consistency of reporting, however, there will be some nuances in how and when the Council implement the framework and reporting styles used in each of the authority's four scrutiny boards.

The Council's Directorate services/business plans included a range of performance metrics, which enabled key officers to monitor progress in achieving the Corporate Plan objectives, statutory duties and putting the Borough's residents first. Ongoing monitoring was important because services could be impacted by a range of internal and external factors, including changes in demand, resources, legislation or policies. It was also considered essential that performance was viewed in the context of the whole borough including published District Profiles and the Oldham Joint Strategic Needs Assessment, which provided more detail and these statistics and projections which needed to be considered when reviewing current and projected service levels and demands.

The meeting was advised that performance management systems, which generated data, were utilised at all levels; good governance processes support a transparent performance reporting cycle. As part of the Council's performance management framework, each directorate had regular opportunities to review their performance at a service level and more holistically; and to raise issues or concerns or take necessary actions to improve or maintain it. Data scrutinised at this level was usually more detailed and focused on the service or function.

Performance Assurance Reports enabled key and high-level data to be scrutinised to provide reassurance, whilst also allowing space for discussion. The format of these reports is evolving as the council navigates its digital journey. The aspiration is to offer a balance between data, insight and contextual narrative.

Members of the Board scrutinised the performance of services across the Council's Directorates in detail and raised, amongst other things, the following issues:

- a. Clarification on the differences between short-term and long-term sickness absences. The Assistant Director of Customer Experience undertook to clarify to members the differences.
- b. The percentage of telephone calls, to council officers across the authority, that were not being answered.
- c. The percentage of Freedom of Information requests that were not being answered within the statutory timeframe. The Director of Legal Services did explain that sometimes Freedom of Information requests could be complex and time consuming thus creating pressure in terms of time.
- d. A member commented upon the high proportion of Standards Committee meetings that were being cancelled. In reply, the Director of Legal Services stated that he was intending to create a work programme for the Standards Committee.
- e. A Member requested information about the number of complaints that were received, regarding alleged misbehaviour by members of Oldham Borough Council. The Director of Legal Services noted that Oldham Council received more complaints regarding the conduct of members than any of the nine other authorities in Greater Manchester.
- f. A member commented on the good industrial relations that was reported. In this regard the meeting was advised that this was assisted by the fact that senior managers, across the Council, had a regular dialogue and held frequent meetings with representatives of the recognised trade unions.
- g. Members sought clarification on the induction programme for new starters to the authority, especially with regard to new starters who held 'public-facing' and 'front-line' roles.

Generally, Members of the Scrutiny Board expressed their satisfaction with the content of the report, noting good progress that was being made by Directorates across the Council. Members of the Scrutiny Board also expressed their satisfaction with the lay-out and format of the submitted report.

Resolved:

1. That the Governance, Strategy and Resources Scrutiny Board commends the submitted report detailing performance across the Council's services for the first two quarter periods of 2025/26 (April – June 2025 and July – September 2025).

REVENUE MONITOR AND CAPITAL INVESTMENT PROGRAMME 2025/26 QUARTER 2



Members scrutinised a report of the Director of Finance which provided the meeting with an update, as at 30th September 2025 (Quarter 2 – July-September) of the Council's 2025/26 forecast revenue budget position, the financial forecast of the Dedicated Schools Grant and the Housing Revenue Account (detailed at Annex 1, to the report) alongside the financial position of the capital programme together with the revised capital programme 2025/26 to 2029/30 (detailed at Annex 2, to the report).

The forecast adverse position for 2025/26, at the end of Quarter 2 was estimated to be £21.094m (£23.209m at the end of Month 5). The details within the revenue monitoring report for Quarter 2 followed on from the Month 5 report previously presented to the Cabinet and highlighted any significant areas of concern which may not just impact on the current year, but also when preparing future budgets. A forecast adverse position based on the Quarter 2 revenue controllable budget was £21.094m which represented a favourable movement of £2.115m from the position previously reported. The increasing need for support of the Council's services from residents and businesses, the complexity of the support needed, and inflationary costs continues to put pressure on service budgets and was demonstrated by the forecast outturn position reported at the end of Quarter 2. These pressures, in the main driven by escalating costs in essential statutory services supporting the most vulnerable residents, reflected the broader challenges the Council and numerous Councils across the country are facing. This is particularly acute in statutory and heavily inspected services where there is little flexibility to mitigate rising costs, for example increasing pressures on social care budgets due to the support needs of vulnerable children and complexity in the needs of adult requiring support.

There was also reported an increasing need to support children with Special Educational Needs (SEND) and whilst significant work has been done in the last 12 months, homelessness presentations and use of temporary accommodation was still of concern given the numbers accessing this service. Since the last update report was presented to the Board, the implementation of the agreed enhanced controls had started to have an impact on the forecast position resulting in the favourable movement between periods. As these controls are further embedded it was expected that the position would continue to improve.

It was noted that it was important that the Council continued its work on mitigating and reducing the forecast revenue variance by the end of the financial year, limiting any unbudgeted use of reserves and protecting its financial resilience. Given, the in-year financial position of the Council, the level of reserves available and the budgetary gaps already within the MTFS, the upcoming Policy Statement and the outcome of the Local Government Finance Settlement for 2026/27 onwards will have

a significant influence on the financial sustainability of the Council and the Council's ability to set a balanced budget over the short term.



The budget pressures the Council had faced in recent years could not continue to be mitigated without significant action both to reduce projected spend in-year and to reduce costs over the years to come. Further details of mitigations underway were included at Annex 1, to the submitted report.

Information on the forecast year end position of the Dedicated Schools Grant (DSG), and Housing Revenue Account (HRA) were also outlined in the report.

The report outlined the most up to date capital spending position for 2025/26 to 2029/30 for approved schemes. The revised Capital Programme budget for 2025/26 was £122.248m at the close of Quarter 2 (30th September 2025). Actual expenditure to 30th September 2025 was £25.973m (21.2% of the forecast outturn).

In scrutinising the report, Members were advised that it had been submitted to the Cabinet's meeting on 17th November 2025, where the recommendations contained therein were approved, including approval of the revised Capital Programme for 2025/26 including the proposed virements and noting the forecast for the financial years to 2029/30 as at the end of Quarter 2 as outlined in Annex 2, to the submitted report.

Resolved:

That the report be noted.

8

COMPLAINTS AND COMPLIMENTS ANNUAL REPORTS 2024/25 AND POLICIES

This report presents Oldham Council's annual overview of complaints received between 1st April 2024 and 31st March 2025. It provided the Council's first single view of performance across Adult Social Care, Children's Services, and Corporate Services, reflecting Oldham's commitment to work with a resident focus.

During the year, 387 formal complaints were recorded. The majority originated within the People Directorate, reflecting the scale, complexity, and sensitivity of social care casework.

While 39% of complaints were completed within target timescales, timeliness remained a key area for development and was a key focus within the Complaints Recovery Plan. The primary factors contributing to delay included case complexity, inter-agency dependencies, and capacity pressures.

48% of all complaints were upheld or partially upheld, demonstrating an organisational culture that values fairness, accountability, and continuous learning. This openness to challenge ensured that resident concerns directly inform service improvement.

Common themes remained consistent with previous trends: clarity of decision-making, communication, and staff conduct which have informed directorate-specific actions such as refreshed guidance, strengthened quality assurance, and improved signposting for residents.

Overall, this data provided a comprehensive and joined-up picture of resident feedback across the Council. It marked a significant step in embedding a consistent, resident-focused approach to complaint handling and service learning and improvement.

Members sought clarity as to what constituted a complaint, when issues were logged as complaints and whether there was a formal threshold. It was noted, by Members, that in social care services, it was much clearer, as there was a statutory process to follow. In Corporate Services, there were grey areas and it was more the case if people wanted to complain, although the service tries to treat initial queries as service requests where they can.

Members questioned whether the Children's Residential Home Complaints database only included children in the home or neighbours as well. It was noted that the database would only include complaints from young people in the homes, but that neighbours could complain through the standard complaints mechanisms.

Resolved:
That the Complaints and Compliments Annual Report, for 2024/25, be endorsed and commended.

9

WORK PROGRAMME

Resolved:
That the Governance, Strategy and Resources Scrutiny Board's Work Programme for 2025/26 be noted.

10

KEY DECISION DOCUMENT

The Scrutiny Board considered the Key Decision Document, which records key decisions that the authority is due to take.

Resolved:
That the Key Decision Document be noted.

11

RULE 13 AND 14

There were no Rule 13 or 14 decisions to report.

The meeting started at 6.00pm and ended at 8.00pm