**Information Rights team – Performance Summary – Quarter 1 2025/26**

1. FOI:
    a. Compliance:
        i. Q1 2025/26 = 74.3% (417 out of 561), Backlog (cases which are already overdue) = 53
        ii. 2024/25 = 90% (1749 out of 1951)
        iii. 2023/24 – 87% (1765 out of 2061)
        iv. 2022/23 – 84% ( 1460 out of 1738)
        v. 2021/22 –76% (1315 out of 1740)
        vi. 2020/21 – 78% (893 out of 1152)

    b. Number of cases received:
        i. Q1 2025-26 = 514 (monthly average 171)
        ii. 2024/25 = 2049 (monthly average 171) – 23% increase compared to 22/23
        iii. 2023/24 – 2040 (monthly average 170) – 22% increase compared to 22/23
        iv. 2022/23 – 1667 (monthly average 139)
        v. 2021/22 – 1713 (monthly average 143)
        vi. 2020/21 – 1464 (monthly average 122)

2. Children's SAR:

    a. Compliance:
        i. Q1 25/26 - 40 out of 45 = 89%, Backlog (cases which are already overdue) = 4
        ii. 2024/25 - 94 out of 102 = 92%
        iii. 2023/24 – 70 cases completed, 68 on time, 97% on time
        iv. 2022/23 – 98 cases completed, 75 on time , 77% on time.
        v. 2021/22 – 77 cases completed, 34 on time, 43% on time
        vi. 2020/21 – 83 cases completed, 31 on time, 37% on time

    b. Validated SARs:
        i. Q1 2025/26 – 40 – 13/month (further 48% increase)
        ii. 2024/25 – 109 – 9/month (34% increase from 23/24)
        iii. 2023/24 – 81 – 6.75/month

iv. 2022/23 – 80 - 6.6/month.
v. 2021/22 - 63 - 5.25/month
vi. 2020/21 – 88 - 7.3/month.

3. Corporate SAR:

a. Annual compliance:
i. Q1 25/26 - out 73 of 100 =73% , Backlog (cases which are already overdue) =38
ii. 2024/25 - out 286 of 416 =69%
iii. 2023/24 – 243 cases completed, 153 on time, 63% on time
iv. 2022/23 – 231 cases completed, 147 on time , 64% on time.
v. 2021/22 – 144 cases completed, 77 on time, 53% on time
vi. 2020/21 – 182 cases completed, 108 on time, 59% on time

b. Validated SARs:
i. Q1 25/26 – 110 – 36/month
ii. 2024/25 – 457 – 38/month – 73% increase
iii. 2023/24 – 264 – 22/month – 16% increase
iv. 2022/23 – 227 - 19/month.
v. 2021/22 – 199 - 17/month
vi. 2020/21 – 242 - 20/month.

4. Data protection:

a. Number of disclosures:
i. Q1 25/26 = 213 (Monthly average = 71) – further 22% increase
ii. 2024/25 – 699 (monthly = 58) – 11% increase
iii. 2023/24 – 632 (monthly = 53)
iv. 2022/23 – 707 (monthly = 59)
v. 2021/22 – 425 (monthly = 35)
vi. 2020/21 – 345 (monthly = 29)

b. Number of data breaches:
   i. Q1 25/26 = 64 (monthly 21)
   ii. 2024/25 – 280 (monthly = 23) – 17% increase
   iii. 2023/24 – 239 (monthly = 20)
   iv. 2022/23 – 260 (monthly = 22)
   v. 2021/22 – 205 (monthly = 17)
   vi. 2020/21 – 247 (monthly = 21)

c. Number of rectification cases:
   i. Q1 25/26 = 0 out of 0 completed on time = Not applicable
   ii. 2024/25 = 11 out of 13 completed on time = 85%
   iii. 2023/24 = 1 out of 1 completed on time = 100%
   iv. 2022/23 = 5 out of 5 closed on time (100%)
   v. 2021/22 = 1 out of 3 closed on time (33%)

d. Number of erasure cases:
   i. Q1 25/26 = 4 out of 4 completed on time = 100%
   ii. 2024/25 - 12 out of 13 completed on time = 92%
   iii. 2023/24 = 19 out of 21 completed on time = 90%
   iv. 2022/23 = 40 out of 44 closed on time (91%)
   v. 2021/22 = 6 out of 7 closed on time (86%)

5. Internal reviews (Stage 2):

   a. Q1 2025/26 - 22 out of 26 completed on time = 85%
   b. 2024/25 = 56 out of 70 completed on time =80%
   c. 2023/24 = 54 out of 67 completed on time = 81%
   d. 2022/23 = 57 out of 130 completed on time – 44%

**Information Rights team – Performance Summary – Quarter 2 2025/26** (*Draft 7th Oct 2025)*

Key challenges that we are working together as a team to manage:

- Capacity challenges within the Information Rights team due to some unforeseen circumstances, long term sickness and vacancy (our new colleague in post since September)
- Capacity challenges within the organisation resulting in non-compliance, requires disproportionate amount of chasing, services not having the time to engage with records management
- Nervousness around releasing certain information, leading to pressure on the team to agree exemptions. A cultural shift is needed towards greater confidence in sharing information and accepting managed risks. This then creates further work at stage 2 and challenges from the ICO.
- Unable to identify technological solutions that we can deploy to speed up our processes

1. FOI:
    a. Compliance:
        i. April to Sept25 = 824 out of 1099 completed on time = 75%
        ii. 2024/25 = 90% (1749 out of 1951)
        iii. 2023/24 – 87% (1765 out of 2061)
        iv. 2022/23 – 84% ( 1460 out of of 1738)
        v. 2021/22 –76% (1315 out of 1740)
        vi. 2020/21 – 78% (893 out of 1152)

    b. Number of cases received:
        i. Average number of requests received/month in 2025/26 = 177
        ii. 2024/25 = 2049 (monthly average 171)
        iii. 2023/24 – 2040 (monthly average 170) – 22% increase compared to 22/23
        iv. 2022/23 – 1667 (monthly average 139)
        v. 2021/22 – 1713 (monthly average 143)
        vi. 2020/21 – 1464 (monthly average 122)

2. Children's SAR:

   a. Compliance:
      i. April to Sept25 = 60 out of 69 = 87%, Unallocated case = 16
      ii. 2024/25 - 94 out of 102 = 92%
      iii. 2023/24 – 70 cases completed, 68 on time, 97% on time
      iv. 2022/23 – 98 cases completed, 75 on time , 77% on time.
      v. 2021/22 – 77 cases completed, 34 on time, 43% on time
      vi. 2020/21 – 83 cases completed, 31 on time, 37% on time

   b. Validated SARs:
      i. 2025/26 – 12/month (further 33% increase)
      ii. 2024/25 – 109 – 9/month (34% increase from 23/24)
      iii. 2023/24 – 81 – 6.75/month
      iv. 2022/23 – 80 - 6.6/month.
      v. 2021/22 - 63 - 5.25/month
      vi. 2020/21 – 88 - 7.3/month.

3. Corporate SAR:

   a. Annual compliance:
      i. April to Sept25 = 126 on time out of 197 = 63% Backlog (cases which are already overdue) =39
      ii. 2024/25 - 286 on time out of 416 =69%
      iii. 2023/24 – 243 cases completed, 153 on time, 63% on time
      iv. 2022/23 – 231 cases completed, 147 on time , 64% on time.
      v. 2021/22 – 144 cases completed, 77 on time, 53% on time
      vi. 2020/21 – 182 cases completed, 108 on time, 59% on time

   b. Validated SARs:
      i. Q2 25/26 – 241 – 41/month – 8% increase from 24/25
      ii. 2024/25 – 457 – 38/month – 73% increase from 23/24
      iii. 2023/24 – 264 – 22/month – 16% increase from 22/23
      iv. 2022/23 – 227 - 19/month.

v. 2021/22 – 199 - 17/month
vi. 2020/21 – 242 - 20/month.

4. Data protection:

a. Number of disclosures:
   i. April to Sept 25 = 413 (Monthly average = 69) – further 19% increase
   ii. 2024/25 – 699 (monthly = 58) – 11% increase
   iii. 2023/24 – 632 (monthly = 53)
   iv. 2022/23 – 707 (monthly = 59)
   v. 2021/22 – 425 (monthly = 35)
   vi. 2020/21 – 345 (monthly = 29)

b. Number of data breaches reported:
   i. April to Sept 25 = 132 (monthly 22)
   ii. 2024/25 – 280 (monthly = 23)
   iii. 2023/24 – 239 (monthly = 20)
   iv. 2022/23 – 260 (monthly = 22)
   v. 2021/22 – 205 (monthly = 17)
   vi. 2020/21 – 247 (monthly = 21)

c. Number of rectification cases:
   i. April to Sept 25 = 1 out of 1 completed on time = 100%
   ii. 2024/25 = 11 out of 13 completed on time = 85%
   iii. 2023/24 = 1 out of 1 completed on time = 100%
   iv. 2022/23 = 5 out of 5 closed on time (100%)
   v. 2021/22 = 1 out of 3 closed on time (33%)

d. Number of erasure cases:
   i. April to Sept 25 = 10 out of 10 completed on time = 100%
   ii. 2024/25 - 12 out of 13 completed on time = 92%
   iii. 2023/24 = 19 out of 21 completed on time = 90%
   iv. 2022/23 = 40 out of 44 closed on time (91%)

v. 2021/22 = 6 out of 7 closed on time (86%)

5. Internal reviews (Stage 2):
   a. Compliance
      i. April to Sept 2025/26 - 40 out of 59 completed on time = 68%
      ii. 2024/25 = 56 out of 70 completed on time =80%
      iii. 2023/24 = 54 out of 67 completed on time = 81%
      iv. 2022/23 = 57 out of 130 completed on time – 44%

   b. Number of cases completed:
      i. April to Sept 2025/26 - 59 (monthly = 10) – 66% increase
      ii. 2024/25 = 70 (monthly = 6)
      iii. 2023/24 = 67 (monthly = 6)

## Q2 FOI Figures (July 2025 - September 2025)

Doesn't reflect cases involving multiple service areas as allocation can only being assigned to one area. It is assigned to the service it was first sent to.

| | Total FOI's received | FOI's that went overdue | Non Compliancy % | Compliant % |
|---|---|---|---|---|
| **City Operations** | **240** | **30** | **13%** | **88%** |
| Place | 34 | 3 | 9% | 91% |
| Environmental Services | 42 | 6 | 14% | 86% |
| Culture and Environment | 37 | 8 | 22% | 78% |
| Digital Innovation | 8 | 1 | 13% | 88% |
| City Infrastructure | 119 | 12 | 10% | 90% |

| | Total FOI's received | FOI's that went overdue | Non Compliancy % | Compliant % |
|---|---|---|---|---|
| **Families Children and Wellbeing** | **95** | **31** | **33%** | **67%** |
| Family Help and Protection | 25 | 12 | 48% | 52% |
| Commissioning and Communities | 24 | 9 | 38% | 63% |
| Education and Learning | 41 | 10 | 24% | 76% |
| Public Health | 5 | 0 | 0% | 100% |

| | Total FOI's received | FOI's that went overdue | Non Compliancy % | Compliant % |
|---|---|---|---|---|
| **Homes and Adult Social Care** | **96** | **9** | **9%** | **91%** |
| Adult Social Care | 10 | 0 | 0% | 100% |
| ASC Commissioning and Partnerships | 3 | 1 | 33% | 67% |
| Homes and Investment | 35 | 1 | 3% | 97% |
| Housing People Services | 48 | 7 | 15% | 85% |

| | Total FOI's received | FOI's that went overdue | Non Compliancy % | Compliant % |
|---|---|---|---|---|
| **Central Hub Directorate** | **106** | **23** | **22%** | **78%** |
| **Cabinet Office** | **6** | **2** | **33%** | **67%** |
| Economic Development | 1 | 0 | **0%** | **100%** |
| Policy and Partnerships | 5 | 2 | **40%** | **60%** |
| | | | | |
| **Corporate Leadership Office** | **0** | **0** | **0%** | |

| | | | | |
|---|---|---|---|---|
| Emergency Planning | 0 | 0 | **0%** | |
| | | | | |
| **Finance and Property** | **54** | **10** | **19%** | **81%** |
| Corporate Finance and Resources | 5 | 1 | **20%** | **80%** |
| Corporate Procurement | 6 | 2 | **33%** | **67%** |
| Insurance | 1 | 0 | **0%** | **100%** |
| Strategic Property | 11 | 1 | **9%** | **91%** |
| Welfare Revenues and Business Support | 31 | 6 | **19%** | **81%** |
| | | | | |
| **Governance and Law** | **13** | **3** | **23%** | **77%** |
| Democratic and Leadership Support | 3 | 0 | **0%** | **100%** |
| Electoral Local Land Charges and Registration Services | 5 | 0 | **0%** | **100%** |
| Legal Services | 5 | 3 | **60%** | **40%** |
| | | | | |
| **People and Innovation** | **33** | **8** | **24%** | **76%** |
| Equalities Diversity and Inclusion | 5 | 1 | **20%** | **80%** |
| Facilities and Building Services | 4 | 3 | **75%** | **25%** |
| Human Resources | 13 | 3 | **23%** | **77%** |
| Innovation | 9 | 1 | **11%** | **89%** |
| Strategic Communications and Engagements | 2 | 0 | **0%** | **100%** |

| Directorate | Team | Closed but responded to Passed deadline Team in Q1&Q2 | Overdue | Validated SARs Q1/2 |
|---|---|---|---|---|
| **City Ops** | Planning | 3 | | 1 |
| **City Ops** | Environmental Services - City Clean | 2 | 4 | 4 |
| **City Ops** | RS - Environmental protection | 2 | 1 | 10 |
| **City Ops** | Parks & Leisure (Parks) | | 1 | 1 |
| **City Ops** | RS - Animal Licencing & Wardens | | 1 | 2 |
| **CLT** | Directors | 3 | 1 | 1 |
| **CLT** | Chief Exec Office | | 8 | 6 |
| **FCW** | CSWS | 10 | 3 | 68 |
| **FCW** | Family Help and Protection | 2 | 1 | 5 |
| **FCW** | Education & Learning | 1 | 3 | 8 |
| **FCW** | SEN | 1 | 5 | 30 |
| **FCW** | Disability (under 25) | | 2 | 3 |
| **FCW** | Independent Visiting Service | | 1 | 1 |
| **G&L** | Democratic Services | 1 | 3 | 4 |
| **G&L** | Electoral Services | 1 | 2 | 11 |
| **G&L** | Legal | 1 | 6 | 13 |
| **HASC** | Housing Customer Services | 20 | 2 | 50 |
| **HASC** | Housing Options | 13 | 2 | 43 |
| **HASC** | Housing - Temporary & Supported Accommodation | 8 | 1 | 11 |
| **HASC** | Adult Social Care | 5 | 1 | 17 |
| **HASC** | Adult Mental Health | 1 | 1 | 3 |
| **HASC** | Housing - Senior Housing | 1 | 2 | 6 |

| | | | | |
|---|---|---|---|---|
| **HASC** | Housing Repairs (Council Housing) | 1 | 2 | 26 |
| **HASC** | Housing Strategy | 1 | 1 | 1 |
| **HASC** | Disability (25+) | | 2 | 4 |
| **P&F** | WRBS - Council Tax | 2 | 2 | 10 |
| **P&F** | WRBS - Housing Benefits | 1 | 2 | 3 |
| **P&F** | WRBS - Revenues and Benefits | 1 | 1 | 3 |
| **P&F** | Audit | | 2 | 2 |
| **P&I** | HR | 5 | 12 | 18 |
| **P&I** | Customer Feedback | 1 | 3 | 14 |
| | Housing (Complex Cases) | | 1 | |
| | Unions | | 1 | 1 |

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| Figures showing April - June 2025 | City Operations | Property & Finance | Homes and Adult Social Care | Families Children & Wellbeing | People and Innovation | Governance and Law | TOTAL | Overall percentage |
|---|---|---|---|---|---|---|---|---|
| Disclosed in error (Email) | 5 | 4 | 7 | 11 | 2 | 1 | **30** | **79%** |
| Disclosed in error (Letter) | 0 | 0 | 0 | 1 | 0 | 0 | **1** | **3%** |
| Data Corruption | 0 | 0 | 1 | 0 | 0 | 0 | **1** | **3%** |
| Lost in transit | 0 | 0 | 0 | 0 | 0 | 0 | **0** | **0%** |
| Lost or Stolen Hardware | 0 | 0 | 0 | 0 | 0 | 0 | **0** | **0%** |
| Lost or Stolen Records | 0 | 0 | 1 | 0 | 0 | 0 | **1** | **3%** |
| Non-Secure disposal | 0 | 0 | 0 | 0 | 0 | 0 | **0** | **0%** |
| Technical security failure | 0 | 0 | 0 | 0 | 0 | 0 | **0** | **0%** |
| Unauthorised access | 0 | 0 | 0 | 0 | 0 | 0 | **0** | **0%** |
| Unlawful disclosure (Published online, shared in investigation, verbally etc) | 0 | 0 | 1 | 0 | 0 | 0 | **1** | **3%** |
| Other | 1 | 1 | 2 | 0 | 0 | 0 | **4** | **11%** |
| Cyber incident | 0 | 0 | 0 | 0 | 0 | 0 | **0** | **0%** |
| TOTAL | **6** | **5** | **12** | **12** | **2** | **1** | 38 | **100%** |
| Total percentage | **16%** | **13%** | **32%** | **32%** | **5%** | **3%** | | |

| Figures showing July - September 2025 | City Operations | Property & Finance | Homes and Adult Social Care | Families Children & Wellbeing | People and Innovation | Governance and Law | TOTAL | Overall percentage |
|---|---|---|---|---|---|---|---|---|
| Disclosed in error (Email) | 7 | 1 | 7 | 9 | 2 | 3 | **29** | **73%** |
| Disclosed in error (Letter) | 0 | 0 | 1 | 0 | 0 | 0 | **1** | **3%** |
| Data Corruption | 1 | 0 | 0 | 1 | 0 | 0 | **2** | **5%** |
| Lost in transit | 1 | 0 | 0 | 0 | 0 | 0 | **1** | **3%** |
| Lost or Stolen Hardware | 1 | 0 | 1 | 0 | 1 | 0 | **3** | **8%** |
| Lost or Stolen Records | 0 | 0 | 0 | 1 | 0 | 0 | **1** | **3%** |
| Non-Secure disposal | 0 | 0 | 0 | 0 | 0 | 0 | **0** | **0%** |
| Technical security failure | 0 | 0 | 0 | 0 | 0 | 0 | **0** | **0%** |
| Unauthorised access | 0 | 0 | 0 | 0 | 0 | 0 | **0** | **0%** |
| Unlawful disclosure (Published online, shared in investigation, verbally etc) | 0 | 0 | 0 | 0 | 0 | 1 | **1** | **3%** |
| Other | 0 | 0 | 1 | 0 | 1 | 0 | **2** | **5%** |
| Cyber incident | 0 | 0 | 0 | 0 | 0 | 0 | **0** | **0%** |
| TOTAL | **10** | **1** | **10** | **11** | **4** | **4** | **40** | **100%** |
| Total percentage | **26%** | **3%** | **26%** | **29%** | **11%** | **11%** | | |

**Information Rights team – Performance Summary – Quarter 3 2025/26** (*Draft 9th January 2026)*

Key challenges that we are working together as a team to manage:

- Capacity challenges within the Information Rights team due to some unforeseen circumstances, long term sicknesses and part year vacancy
- Capacity challenges within the organisation resulting in non-compliance, requires disproportionate amount of chasing, services not having the time to work on proper records management
- Unable to identify technological solutions that we can deploy to speed up our processes – seeking help from LGA (seeking help from IT&D to enable us to run a test and learn pilot in adult social care).
- The removal of printers from key operational areas has created additional workload pressures and necessitated the use of more external resources which takes time (currently capturing implications for this to inform a business case for printer in the same room to share with IT&D)

Other points to note:

- **ICO complaints decision notice**: We have begun to receive decision notices from the ICO for non-compliance as the requests are so late going out (have received 3 decision notices)
- **Nervousness around releasing certain information**: leading to pressure on the team to agree exemptions. A cultural shift is needed towards greater confidence in sharing information and accepting managed risks. This then creates further work at stage 2 and challenges from the ICO. Has contributed to increased internal reviews (83% increase this year)
- **Internal records management processes:**
    - Offsite storage facilities do not have adequate audit trails of the records that are held which leads to us not being able to retrieve records and uncertainty that records held by the council have been disclosed in full (data loss) in line with our statutory duties. Serious data losses with corrupted records which we are unable to make clear statements in regard to telling requesters the up to date position. Inability to cross check whether corrupted records are held elsewhere.
    - The policy requiring the deletion of email accounts within 60 days of an employee's departure has exposed shortcomings in our records management practices. Email accounts as de facto repositories for official records rather than storing them within the appropriate systems. As a result, records that ought to be retained and made available for disclosure are almost certainly being deleted.

1. FOI:
    a. Compliance:
        i. April to Dec25 = 1191 out of 1571 completed on time = 75.8%
        ii. 2024/25 = 90% (1749 out of 1951)
        iii. 2023/24 – 87% (1765 out of 2061)
        iv. 2022/23 – 84% ( 1460 out of 1738)
        v. 2021/22 –76% (1315 out of 1740)
        vi. 2020/21 – 78% (893 out of 1152)

    b. Number of cases received:
        i. Average number of requests received/month in 2025/26 = 1539/9 = 171
        ii. 2024/25 = 2049 (monthly average 171)
        iii. 2023/24 – 2040 (monthly average 170) – 22% increase compared to 22/23
        iv. 2022/23 – 1667 (monthly average 139)
        v. 2021/22 – 1713 (monthly average 143)
        vi. 2020/21 – 1464 (monthly average 122)

2. Children's SAR:

    a. Compliance:
        i. April to Dec25 = 88 out of 103 completed on time = 85%
        ii. Unallocated case = 16
        iii. 2024/25 - 94 out of 102 = 92%
        iv. 2023/24 – 70 cases completed, 68 on time, 97% on time
        v. 2022/23 – 98 cases completed, 75 on time , 77% on time.
        vi. 2021/22 – 77 cases completed, 34 on time, 43% on time
        vii. 2020/21 – 83 cases completed, 31 on time, 37% on time

    b. Validated SARs:
        i. Average number of validated cases/month in 2025/26 (April to Dec) = 12.5/month (further 15% increase from 23/24)
        ii. 2024/25 – 109 – 9/month (33% increase from 23/24)

iii. 2023/24 – 81 – 6.75/month
iv. 2022/23 – 80 - 6.6/month.
v. 2021/22 - 63 - 5.25/month
vi. 2020/21 – 88 - 7.3/month.

3. Corporate SAR:

a. Annual compliance:
i. April to Dec25 = 213 out of 322 completed on time = 66%. Backlog (cases which are already overdue) = 47
ii. 2024/25 - 286 on time out of 416 =69%
iii. 2023/24 – 243 cases completed, 153 on time, 63% on time
iv. 2022/23 – 231 cases completed, 147 on time , 64% on time.
v. 2021/22 – 144 cases completed, 77 on time, 53% on time
vi. 2020/21 – 182 cases completed, 108 on time, 59% on time

b. Validated SARs:
i. Average number of validated cases/month in 2025/26 = 39/month
ii. 2024/25 – 457 – 38/month – 73% increase from 23/24
iii. 2023/24 – 264 – 22/month – 16% increase from 22/23
iv. 2022/23 – 227 - 19/month.
v. 2021/22 – 199 - 17/month
vi. 2020/21 – 242 - 20/month.

4. Data protection:

a. Number of disclosures:
i. April to Dec 25 = 640 (monthly average 71) – further 22% increase
ii. 2024/25 – 699 (monthly = 58) – 11% increase
iii. 2023/24 – 632 (monthly = 53)
iv. 2022/23 – 707 (monthly = 59)
v. 2021/22 – 425 (monthly = 35)
vi. 2020/21 – 345 (monthly = 29)

b. Number of data incidents reported:
   i. April to Dec 25 = 214 incidents (of which 124 actual breaches) (monthly average 24 (14))
   i. 2024/25 – 280 incidents (monthly = 23)
   ii. 2023/24 – 239 incidents (monthly = 20)
   iii. 2022/23 – 260 incidents (monthly = 22)
   iv. 2021/22 – 205 incidents (monthly = 17)
   v. 2020/21 – 247 incidents (monthly = 21)

c. Number of rectification cases:
   i. April to Dec 25 = 4 out of 5 completed on time = 80%
   ii. 2024/25 = 11 out of 13 completed on time = 85%
   iii. 2023/24 = 1 out of 1 completed on time = 100%
   iv. 2022/23 = 5 out of 5 closed on time (100%)
   v. 2021/22 = 1 out of 3 closed on time (33%)

d. Number of erasure cases:
   i. April to Dec 25 = 11out of 12 completed on time = 92%
   i. 2024/25 - 12 out of 13 completed on time = 92%
   ii. 2023/24 = 19 out of 21 completed on time = 90%
   iii. 2022/23 = 40 out of 44 closed on time (91%)
   iv. 2021/22 = 6 out of 7 closed on time (86%)

5. Internal reviews (Stage 2):
   a. Compliance
      i. April to Dec 25 = 72 out of 96 completed on time = 75%
      ii. 2024/25 = 56 out of 70 completed on time =80%
      iii. 2023/24 = 54 out of 67 completed on time = 81%
      iv. 2022/23 = 57 out of 130 completed on time – 44%

   b. Number of cases completed:
      i. April to December 2025/26 - 96 (monthly = 11) (83% increase)
      ii. 2024/25 = 70 (monthly = 6)

iii. 2023/24 = 67 (monthly = 6)

## Q3 FOI Figures (October 2025 - December 2025)

Doesn't reflect cases involving multiple service areas as allocation can only being assigned to one area

| | Total FOI's received | FOI's that went overdue | Non Compliancy % | Compliant % |
|---|---|---|---|---|
| **City Operations** | **209** | **43** | **21%** | **79%** |
| Place | 28 | 8 | 29% | 71% |
| Environmental Services | 26 | 4 | 15% | 85% |
| Culture and Environment | 29 | 10 | 34% | 66% |
| Digital Innovation | 8 | 3 | 38% | 63% |
| City Infrastructure | 118 | 18 | 15% | 85% |

| | Total FOI's received | FOI's that went overdue | Non Compliancy % | Compliant % |
|---|---|---|---|---|
| **Families Children and Wellbeing** | **101** | **32** | **32%** | **68%** |
| Family Help and Protection | 33 | 5 | 15% | 85% |
| Commissioning and Communities | 19 | 5 | 26% | 74% |
| Education and Learning | 43 | 21 | 49% | 51% |
| Public Health | 6 | 1 | 17% | 83% |

| | Total FOI's received | FOI's that went overdue | Non Compliancy % | Compliant % |
|---|---|---|---|---|
| **Homes and Adult Social Care** | **78** | **16** | **21%** | **79%** |
| Adult Social Care | 11 | 2 | 18% | 82% |
| ASC Commissioning and Partnerships | 5 | 1 | 20% | 80% |
| Homes and Investment | 22 | 6 | 27% | 73% |
| Housing People Services | 40 | 7 | 18% | 83% |

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| | Total FOI's received | FOI's that went overdue | Non Compliancy % | Compliant % |
|---|---|---|---|---|
| **Central Hub Directorate** | **96** | **20** | **21%** | **79%** |
| **Cabinet Office** | **1** | **0** | **0%** | **100%** |
| Economic Development | 0 | 0 | 0% | 0% |
| Policy and Partnerships | 1 | 0 | 0% | 100% |
| | | | | |
| **Corporate Leadership Office** | **0** | **0** | **0%** | |
| Emergency Planning | 0 | 0 | 0% | |
| | | | | |
| **Property and Finance** | **51** | **8** | **16%** | **84%** |
| Corporate Finance and Resources | 6 | 1 | 17% | 83% |
| Corporate Procurement | 6 | 1 | 17% | 83% |
| Insurance | 2 | 0 | 0% | 100% |
| Strategic Property | 8 | 3 | 38% | 63% |
| Welfare Revenues and Business Support | 29 | 3 | 10% | 90% |
| | | | | |
| **Governance and Law** | **15** | **3** | **20%** | **80%** |
| Democratic and Leadership Support | 7 | 1 | 14% | 86% |

| | | | | |
|---|---|---|---|---|
| Electoral Local Land Charges and Registration Services | 4 | 0 | 0% | 100% |
| Legal Services | 4 | 2 | 50% | 50% |
| | | | | |
| **People and Innovation** | **29** | **9** | **31%** | **69%** |
| Equalities Diversity and Inclusion | 0 | 0 | 0% | 0% |
| Facilities and Building Services | 4 | 0 | 0% | 100% |
| Human Resources | 19 | 6 | 32% | 68% |
| Innovation | 4 | 3 | 25% | 75% |
| Strategic Communications and Engagements | 2 | 1 | 50% | 50% |

**Subject Access Review**

| Directorate | Service | Team | All Closed | Closed passed deadline | Compliancy | Live cases (Overdue) | Live cases (In time) |
|---|---|---|---|---|---|---|---|
| Central Hub | CLT | Cabinet Office | 1 | 1 | 0% | 1 | |
| Central Hub | CLT | Chief Exec Office | 11 | 4 | 64% | 1 | 1 |
| Central Hub | CLT | Directors | 4 | 4 | 0% | 1 | |
| Central Hub | G&L | Democratic Services | 10 | 1 | 90% | | 1 |
| Central Hub | G&L | Electoral Services | 12 | 1 | 92% | | |
| Central Hub | G&L | Legal | 17 | 3 | 82% | 11 | |
| Central Hub | G&L | Life Events | 1 | 0 | 100% | | |
| Central Hub | P&F | Audit | 2 | 1 | 50% | | |
| Central Hub | P&F | Financial Services | 2 | 1 | 50% | | |
| Central Hub | P&F | Strategic Property | 1 | 1 | 0% | | |
| Central Hub | P&F | WRBS - Council Tax | 5 | 2 | 60% | 10 | 1 |
| Central Hub | P&F | WRBS - Housing Benefits | 4 | 1 | 75% | | 1 |
| Central Hub | P&F | WRBS - Revenues and Benefits | 2 | 1 | 50% | 1 | |
| Central Hub | P&F | Business Operations | 2 | 0 | 100% | | |
| Central Hub | P&I | Communications Team | 0 | 0 | | | |
| Central Hub | P&I | Customer Feedback | 23 | 1 | 96% | 1 | 4 |
| Central Hub | P&I | Data Protection | 0 | 0 | | | |
| Central Hub | P&I | Equalities | 3 | 0 | 100% | 1 | |

| Directorate | Service | Team | All Closed | Closed passed deadline | Compliancy | Live cases (Overdue) | Live cases (In time) |
|---|---|---|---|---|---|---|---|
| Central Hub | P&I | FOI | 2 | 0 | 100% | | |
| Central Hub | P&I | Health and Safety (HR) | 1 | 0 | 100% | | |
| Central Hub | P&I | HR | 15 | 8 | 47% | 9 | 1 |
| Central Hub | P&I | Learning and Organisational Development | 0 | 0 | | | 1 |
| Central Hub | P&I | SAR | 4 | 0 | 100% | | |
| City Ops | City Ops | Blue Badge | 4 | 0 | 100% | | 1 |
| City Ops | City Ops | Brighton Centre | 3 | 0 | 100% | | |
| City Ops | City Ops | City Development & Regeneration | 3 | 1 | 67% | | |
| City Ops | City Ops | Concessionary Travel | 2 | 0 | 100% | | |
| City Ops | City Ops | Environmental Services - City Clean | 5 | 1 | 80% | 2 | |
| City Ops | City Ops | Hackney Carriage | 2 | 0 | 100% | | |
| City Ops | City Ops | IT | 0 | 0 | | | |
| City Ops | City Ops | Parking Services | 8 | 1 | 88% | | |
| City Ops | City Ops | Parking Services (CCTV) | 0 | 0 | | | |
| City Ops | City Ops | Parks & Leisure (Parks) | 0 | 0 | | | |
| City Ops | City Ops | Parks & Leisure (Sports & Leisure) | 0 | 0 | | | |
| City Ops | City Ops | Planning | 4 | 3 | 25% | | |
| City Ops | City Ops | RS - Animal Licencing & Wardens | 1 | 1 | 0% | | |
| City Ops | City Ops | RS - Environmental Health & Licensing | 2 | 0 | 100% | | |

| Directorate | Service | Team | All Closed | Closed passed deadline | Compliancy | Live cases (Overdue) | Live cases (In time) |
|---|---|---|---|---|---|---|---|
| City Ops | City Ops | RS - Environmental protection | 12 | 5 | 58% | 1 | |
| City Ops | City Ops | RS - ETS/ Infestations | 0 | 0 | | | |
| City Ops | City Ops | RS - Food | 0 | 0 | | | |
| City Ops | City Ops | RS - Licensing and Taxi Licensing | 0 | 0 | | | |
| FCW | FCW | BHISS | 2 | 0 | 100% | | |
| FCW | FCW | Clermont | 1 | 1 | 0% | | |
| FCW | FCW | Community Cohesion [Community Safety] | 1 | 0 | 100% | | |
| FCW | FCW | CSWS | 94 | 17 | 82% | 8 | 11 |
| FCW | FCW | Disability (under 25) | 2 | 2 | 0% | 1 | |
| FCW | FCW | Education & Learning | 5 | 3 | 40% | 3 | 1 |
| FCW | FCW | Family Hubs & Youth | 2 | 0 | 100% | | 1 |
| FCW | FCW | Fostering | 0 | 0 | | | |
| FCW | FCW | Healthy lifestyles | 2 | 0 | 100% | | |
| FCW | FCW | Home to School Transport | 1 | 1 | 0% | | |
| FCW | FCW | Independent Visiting Service | 0 | 0 | | | |
| FCW | FCW | LADO | 1 | 0 | 100% | | |
| FCW | FCW | Libraries | 3 | 1 | 67% | | |
| FCW | FCW | Public Health | 3 | 0 | 100% | 1 | |
| FCW | FCW | RUOK | 0 | 0 | | | |

| Directorate | Service | Team | All Closed | Closed passed deadline | Compliancy | Live cases (Overdue) | Live cases (In time) |
|---|---|---|---|---|---|---|---|
| FCW | FCW | SEN | 25 | 8 | 68% | 3 | 1 |
| FCW | FCW | Youth Offending Service | 1 | 0 | 100% | | |
| HASC | HASC | Adult Mental Health | 4 | 1 | 75% | | |
| HASC | HASC | Adult Social Care | 15 | 6 | 60% | 9 | 2 |
| HASC | HASC | Disability (25+) | 2 | 0 | 100% | | |
| HASC | HASC | Housing - Private Sector Housing | 3 | 2 | 33% | | |
| HASC | HASC | Housing - Senior Housing | 5 | 1 | 80% | | 1 |
| HASC | HASC | Housing - Temporary & Supported Accommodation | 0 | 0 | | | |
| HASC | HASC | Housing Adaptations | 0 | 0 | | 1 | |
| HASC | HASC | Housing Customer Services | 73 | 23 | 68% | 6 | 3 |
| HASC | HASC | Housing Options | 60 | 16 | 73% | 1 | 2 |
| HASC | HASC | Housing Repairs (Council Housing) | 37 | 2 | 95% | 2 | 2 |
| HASC | HASC | Housing Strategy | 0 | 0 | | | |
| HASC | HASC | Housing Tenancy | 5 | 0 | 100% | | |

## SARs from Employees allocated to Services

| Directorate | Service | Team | All Closed | Closed passed deadline | Compliancy | Live Cases (Overdue) | Live Cases (In time) |
|---|---|---|---|---|---|---|---|
| Central Hub E | CLT | EMPLOYEE - Cabinet Office | 1 | 1 | 0% | 1 | |
| Central Hub E | CLT | EMPLOYEE - Chief Exec Office | 2 | 1 | 50% | | 1 |
| Central Hub E | CLT | EMPLOYEE -Directors | 1 | 1 | 0% | 1 | |
| Central Hub E | G&L | EMPLOYEE - Electoral Services | 0 | 0 | | | |
| Central Hub E | G&L | EMPLOYEE - Legal | 3 | 1 | 67% | 3 | |
| Central Hub E | G&L | EMPLOYEE -Democratic Services | 0 | 0 | | | 1 |
| Central Hub E | P&F | EMPLOYEE - Audit | 2 | 1 | 50% | | |
| Central Hub E | P&F | EMPLOYEE - HR systems | 1 | 0 | 100% | 1 | 1 |
| Central Hub E | P&F | EMPLOYEE - Procurement | 0 | 0 | | 1 | |
| Central Hub E | P&F | EMPLOYEE - WRBS | 0 | 0 | | 3 | |
| Central Hub E | P&I | EMPLOYEE - Communications Team | 0 | 0 | | | |
| Central Hub E | P&I | EMPLOYEE - Customer Feedback | 1 | 0 | 100% | 2 | |
| Central Hub E | P&I | EMPLOYEE - Equalities | 1 | 0 | 100% | 1 | |
| Central Hub E | P&I | EMPLOYEE - Health & Safety | 1 | 1 | 0% | | |
| Central Hub E | P&I | EMPLOYEE - Learning and Organisational Development | 0 | 0 | | 1 | |
| Central Hub E | P&I | EMPLOYEE - SAR | 0 | 0 | | | |

| Directorate | Service | Team | All Closed | Closed passed deadline | Compliancy | Live Cases (Overdue) | Live Cases (In time) |
|---|---|---|---|---|---|---|---|
| City Ops E | City Ops | EMPLOYEE - Blue Badge & Concessionary Travel | 0 | 0 | | | |
| City Ops E | City Ops | EMPLOYEE - Environmental Services - City Clean | 2 | 1 | 50% | **2** | |
| City Ops E | City Ops | EMPLOYEE - Hackney Carraige | 0 | 0 | | | |
| City Ops E | City Ops | EMPLOYEE - IT | 0 | 0 | | **1** | |
| City Ops E | City Ops | EMPLOYEE - Parks & Leisure | 1 | 1 | 0% | **1** | |
| City Ops E | City Ops | EMPLOYEE - RS - Environmental Protection | 0 | 0 | | **1** | |
| FCW E | FCW | EMPLOYEE - Disability (under 25) | 0 | 0 | | | |
| FCW E | FCW | EMPLOYEE - Family Help and Protection | 0 | 0 | | | **1** |
| FCW E | FCW | EMPLOYEE - Independent Visiting Service | 0 | 0 | | | |
| FCW E | FCW | EMPLOYEE - LADO | 0 | 0 | | | |
| FCW E | FCW | EMPLOYEE - Public Health | 1 | 0 | 100% | **1** | |
| FCW E | FCW | EMPLOYEE - SEN | 1 | 1 | 0% | | |
| FCW E | FCW | EMPLOYEE - Skills and Employment | 0 | 0 | | | |
| HASC E | HASC | EMPLOYEE - Adult Mental Health | 0 | 0 | | | |
| HASC E | HASC | EMPLOYEE - Adult Social Care | 1 | 1 | 0% | | |
| HASC E | HASC | EMPLOYEE - Disability (25+) | 0 | 0 | | | |
| HASC E | HASC | EMPLOYEE - Housing | 2 | 0 | 100% | | |

| Directorate | Service | Team | All Closed | Closed passed deadline | Compliancy | Live Cases (Overdue) | Live Cases (In time) |
|---|---|---|---|---|---|---|---|
| HASC E | HASC | EMPLOYEE - Housing Customer Services | 1 | 0 | 100% | | |
| HASC E | HASC | EMPLOYEE - Housing Options | 1 | 0 | 100% | | |
| HASC E | HASC | EMPLOYEE - Housing Repairs | 1 | 0 | 100% | | |
| HASC E | HASC | EMPLOYEE - Housing Strategy | 0 | 0 | | | |
| HASC E | HASC | EMPLOYEE - Housing Tenancy | 1 | 0 | 100% | | |
| HASC E | HASC | EMPLOYEE - Seniors Housing | 1 | 1 | 0% | | |

## Data breaches breakdown:

| Figures showing Oct - December 2025 | City Operations | Property & Finance | Homes and Adult Social Care | Families Children & Wellbeing | People and Innovation | Governance and Law | TOTAL | Overall percentage |
|---|---|---|---|---|---|---|---|---|
| Disclosed in error (Email) | 0 | 2 | 9 | 14 | 2 | 0 | **27** | **66%** |
| Disclosed in error (Letter) | 1 | 1 | 3 | 2 | 0 | 0 | **7** | **17%** |
| Data Corruption | 0 | 0 | 0 | 0 | 0 | 0 | **0** | **0%** |
| Lost in transit | 0 | 0 | 0 | 0 | 0 | 0 | **0** | **0%** |
| Lost or Stolen Hardware | 0 | 0 | 0 | 0 | 0 | 0 | **0** | **0%** |
| Lost or Stolen Records | 0 | 0 | 1 | 0 | 0 | 0 | **1** | **2%** |
| Non-Secure disposal | 0 | 0 | 0 | 0 | 0 | 0 | **0** | **0%** |

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| **Technical security failure** | 0 | 0 | 0 | 0 | 0 | 0 | **0** | **0%** |
| **Unauthorised access** | 0 | 0 | 0 | 0 | 0 | 0 | **0** | **0%** |
| **Unlawful disclosure (Published online, shared in investigation, verbally etc)** | 0 | 1 | 2 | 0 | 1 | 0 | **4** | **10%** |
| **Other** | 1 | 1 | 0 | 2 | 0 | 2 | **6** | **15%** |
| **Cyber incident** | 0 | 0 | 0 | 0 | 0 | 0 | **0** | **0%** |
| TOTAL | **2** | **5** | **15** | **18** | **3** | **2** | 45 | **110%** |
| **Total percentage** | **5%** | **13%** | **39%** | **47%** | **8%** | **5%** | | |

**Information Rights team – Performance Summary – Quarter 4 2025/26** (*Draft 17th April 2026)*

Key challenges that we are working together as a team to manage:

- Capacity challenges within the Information Rights team due to some unforeseen circumstances, long term sicknesses (out of 8 full time staff, 3 and out of 5 part time staff 2 so total 5 on long term sick during the year) and part year vacancy of 1 role
- Capacity challenges within the organisation resulting in non-compliance, requires disproportionate amount of chasing, services not having the time to work on proper records management *(detailed breakdown in appendix 1 and 2)*
- Complexity of the FOI and SAR cases have increased including more sophisticated correspondence using AI
- Seeking help from IT&D to enable us to run test and learn technology pilots to speed up SAR redaction + to make better use of M365 tools within adult social care
- Emails sent to a wrong person remains the biggest reason for data breaches – exploring with IT&D colleagues options to mitigate this.
- The removal of printers from our Information Rights room has created additional workload pressures as now unable to work and print at the same time adversely affecting productivity (currently capturing implications for this to inform a business case for printer in the same room)

1. FOI:
   a. Compliance:
      i. 2025/26 = 73% (1492 out of 2052) – 76 in the backlog which are already overdue
      ii. 2024/25 = 90% (1749 out of 1951)
      iii. 2023/24 – 87% (1765 out of 2061)
      iv. 2022/23 – 84% ( 1460 out of 1738)
      v. 2021/22 –76% (1315 out of 1740)
      vi. 2020/21 – 78% (893 out of 1152)

   b. Number of cases received:
      i. 2025/26 = 2094 (monthly average 174 )
      ii. 2024/25 = 2049 (monthly average 171)
      iii. 2023/24 – 2040 (monthly average 170) – 22% increase compared to 22/23
      iv. 2022/23 – 1667 (monthly average 139)
      v. 2021/22 – 1713 (monthly average 143)

vi. 2020/21 – 1464 (monthly average 122)

2. Children's SAR:
    a. Compliance:
        i. 2025/26 – 119 out of 142 = 84%, Unallocated cases = 9
        ii. 2024/25 - 94 out of 102 = 92%
        iii. 2023/24 – 70 cases completed, 68 on time, 97% on time
        iv. 2022/23 – 98 cases completed, 75 on time , 77% on time.
        v. 2021/22 – 77 cases completed, 34 on time, 43% on time
        vi. 2020/21 – 83 cases completed, 31 on time, 37% on time

    b. Validated SARs:
        i. 2025/26 = 140 – 12/month (further 33% increase from 24/25)
        ii. 2024/25 – 109 – 9/month (33% increase from 23/24)
        iii. 2023/24 – 81 – 6.75/month
        iv. 2022/23 – 80 - 6.6/month.
        v. 2021/22 - 63 - 5.25/month
        vi. 2020/21 – 88 - 7.3/month.

3. Corporate SAR:
    a. Annual compliance:
        i. 2025/26 - 272 on time out of 417 = 65% , Backlog (cases which are already overdue) = 57
        ii. 2024/25 - 286 on time out of 416 =69%
        iii. 2023/24 – 243 cases completed, 153 on time, 63% on time
        iv. 2022/23 – 231 cases completed, 147 on time , 64% on time.
        v. 2021/22 – 144 cases completed, 77 on time, 53% on time
        vi. 2020/21 – 182 cases completed, 108 on time, 59% on time

    b. Total Cases received (valid, not valid)
        i. 2025/26 – 773 – 64/month
        ii. 2024/25 – 710 – 59/month
        iii. 2023/24 – 381 – 32/month

iv. 2022/23 – 394 - 33/month
v. 2021/22 – 297 – 25/month
vi. 2020/21 – 246 – 21/month

c. Validated SARs:
   i. 2025/26 – 463 – 38/month (overall SAR requests including not valid, has increased from 710 to 773)
   ii. 2024/25 – 457 – 38/month – 73% increase from 23/24
   iii. 2023/24 – 264 – 22/month – 16% increase from 22/23
   iv. 2022/23 – 227 - 19/month.
   v. 2021/22 – 199 - 17/month
   vi. 2020/21 – 242 - 20/month.

4. Data protection:

a. Number of disclosures:
   i. 2025/26 – 821 (monthly = 68) – further 17% increase from 24/25
   ii. 2024/25 – 699 (monthly = 58) – 11% increase from 23/24
   iii. 2023/24 – 632 (monthly = 53)
   iv. 2022/23 – 707 (monthly = 59)
   v. 2021/22 – 425 (monthly = 35)
   vi. 2020/21 – 345 (monthly = 29)

b. Number of data incidents reported:
   i. 2025/26 = 279 incidents (of which 165 actual breaches) (monthly average 23 (14))
   i. 2024/25 – 280 incidents (monthly = 23)
   ii. 2023/24 – 239 incidents (monthly = 20)
   iii. 2022/23 – 260 incidents (monthly = 22)
   iv. 2021/22 – 205 incidents (monthly = 17)
   v. 2020/21 – 247 incidents (monthly = 21)

c. Number of rectification cases:
   i. 2025/26 = 9 out of 9 completed on time = 100%

ii. 2024/25 = 11 out of 13 completed on time = 85%
iii. 2023/24 = 1 out of 1 completed on time = 100%
iv. 2022/23 = 5 out of 5 closed on time (100%)
v. 2021/22 = 1 out of 3 closed on time (33%)

d. Number of erasure cases:
   i. 2025/26 = 11 out of 13 completed on time = 85%
   i. 2024/25 - 12 out of 13 completed on time = 92%
   ii. 2023/24 = 19 out of 21 completed on time = 90%
   iii. 2022/23 = 40 out of 44 closed on time (91%)
   iv. 2021/22 = 6 out of 7 closed on time (86%)

5. Internal reviews (Stage 2):
   a. Compliance
      1. 2025/26 = 97 out of 138 completed on time = 70%
      i. 2024/25 = 56 out of 70 completed on time =80%
      ii. 2023/24 = 54 out of 67 completed on time = 81%
      iii. 2022/23 = 57 out of 130 completed on time – 44%

   b. Number of cases completed:
      i. 2025/26 = 135 (monthly = 11) – 93% increase
      ii. 2024/25 = 70 (monthly = 6)
      iii. 2023/24 = 67 (monthly = 6)

## Appendix 1 - Yearly FOI Figures (1st April 2025 - 31st March 2026) – Draft

Doesn't reflect cases involving multiple service areas as allocation can only being assigned to one area.

| | Total FOI's received | FOI's that went overdue | Non Compliancy % | Compliant % |
|---|---|---|---|---|
| **City Operations** | **905** | **206** | **23%** | **77%** |
| Place | 131 | 32 | 24% | 76% |
| Environmental Services | 128 | 44 | 34% | 66% |
| Culture and Environment | 116 | 35 | 30% | 70% |
| IT&D | 43 | 23 | 53% | 47% |
| City Infrastructure | 487 | 72 | 15% | 85% |

| | Total FOI's received | FOI's that went overdue | Non Compliancy % | Compliant % |
|---|---|---|---|---|
| **Families Children and Wellbeing** | **370** | **150** | **41%** | **59%** |
| Family Help and Protection | 102 | 38 | 37% | 63% |
| Commissioning and Communities | 83 | 31 | 37% | 63% |
| Education and Learning | 158 | 76 | 48% | 52% |

| | | | | |
|---|---|---|---|---|
| Public Health | 27 | 5 | 19% | 81% |

| | Total FOI's received | FOI's that went overdue | Non Compliancy % | Compliant % |
|---|---|---|---|---|
| **Homes and Adult Social Care** | **358** | **66** | **18%** | **82%** |
| Adult Social Care | 47 | 10 | 21% | 79% |
| ASC Commissioning and Partnerships | 29 | 9 | 31% | 69% |
| Homes and Investment | 123 | 18 | 15% | 85% |
| Housing People Services | 159 | 29 | 18% | 82% |

| | Total FOI's received | FOI's that went overdue | Non Compliancy % | Compliant % |
|---|---|---|---|---|
| **Central Hub Directorate** | **444** | **152** | **34%** | **66%** |
| **Cabinet Office** | **13** | **5** | **38%** | **62%** |
| Economic Development | 6 | 2 | 33% | 67% |
| Policy and Partnerships | 7 | 3 | 43% | 57% |
| | | | | |
| **Corporate Leadership Office** | **1** | **1** | **100%** | **0%** |

| | | | | |
|---|---|---|---|---|
| Emergency Planning | 1 | 1 | **100%** | **0%** |
| | | | | |
| **Property and Finance** | **232** | **76** | **33%** | **67%** |
| Corporate Finance and Resources | 30 | 11 | 37% | 63% |
| Corporate Procurement | 25 | 8 | 32% | 68% |
| Insurance | 6 | 1 | 17% | 83% |
| Strategic Property | 37 | 15 | 41% | 59% |
| Welfare Revenues and Business Support | 133 | 41 | 31% | 69% |
| Internal Audit and Counter Fraud | 1 | 0 | 0% | 100% |
| | | | | |
| **Governance and Law** | **51** | **15** | **29%** | **71%** |
| Democratic and Leadership Support | 22 | 6 | 27% | 73% |
| Electoral Local Land Charges and Registration Services | 15 | 1 | 7% | 93% |
| Legal Services | 14 | 8 | 57% | 43% |
| | | | | |

| | | | | |
|---|---|---|---|---|
| **People and Innovation** | **147** | **55** | **37%** | **63%** |
| Equalities Diversity and Inclusion | 11 | 3 | 27% | 73% |
| Facilities and Building Services | 18 | 7 | 39% | 61% |
| Human Resources | 76 | 29 | 38% | 62% |
| Innovation | 31 | 7 | 23% | 77% |
| Strategic Communications and Engagements | 11 | 9 | 82% | 18% |

**Appendix 2 - Subject Access Review 2025/26 (Draft)**

| Directorate | Sub direc | Team | All Closed | Compliancy |
|---|---|---|---|---|
| Central Hub | CLT | Chief Exec Office | 10 | 70% |
| Central Hub | CLT | Directors | 6 | 100% |
| Central Hub | G&L | Democratic Services | 11 | 82% |
| Central Hub | G&L | Electoral Services | 17 | 94% |
| Central Hub | G&L | Legal | 16 | 56% |
| Central Hub | G&L | Life Events | 1 | 100% |
| Central Hub | P&F | Business Operations | 2 | 100% |
| Central Hub | P&F | Financial Services | 2 | 50% |
| Central Hub | P&F | Strategic Property | 2 | 50% |
| Central Hub | P&F | WRBS - ALL | 10 | 50% |
| Central Hub | P&I | Customer Feedback | 30 | 93% |
| Central Hub | P&I | Equalities | 2 | 100% |
| Central Hub | P&I | FOI | 3 | 67% |
| Central Hub | P&I | Health and Safety | 2 | 100% |
| Central Hub | P&I | HR | 9 | 11% |
| City Ops | City Ops | Blue Badge | 5 | 100% |
| City Ops | City Ops | Brighton Centre | 3 | 100% |
| City Ops | City Ops | City Development & Regeneration | 3 | 67% |
| City Ops | City Ops | Concessionary Travel | 3 | 100% |
| City Ops | City Ops | Hackney Carriage | 2 | 100% |
| City Ops | City Ops | Parking Services | 12 | 92% |
| City Ops | City Ops | Planning | 5 | 40% |
| City Ops | City Ops | RS - Animal Licencing & Wardens | 1 | 0% |
| City Ops | City Ops | RS - Environmental Health & Licensing | 2 | 100% |

| Directorate | Sub direc | Team | All Closed | Compliancy |
|---|---|---|---|---|
| City Ops | City Ops | RS - Environmental protection | 12 | 58% |
| FCW | FCW | BHISS | 2 | 100% |
| FCW | FCW | Clermont | 2 | 50% |
| FCW | FCW | Community Cohesion [Community Safety] | 1 | 100% |
| FCW | FCW | CSWS | 119 | 84% |
| FCW | FCW | Disability (under 25) | 3 | 100% |
| FCW | FCW | Education & Learning | 6 | 17% |
| FCW | FCW | Family Hubs & Youth | 6 | 83% |
| FCW | FCW | Healthy lifestyles | 2 | 100% |
| FCW | FCW | Home to School Transport | 1 | 0% |
| FCW | FCW | Independent Visiting Service | 1 | 100% |
| FCW | FCW | LADO | 2 | 100% |
| FCW | FCW | Libraries | 5 | 80% |
| FCW | FCW | MARAC | 3 | 100% |
| FCW | FCW | Public Health | 3 | 100% |
| FCW | FCW | SEN | 30 | 67% |
| FCW | FCW | Youth Offending Service | 1 | 100% |
| HASC | HASC | Adult Mental Health | 5 | 80% |
| HASC | HASC | Adult Social Care | 20 | 40% |
| HASC | HASC | Disability (25+) | 3 | 33% |
| HASC | HASC | Housing - Complex Cases | 1 | 100% |
| HASC | HASC | Housing - Leasehold | 2 | 100% |
| HASC | HASC | Housing - Private Sector Housing | 5 | 60% |
| HASC | HASC | Housing - Senior Housing | 8 | 88% |
| HASC | HASC | Housing - Temporary & Supported Accommodation | 15 | 33% |
| HASC | HASC | Housing Customer Services | 83 | 71% |

| Directorate | Sub direc | Team | All Closed | Compliancy |
|---|---|---|---|---|
| HASC | HASC | Housing Options | 72 | 72% |
| HASC | HASC | Housing Repairs (Council Housing) | 46 | 93% |
| HASC | HASC | Housing Tenancy | 5 | 100% |

## SARs from Employees allocated to Services

| Directorate | Sub direc | Team | All Closed | Compliancy |
|---|---|---|---|---|
| Central Hub | CLT | EMPLOYEE - Cabinet Office | 2 | 0% |
| Central Hub | CLT | EMPLOYEE - Chief Exec Office | 2 | 0% |
| Central Hub | G&L | EMPLOYEE -Democratic Services | 3 | 33% |
| Central Hub | P&F | EMPLOYEE - Audit | 1 | 0% |
| Central Hub | P&F | EMPLOYEE - Procurement | 1 | 100% |
| Central Hub | P&F | EMPLOYEE - WRBS | 6 | 83% |
| Central Hub | P&I | EMPLOYEE - Customer Feedback | 2 | 100% |
| Central Hub | P&I | EMPLOYEE - DSAR | 2 | 0% |
| City Ops | City Ops | EMPLOYEE - Hackney Carraige | 1 | 100% |
| City Ops | City Ops | EMPLOYEE - IT&D | 1 | 0% |
| FCW | FCW | EMPLOYEE - Family Help and Protection | 2 | 50% |
| FCW | FCW | EMPLOYEE - Skills and Employment | 1 | 100% |
| HASC | HASC | EMPLOYEE - Adult Mental Health | 4 | 100% |
| HASC | HASC | EMPLOYEE - Adult Social Care | 3 | 67% |
| HASC | HASC | EMPLOYEE - Disability (25+) | 1 | 100% |

| | | | | |
|---|---|---|---|---|
| **HASC** | **HASC** | EMPLOYEE - Housing | 1 | 100% |
| **HASC** | **HASC** | EMPLOYEE - Housing Customer Services | 2 | 100% |
| **HASC** | **HASC** | EMPLOYEE - Housing Options | 1 | 100% |
| **HASC** | **HASC** | EMPLOYEE - Housing Repairs | 1 | 100% |
| **HASC** | **HASC** | EMPLOYEE - Housing Strategy | 1 | 100% |
| **HASC** | **HASC** | EMPLOYEE - Seniors Housing | 1 | 100% |

## Appendix 3 - Data breaches yearly breakdown:

| Figures showing 01st April – 31st March 2026 | City Operations | Property & Finance | Homes and Adult Social Care | Families Children & Wellbeing | People and Innovation | Governance and Law | TOTAL | Overall percentage |
|---|---|---|---|---|---|---|---|---|
| Disclosed in error (Email) | 13 | 9 | 33 | 45 | 9 | 6 | **115** | **71%** |
| Disclosed in error (Letter) | 2 | 2 | 7 | 3 | 1 | 0 | **15** | **9%** |
| Data Corruption | 1 | 0 | 0 | 0 | 0 | 0 | **1** | **1%** |
| Lost in transit | 1 | 0 | 1 | 0 | 0 | 0 | **2** | **1%** |
| Lost or Stolen Hardware | 1 | 0 | 0 | 0 | 0 | 0 | **1** | **1%** |
| Lost or Stolen Records | 0 | 0 | 2 | 1 | 0 | 0 | **3** | **2%** |
| Non-Secure disposal | 0 | 0 | 0 | 0 | 0 | 0 | **0** | **0%** |
| Technical security failure | 0 | 0 | 0 | 0 | 0 | 0 | **0** | **0%** |
| Unauthorised access | 0 | 2 | 2 | 0 | 0 | 0 | **4** | **2%** |
| Unlawful disclosure (Published online, shared in investigation, verbally etc) | 3 | 2 | 7 | 2 | 1 | 3 | **18** | **11%** |
| Other | 0 | 0 | 1 | 0 | 1 | 0 | **2** | **1%** |
| Cyber incident | 0 | 0 | 0 | 0 | 0 | 0 | **0** | **0%** |
| TOTAL | **21** | **15** | **53** | **51** | **12** | **9** | **161** | **100%** |
| Total percentage | **13%** | **9%** | **33%** | **32%** | **7%** | **6%** | **100%** | |

**Appendix 4 - Other key points to note (in consultation with Sarah Turner and Charnelle Jarrett)**

1) Corrupted files:

We are aware that several records were corrupted in a migration that took place in 2012. When we are searching for records for children, we come across files that cannot be retrieved and now need to be able to inform requesters that not all of their information is able to be provided. The request of IGB is to note that we will add to requests when we find the problem.

Rationale:

The reason that this is necessary is because we have a duty to inform requesters where we have been unable to provide all of the information that the council holds. At present we are not able to quantify the scale of the issue but know that it involves at least hundreds of records. The Data Protection Officer is aware that the problem exists and historically did try to understand what action was needed but as far as we are aware no decision was ever taken as to whether the loss needed to be cited with the ICO.

We cant be sure that a requester would not inform the ICO of the problem and how they may respond.

The wording that we will use on all records where corrupted records are located is as below:

*'We have identified files relating to yourself that are unfortunately corrupted. This corruption of data appears to affect documents from 2007 to 2010 and was due to a failed migration that happened in 2012. These files are not recoverable. We can't say for sure what information is contained in these files, but it may be that the information appears in other documents within your SAR. If there is a specific record that you were expecting that has not appeared in your SAR, you can contact us and we will try to locate it but please be aware that this may not be possible.'*

2) Retention and Destruction

The standard retention and destruction for Information rights records is 3 years from disclosure for SARS and FOI. It is permissible to make a business decision to keep records for longer if there is an identified service need.

We will increase the retention period for Childrens SAR requests (CSWS only) from 3 years to 10 years.

Rationale:

It is known that CSWS SARS can be up to 15,000 pages long (18 to 21yrs of information) and hold very sensitive and (to the requestor) traumatic information. As such it can often take a requestor some years to process this information. We are increasingly seeing young people, re -requesting SARS that they have already received. This is often because they request the records as soon as they leave the care system at 18 – 21yrs and are not in permanent accommodation or their circumstances are very subject to change, this means they often do not access the SAR that they have been sent and then forget about it until they are in a more stable place. The ICO guidelines state that you cannot refuse a request as "repeated" if a reasonable period has passed. 5 years far exceeds any reasonable timeframe, making it almost certainly a new, valid request rather than a repeat. These SARS have often taken months to collate and redact, and a retention of ten years would mean that this work would not need to be repeated.

Children's services case information in some cases is kept for a minimum of 25 years but can be up to 99 years. This means that re requests are for information that will still be held in almost all cases.

On this basis we would increase the retention period for children's SAR records only for 10 years.

To note, currently no records have ever been destroyed so we hold records for SARS from over 5 years ago and we are currently in breach of the Data Protection Act, it would be a major piece of work to go back through all these SARS. Extending to ten years would mean that it is acceptable to still be holding some of these SARS and would support with increased demand on the service as well as increased repeat requests.