

# Agenda



## Standards Committee Hearing

---

Date: Wednesday, 22 September 2021

Time: 3.00 pm

Venue: Microsoft Teams Meeting

To: A. Mitchell (Chair), K. Watkins (Vice Chair), J. Davies, T. Britton, R. Morgan, P. Worthington and Councillors D. Wilcox, P Hourahine, D Fouweather

---

Item		Wards Affected
1	<u>Apologies for Absence</u>	
2	<u>Declarations of Interest</u>	
3	<u>Part 2 Exempt or Confidential Items</u> To consider the exclusion of the press and public from all or part this meeting while the following item is being considered on the grounds that it will involve the disclosure of “exempt” information as defined in schedule 12 A of the Local Government Act 1972 (as amended) and whether the exemption outweighs the public interest in disclosure.	
4	<u>Misconduct hearing - Public Services Ombudsman for Wales Report - Case No.202001914 (Pages 3 - 110)</u>	
5	<u>Webcast of Hearing</u> <a href="#">Standards Committee Hearing, 22 September (part 1) - YouTube</a> <a href="#">Standards Committee Hearing, 22 September (part 2) - YouTube</a> <a href="#">Standards Committee Hearing, 22 September (part 3) - YouTube</a>	

This page is intentionally left blank

The investigation of a complaint  
against Councillor Joan Watkins of  
Newport City Council

A report by the  
Public Services Ombudsman for Wales  
Case: 202001914

<b>Contents</b>	<b>Page</b>
Introduction	1
Summary	2
The complaint	3
Legal background	3
My investigation	3
My guidance on the Code of Conduct	4
Events	5
What Councillor Watkins said	9
Councillor Watkins' comments on the draft report	11
Undisputed facts	12
Disputed facts	12
Analysis of evidence	13
Conclusions	14
Finding	16
Index to Appendices	17

## Introduction

Report by the Public Services Ombudsman for Wales on the investigation of a complaint made against Councillor Joan Watkins of Newport City Council, of a breach of the Council's statutory Code of Conduct for Members.

This report is issued under section 69 of the Local Government Act 2000.

## Summary

The Ombudsman received a complaint from the Practice Manager of a GP Practice (“the Practice”) in the area of the Aneurin Bevan University Health Board (“the Health Board”), that a Member (“the Member”) of Newport City Council had failed to observe the Code of Conduct for Members.

It was alleged that the Member used their position as a member of the Council improperly when they advocated on behalf of a patient of the Practice.

The Ombudsman concluded that the Member had made 2 telephone calls to the Practice in which she sought to improperly rely on her position as a Member of the Council, and as a Council representative on the Health Board, in order to speak to an on-call doctor about the patient’s healthcare. The Ombudsman also concluded that the Member had made a complaint to the Health Board containing information which was critical of the Practice staff and did not accurately reflect the content of the telephone conversations. The Ombudsman was of the view that the complaint was an attempt by the Member to use their position to undermine the actions of the Practice and create a disadvantage for it.

The Ombudsman therefore determined that the Member may have breached paragraph 7(a) of the Council’s Code of Conduct for Members and referred his investigation report to the Monitoring Officer of Newport City Council for consideration by its Standards Committee.

## The complaint

1. On 18 August **2020**, I received a complaint<sup>1</sup> from the Practice Manager of Isca Medical Centre (“the Practice”), Mrs Caroline Perkins, that Councillor Joan Watkins had failed to observe the Code of Conduct for members of Newport City Council (“the Council”). It was alleged that Councillor Watkins used her position as a member of the Council improperly when she advocated on behalf of a patient of the Practice.

## Legal background

2. As required by Part III of the Local Government Act 2000 (“the Act”), the Council has adopted a Code of Conduct for members<sup>2</sup> which incorporates the provisions of a model Code contained in an order made by the Welsh Ministers. Council members are required to sign an undertaking that, in performing their functions, they will observe the Council’s Code of Conduct. Councillor Watkins gave such an undertaking on 8 May 2017.<sup>3</sup> When an elected member is nominated by their authority to serve on another public body on its behalf, the member is also required to comply with the Code of Conduct when they are performing in that role.

3. Section 69 of the Act provides the authority for my investigation and the production of this report.

## My investigation

4. Having considered the complaint as made to me, I concluded that it was appropriate to investigate whether Councillor Watkins had failed to comply with the following provision of the Code of Conduct:

- 7(a) – not to, in an official capacity or otherwise, use or attempt to use her position improperly to confer on or secure for herself, or any other person, an advantage or create or avoid for herself, or any other person, a disadvantage.

---

<sup>1</sup> Appendix 1

<sup>2</sup> Appendix 2

<sup>3</sup> Appendix 3

5. Councillor Watkins was informed of my intended investigation on 6 October.<sup>4</sup>

6. During my investigation, I obtained relevant information from the Council's Monitoring Officer.<sup>5</sup> My Investigation Officer has also obtained relevant documents from the Practice (including the call recordings), Aneurin Bevan University Health Board ("the Health Board")<sup>6</sup> and from the complainant, Mrs Perkins.<sup>7</sup> The following witnesses were interviewed:

- Mrs Perkins – Practice Manager and complainant<sup>8</sup>
- Ms Helen Dowsell – Care Navigator at the Practice<sup>9</sup>
- Mrs Leanne Elizabeth Simmons - Care Navigator at the Practice.<sup>10</sup>

7. I have put the evidence found by my investigation to Councillor Watkins, enabling her to review that evidence before responding to the questions which were put to her by my Investigation Officer during the interview held via Microsoft Teams on 1 March 2021.<sup>11</sup>

8. I have given Councillor Watkins the opportunity to comment on a draft of this report which included my provisional views and finding.

### **My guidance on the Code of Conduct**

9. I have issued guidance for members of local authorities in Wales on the model Code of Conduct ("my guidance"). An extract from my guidance that was applicable at the time of these events and which is relevant to this complaint, is included at Appendix 11.

---

<sup>4</sup> Appendix 4

<sup>5</sup> Appendix 5

<sup>6</sup> Appendix 6

<sup>7</sup> Appendix 7

<sup>8</sup> Appendix 7

<sup>9</sup> Appendix 8

<sup>10</sup> Appendix 9

<sup>11</sup> Appendix 10

## Events

10. Councillor Watkins first became a member of the Council on 8 May **2017** and was appointed as a Council representative on the Health Board at the Council's Annual General Meeting in May **2018**.<sup>12</sup>

11. Councillor Watkins contacted the Practice via telephone on 7 August **2020**<sup>13</sup> and spoke to the Practice's Care Navigator, Mrs Simmons. Councillor Watkins introduced herself as "Councillor Joan Watkins" and said, "I actually sit on the [Health Board]". Councillor Watkins requested a conversation with the Practice's on-call doctor and initially refused to provide details of the patient for whom she was advocating, instead stating she would discuss the matter with the on-call Doctor.

12. Mrs Simmons advised Councillor Watkins that, due to confidentiality, the Practice required the name of the patient. Councillor Watkins provided the patient's name and asked Mrs Simmons to contact the patient to obtain her permission for the Doctor to speak to Councillor Watkins. Mrs Simmons advised Councillor Watkins that she would do so as soon as she had "the first opportunity" and the call ended.

13. Mrs Simmons told my office that the Practice, in line with its data protection protocol, only shares information about a patient with an advocate if it has a signed consent form. Mrs Simmons said that she contacted the patient who said she was aware that Councillor Watkins was calling on her behalf and gave permission for her to do so. Mrs Simmons said that she found Councillor Watkins to be "very demanding" and "a little bit irate" during the call. Mrs Simmons said that she managed to deal with the patient's issue directly with the patient.<sup>14</sup>

14. Councillor Watkins subsequently telephoned the Practice later that afternoon and spoke to the Practice's Care Navigator, Ms Dowsell. Councillor Watkins identified herself as "Joan Watkins" and asked whether she could expect a call from the on-call Doctor. Ms Dowsell informed Councillor Watkins that Mrs Simmons had spoken to the patient and that the Doctor was dealing with the patient's issues and referred to a telephone consultation.

---

<sup>12</sup> Appendix 5

<sup>13</sup> Appendix 12

<sup>14</sup> Appendix 9

15. Councillor Watkins said that she would like to speak to the on-call Doctor, and that she was “doing this in the capacity of sitting on the Health Board”. Ms Dowsell told Councillor Watkins that the on-call Doctor would not be able to speak to her that day as he was dealing with emergencies and that “this will be raised with the Practice Manager on Monday morning”. Councillor Watkins responded that “this will be raised with the Health Board and the Chief Executive” at the Health Board. Councillor Watkins said “this will not be the end of this matter” before ending the call.

16. Ms Dowsell told my office that she found Councillor Watkins to be “very assertive and threatening”. She said that she had acted in accordance with the Practice’s data protection protocol and that she felt Councillor Watkins was “using her position” on the Health Board “in order to obtain information about the patient” and to “pressure” her into asking the on-call Doctor to contact her. Ms Dowsell said that she felt Councillor Watkins’ reference to the Chief Executive of the Health Board was “a threat and an abuse of her position” and that she did not think Councillor Watkins “should have used her position in this way”.<sup>15</sup>

17. The Practice Manager, Mrs Perkins, stated that she was informed of Councillor Watkins’ calls on 10 August. She said she thought that Councillor Watkins was “rude and demanding to staff” and had tried to “use her position”. Mrs Perkins said there was “no medical emergency” regarding the patient and that the Doctor had decided that no treatment was required that day as the patient’s request “was for a routine ongoing problem” but said a “call back with the patient was arranged the same day”.<sup>16</sup>

18. On 20 August, Councillor Watkins made a complaint via email to the Health Board’s Primary Care Unit. Councillor Watkins stated,

“I received a telephone call from a very distressed elderly and frail lady saying she was suffering badly with what seemed to be conjunctivitis...She rang me in desperation could I help...I duly rang the surgery explained the situation and asked if I could speak to the duty Doctor...frankly they were totally unhelpful and I believe I was met with the same poor attitude that this elderly lady had

---

<sup>15</sup> Appendix 8

<sup>16</sup> Appendix 7

experienced, I could make no progress on her behalf...These receptionists who may now have the title of Care Navigators acted as a real barrier having in my view no care whatsoever for the plight the lady was in...it is my view that receptionists should not be acting as barriers to care, yes they may at times have a difficult role but on this occasion I myself found them unhelpful bordering on rude when my intention was only to try and help".<sup>17</sup>

19. On 15 September, the Health Board's Primary Care Unit responded to Councillor Watkins, stating,

"You may be aware that due to national GP recruitment issues, the majority of practices have had to adopt a multi-disciplinary team in order to continue to provide the appropriate levels of care to their registered population. Additionally, most practices navigate patients to the most appropriate healthcare professional, based on their clinical need. In this instance, the [Practice] determined that [the patient's] clinical needs could be met by the Advanced Nurse Practitioner, unfortunately this was not acceptable to [the patient] who declined care from the Advanced Nurse Practitioner. [The Doctor] was consulted and to ensure [the patient's] needs were met, she was informed to book a routine appointment with a GP, due to the ongoing nature of the problem. The [Practice] advised that [the patient] was indeed happy with this and accepted the appointment for 19th August.

The [Practice] is sorry that you felt their attitude towards you was not acceptable, whilst trying to resolve your constituents [sic] concerns. As you are probably aware practices are bound by confidentiality agreements and must comply with relevant data protection legislation General Data Protection Regulation (GDPR) so unfortunately they are unable to provide you with patient information unless patient consent is gained".<sup>18</sup>

---

<sup>17</sup> Appendix 6

<sup>18</sup> Appendix 6

20. Councillor Watkins responded to the Health Board's Primary Care Unit on the same day and said,

"I am afraid I find this reply somewhat lacking given the [Practice] have not been truthful in some of their responses...In terms of [the patient] I told the Receptionists she was willing to give permission for them to speak with me, both [the patient] and I are fully cognisant...of the rules around confidentiality, she was happy to give the necessary permission...On the night she asked for my assistance she still was only offered an appointment 10 days hence".<sup>19</sup>

21. The Health Board's Primary Care Unit responded to the further complaint from Councillor Watkins on 5 October, stating,

"The Practice Manager has advised that the practice complies with data protection and General Data Protection Regulation (GDPR) rules and the following process is followed when an individual rings or attends the [Practice] to discuss a patients [sic] medical needs:

Initially, the [Practice] checks whether there is a signed consent form held in the patients [sic] electronic medical record giving permission for other individual(s) to communicate directly with the [Practice] on behalf of the patient. Where this is not in place the [Practice] would ask the person calling if the patient was with them at the time of the call, where this is the case, the staff would ask to briefly speak to the patient whereby they would make 3 checks of personal identifiable information with the patient. This would include full name, date of birth and home address including postcode. Once the staff member was confident that the information matched the [Practice] records they would ask the patient for their verbal consent to discuss their care with the person calling.

The Practice Manager advised that as there was no signed consent form in place prior to your contact, and as [the patient] was not with you at the time of the call, they were unable to discuss her care with you. Subsequently, the Practice Manager advised that the staff

---

<sup>19</sup> Appendix 6

member informed you that they would contact [the patient] directly, which they did.

We appreciate that there may have been mitigating factors as to why [the patient] was unwilling to be seen by the Nurse Practitioner, and are sorry that she had a prior experience that contributed to this. The Practice Manager advised that [the patient's] request for an appointment was considered by the duty GP at the time, who considered a routine appointment clinically appropriate".<sup>20</sup>

### What Councillor Watkins said

22. Councillor Watkins responded to my investigation via email on 14 October. Councillor Watkins said:

"I thought perhaps if I could speak with the on call Doctor, a prescription might be arranged which I would be happy to pick up, take to the Chemist and then deliver to her...On that basis and with the sole intention of trying to help her I rang the Surgery...I asked if I could speak with the duty Doctor, and explained why but that request was denied and my message that here was a very distressed old lady in considerable discomfort was not met with the assistance I had hoped for...I made no progress with the receptionist with either my request to speak to the Dr or to try and obtain a prescription to assist her...Neither was the receptionist willing to contact the lady to obtain her consent for me to talk on her behalf...On that basis I was frustrated at clearly not going to be able to help her. I did therefore state that I felt this was unacceptable and in the capacity of sitting on the...Stake holders Health Board for [the Health Board] as an Elected Member I was going to report the matter to [the Health Board]...In the event, not being able to obtain any help for her from the surgery and knowing her appointment to be seen was some days away I felt sad , frustrated and sorry that I had to go back to her unable to offer any immediate help...and in contacting this surgery my only intention was to try and help her, sadly to no avail".<sup>21</sup>

---

<sup>20</sup> Appendix 6

<sup>21</sup> Appendix 13

23. Councillor Watkins was supported at interview on 1 March **2021** by her fellow member of the Council, Councillor William Routley.

Councillor Watkins made the following points at interview:

- She had “transgressed” in relation to paragraph 7(a) of the Code of Conduct as she was concerned about an elderly lady who was in distress due to her eye condition and that the lady had told her that she could not see. Her only intention was to try and help the patient.
- She wanted to speak to the on-call Doctor in order to obtain a prescription for the patient which she herself would have taken to the Chemist.
- She accepted that the Practice staff were acting in accordance with the Practice’s data protection policies.
- Her role on the Health Board was to meet stakeholders and bring issues for discussion and, at times, for investigation.
- On reflection, she accepted that she should not have said she was acting in the capacity of sitting on the Health Board and that she was really doing it in the capacity of a friend to the patient. She acknowledged that it was wrong of her to say this.
- In relation to her comments and her manner during the telephone call, she said she was acting “in the moment”, and that the Practice staff felt she “came on too strong”.
- In complaining to the Health Board, her intention was that it would speak with the Practice and “ensure that [it] was offering a service that was appropriate and effective and proper”.
- Her description of the Care Navigators (in her complaint to the Health Board) as “unhelpful, bordering on rude” and “a real barrier” was her view at the time of making the complaint but, on reflection, she “may have come on too strong in that respect”.

- In hindsight, she would have acted differently and, rather than telephone the Practice, she would have helped the lady to go to A&E.
- In hindsight, she may have worded her complaint to the Health Board differently.
- She said she was sorry if she was too forceful on the telephone and if she caused offence and said this was not her intention.
- She said if she did breach paragraph 7(a) of the Code of Conduct it was absolutely a mistake on her part.
- She said she would be more than happy to offer an apology to the Practice.
- Councillor Routley, speaking at the end of the interview on Councillor Watkins' behalf, said he had provided training to Councillor Watkins, that lessons had been learned and, going forward, patients making a complaint of this nature to her would be advised to go to A&E. Councillor Routley repeated that Councillor Watkins had acted "in the moment".

### **Councillor Watkins' comments on the draft report**

24. In an email dated 7 July, Councillor Watkins repeated that her intention had been to help a vulnerable and distressed old lady. She said that, on reflection, she should not have stated her status as a Councillor or a member of the Health Board. She again said that she had acted "in the moment". Councillor Watkins accepted that her manner "may have been quite forceful" and said she had "offered apology for that". Councillor Watkins referred to her own historical issues with the Practice relating to her healthcare and said that "the history there is very negative". She said she had "learned lessons" to take forward.<sup>22</sup>

---

<sup>22</sup> Appendix 14

## Undisputed facts

25. Councillor Watkins made 2 telephone calls to the Practice on 7 August 2020 to discuss the care and treatment of a patient.
26. Councillor Watkins was acting in her capacity as a member of the Council and as a Council-appointed representative to the Health Board when advocating on behalf of the patient.
27. Councillor Watkins was attempting to assist an elderly patient.
28. The Care Navigator, Mrs Simmons, found Councillor Watkins to be very demanding during the first call. Mrs Simmons dealt with the patient directly.
29. The Care Navigator, Ms Dowsell, found Councillor Watkins to be threatening during the second call and felt that Councillor Watkins was attempting to use her position as a member of the Health Board improperly and threateningly.
30. The Practice Staff were acting in accordance with the Practice's data protection policies.
31. Councillor Watkins made two complaints to the Health Board's Primary Care Unit, on 20 August and 15 September. The Health Board did not uphold either of Councillor Watkins' complaints.
32. Councillor Watkins said she had historical issues with the Practice relating to her own healthcare.

## Disputed facts

33. Was Councillor Watkins acting "in the moment" when contacting the Practice via telephone and making her complaint to the Health Board?
34. Did Councillor Watkins exaggerate the behaviour of the Practice's staff when making her complaint to the Health Board?

## Analysis of evidence

### Disputed facts

#### Was Councillor Watkins acting “in the moment” when contacting the Practice via telephone and making her complaint to the Health Board?

35. I accept that Councillor Watkins was acting “in the moment” during her initial telephone call to the Practice. However, at the end of the first telephone call, Mrs Simmons informed Councillor Watkins that she would contact the patient at “the first opportunity”. Councillor Watkins appeared to be aggrieved that she could not speak to the on-call Doctor at that time.

36. Councillor Watkins then made a further telephone call to the Practice in which she was informed that the Doctors were dealing with the patient’s issues. It was at this point that Councillor Watkins said she was “doing this in the capacity of sitting on the Health Board”. Councillor Watkins was then told that the on-call Doctor would not be able to speak to her as he was dealing with emergencies, to which Councillor Watkins responded that she would raise the matter “with the Health Board and the [Health Board’s] Chief Executive”. I do not accept that her responses were “in the moment” or indeed that she was still concerned for the safety and health of her constituent when she responded in this manner, given that this was the second call she had made and she had been advised that the Practice was dealing with the patient.

37. Further, at the time of the telephone calls, Councillor Watkins had been a Council representative on the Health Board for more than 2 years. It was inappropriate for Councillor Watkins to have made this statement, advocating for individual patients in such a way does not appear to form part of her role (see paragraph 23). Councillor Watkins accepted at interview that she should not have said she was “acting in the capacity of sitting on the Health Board”.

38. I do not accept that Councillor Watkins was acting “in the moment” when she made her complaint to the Health Board. Councillor Watkins’ complaint was made 13 days after the telephone calls, by which time Councillor Watkins would have had significant opportunity to reflect on the matter.

## Did Councillor Watkins exaggerate the behaviour of the Practice staff when making her complaint to the Health Board?

39. It is of concern that, despite the call recordings reflecting that the Practice adhered to its procedures and its staff were firm but remained polite and courteous to Councillor Watkins, Councillor Watkins' complaint indicated that Mrs Simmons and Ms Dowsell were unhelpful and had a poor attitude. Councillor Watkins' complaint also suggested that the Practice did not contact the patient which it clearly did that day.

40. Councillor Watkins said that she "may have come on too strong" in her complaint that Mrs Simmons and Ms Dowsell were "unhelpful, bordering on rude" and "a real barrier". I am of the view that Councillor Watkins' comments were unfair and untrue. Councillor Watkins is in a position of some authority with the Health Board and therefore her comments would have carried considerable weight. It is fortunate that the Practice was able to retain the call recordings. It appears to me that the complaint to the Health Board was punitive action because the Practice did not defer to Councillor Watkins and act as she would have liked it to.

## Conclusions

41. Members are bound by the full extent of the Code of Conduct when they act, claim to act or give the impression that they are acting in the role of member or as a representative of their authority.

42. I am satisfied that Councillor Watkins was acting in her capacity as a Councillor when she contacted the Practice, and when she made her complaint to the Health Board, as she introduced herself at the start of the initial telephone call as "Councillor Joan Watkins" and said that she sat on the Health Board. She said she was acting in her capacity as sitting on the Health Board in her second telephone call to the Practice. Councillor Watkins' complaint to the Health Board was sent from her Council email account and signed off as "Joan Watkins Cllr". In any event, paragraph 7(a) of the Code of Conduct applies to members at all times.

43. Whilst it is positive that Councillor Watkins offered to make an apology to the Practice during the interview, she has had ample opportunity to do so since her contact with the Practice. Moreover, she does not require direction from me to make such an apology.

44. Councillor Watkins said that her only intention in contacting the Practice was to try and help an elderly patient. Whilst I accept that Councillor Watkins was trying to be helpful, in the telephone calls she was forceful in wanting to speak to the on-call Doctor and initially refused to provide any details as to who she was acting on behalf of or what the purpose of her call was. She also said that she would approach the Chief Executive of the Health Board regarding the Practice's refusal to put her through to the on-call Doctor, despite being informed that the Doctor was dealing with the patient's issues. It is difficult to see how Councillor Watkins' comments were helpful to either the Practice or the patient at the time. Furthermore, whilst I understand that the patient contacted Councillor Watkins in distress, it is unlikely that conjunctivitis (see paragraph 18) could have been considered an urgent medical matter.<sup>23</sup> I am of the view that Councillor Watkins attempted to use her position to seek an advantage for her constituent over other patients of the Practice, whose needs may have been more urgent, and that her actions on 7 August were suggestive of a breach of paragraph 7(a) of the Code of Conduct.

45. It is an aggravating factor that this incident occurred during the ongoing coronavirus Covid-19 outbreak, when healthcare providers were facing unprecedented pressures. Councillor Watkins said that she had issues with the Practice relating to her own healthcare prior to this incident, which, in my view, may have influenced her behaviour towards the Practice. Whilst that may have been the case, as Councillor Watkins was acting in her official position as a member of the Council and its representative on the Health Board during the exchanges, she should have been mindful of the need to act fairly and appropriately in her role. Councillor Watkins' attempts to use her position as a Council representative on the Health Board to encourage the Practice staff to act outside of its procedures is suggestive of a breach of paragraph 7(a) of the Code of Conduct.

46. Councillor Watkins' complaint to the Health Board contained information which was critical of the Practice staff and did not accurately reflect the content of the telephone conversations. I am of the view that the complaint was an attempt by Councillor Watkins to use her position in the Health Board to undermine the actions of the Practice and create a disadvantage for it and that her actions were suggestive of a breach of paragraph 7(a) of the Code of Conduct.

---

<sup>23</sup> Appendix 15

## Finding

47. My finding under section 69 of the Local Government Act 2000 is that my report on this investigation should be referred to the Monitoring Officer of the Council for consideration by its Standards Committee.



**Nick Bennett**  
Ombudsman

13 July 2021

## Index to Appendices

Appendix 1	The complaint
Appendix 2	The Council's Code of Conduct
Appendix 3	Councillor Watkins' Acceptance of Office
Appendix 4	Investigation start letter to Councillor Watkins
Appendix 5	Information from the Council's Monitoring Officer
Appendix 6	Information from the Health Board
Appendix 7	Witness Statement and additional information – Mrs Perkins
Appendix 8	Witness Statement – Ms Helen Dowsell
Appendix 9	Witness Statement – Mrs Leanne Elizabeth Simmons
Appendix 10	Transcript of interview with Councillor Watkins
Appendix 11	Extracts from my guidance
Appendix 12	Transcript of Councillor Watkins' telephone calls to the Practice
Appendix 13	Councillor Watkins' email – 14 October 2020
Appendix 14	Councillor Watkins' email – 7 July 2021
Appendix 15	NHS Guidance – Conjunctivitis

Public Services Ombudsman for Wales  
1 Ffordd yr Hen Gae  
Pencoed  
CF35 5LJ

Tel: 01656 641150  
Fax: 01656 641199  
Email: [ask@ombudsman-wales.org.uk](mailto:ask@ombudsman-wales.org.uk)  
Follow us on Twitter: @OmbudsmanWales

# APPENDIX 1

**Complaint Reference: 3YFV7P4M**

---

## Your details

---

### Title

Mrs

### Forename(s)

Caroline

### Surname

Perkins

### House name/number and Street

Cadoc House

### Address Line

2

High Street

### Address Line

3

Caerleon

### Postcode

NP18 1AZ

### Country

United Kingdom

### Phone

01633849200

### Mobile

01633849200

### Email

caroline.perkins@wales.nhs.uk

**How would you prefer us to contact you?**

Email

**Are you filling this form out on behalf of someone else?**

No

**Please choose your preferred language for communicating with us.**

English

## Your Complaint

---

**Organisation**

**Type**

Community Council

**Organisation - please select from the list. If your complaint is about more than one organisation, you will need to submit a separate complaint for each one. If the body you are complaining about does not appear in the list below please telephone us on 0300 7900203 or email [ask@ombudsman-wales.org.uk](mailto:ask@ombudsman-wales.org.uk)**

Newport Town Council

**Councillor Name**

Joan Watkins

**Explain how the individual has breached the Code of Conduct.**

**Please say which or refer to the paragraphs of the "Code" you think the member has breached.**

**Please also include the names and contact details of any witnesses relevant to your complaint.**

We want to report / make a complaint about this councillor. She contacted the practice by telephone on the evening of 07 August 2020 to discuss a patient stating 'this is Councillor Joan Watins' (please see receptionist statement below). We hold no consent for this councillor to discuss any patient. This councillor has abused her position, attempted to circumvent clear data protection and breach GDPR, and harassment of practice staff. She telephoned to enquire about a patient and was very unpleasant to the receptionist taking the call which is unacceptable. This is not how patient advocacy should be conducted. The Councillor stated many times that she sits on the Aneurin Bevan Health Board. Trying to obtain information about a patient stating 'I am doing this on he capacity of sitting on the health board' is a breach of position. Using her title to demand to speak to the On call Doctor is also inappropriate and dangerous. It has been communicated to us that she has been posting

inappropriate comments on social media (FB Open Caerleon) about the practice but unfortunately cannot see the posts anymore. I have listened to the recorded telephone calls from the patient and can confirm all the above where the patient did try to obtain information about a patients consultation with a Doctor. She also threatened us with the Chief Executive of the health board. Again pure abuse of power. The patient did not require urgent medical attention. x2 Telephone calls uploaded to you From: Leanne Simmons (Caerleon - Isca Medical Centre)

## Supporting Documents

---

- c7d9e3bd97a2e6f444f4575d792f1591.wav
- 885de7e6f10689324851b1e8ac3340cb.wav

## Privacy

---

I understand that my complaint form and all material supplied with it (including my identity) will be disclosed in full to the member who I am making a complaint against and that this information may become public knowledge. This information will also usually be disclosed to the Monitoring Officer and Clerk (where applicable) of the appropriate Council.

I also confirm that I am prepared to give spoken evidence in support of my complaint to the authority's Standards Committee, or any case tribunal which may be appointed to consider any report which the Ombudsman may issue if he decides to investigate my complaint.

### Privacy

Authorisation given

# APPENDIX 2

# NEWPORT CITY COUNCIL

## CODE OF CONDUCT

### PART 1 INTERPRETATION

1.—(1) In this code —

"co-opted member" ("*aelod cyfetholedig*"), in relation to a relevant authority, means a person who is not a member of the authority but who —

(a) is a member of any committee or sub-committee of the authority, or

(b) is a member of, and represents the authority on, any joint committee or joint sub-committee of the authority, and who is entitled to vote on any question which falls to be decided at any meeting of that committee or subcommittee;

"meeting" ("*cyfarfod*") means any meeting —

(a) of the relevant authority,

(b) of any executive or board of the relevant authority,

(c) of any committee, sub-committee, joint committee or joint sub-committee of the relevant authority or of any such committee, sub-committee, joint committee or joint sub-committee of any executive or board of the authority, or

(d) where members or officers of the relevant authority are present other than a meeting of a political group constituted in accordance with regulation 8 of the Local Government (Committees and Political Groups) Regulations 1990,

and includes circumstances in which a member of an executive or board or an officer acting alone exercises a function of an authority;

"member" ("*aelod*") includes, unless the context requires otherwise, a co-opted member;

"registered society" means a society, other than a society registered as a credit union, which is —

(a) a registered society within the meaning given by section 1(1) of the Co-operative and Community Benefit Societies Act 2014; or

(b) a society registered or deemed to be registered under the Industrial and Provident Societies Act (Northern Ireland) 1969;

"register of members' interests" ("*cofrestr o fuddiannau'r aelodau*") means the register established and maintained under section 81 of the Local Government Act 2000;

"relevant authority" ("*awdurdod perthnasol*") means—

(a) a county council,

(b) a county borough council,

(c) a community council,

(d) a fire and rescue authority constituted by a scheme under section 2 of the Fire and Rescue Services Act 2004 or a scheme to which section 4 of that Act applies,

(e) a National Park authority established under section 63 of the Environment Act 1995;

"you" ("*chi*") means you as a member or co-opted member of a relevant authority; and

"your authority" ("*eich awdurdod*") means the relevant authority of which you are a member or co-opted member.

(2) In relation to a community council—

(a) "proper officer" ("*swyddog priodol*") means an officer of that council within the meaning of section 270(3) of the Local Government Act 1972; and

(b) "standards committee" ("*pwyllgor safonau*") means the standards committee of the county or county borough council which has functions in relation to the community council for which it is responsible under section 56(1) and (2) of the Local Government Act 2000.

## **PART 2 GENERAL PROVISIONS**

2.—(1) Save where paragraph 3(a) applies, you must observe this code of conduct —

(a) whenever you conduct the business, or are present at a meeting, of your authority;

(b) whenever you act, claim to act or give the impression you are acting in the role of member to which you were elected or appointed;

(c) whenever you act, claim to act or give the impression you are acting as a representative of your authority; or

(d) at all times and in any capacity, in respect of conduct identified in paragraphs 6(1)(a) and 7.

(2) You should read this code together with the general principles prescribed under section 49(2) of the Local Government Act 2000 in relation to Wales.

3. Where you are elected, appointed or nominated by your authority to serve —

(a) on another relevant authority, or any other body, which includes a Local Health Board you must, when acting for that other authority or body, comply with the code of conduct of that other authority or body; or

(b) on any other body which does not have a code relating to the conduct of its members, you must, when acting for that other body, comply with this code of conduct, except and insofar as it conflicts with any other lawful obligations to which that other body may be subject.

4. You must —

(a) carry out your duties and responsibilities with due regard to the principle that there should be equality of opportunity for all people, regardless of their gender, race, disability, sexual orientation, age or religion;

(b) show respect and consideration for others;

(c) not use bullying behaviour or harass any person; and

(d) not do anything which compromises, or which is likely to compromise, the impartiality of those who work for, or on behalf of, your authority.

5. You must not —

(a) disclose confidential information or information which should reasonably be regarded as being of a confidential nature, without the express consent of a person authorised to give such consent, or unless required by law to do so;

(b) prevent any person from gaining access to information to which that person is entitled by law.

**6.—(1) You must —**

(a) not conduct yourself in a manner which could reasonably be regarded as bringing your office or authority into disrepute;

(b) report, whether through your authority's confidential reporting procedure or direct to the proper authority, any conduct by another member or anyone who works for, or on behalf of, your authority which you reasonably believe involves or is likely to involve criminal behaviour (which for the purposes of this paragraph does not include offences or behaviour capable of punishment by way of a fixed penalty);

(c) report to your authority's monitoring officer any conduct by another member which you reasonably believe breaches this code of conduct;

(d) not make vexatious, malicious or frivolous complaints against other members or anyone who works for, or on behalf of, your authority.

(2) You must comply with any request of your authority's monitoring officer, or the Public Services Ombudsman for Wales, in connection with an investigation conducted in accordance with their respective statutory powers.

**7. You must not —**

(a) in your official capacity or otherwise, use or attempt to use your position improperly to confer on or secure for yourself, or any other person, an advantage or create or avoid for yourself, or any other person, a disadvantage;

(b) use, or authorise others to use, the resources of your authority —

(i) imprudently;

(ii) in breach of your authority's requirements;

(iii) unlawfully;

(iv) other than in a manner which is calculated to facilitate, or to be conducive to, the discharge of the functions of the authority or of the office to which you have been elected or appointed;

(v) improperly for political purposes; or

(vi) improperly for private purposes.

**8. You must —**

(a) when participating in meetings or reaching decisions regarding the business of your authority, do so on the basis of the merits of the circumstances involved and in the public interest having regard to any relevant advice provided by your authority's officers, in particular by —

(i) the authority's head of paid service;

(ii) the authority's chief finance officer;

(iii) the authority's monitoring officer;

(iv) the authority's chief legal officer (who should be consulted when there is any doubt as to the authority's power to act, as to whether the action proposed lies within the policy framework agreed by the authority or where the legal consequences of action or failure to act by the authority might have important repercussions);

(b) give reasons for all decisions in accordance with any statutory requirements and any reasonable additional requirements imposed by your authority.

**9. You must —**

(a) observe the law and your authority's rules governing the claiming of expenses and allowances in connection with your duties as a member;

(b) avoid accepting from anyone gifts, hospitality (other than official hospitality, such as a civic reception or a working lunch duly authorised by your authority), material benefits or services for yourself or any person which might place you, or reasonably appear to place you, under an improper obligation.

## **PART 3 INTERESTS**

### **Personal Interests**

**10.—**(1) You must in all matters consider whether you have a personal interest, and whether this code of conduct requires you to disclose that interest.

(2) You must regard yourself as having a personal interest in any business of your authority if —

(a) it relates to, or is likely to affect —

(i) any employment or business carried on by you;

(ii) any person who employs or has appointed you, any firm in which you are a partner or any company for which you are a remunerated director;

(iii) any person, other than your authority, who has made a payment to you in respect of your election or any expenses incurred by you in carrying out your duties as a member;

(iv) any corporate body which has a place of business or land in your authority's area, and in which you have a beneficial interest in a class of securities of that body that exceeds the nominal value of £25,000 or one hundredth of the total issued share capital of that body;

(v) any contract for goods, services or works made between your authority and you or a firm in which you are a partner, a company of which you are a remunerated director, or a body of the description specified in sub-paragraph (iv) above;

(vi) any land in which you have a beneficial interest and which is in the area of your authority;

(vii) any land where the landlord is your authority and the tenant is a firm in which you are a partner, a company of which you are a remunerated director, or a body of the description specified in subparagraph (iv) above;

(viii) any body to which you have been elected, appointed or nominated by your authority;

(ix) any —

(aa) public authority or body exercising functions of a public nature;

(bb) company, registered society, charity, or body directed to charitable purposes;

(cc) body whose principal purposes include the influence of public opinion or policy;

(dd) trade union or professional association; or

(ee) private club, society or association operating within your authority's area,

in which you have membership or hold a position of general control or management;

(x) any land in your authority's area in which you have a licence (alone or jointly with others) to occupy for 28 days or longer;

*[Note: subparagraph (b) is omitted.]*

(c) a decision upon it might reasonably be regarded as affecting —

(i) your well-being or financial position, or that of a person with whom you live, or any person with whom you have a close personal association;

(ii) any employment or business carried on by persons as described in 10(2)(c)(i);

(iii) any person who employs or has appointed such persons described in 10(2)(c)(i), any firm in which they are a partner, or any company of which they are directors;

(iv) any corporate body in which persons as described in 10(2)(c)(i) have a beneficial interest in a class of securities exceeding the nominal value of £5,000; or

(v) any body listed in paragraphs 10(2)(a)(ix)(aa) to (ee) in which persons described in 10(2)(c)(i) hold a position of general control or management,

to a greater extent than the majority of—

(aa) in the case of an authority with electoral divisions or wards, other council tax payers, rate payers or inhabitants of the electoral division or ward, as the case may be, affected by the decision; or

(bb) in all other cases, other council tax payers, ratepayers or inhabitants of the authority's area.

### **Disclosure of Personal Interests**

**11.—(1)** Where you have a personal interest in any business of your authority and you attend a meeting at which that business is considered, you must disclose orally to that meeting the existence and nature of that interest before or at the commencement of that consideration, or when the interest becomes apparent.

(2) Where you have a personal interest in any business of your authority and you make —

(a) written representations (whether by letter, facsimile or some other form of electronic communication) to a member or officer of your authority regarding that business, you should include details of that interest in the written communication; or

(b) oral representations (whether in person or some form of electronic communication) to a member or officer of your authority you should disclose the interest at the commencement of such representations, or when it becomes apparent to you that you have such an interest, and confirm the representation and interest in writing within 14 days of the representation.

(3) Subject to paragraph 14(1)(b) below, where you have a personal interest in any business of your authority and you have made a decision in exercising a function of an executive or board, you must in relation to that business ensure that any written statement of that decision records the existence and nature of your interest.

(4) You must, in respect of a personal interest not previously disclosed, before or immediately after the close of a meeting where the disclosure is made pursuant to sub-paragraph 11(1), give written notification to your

authority in accordance with any requirements identified by your authority's monitoring officer, or in relation to a community council, your authority's proper officer from time to time but, as a minimum containing —

- (a) details of the personal interest;
- (b) details of the business to which the personal interest relates; and
- (c) your signature.

(5) Where you have agreement from your monitoring officer that the information relating to your personal interest is sensitive information, pursuant to paragraph 16(1), your obligations under this paragraph 11 to disclose such information, whether orally or in writing, are to be replaced with an obligation to disclose the existence of a personal interest and to confirm that your monitoring officer has agreed that the nature of such personal interest is sensitive information.

(6) For the purposes of sub-paragraph (4), a personal interest will only be deemed to have been previously disclosed if written notification has been provided in accordance with this code since the last date on which you were elected, appointed or nominated as a member of your authority.

(7) For the purposes of sub-paragraph (3), where no written notice is provided in accordance with that paragraph you will be deemed as not to have declared a personal interest in accordance with this code.

### **Prejudicial Interests**

**12.—**(1) Subject to sub-paragraph (2) below, where you have a personal interest in any business of your authority you also have a prejudicial interest in that business if the interest is one which a member of the public with knowledge of the relevant facts would reasonably regard as so significant that it is likely to prejudice your judgement of the public interest.

(2) Subject to sub-paragraph (3), you will not be regarded as having a prejudicial interest in any business where that business—

(a) relates to —

- (i) another relevant authority of which you are also a member;
- (ii) another public authority or body exercising functions of a public nature in which you hold a position of general control or management;
- (iii) a body to which you have been elected, appointed or nominated by your authority;
- (iv) your role as a school governor (where not appointed or nominated by your authority) unless it relates particularly to the school of which you are a governor;
- (v) your role as a member of a Local Health Board where you have not been appointed or nominated by your authority;

(b) relates to —

- (i) the housing functions of your authority where you hold a tenancy or lease with your authority, provided that you do not have arrears of rent with your authority of more than two months, and provided that those functions do not relate particularly to your tenancy or lease;
- (ii) the functions of your authority in respect of school meals, transport and travelling expenses, where you are a guardian, parent, grandparent or have parental responsibility (as defined in section 3 of the Children Act 1989) of a child in full time education, unless it relates particularly to the school which that child attends;

(iii) the functions of your authority in respect of statutory sick pay under Part XI of the Social Security Contributions and Benefits Act 1992, where you are in receipt of, or are entitled to the receipt of such pay from your authority;

(iv) the functions of your authority in respect of an allowance or payment made in accordance with the provisions of Part 8 of the Local Government (Wales) Measure 2011, or an allowance or pension provided under section 18 of the Local Government and Housing Act 1989;

(c) your role as a community councillor in relation to a grant, loan or other form of financial assistance made by your community council to community or voluntary organisations up to a maximum of £500.

(3) The exemptions in subparagraph (2)(a) do not apply where the business relates to the determination of any approval, consent, licence, permission or registration.

### **Overview and Scrutiny Committees**

**13.** You also have a prejudicial interest in any business before an overview and scrutiny committee of your authority (or of a sub-committee of such a committee) where—

(a) that business relates to a decision made (whether implemented or not) or action taken by your authority's executive, board or another of your authority's committees, sub-committees, joint committees or joint subcommittees; and

(b) at the time the decision was made or action was taken, you were a member of the executive, board, committee, sub-committee, joint-committee or joint sub-committee mentioned in sub-paragraph (a) and you were present when that decision was made or action was taken.

### **Participation in Relation to Disclosed Interests**

**14.—**(1) Subject to sub-paragraphs (2), (2A), (3) and (4), where you have a prejudicial interest in any business of your authority you must, unless you have obtained a dispensation from your authority's standards committee —

(a) withdraw from the room, chamber or place where a meeting considering the business is being held—

(i) where sub-paragraph (2) applies, immediately after the period for making representations, answering questions or giving evidence relating to the business has ended and in any event before further consideration of the business begins, whether or not the public are allowed to remain in attendance for such consideration; or

(ii) in any other case, whenever it becomes apparent that that business is being considered at that meeting;

(b) not exercise executive or board functions in relation to that business;

(c) not seek to influence a decision about that business;

(d) not make any written representations (whether by letter, facsimile or some other form of electronic communication) in relation to that business; and

(e) not make any oral representations (whether in person or some form of electronic communication) in respect of that business or immediately cease to make such oral representations when the prejudicial interest becomes apparent.

(2) Where you have a prejudicial interest in any business of your authority you may attend a meeting but only for the purpose of making representations, answering questions or giving evidence relating to the business, provided that the public are also allowed to attend the meeting for the same purpose, whether under a statutory right or otherwise.

(2A) Where you have a prejudicial interest in any business of your authority you may submit written representations to a meeting relating to that business, provided that the public are allowed to attend the meeting for the purpose of making representations, answering questions or giving evidence relating to the business, whether under statutory right or otherwise.

(2B) When submitting written representations under sub-paragraph (2A) you must comply with any procedure that your authority may adopt for the submission of such representations.

(3) Sub-paragraph (1) does not prevent you attending and participating in a meeting if —

(a) you are required to attend a meeting of an overview or scrutiny committee, by such committee exercising its statutory powers; or

(b) you have the benefit of a dispensation provided that you —

(i) state at the meeting that you are relying on the dispensation; and

(ii) before or immediately after the close of the meeting give written notification to your authority containing —

(aa) details of the prejudicial interest;

(bb) details of the business to which the prejudicial interest relates;

(cc) details of, and the date on which, the dispensation was granted; and

(dd) your signature.

(4) Where you have a prejudicial interest and are making written or oral representations to your authority in reliance upon a dispensation, you must provide details of the dispensation within any such written or oral representation and, in the latter case, provide written notification to your authority within 14 days of making the representation.

## **PART 4 THE REGISTER OF MEMBERS' INTERESTS**

### **Registration of Personal Interests**

**15.—**(1) Subject to sub-paragraph (4), you must, within 28 days of—

(a) your authority's code of conduct being adopted or the mandatory provisions of this model code being applied to your authority; or

(b) your election or appointment to office (if that is later),

register your personal interests, where they fall within a category mentioned in paragraph 10(2)(a), in your authority's register of members' interests by providing written notification to your authority's monitoring officer.

(2) Subject to sub-paragraph (4), you must, within 28 days of becoming aware of any new personal interest falling within a category mentioned in paragraph 10(2)(a), register that new personal interest in your authority's register of members' interests by providing written notification to your authority's monitoring officer.

(3) Subject to sub-paragraph (4), you must, within 28 days of becoming aware of any change to a registered personal interest falling within a category mentioned in paragraph 10(2)(a), register that change in your authority's register of members' interests by providing written notification to your authority's monitoring officer, or in the case of a community council to your authority's proper officer.

(4) Sub-paragraphs (1), (2) and (3) do not apply to sensitive information determined in accordance with paragraph 16(1).

(5) Sub-paragraphs (1) and (2) do not apply if you are a member of a relevant authority which is a community council when you act in your capacity as a member of such an authority.

(6) You must, when disclosing a personal interest in accordance with paragraph 11 for the first time, register that personal interest in your authority's register of members' interests by providing written notification to your authority's monitoring officer, or in the case of a community council to your authority's proper officer.

### **Sensitive information**

**16.**—(1) Where you consider that the information relating to any of your personal interests is sensitive information, and your authority's monitoring officer agrees, you need not include that information when registering that interest, or, as the case may be, a change to the interest under paragraph 15.

(2) You must, within 28 days of becoming aware of any change of circumstances which means that information excluded under sub-paragraph (1) is no longer sensitive information, notify your authority's monitoring officer, or in relation to a community council, your authority's proper officer asking that the information be included in your authority's register of members' interests.

(3) In this code, "sensitive information" ("*gwybodaeth sensitif*") means information whose availability for inspection by the public creates, or is likely to create, a serious risk that you or a person who lives with you may be subjected to violence or intimidation.

### **Registration of Gifts and Hospitality**

**17.** You must, within 28 days of receiving any gift, hospitality, material benefit or advantage above a value specified in a resolution of your authority, provide written notification to your authority's monitoring officer, or in relation to a community council, to your authority's proper officer of the existence and nature of that gift, hospitality, material benefit or advantage.

# APPENDIX 3

LOCAL GOVERNMENT ACT 2000, SECTION 52

UNDERTAKING BY MEMBER TO COMPLY

WITH CODE OF CONDUCT

---

I, Joan Mary Watkins [Please state full name]

being a Member of NEWPORT CITY COUNCIL ("the Council") HEREBY UNDERTAKE that in performance of my functions as a Member of the Council I will observe the Authority's Code of Conduct for the time being adopted under Section 51 of the Local Government Act 2000.

I acknowledge that I have received and have read a copy of the Authority's Code of Conduct.

Not For Public Release

Signed: \_\_\_\_\_

Dated: 8 1 5 2017

# APPENDIX 4

Our ref: 202001914/LMA/LS

Ask for: Mr Leigh McAndrew

 01656 644216

Date: 6 October 2020

 Leigh.McAndrew  
@ombudsman.wales

**PERSONAL & CONFIDENTIAL**

Councillor Joan Watkins  
Lavender House  
13 Eastfield Way  
Caerleon  
NEWPORT  
NP18 3EU

Dear Councillor Watkins

**Code of Conduct complaint made by Mrs Caroline Perkins**

The Ombudsman has decided to investigate the complaint made against you by Mrs Perkins, of which we informed you care of Newport City Council Civic Centre on 7 September **2020**.

Further to our telephone conversation of today, I understand that you are yet to receive that notification. I therefore enclose the correspondence which was previously sent to you care of the Civic Centre regarding this matter. I also enclose a CD which includes recordings of 2 telephone calls.

I have been asked to carry out the investigation.

The complaint will be investigated on the basis that there may have been a failure to comply with the following paragraphs of the Code of Conduct (“the Code”):

- 7. You must not —
  - (a) in your official capacity or otherwise, use or attempt to use your position improperly to confer on or secure for yourself, or any other person, an advantage or create or avoid for yourself, or any other person, a disadvantage.

Page 1 of 2

You need not respond to this letter if you do not wish to. However, any comments made at this stage will be taken into consideration. You should bear in mind that your comments may also be disclosed to the complainant or used in any subsequent proceedings.

If my investigation finds that there is a case to answer, I will in due course put to you the evidence I have found, and you may be invited to interview to answer any questions which appear relevant in the light of it.

I have written to notify the Monitoring Officer of Newport City Council of this investigation and have asked for any relevant information.

The Ombudsman's investigations are conducted in private. You are therefore asked not to contact or discuss the details of the complaint with any potential witnesses or persons who may be involved in the matter, whether directly or indirectly, to avoid any prejudice to the investigation. Conduct of this kind may amount to a breach of the Code.

If you consider that specific information should be considered, or witnesses should be contacted by the Ombudsman as part of this investigation, please let me know and I will consider your request in light of the remit of the Ombudsman's investigation.

### **Meeting your needs during our investigation**

Please let us know if you need us to adapt the way we communicate with you. If anything makes it difficult for you to engage with us during the investigation, for example, if you have a disability, please contact us to explain how this affects you.

We will consider whether your request is reasonable and appropriate in the circumstances. This is because we need to use public money carefully.

Yours sincerely



**Leigh McAndrew**  
Investigation Officer

Enc: Correspondence previously sent care of the Civic Centre on 7 September

Cc: Mr Gareth Price, Monitoring Officer

# APPENDIX 5

**From:** [Price, Gareth \(Head of Law & Regulation\)](#)  
**To:** [Leigh McAndrew](#)  
**Subject:** IN - Monitoring Officer - Information Provided  
**Date:** 23 October 2020 13:46:26  
**Attachments:** [image001.jpg](#)  
[image001.png](#)

---

I'm sorry Leigh...I thought these had been sent to you on Monday.

Please find attached:

1. The Council Code of Conduct – adopted on 17<sup>th</sup> May 2016;
2. A copy of Councillor Watkins signed declaration of acceptance of office dated 8<sup>th</sup> May 2017;
3. Councillor Watkins attended training on the Code as part of the Members induction training programme in May 2017. I attach a copy of the handout provided and the slide presentation. If you require copies of any of the other documents included within the Members induction packs, then please let me know;
4. A copy of Councillor Watkins' register of members interests.
5. I confirm that there are no Council files or documents relating to this complaint;
6. I confirm that Councillor Watkins is a Council-appointed representative on the Aneurin Bevan University Health Board. She was appointed to this outside body at the Council Annual General Meeting in May 2018 and has served on the Health Board ever since. This is declared in her register of members interests.

Please let me know if you require anything further.

Regards.

**Gareth Price**

Pennaeth y Gyfraith a Rheoleiddio / Head of Law & Regulation  
Y Gyfraith a Rheoleiddio / Law & Regulation  
Cyngor Dinas Casnewydd / Newport City Council  
Tel: 01633210726

---

**From:** Leigh McAndrew <Leigh.McAndrew@ombudsman-wales.org.uk>  
**Sent:** 23 October 2020 09:31  
**To:** Price, Gareth (Head of Law & Regulation) <Gareth.Price@newport.gov.uk>  
**Subject:** Complaint made to the Ombudsman - 202001914

Dear Mr Price

**Reference: 202001914**

Further to the emails below, it does not appear that the requested information has been received. Please would you provide me with an update? Thank you.

Yours sincerely

# APPENDIX 6

**From:** [Leigh McAndrew](#)  
**To:** [Work Pro](#)  
**Subject:** FW: Complaint made to the Ombudsman - 202001914 [REF/LV/59/Vq/GN/]  
**Date:** 20 November 2020 10:07:14

---

**From:** ABB\_Concerns Review\_Team (Aneurin Bevan UHB - Putting Things Right)  
<ABB.ConcernsReviewTeam@wales.nhs.uk>  
**Sent:** 19 November 2020 15:29  
**To:** Leigh McAndrew <Leigh.McAndrew@ombudsman-wales.org.uk>; ABB\_Concerns Review\_Team (Aneurin Bevan UHB - Putting Things Right) <ABB.ConcernsReviewTeam@wales.nhs.uk>  
**Subject:** RE: Complaint made to the Ombudsman - 202001914 [REF/LV/59/Vq/GN/]

Dear Mr McAndrew

I have attached the email thread between Mrs Watkins and the Primary Care Team.

Some information has been redacted however, as it relates to a separate matter and not to Mrs Griffiths' case.

I hope you find this helpful but please do not hesitate to come back to me if you require anything further.

Many thanks

Emma

[Emma Evans](#)  
Ombwdsmon Gwasanaethau Cyhoeddus Cymru Swyddog Cymorth/ Public Services  
Ombudsman for Wales Support Officer  
Bwrdd Iechyd Lleol Prifysgol Aneurin Bevan /Aneurin Bevan University Health Board  
Pencadlys/Headquarters  
Ysbyty Sant Cadog/St Cadoc's Hospital  
Ffordd y Lodj/Lodge Road Caerllion/Caerleon  
Casnewydd/Newport  
NP18 3XQ  
Ffôn/Tel: 01633 436865 (Ext 56865)  
E-bost /E-mail: [Emma.Evans4@wales.nhs.uk](mailto:Emma.Evans4@wales.nhs.uk)



**From:** [Jodie Collins \(Aneurin Bevan UHB - Primary Care Unit\)](#)  
**To:** [Watkins, Joan \(Elected Member\)](#)  
**Subject:** FW: Two issues of complaint  
**Date:** 05 October 2020 14:06:19

---

Dear Councillor Watkins,

Thank you for your email. I am sorry that you feel the response provided did not address your concerns fully.

The Practice Manager, Caroline Perkins, Isca Medical Centre was contacted to discuss your concerns regarding their failure to discuss Mrs Griffiths care with you, despite you advising that you had her permission to do so.

The Practice Manager has advised that the practice complies with data protection and General Data Protection Regulation (GDPR) rules and the following process is followed when an individual rings or attends the practice to discuss a patients medical needs:

Initially, the practice checks whether there is a signed consent form held in the patients electronic medical record giving permission for other individual(s) to communicate directly with the practice on behalf of the patient. Where this is not in place the practice would ask the person calling if the patient was with them at the time of the call, where this is the case, the staff would ask to briefly speak to the patient whereby they would make 3 checks of personal identifiable information with the patient. This would include full name, date of birth and home address including postcode. Once the staff member was confident that the information matched the practice records they would ask the patient for their verbal consent to discuss their care with the person calling.

The Practice Manager advised that as there was no signed consent form in place prior to your contact, and as Mr Griffiths was not with you at the time of the call, they were unable to discuss her care with you. Subsequently, the Practice Manager advised that the staff member informed you that they would contact Mrs Griffiths directly, which they did.

We appreciate that there may have been mitigating factors as to why Mrs Griffiths was unwilling to be seen by the Nurse Practitioner, and are sorry that she had a prior experience that contributed to this. The Practice Manager advised that Mrs Griffiths' request for an appointment was considered by the duty GP at the time, who considered a routine appointment clinically appropriate.

[REDACTED]

I hope that this response addresses your concerns raised but if you have any further questions or concerns, please do not hesitate to contact a member of the Primary Care Team on 01495 241232.

Many Thanks

Jodie - Senior Primary Care Manager (Dental and Optometry)

[Dylech gyfeirio unrhyw ymholiadau sy'n ymwneud â COVID 19 at PrimaryCare.CoV.ABB@wales.nhs.uk](#)

**Mae epidemioleg y coronafeirws yn datblygu'n gyflym.  
Dylech bob amser gyfeirio at ganllawiau ar-lein (linc isod) a diffiniad achos ar**

**gyfer achos posibl.**

<https://www.gov.uk/government/publications/wuhan-novel-coronavirus-initial-investigation-of-possible-cases>

-

Please direct any queries relating to COVID 19 to [PrimaryCare.CoV.ABB@wales.nhs.uk](mailto:PrimaryCare.CoV.ABB@wales.nhs.uk)

**The epidemiology of the Novel Coronavirus is developing rapidly.**

**Always refer to online guidance (link below) and case definition for a possible case.**

<https://www.gov.uk/government/publications/wuhan-novel-coronavirus-initial-investigation-of-possible-cases>

Aneurin Bevan University Health Board  
Primary & Community Care Division  
Unit 1 | Uned 1  
Llanarth House | Ty Llanhârth  
Newbridge Gateway | Porth Trecelyn  
Bridge Street | Stryd Y Bont  
Newbridge | Trecelyn  
NP11 5GH

Tel: 01495 241204 / 07896213798

Email: [jodie.collins@wales.nhs.uk](mailto:jodie.collins@wales.nhs.uk)

---

**From:** Watkins, Joan (Elected Member) [<mailto:Joan.Watkins@newport.gov.uk>]

**Sent:** 15 September 2020 19:05

**To:** Jodie Collins (Aneurin Bevan UHB - Primary Care Unit) <[Jodie.Collins@wales.nhs.uk](mailto:Jodie.Collins@wales.nhs.uk)>

**Subject:** RE: Two issues of complaint

Good Afternoon

I am afraid I find this reply somewhat lacking given the Surgery have not been truthful in some of their responses

In terms of Mrs Griffiths I told the Receptionists she was willing to give permission for them to speak with me, both Mrs Griffiths and I are fully cognisant and of the rules around confidentiality, she was happy to give the necessary permission.

I am aware of why she may have declined to see a Nurse Practitioner rather than a GP, sometime last year I happened to meet her in the village here, her eyes looked inflamed and sore when I asked had she seen a doctor she said she had tried that morning but had been referred to the Nurse Practitioner, she stated she knew nothing about eyes and sent her off to the Optician in the village to be seen, she had just been there and been told there were no appointments for a week!!

On the night she asked for my assistance she still was only offered an appointment 10 days hence.

With regard to the notice displayed in the Surgery clearly it has been changed which is good news, the notice I complained of was in place for some time and I saw it myself on more than one occasion. !!

The points I record above support my position that this Surgery has not been entirely truthful and there is a background to why this elderly lady chose not to see a Nurse Practitioner on this recent occasion.

[Redacted content]

Kind Regards Joan Watkins

**From:** Jodie Collins (Aneurin Bevan UHB - Primary Care Unit) [<mailto:Jodie.Collins@wales.nhs.uk>]  
**Sent:** 15 September 2020 09:18  
**To:** Watkins, Joan (Elected Member) <[Joan.Watkins@newport.gov.uk](mailto:Joan.Watkins@newport.gov.uk)>  
**Subject:** FW: Two issues of complaint

Dear Councillor Watkins,

Thank you for your email below outlining the two issues of concern. I apologise for the delay in responding to you, however these concerns have been fully investigated and I will reposed to each below.

In respect of your concerns regarding Mrs Griffiths care, the Practice Manager, Mrs Caroline Perkins of Isca Medical Centre was contacted. She advised that Mrs Griffiths made contact with the practice on 5<sup>th</sup> August where she refused to speak to, or receive treatment from the Advanced Nurse Practitioner as she was not a GP.

You may be aware that due to national GP recruitment issues, the majority of practices have had to adopt a multi-disciplinary team in order to continue to provide the appropriate levels of care to their registered population. Additionally, most practices navigate patients to the most appropriate healthcare professional, based on their clinical need. In this instance, the practice determined that Mrs Griffiths' clinical needs could be met by the Advanced Nurse Practitioner, unfortunately this was not acceptable to Mrs Griffiths who declined care from the Advanced Nurse Practitioner. Dr Davies was consulted and to ensure Mrs Griffiths' needs were met, she was informed to book a routine appointment with a GP, due to the ongoing nature of the problem. The practice advised that Mrs Griffiths was indeed happy with this and accepted the appointment for 19<sup>th</sup> August.

The practice is sorry that you felt their attitude towards you was not acceptable, whilst trying to resolve your constituents concerns. As you are probably aware practices are bound by confidentiality agreements and must comply with relevant data protection legislation General Data Protection Regulation (GDPR) so unfortunately they are unable to provide you with patient information unless patient consent is gained.

In relation to concerns raised by residents regarding the notice displayed in the surgery stating consultations are 10 minutes and only one health issue to be raised at a time. The Practice Manager has provided a copy of the poster, which states;

'routine appointments are 10 minutes in duration, you may wish to discuss several issues at your appointment, therefore, please let the Doctor know this at the beginning of your consultation, this will help plan your consultation time appropriately. Sometimes the Doctor will not be able to deal with all of your problems in one appointment and you may be asked to book another appointment. If you have an emergency appointment, the Doctor will only be able to deal with the most important issues. The Doctor will guide you with regards to further appointment arrangements, if it is not possible to deal with all the problems you wish to discuss in the existing consultation'.

The Practice Manager is happy to deal with any patient queries regarding access or any other aspects of service delivery.



I hope that this response addresses your concerns raised but if you have any further questions or concerns, please do not hesitate to contact a member of the Primary Care Team on 01495 241232.

Yours sincerely

Jodie

Many Thanks

Jodie - Senior Primary Care Manager (Dental and Optometry)

Dylech gyfeirio unrhyw ymholiadau sy'n ymwneud â COVID 19 at [PrimaryCare.CoV.ABB@wales.nhs.uk](mailto:PrimaryCare.CoV.ABB@wales.nhs.uk)

**Mae epidemioleg y coronafeirws yn datblygu'n gyflym.  
Dylech bob amser gyfeirio at ganllawiau ar-lein (linc isod) a diffiniad achos ar gyfer achos posibl.**

<https://www.gov.uk/government/publications/wuhan-novel-coronavirus-initial-investigation-of-possible-cases>

Please direct any queries relating to COVID 19 to [PrimaryCare.CoV.ABB@wales.nhs.uk](mailto:PrimaryCare.CoV.ABB@wales.nhs.uk)

**The epidemiology of the Novel Coronavirus is developing rapidly.**

**Always refer to online guidance (link below) and case definition for a possible case.**

<https://www.gov.uk/government/publications/wuhan-novel-coronavirus-initial-investigation-of-possible-cases>

Aneurin Bevan University Health Board  
Primary & Community Care Division  
Unit 1 | Uned 1  
Llanarth House | Ty Llanhârth  
Newbridge Gateway | Porth Trecelyn  
Bridge Street | Stryd Y Bont  
Newbridge | Trecelyn  
NP11 5GH

Tel: 01495 241204 / 07896213798

Email: [jodie.collins@wales.nhs.uk](mailto:jodie.collins@wales.nhs.uk)

---

**From:** Watkins, Joan (Elected Member)

**Sent:** 20 August 2020 17:18

**To:** [vicky.taylor@wales.nhs.uk](mailto:vicky.taylor@wales.nhs.uk)

**Cc:** [jodie.collins@wales.nhs.uk](mailto:jodie.collins@wales.nhs.uk)

**Subject:** Two issues of complaint

Good Afternoon Ms Taylor,

I recently contacted Tanya Strange re a serious matter of concern in respect of an elderly resident here in Caerleon who also happens to be a member of the Caerleon .Ffrindi Mi Friendship Group which I run

I asked Tanya who at the ABUHB I should address my complaint to. I did this in the capacity of elected member and as Cllr representing the Local Authority on the Stake Hold.er Health Board She copied her response to me into yourself and Ms Jodie Collins, on that basis I expected to hear from you but that has not been the case.

I will now outline my first issue of complaint

On Friday 7<sup>th</sup> August at approximately 5 30 pm, I received a telephone call from a very distressed elderly and frail lady saying she was suffering badly with what seemed to be conjunctivitis and extreme irritation of her eyelids and scalp { I am aware she has had previous issues with redness soreness and pain in her eyes } she was distressed and crying having been told on contacting the surgery she could not be seen until the 19<sup>th</sup> August and was not offered any immediate assistance, she felt the receptionist were unhelpful and indeed acted as a barrier to her getting the help she needed. She rang me in desperation could I help?

I was certainly willing to try and thinking if a prescription could be obtained I would call the surgery and would have been more than willing to take it to Ponthir Pharmacy which I knew was open until 6 30 pm'

I duly rang the surgery explained the situation and asked if I could speak to the duty Doctor, I am aware of confidentiality at all times having been a nurse and midwife for some 42 years prior to retirement I explained the lady in question would if rung give permission for them to speak to

me, frankly they were totally unhelpful and I believe I was met with the same poor attitude that this elderly lady had experienced, I could make no progress on her behalf being told she had an appointment for the 19<sup>th</sup>, that was almost 2 weeks away and here we have an elderly vulnerable lady in pain. These receptionists who may now have the title of Care Navigators acted as a real barrier having in my view no care whatsoever for the plight the lady was in.

I felt distressed myself unable to obtain the care I felt she needed, I also felt disappointed in the least that this could happen.

I am fully aware of the pressures ensuing from the Pandemic and it's effects on GP surgeries but I would mention here that prior to this current situation I have been approached by residents with regard to a large notice displayed prominently in this Isca Surgery stating, 10 minutes only per consultation and only one health issue to be raised at a time.

For the life of me I do not understand how that can be best practice as often the symptoms from one health issue can fall across or be part of another, a fact which can influence treatment and care.

I bring this to your attention as I feel this poor lady did not receive the care she needed, I believe Dr Jones did call her before the surgery closed that evening but the appt on the 19<sup>th</sup> was the only option. pursued

Furthermore it is my view that receptionists should not be acting as barriers to care, yes they may at times have a difficult role but on this occasion I myself found them unhelpful bordering on rude when my intention was only to try and help.

[REDACTED]

My tel contact details are 01633 549608 or 07966086578

Thank you Joan Watkins Cllr

Mae'r Cyngor yn croesawu gohebiaeth yn Gymraeg, Saesneg neu yn y ddwy iaith. Byddwn yn cyfathrebu â chi yn ôl eich dewis. Ni fydd gohebu yn Gymraeg yn arwain at oedi.

The Council welcomes correspondence in English or Welsh or both, and will respond to you according to your preference. Corresponding in Welsh will not lead to delay.

# APPENDIX 7

## WITNESS STATEMENT

Statement of: Mrs Caroline Perkins

Address: Isca Medical Practice, Cadoc House, High Street,  
Caerleon, NP18 1AZ

Age if under 18: Over 18

Occupation/Position: Practice Manager, Isca Medical Practice

---

1. I, Mrs Caroline Perkins of Isca Medical Practice, Cadoc House, High Street, Caerleon, NP18 1AZ, make this statement in connection with a complaint made to the Public Services Ombudsman for Wales that Councillor Joan Watkins of Newport City Council has breached the Code of Conduct for elected members. The facts in this statement come from my personal knowledge.
2. I have been the Practice Manager at Isca Medical Practice for 6 months, but with 17 years' previous experience within Primary Care.
3. I was informed of Councillor Watkins' telephone calls of 7 August 2020 on the next working day, 10 August 2020. I was told that Councillor Watkins was demanding and had abused her position to gain information regarding a patient (Maria Griffiths) by stating she was a Councillor and member of the Local Health Board.
4. When I listened to the telephone call recordings, I thought that Councillor Watkins was rude and demanding to staff. She demonstrated an abuse of her position and breached GDPR by trying to use her position to gain information without documented consent from the patient.
5. The patient, Maria Griffiths, did not give the Practice authorisation or consent for Councillor Watkins to advocate on her behalf.
6. There was no medical emergency regarding Maria Griffiths. The doctor stated that she was provided with routine skin and eye care advice. It was not a medical emergency as the Practice was aware of the routine skin problem.
7. Councillor Watkins was very demanding, but as reception staff are not trained in clinical triage they appointed a call back for the patient herself and explained this to Councillor Watkins, who insisted that the on call doctor telephone her back to discuss the patient. The outcome by the doctor was

that there was no care or treatment required for that day as the request was for a routine ongoing problem, but a call back with the patient was arranged the same day.

8. We contacted Newport City Council about our concerns and the Councillor's conduct, who advised we contact the Ombudsman. As Councillor Watkins tried to abuse the position she holds at Aneurin Bevan University Health Board we reported the Councillor to them too. Further to this, the Councillor was contacted by yourselves following our complaint. After some time had passed, the Councillor (not the patient) contacted the Health Board and made a complaint about the member of reception that took her call. We feel, where we responded to the Health Board, that the Councillor sent this complaint about the practice as a retaliation complaint after receiving our complaint about her misconduct.
9. The complaint was received from Angela Dawn Williams of the Health Board. I do not have any consent from Maria Griffiths relating to the complaint made by the Councillor (for her to act on Maria Griffiths' behalf). I am unsure if the Health Board attained this prior to forwarding the complaint to us, but it is usually acquired and attached, which it was not to the Practice.
10. I replied to the Health Board with our version of the telephone call, defending the reception member, highlighting that she was commended for the way she handled the call with professionalism, and for her GDPR diligence against the rudeness of the Councillor. I also forwarded them a copy of the complaint we sent to the Ombudsman against the Councillor.
11. The Practice policy and process for dealing with patient advocates is for patients and their advocate to complete a consent for information form, which highlights what information can be gained or requested. Please note that this does not include divulging medical history. If the form is yet to be completed, we ask the patient to be present with their advocate when acting on their behalf, where we ask for patient-identifiable information from the patient to confirm who they say they are. We then ask the patient to give us verbal consent for us to liaise with their advocate. All consent information is documented whether this be verbal or written.
12. Councillor Watkins has always been 'difficult' with the Practice, where she has publicly slandered us on a social media platform. This is unprofessional given her status as a Councillor and Local Health Board member and can hinder patient care as a result.

---

Statement of truth:

I believe that the facts stated in this witness statement are true.

Signed: 

Dated: 21.11.2020.

Case reference number: 202001914

**From:** [Caroline Perkins \(Caerleon - Isca Medical Centre\)](#)  
**To:** [Leigh McAndrew](#)  
**Subject:** IN - Complainant - Providing patient consent form  
**Date:** 15 December 2020 11:00:51  
**Attachments:** [image001.png](#)

---

Hi Leigh

Please find attached the form that both parties have to complete. Once it is completed the patient notes are updated and is clearly visible to staff that the form has been completed and by whom, so they are aware who is allowed the 'ticked' information only.

Regards

*Caroline*

**Mrs. Caroline Perkins**  
**Practice Manager**  
**Isca Medical Centre**  
**Cadoc House**  
**High Street**  
**Caerleon**  
**Newport**  
**NP18 1AZ**

**Tel: 01633 423886**  
**DDI: 01633 849200**  
**Facsimile: 01633 430153**  
**Email: [caroline.perkins@wales.nhs.uk](mailto:caroline.perkins@wales.nhs.uk)**



Disclaimer

This email contains information intended for the addressee only and may be confidential, the subject of legal or professional privilege, or be otherwise protected from disclosure. If you are not the intended recipient of this message, please notify the sender immediately and do not disclose, distribute or copy the email to any other party. This email and any attached file are the property of Isca Medical Centre  
Ymwadiad

Mae'r e-bost hwn yn cynnwys gwybodaeth y bwriedir ar gyfer y derbynnydd yn unig a gall fod yn gyfrinachol, yn destun ragorffaint gyfreithiol neu broffesiynol, neu fel arall wedi'i diogelu rhag cael ei rhyddhau. Os nad chi yw derbynnydd bwriadedig y neges hon, a fydddech cystal â rhoi gwybod i'r anfonwr ar unwaith a pheidio â datgelu, dosbarthu neu gopïo'r e-bost i unrhyw barti arall. Mae'r e-bost hon ac unrhyw ffeiliau atoddedig yn eiddo i Meddygfa Isca.



**ISCA MEDICAL CENTRE**  
**PATIENT CONSENT FORM FOR INFORMATION**

**This form is not to be filled in by carers. Please ask the reception staff for a carers identification form.**

This form is to be completed and signed by patients that are allowing access to the information ticked below. Please be aware that **NO** medical information/history of the patient will be given out. Consent is required due to General Data protection Regulations.

- Prescription / Sick note collection**
- Results**
- Appointment Information/confirmation**
- Referral confirmation**
- Medication queries**

The GP has sole discretion to withhold all, or some information of the patient, and the doctor may override this authority at any time if deemed necessary.

This permission/consent form will remain in force until cancelled by the patient in writing.

**One form per patient**

**DATE** \_\_\_\_\_

**DETAILS OF PATIENT GIVING CONSENT**

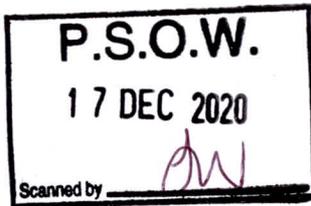
Name	
Date Of Birth	
Address Post Code	
Telephone Number(s)	
Your signature of consent to below person gaining information	
Relationship to person below	

**DETAILS OF PERSON ACCESSING INFORMATION**

Name	
Date Of Birth	
Address Post code (If Different From Above)	
Telephone Number(s)	
GP Details (If this is not your surgery)	
Your signature to consent to your details being held on record	
Relationship to person above	

Once completed please hand back to reception staff.

# APPENDIX 8



### WITNESS STATEMENT

Statement of: Ms Helen Dowsell  
Address: [REDACTED]  
Age if under 18: Over 18  
Occupation/Position: Care Navigator / Receptionist, Isca Medical Practice

1. I, Ms Helen Dowsell of [REDACTED] make this statement in connection with a complaint made to the Public Services Ombudsman for Wales that Councillor Joan Watkins of Newport City Council has breached the Code of Conduct for elected members. The facts in this statement come from my personal knowledge.
2. I have been a Care Navigator / Receptionist at Isca Medical Practice for just over 12 months.
3. In my role I regularly deal with patient advocates. We have a protocol in place at the Practice and do not share patient information with advocates or family members until our consent form has been filled in. This is our usual process and we treat everyone the same way. For example, if a family member wanted information about a relative, we would not be able to give them that information and would inform them that our consent form needed to be filled in.
4. I took the second telephone call from Councillor Watkins on 7 August 2020. I have since relistened to the telephone call recording. The first call from Councillor Watkins was taken by my colleague, Leanne Simmons. I was sat near her during that call and it seemed as though Councillor Watkins would not take "no" for an answer.
5. During my telephone call with her, I found Councillor Watkins to be very assertive and threatening. I had to put her on hold in order to give her information she was asking for, but I could only tell her that the matters relating to the patient, Maria Griffiths, were in hand with the Doctors.
6. I dealt with Councillor Watkins as I would with anyone else advocating for a patient where we did not have a completed consent form. I worked in accordance with the Practice's protocol.

Case reference number: 202001914

7. Councillor Watkins told me that she was a member of the Health Board and I felt she was using her position in order to obtain information about the patient and to pressure me into asking the on-call Doctor (Doctor Jones) to contact her. She told me that she would raise the matter with the Chief Executive of the Health Board and that it would not be the end of the matter. I felt that this was a threat and an abuse of her position. I do not think that Councillor Watkins should have used her position in this way.
8. I did not know who Councillor Watkins was prior to the telephone call and I have not had any interaction with her since.

---

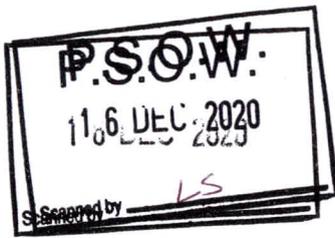
Statement of truth:

I believe that the facts stated in this witness statement are true.

Signed: 

Dated: 11.12.20.

# APPENDIX 9



### WITNESS STATEMENT

Statement of: Leanne Simmons  
Address: [REDACTED]  
Age if under 18: Over 18  
Occupation/Position: Care Navigator / Practice Manager

1. I, Leanne Simmons of [REDACTED] make this statement in connection with a complaint made to the Public Services Ombudsman for Wales that Councillor Joan Watkins of Newport City Council has breached the Code of Conduct for elected members. The facts in this statement come from my personal knowledge.
2. I have worked at Isca Medical Centre as a Care Navigator / Receptionist for 1 year.
3. I deal with patient advocates in my role fairly regularly. We only share information about a patient with an advocate if we have signed consent form, following our data protection protocol. Only if we have signed consent on the patient's file can we speak to an advocate. If we do not have signed consent, then we ask that the patient is in the room with the advocate to give permission.
4. I took a telephone call from Councillor Watkins on 7 August 2020. I have relistened to the telephone call recording. She phoned up asking to speak to the On-Call Doctor. It was gone 5pm on a Friday night, which is at a very busy time for the On-Call Doctor. I asked her what it was in relation to. She said her call was about a patient but wouldn't disclose who the patient was. I told her that I couldn't put it to the Doctor if we didn't know who the patient was.
5. Councillor Watkins informed me that she was on the Board of the Health Board so she knows about this ruling and data protection. I asked her the patient's name again and she gave it to me. I told her that I had to get the patient's permission to discuss her issues with Councillor Watkins and I was not aware if the patient knew that Councillor Watkins was calling on her behalf. Councillor Watkins told me that she had the patient's permission and wouldn't take "no" for an answer. I told her I would phone the patient to get permission.

Case reference number: 202001914

6. When I phoned the patient, she said she was aware that Councillor Watkins was calling on her behalf and gave permission. I managed to deal with the patient's issue directly with the patient, rather than with Councillor Watkins.
7. I found Councillor Watkins to be very demanding and a little bit irate. She threw me a little bit because the Doctor walked in when I was on the phone to her. He said that we needed more information about the patient from her. Councillor Watkins told me that she was on the board of the local Health Board and demanded to speak to the On-Call Doctor that day.
8. When Councillor Watkins called back she spoke to my colleague, Helen Dowsell. I told Helen to tell her that the Practice Manager would deal with her complaint and that the Practice was dealing with patient directly. She wasn't happy when speaking to Helen.
9. I never had had any dealings with Councillor Watkins prior to 7 August 2020 and have not had any interactions with her since.

---

Statement of truth:

I believe that the facts stated in this witness statement are true.

Signed: *L. Simmons*

Dated: *15/12/20*

**From:** [Leanne Simmons \(Caerleon - Isca Medical Centre\)](#)  
**To:** [Leigh McAndrew](#)  
**Subject:** IN - Witness - Leanne Simmons -  
**Date:** 11 December 2020 16:48:51  
**Attachments:** [image001.jpg](#)  
[image001.png](#)

---

Hi Leigh,

I have signed the witness statement and I have copied the email that I sent Caroline Perkins the practice manager on 7/8/20.

Hi Caroline,

I received a call on Friday about 17.25 from Joan Watkins a counsellor that wanted to speak to the on call Dr. She was vile on the phone and would not give me any information about who she would like to speak about. I told her that I could not deal with the issue because of patient confidentiality. After a mouthful off her she told me the patients name and I told her that I would phone the patient to ask permission to speak to her on her behalf.

I contacted Maria Griffiths who was the patient and dealt with the issue direct. Alun is aware of the issue and I day booked the requested to be dealt with. Joan Watkins phoned back about 18.00 asking about the situation. Helen D took the call and told her that the issue was being dealt with Maria Griffiths directly and that as it was not an emergency for today it would be dealt with on Monday and I would inform yourself.

See spoke to Margaret on Wednesday about the issue so not sure how we approach this. I told her that we might be able to book her a routine appointment in 2 weeks but she said she cannot wait that long. She would like to speak to a DR for some advice.

Kind Regards

*Leanne*

**Leanne Simmons  
Care Navigator  
Isca Medical Centre  
Cadoc House  
High Street  
Caerleon  
Newport  
NP18 1AZ**

**Tel: 01633 423886**

**Facsimile: 01633 430153**

**Email: [Leanne.simmons@wales.nhs.uk](mailto:Leanne.simmons@wales.nhs.uk)**

Burgundy logo



# APPENDIX 10

**Public Services Ombudsman for Wales**  
**Interview Record**

Date: 1 March 2021

Venue: Online Meeting Recording

Interviewing Officer: Leigh McAndrew - Investigation Officer ("LMcA")

Others Present: Councillor Joan Watkins ("JW")  
Llinos Lake – Support for Leigh McAndrew ("LL")  
Councillor William Routley – Support for  
Councillor Watkins ("WR")

---

LMcA: Okay. I've got a long-scripted bit to read before we start any questions. When I say your name, if you could just say your name, so that we can hear you on the recording. So, the date is the 1<sup>st</sup> of March 2021. The time is 10:00 o'clock in the morning. This is an interview in relation to a complaint made by Mrs Caroline Perkins against Councillor Joan Watkins, which alleges breaches of the Code of Conduct for Members of Newport City Council. I am Leigh McAndrew, Investigation Officer for the Ombudsman and being interviewed is Councillor Joan Watkins. Do you mind speaking just so we can hear you, Councillor Watkins?

JW: Er yes, this is Councillor Joan Watkins.

LMcA: Okay. So, I'm being supported by my colleague, Llinos Lake

LL: Llinos Lake.

LMcA: And Councillor Watkins is being supported by Councillor Routley.

WR: Yes, I'm here present, thank you.

LMcA: Okay. So, I must make it clear, Councillor Watkins, that the answers to my questions must be your own. We're proceeding with a Microsoft Teams interview, because of the on-going social distant measures. Please confirm throughout that you're happy for the interview to take place via Microsoft Teams.

JW: Yes, I'm very er comfortable with that, thank you.

Councillors Name: Councillor Joan Watkins.

LMcA: Okay. So, the interview is being recorded. Before making his final recommendations, the Ombudsman will provide you with a written transcript of the interview. If you have any other legal representative or friend acting for you, who require a copy of the recording, it may be provided, although the Ombudsman does reserve the right to charge. Requests for an additional copy should be made to the Ombudsman's Information Governance Manager. The interview's last, er listed to last a maximum of two hours. Could you confirm you've allowed enough time to complete the interview?

JW: Yes, I have.

WR: Yes.

LMcA: And could you confirm you're well enough to continue and answer my questions today?

JW: Yes, I am.

LMcA: Okay. Can you confirm that you have anything you might need during the course of the interview, such as reading glasses, medication or anything else?

JW: No, I do wear reading glasses and I think you can see I'm wearing them at the moment.

LMcA: Mmm hmm. Can I ask that mobile phones or other electronic devices that might interrupt us are either switched off or turned to 'silent', unless there's a pressing reason that might prevent you from doing so?

JW: My mobile is turned off. I can't turn off my landline, however.

LMcA: That's fine, no problem. In the event you need a comfort break or a break for any other reason, at any stage, please let me know and we can pause the interview and then resume. Could you confirm you've received the evidence bundle which was enclosed with my letter to you on 7<sup>th</sup> January which comprised of 95 pages of text.

JW: I have.

LMcA: Okay. Have you had the opportunity to familiarise yourself with it?

JW: I have.

Councillors Name: Councillor Joan Watkins.

LMcA: Okay. Have you got a copy of it with you?

JW I have, yes.

LMcA: Okay. So, I'll tell you a bit about the allegations which are made against you and then I'll pose a series of questions relating to them. I'd ask that you listen to my questions carefully and answer them as fully as you can. My questions are my opportunity to cover the issues I need to, and your answers are your opportunity to respond to the allegations made and provide the Ombudsman with any information which may assist him in reaching his conclusions. Please be aware that any information or evidence that you give to me today is likely to be detailed in or appended to any Report that the Ombudsman may produce on his findings. Any such Report, depending on the finding made by the Ombudsman, may be shared with the Standards Committee of Newport City Council or the Adjudication Panel for Wales who may hold any Hearing in public and may also publish the Report and Appendices in the public domain. So, you've been asked to attend an interview today because an allegation has been made that you may have breached the Code of Conduct for Members. It has been alleged that you used your position as an Elected Member improperly when advocating on behalf of a patient of Isca Medical Centre. Do you understand the allegations as they've been made?

JW: Yes.

LMcA: Okay. The Ombudsman is therefore investigating whether your conducted breached the Code in respect of paragraph 7(a) of the Code which states: -

'You must not in your official capacity or otherwise, use or attempt to use your position improperly to confer on or secure for yourself or any other person, an advantage or create or avoid for yourself or any other person, a disadvantage.'

I'll now proceed to asking you the questions. I've just got some general questions to start with. Please would you confirm that Appendix 5 of the Evidence File has your Declaration of Acceptance of Office and undertaking to observe the Code?

JW: I believe so.

LMcA: Yeah. On what date did you become a member of the Council?

Councillors Name: Councillor Joan Watkins.

JW: I think the 4<sup>th</sup> of May 2017.

LMcA: Okay. And that was elected, you were elected to the Council on that date?

JW: Yes.

LMcA: Have you undertaken any training on the Code of Conduct?

JW: Yes, I undertook training initially and I had been a Councillor for a number of years in a constituency in England.

LMcA: Okay. Have you, have you done training with Newport City Council, since being elected in 2017?

JW: Erm I, I believe I did, yes.

LMcA: Okay. But you can't recall, you can't recall when that might have been?

JW: Not, er no, I'm sorry.

LMcA: Okay.

JW: But I think at the start of your period of service, yes Code of Conduct training is undertaken.

LMcA: Okay. Please could you explain your understanding of paragraph 7(a) of the Code, which I read a couple of minutes ago? What's your understanding of that section of the Code?

JW: I'm sorry, can you just remind me of that paragraph?

LMcA: That's fine. In your official, you must not, in your official capacity or otherwise, use or attempt to use your position improperly.

JW: I, I do understand that, yes, and I hope I will be able to explain why I, I transgressed on this occasion.

LMcA: Okay. On what date were you ap-, well if you can recall, roughly, when were you appointed as the Council Representative on the Aneurin Bevan University Health Board?

JW: Well, I think it would have been in my first year of appointment as, as an elected Member.

Councillors Name: Councillor Joan Watkins.

LMcA: So, but within 2017/2018?

JW: Yes.

LMcA: Okay. What are, what are some of the duties and roles, uh, you have as a Council Representative on the Health Board?

JW: Well, it's a Stakeholders Health Board and it's a Board where you can bring issues in respect of the Health Board and in respect of residents and patients.

LMcA: Okay.

JW: So, you're able to, to bring all those conditions and situations to the Stakeholders Health Board for discussion and at times for investigation.

LMcA: Okay. So, would that be through meetings or through correspondence?

JW: Under normal circumstances, the Health Board meets, and Members meet face to face.

LMcA: Mmm.

JW: Currently the Health Board has not met for a very long time.

LMcA: Okay. So would part of that role be, when you're raising concerns, is that on a general level or would you bring case-specific or people-specific complaints to the Health Board?

JW: I think you would raise them on a general basis, but it is the case where I have heard Aneurin Bevan Health Board Officers ask for a private discussion with Members following the Health Board meetings.

LMcA: Okay. Okay. I'll just move in to questions specifically about this complaint now. Can you tell me what you recall from your contact with the Isca Medical Centre on the 7<sup>th</sup> of August 2020 please?

JW: Can I give you the context, the context of why I contacted them?

LMcA: Yeah. Yes please.

Councillors Name: Councillor Joan Watkins.

JW: Right. I had a telephone call from a very elderly, frail lady, Maria. I know this lady well because I, I work as a volunteer having set up a befriending service with Tanya Strange, who at that time was the Lead Nurse, Public Health and this, this service operates under the Aneurin Bevan Health Board. Maria attends the weekly meeting that I run in Caerleon. So, I know her well.

LMcA: Okay.

JW: She contacted me that evening in really, really serious distress, crying, upset, very distressed, asking could I help her? She has an eye condition which I am aware of; I had met her on a previous occasion once in the village where she was in trouble with it, and the Practice Nurse had sent her to the Optician and the Optician couldn't give her an appointment until a week ahead. She was distressed on that occasion. However, on this occasion, she was seeking my help, could I get the doctor to give her a prescription or something that would help ease the trouble she was in? So, I said "I'll do my best, Maria" and I ... right she'll, I also did say to her "You may have to give permission for the Surgery to speak with me", because I am very aware of confidentiality. I rang the Surgery, and it was my intention only to help this lady, to see if I could speak with the Doctor, ask was it possible for a script to be issued, in which case I would pop down to the Surgery, pick it up and take it to the Chemist. It was very late on a Friday afternoon so I was aware that Chemists close at 06:30 and it was absolutely only my intention to see if the Doctor could do that and if I could be of help.

LMcA: Okay. Um, so, did, did the Practice have the patient's consent on its system, to discuss her healthcare with you?

JW: I, I don't, I don't know if they had it, the consent, on the system. But I did mention to them that the lady would be more than willing to give the consent that was required. And I understood fully why the consent was required.

LMcA: Okay. So how, you, I, you've had a CD of the, of the telephone calls and they were transcribed in the, in the file as well.

JW: Yeah.

LMcA: Do you accept the Receptionists were acting in accordance with the Practice procedures in relation to data protection?

JW: Er yes.

Councillors Name: Councillor Joan Watkins.

LMcA: Okay. So, if, if you do accept that, why was it that you continued to, to contact them after the first phone call?

JW: I accepted that they acted in that context, but I was trying desperately to see whether I could access some help for this lady. I understood their concerns regarding confidentiality, what I was asking was could I possibly just have a word with the GP, in the hope that he might provide, be able to provide a script. You know, I'm very aware that Surgeries are busy, it was late on a Friday afternoon. I can assure you it was my intention only to try and help.

LMcA: Mmm hmm. Okay. During the second call, and like I say, the transcript is, is in the file.

JW: Yes.

LMcA: The Receptionist informed you that the doctor was dealing with the patient's issues. You then said it was important for the doctor to ring you and that you were doing it in the capacity of sitting on the Health Board. Could you just explain what, what you meant by that?

JW: I, I er, on reflection, I am accepting of the fact that I should not have said I was doing it in that capacity. I was really doing it in the capacity of a friend for this lady and I acknowledge it was wrong for me to have said what I said at the time. My, my only, my only thing that I could say here was that I was acting in the moment so to speak.

LMcA: Okay.

JW: I was ... so you know, I do acknowledge that I should not have done that.

LMcA: Okay. Reading through the emails is, is it Conjunctivitis that this lady had? Is, is that what you understood her to have had?

JW: I'm not entirely sure what her condition, in terms of her eyes, is. I, I've never explored that with her.

LMcA: Okay.

JW: And I did wish to explore it with the surgery. But she was telling me that she couldn't see, and she was in such a, a state of upset and telling me that she couldn't see, and you know, I'm sure you would agree that eyesight is extremely important and telling me that only added to my concern for her.

Councillors Name: Councillor Joan Watkins.

LMcA: Okay.

JW: She's an elderly lady who lives alone. I am aware of that also. And I knew that in contacting me, she was clearly feeling very, very desperate.

LMcA: Okay. Okay. Did you think it, at the time then, that, that it was, in order to resolve the situation, it required a conversation between you and the, and the on-call Doctor?

JW: Well, I thought that would have been helpful because what I just wanted to say to him was that I knew Maria, I was very concerned at the state she appeared to be in, and if there was anything he could do with regard to issuing a prescription, I would be very ... I didn't want to know what the prescription would be. I didn't want any discussion with regard to her eyes condition. I just thought if there's, if it were possible, and if he deemed it the right thing to do, I would have been able to have gone and picked it up, taken it to the Chemist and delivered it to the lady.

LMcA: Okay. What, what ... you, I've included in the, in the file some of what the Reception, what some staff from the, from the Practice what they said about how they felt about the, their conversations with you. What, what is your view on what they said about your manner, during the, the telephone calls?

JW: Well, I think they felt that I came on too strong and I'm acknowledging that. But I am saying in mitigation, I was very caught up in the issue that the lady had asked me to deal with. And I, I rather felt that you know, I wasn't able to make any progress with the Surgery.

LMcA: Okay. have you, have you had any issues with the, with the, with the Practice previous to this occasion?

JW: Well, thank you for the opportunity for me to just explain that in 2019 I was in hospital in the January as a result of a fall and very serious injury to my back and hip. I have collapsed discs, a wedge fracture and a hip injury and on coming out of hospital, I was sent to see the GP. I was on morphine. I subsequently had a further appointment made with the GP whilst I was on morphine. When I turned up at the surgery for that appointment, I was told no, I had to see the Practice Nurse. I was very well aware, I have 42 years' experience as a Nurse and Midwife myself, and I knew the Practice Nurse could not help with my condition and my appointment had been made with the GP. I did ask to speak with the Practice Manager and yes, I do

Councillors Name: Councillor Joan Watkins.

have a history with this lady because she was determined to prevent me from seeing the Doctor. It was only when the Doctor appeared in the Reception area that he directed me to see, that yes, my appointment was with him.

LMcA: Okay. Um, do you think that your, your previous, your history with the Practice might have influenced the way you dealt with them on that, on this occasion that we're discussing today, the 7<sup>th</sup> of August?

JW: I, I hope, I'm sorry, my landline is ringing, I can't do anything about it.

LMcA: That's okay, no problem, I can still hear you fine.

JW: Thank you. Erm I, I don't think so. I try to be, you know, forward-looking, not backward-looking and on this occasion, I wasn't calling on behalf of myself, I was calling to try and help a very frail, vulnerable old lady.

LMcA: Okay. I'll turn to your complaint to the Health Board then. Um, what, what were you aiming to achieve when you, when you made your complaint, as a result of the complaint to the Health Board?

JW: Well, I was just hoping ... this is a very difficult situation for me, because as a Local Councillor I do get people ringing me up, asking for my help as did this lady, in respect of this Surgery. And I was just hopeful that the Health Board would be able to speak with the Surgery and ensure that, that the Surgery was offering a service that was appropriate and effective and proper, because given, I, I would share this with you, Mr McAndrew, I even took a phone call on Saturday morning of this week, someone calling me with concerns about his treatment at the surgery. All I can do when this happens is advise them to go to A&E. And I've certainly never, ever made any statements against the Surgery, publicly or otherwise, because that would be entirely wrong and not appropriate. But I know that, that in the village where I live, there are concerns and I'm aware of that, because of the phone calls that I, you know, make. I just want, want people to get the service that they need and deserve.

LMcA: Okay.

JW: So that was the reason I took it to the Health Board.

LMcA: Okay. Like I said, the, having listened to the calls again and seen the transcript, I, I note you said in your complaint that Receptions, Receptionists had no care whatsoever for the patient, that they were

Councillors Name: Councillor Joan Watkins.

unhelpful, bordering on rude, and they were acting as a real barrier. Do you think that's a fair reflection of the telephone calls you had with them?

JW: It was my reflection at the time because I was, you know, I, I too was upset that I wasn't able to help this lady.

LMcA: Okay. And what about on, on reflection?

JW: On reflection, I probably would say I, yes, I may have been, I may have come on too strong in that respect.

LMcA: Okay. Um, in hindsight, would you have act, acted differently during, during those telephone calls do you think?

JW: Yes, I would, yes, I would and in fact, despite the fact that I know this lady and feel very, very sorry for her and the situation that she continues to be in, I probably wouldn't have made that phone call at all. I would probably have directed her to go to A&E and I probably would have gone and tried to, you know, pick her up and take her there. So, I probably would not have made that phone call, no.

LMcA: Okay. And in hindsight, would you have made the same complaint or worded your complaint to the Health Board in the same way?

JW: No, I may well have worded it differently.

LMcA: Okay.

JW: I think I also mentioned in that complaint about a Notice on the Surgery wall.

LMcA: Yeah.

JW: A number of people had brought to my attention, and that I had seen for myself, a lot of people found that very difficult and offensive and I think I probably raised that with the Health Board also. That Notice was subsequently removed.

LMcA: Okay. Um, Llinos, do you have anything you wanted to, to ask?

LL: I, no, no I don't have any questions.

Councillors Name: Councillor Joan Watkins.

LMcA: Okay. Are you, Councillor Watkins, I've reached the end of my questions to you, erm, I just want to ask you if you have anything further that you want to add, about the, the complaint made against you?

JW: Erm no. I, I, on reflection, I feel I did, I did take matters too far. But I did so in the moment of the time, so to speak, because I was very concerned for this old lady. She's there on her own, she's struggling, she'd been told that she couldn't get an appointment for a further nearly two weeks and here she was struggling and in real trouble with this eye condition. The only other thing I would add is that I think in making the complaint, from my perspective, it is possible that Mrs Perkins took our previous conversation into account. I clearly didn't make myself popular when I asked to see the Doctor that I was, you know, lined up to see. And, and I had to have a fight in order to pursue that. I was supported on that occasion by the Doctor.

LMcA: Okay. As I say, I've got, I've got no further questions for you. And are you, do you have anything else now, following that, that you wanted to say? Or to clarify about what you've said?

JW: I don't really think there's anything very much else I can say.

LMcA: Okay.

JW: Other than to say I really did want to try and help this lady. I am sorry if I was too forceful in how I pursued the phone calls. And I'm sorry that I used the fact that I sat on the Stakeholders Board. With hindsight, I would have handled that somewhat differently, er, somewhat differently. I think, looking back, I was caught up in the moment. And I'm sorry if I caused offence. It was not my intention to do that, it was merely my intention to try and help this elderly lady.

LL: Okay.

WR: I wonder if I could, if I could tell you the progress that I've been able to undertake with Councillor Watkins, if that's okay at this time.

LMcA: Yeah, that's fine, yeah.

WR: Okay. I think it's, it's, it's the age of the lady that Joan is referring to, Maria, is probably mid 80's, okay. So, so when you paint that picture and the lady that couldn't see at that time, I think that, I think that Councillor Watkins did get caught up, as she explains, in the

Councillors Name: Councillor Joan Watkins.

moment and sometimes you can get caught up in the moment. And looking forward, because that's where I want to go, it's lessons learnt. I've undertaken a training module with Councillor Watkins. I speak with her on a regular basis. And, and we all have, we all have 'senior moments' I call them for myself. But we all have moments when we go "Oh I wish I'd done that better". And also, how, how we act and how we present and sometimes if we come across too strong in, in our defence and I just think all this was down to, to that. Within the training that Councillor Watkins and the conversations that we have now, there's, there's been a difference between when Joan was a former serving Member in England, on a formal serving Authority. I mean the attitudes of Councillors twenty years ago, to where they are today, are somewhat changed and, and the way we'll, we address each other is somewhat changed. And you know, I, I get the feeling that we've made great progress, that the honesty that's come from Councillor Watkins for me, is refreshing. And the lessons have been learnt. And I just, I just feel that this was an episode that got beyond Councillor Watkins and even out of Councillor Watkins' own, own capacity to control. She was caught up as she eloquently said, in the moment of that time. From now on, referral to A&E and you know, because that's what we would say. Somebody presented to me, I'd say "Okay, you need to go to A&E if you can't be seen by any other house professional at that time". And especially a woman who was in her 80's, 85 I believe is the age and on her own. And so that's all I can say is, we have onward-going conversations with Councillor Watkins and she has made great progress.

LMcA: Okay.

WR: And can I thank you for the postponement, you know.

LMcA: That's fine.

WR: It's, you know, technology failed me somewhat on that day and er, there we go, thank you very much indeed.

LMcA: Okay, no problem. Llinos, I'll come back to you, have you got anything you wanted to, to ask before I move on to this.

LL: Erm yeah, I was just going to ask on that, Councillor Watkins, would, do you agree with, would you agree with that, would you agree that you've, you've learnt from this experience?

Councillors Name: Councillor Joan Watkins.

JW: Oh yes absolutely, I have, yes. And I would say that the gentleman who rang me on Saturday, the advice that I gave him was that he should attend A&E.

LMcA: Okay.

LL: Okay. Erm and the other thing, you've, this, you've, you've told us throughout that in hindsight you would, you would do things differently and you would approach this situation differently? Do you therefore consider that by your actions, that you may have breached paragraph 7(a) of the Code?

JW: Er if I did breach paragraph (a) of the Code, it was absolutely a mistake on my part. I was really, really, I can only repeat, I was so in the moment, trying to help this vulnerable old lady.

LL: Yeah, okay thank you.

LMcA: Thanks, Llinos. Okay that, that concludes the interview other than a few more things I need to tell you before we end the, end the meeting. I will need to send the recording away to be transcribed. Once I've got that back, I'll send you a copy of the transcript, so you have it for your records. What I'll need to do next is decide whether that completes the investigation or whether there's any further evidence required. Once I'm satisfied the investigation is completed it will be considered in detail and a finding made. If we do conclude that there is evidence of a breach, the Ombudsman has the option to determine that no action is required or to make a referral to the Standards Committee of Newport City Council or to the Adjudication Panel for Wales. If a referral is considered appropriate, a draft Report will usually be shared with you and you'll be given the opportunity to comment on the analysis of the evidence and the finding proposed. If the Ombudsman concludes that there is no evidence that a breach of the Code is ... has occurred then the Report would bring an end to it.

JW: Mr McAndrew ...

LMcA: Yeah.

JW: ... should, if, if it were required, I would be more than happy to offer an apology to the er Surgery.

Councillors Name: Councillor Joan Watkins.

LMcA: Okay. That's helpful, thank you for that. So, in closing the interview, I'd like to take this opportunity to remind you that the Ombudsman's Investigations are conducted in private. I therefore ask you not to discuss the evidence received or that you have shared with me today, with anyone other than your representative or Legal Advisor and that extends to the transcript and any draft report which may be issued to you also. It is particularly important that you do not discuss matters relating to the complaint investigation with anyone who may be a witness or involved in the matter. You should be aware that any such disclosure or interference may amount to a breach of the Code. Before I stop the recording, I'll ask you one more time if there's anything you wanted to, to add, before we, before we end.

JW: The only thing I can add is that I am sorry that I have offended or, you know, upset persons working at the Isca Practice. It was not my intention to do that. I, I do believe I was caught up in the moment and really desperately trying to help this vulnerable old lady. So, I can only offer my apology and I have reflected on the matter. I do deal and will deal with matters of this nature very differently for the future and I have taken on board the training and advice that I've had from Councillor Routley, who is my Chief Whip.

LMcA: Okay. Well, I think on that then, I, we can conclude the interview and it's 10:31. So thank you for your time today and I will um write to you with a copy of the transcript when, when it's received.

JW: Thank you very much.

LMcA: Okay. I'll just end the recording there. Thank you very, very much.

JW: Thank you.

# APPENDIX 11

## **Co-operating with investigations**

### **See paragraph 6(2)**

You must co-operate with an investigation when it is being conducted by me or by your Monitoring Officer using our statutory powers. Not to do so is itself a breach of the Code. This means that you should reply promptly to all correspondence and telephone calls, make yourself available for interview if required and make available copies of any requested documents. It would be helpful if you could identify any concerns that you may have during the course of the investigation so that these can be promptly resolved. My office and your Monitoring Officer will make reasonable allowances for urgent pressures you face and arrangements previously made, for example, for holidays. However, you are expected to give priority to their investigations to avoid matters being needlessly drawn out. The requirement to co-operate with an investigation applies whether you are a witness or the subject of the investigation.

I am aware of instances where members accused of breaches of the Code have sought to put pressure on the individuals making the complaint or on other witnesses. I regard such behaviour as entirely unacceptable. You must not intimidate or attempt to intimidate any person who is or is likely to be a complainant, a witness, or involved in the administration of any investigation or proceedings relating to a failure to comply with the Code.

However much you may be concerned about allegations that you or a fellow councillor failed to comply with the Code, it is always wrong to bully, intimidate or attempt to intimidate any person involved in the investigation or hearing. Even though you may not have breached the Code, you will have your say during any independent investigation or hearing, and you should let these processes follow their natural course.

If you intimidate a witness in an investigation about your conduct, for example, you may find yourself subject to another complaint that you have breached paragraph 4(c) of the Code with regard to bullying or harassment, or paragraph 6(1)(a) in respect of bringing the office of member into disrepute.

## **Using your position improperly**

### **See paragraph 7(a)**

You must not use, or attempt to use, your position improperly to the advantage or disadvantage of yourself or anyone else. **This paragraph applies at all times** and not just when you are carrying out your duties as a member. You should not use, or attempt to use, your public office either for your or anybody else's personal gain or loss. For example, your behaviour would be improper if you sought to further your own private interests through your position as a member. This also applies if you use your office to improve your wellbeing at the expense of others.

Members who own land, or whose close personal associates own land, need to be particularly cautious where planning matters are concerned. If you are in any doubt, you should take advice. This applies equally to members of community councils when your Council is consulted on planning matters. Similarly, while it is reasonable to expect members to help constituents apply to the Council, for example, for housing, it is quite inappropriate to seek to influence the decision to be taken by the officers.

The provisions of the Bribery Act 2010 apply to members carrying out their public functions. Should a member be convicted of a criminal offence under this Act then it is likely that they will also have used their position improperly (in breach of paragraph 7(a)) and be likely to have brought the office of member or their authority into disrepute in breach of paragraphs 6(1)(a) and (b). If any complaint which is made to me concerns conduct which may amount to a criminal offence then I am likely to refer the matter to the police.

### **Example**

A member of a county council had requested that land in his ownership in Village A be included as suitable for development in the Council's Local Development Plan (LDP). When the Council was considering suitable settlement areas for inclusion in the LDP, officers recommended that land in the neighbouring village (Village B) be included in the draft plan instead. Despite having received very clear advice from the Council's Monitoring Officer on his prejudicial interest the member e-mailed the Council's planning policy officer and outlined a number of arguments which he claimed favoured the inclusion of his land in Village A as opposed to the land in Village B. At the relevant time the draft plan had been disclosed to members of the Council on a confidential basis and had not been disclosed publicly.

The Adjudication Panel found that by sending the e-mail the member had breached paragraph 7(a) of the Code by attempting to use his position improperly for his own advantage. At the hearing he sought to apportion blame on the Council's Monitoring Officer for failing to advise and train him properly on the Code when this clearly was not the case. His actions also brought his office and the Council into disrepute. The member was disqualified from holding office for 18 months for this and other breaches of the Code.

## **The authority's resources**

### **See paragraph 7(b)**

You must only use or authorise the use of the resources of the authority in accordance with its requirements. **This paragraph also applies at all times.** Where your authority provides you with resources (for example telephone, computer and other IT facilities, transport or support from council employees), you must only use these resources or employees for carrying out your local authority business and any other activity which your authority has authorised you to use them for.

# APPENDIX 12

**Case Ref:** 202001914

**Created by** Leigh McAndrew **on** 18/09/2020 14:22:45

**Title:** HOME - IO transcription of telephone calls

**Activity Date:** 18/09/2020

**Body:**

**KEY:**

JW – Councillor Joan Watkins – Accused Member  
LS – Leanne Simmons – Receptionist (Call 1)  
HD – Helen Dowsell – Receptionist (Call 2)

**Call 1**

LS: Good afternoon, Isca Medical Centre, Leanne speaking, can I take your date of birth please?

JW: Hello, good afternoon. No, I'm not actually ringing on behalf of myself.

LS: Okay.

JW: This is Councillor Joan Watkins

LS: Yep.

JW: And I actually sit on the Aneurin Bevan Health Board.

LS: Yep.

JW: And I really need to have a conversation with whoever is your on-call doctor today.

LS: Right, what's it regarding?

JW: It's regarding a patient who's contacted me.

LS: Okay and what's the patient's name?

JW: No, I'll discuss that with the doctor if you don't mind.

LS: Right, I'll just see if he's available.

JW: Who is today's on-call doctor?

LS: It's Dr Jones.

JW: Dr Jones, lovely. Thank you.

LS: So, you're a Councillor, are you?

JW: It's Councillor Joan Watkins. He does know me.

LS: Okay. I'll just see if he's available at the moment.

JW: Thank you so much.

LS: As you can imagine, it's busy on a Friday.

JW: Busy every day, I'm sure.

[Call on hold for 00:25]

LS: Hi, is that Councillor Joan Watkins?

JW: That's right, yes.

LS: Hi, um, I can't actually get hold of him at the moment.

JW: Right.

LS: Um, can I take a message and pass to him or?

JW: Yes, can I give you my telephone number and please ask him to call me?

LS: Yeah.

JW: It's, uh, 01633 549608 or.

LS: 549648 is it?

JW: No. 549608.

LS: Yep.

JW: Or 07966 086578 and I'd welcome a call from him today, please.

LS: One second. I'll just put you on hold a second.

JW: Okay.

[Call on hold for 01:15]

LS: Hi, um, I need some more information because of confidentiality, we can't.

JW: Well this is why I can't give to you; this is why I need to speak to the doctor.

LS: Yes, well we need to know that you've got permission, so we need to know the patient.

JW: Well, yes, the lady will give you permission, most certainly.

LS: Yes, but we need to know the patient and we need to know who we're dealing with because of confidentiality we can't.

JW: I know all about confidentiality, you don't need to tell me.

LS: Right, I've just been told we need to have more details.

JW: The lady is called Maria Griffiths.

LS: Yeah.

JW: And you can call her and ask her to give permission for the doctor to speak to me on 422515 and it would be good if you called her and asked her to give permission, okay?

LS: Okay, yeah.

JW: And can you do that now?

LS: I will do it as soon as I get the first opportunity, yes.

JW: Okay, good. Thank you.

LS: Bye.

[End of call]

## **Call 2**

HD: Good afternoon, Isca Medical Centre, my name's Helen, how can I help?

JW: Hello, good afternoon, this is Joan Watkins. I'm calling again to see if you've contacted Maria Griffiths and, if so, can I expect a call from Dr Jones, please?

HD: Bear with me one sec.

JW: Thank you.

[Call on hold for 00:06]

HD: Um, hello, sorry to keep you. I've just spoken to my colleague and the doctors are dealing with this.

JW: In what way?

HD: Bear with me.

JW: Hello? Hello, in what way?

HD: Hello, sorry to keep you, it's just my colleague is the person you were speaking to earlier on.

JW: That's right, I do recall it was a different name. Now you're telling me the doctors are dealing with this and I'm asking the question in what way, please?

HD: Um, they, they've.

[Call on hold for 00:19]

HD: Right, um, just to bring you up to speed, Leanne has spoken to Maria, um and, um, the doctor is dealing with, uh, Maria's issues, um, this is then going to be passed, the information will be passed onto the Practice Manager on Monday, um and, uh, I believe there was a, uh, conversation about a telephone consultation.

[Someone in background]: It won't be today.

HD: It won't be today.

JW: I would like to speak to Dr Jones, please, and it would probably be a very sensible option for me to do that. I know this lady very well; I know the difficulties she's experiencing, and I think it's important that Dr Jones just gives me a call. I am doing this in the capacity of sitting on the Health Board.

HD: Bear with me.

[Call on hold for 00:25]

HD: Uh, right, um, the doctor won't be able to speak to you today, he has got emergencies, um, and this will be raised with the Practice Manager on Monday morning.

JW: And this will be raised with the Health Board and the Chief Executive at Aneurin Bevan University Health Board.

HD: Okay.

JW: Uh, this is not acceptable. This lady is sorely in need of treatment and it would appear that one way or another she's not getting it and that can't be right when she's an elderly, frail, vulnerable old lady.

HD: Um.

JW: So, are you telling me that Dr Jones will be speaking to her?

HD: Um, Dr Jones is dealing with her issues, yes.

JW: Right.

HD: Okay?

JW: Well this will not be the end of this matter, I'm afraid. However, we'll leave it there.

HD: Okay.

JW: Okay.

HD: Thank you.

JW: Bye-bye.

HD: Bye.

[End of call]

# **APPENDIX 13**

**From:** [Watkins, Joan \(Elected Member\)](#)  
**To:** [Phillip James](#)  
**Subject:** IN - Accused Member - Email  
**Date:** 14 October 2020 17:31:27

---

Your Reference 202001914  
Complaint Reference 3YFV7P4M

Dear sir I write in response to the above complaint against me

On the evening of 7<sup>th</sup> August 2020 at approximately 5 30 pm I received a call from a very elderly and vulnerable old lady, known to me as a member of one of two Befriending Groups which I run as part of Ffrindi Mi under the auspices of the ABUHB

She was extremely distressed advising she had been in contact with Isca Surgery asking to see a Doctor or obtain a prescription to ease a painful and distressing eye condition which had flared up, she asked if I could help as she said the receptionist had not facilitated her requests and she had been given an appointment to see someone some several days away.

I am aware she suffers this eye condition having seen her previously with red and sore eyes. On one occasion I met her by chance in the village a year or so ago when she had visited the surgery that morning, been seen by a nurse Practitioner who had allegedly stated she didn't know enough about eyes to treat her and had sent her to see the local optician, I happened to meet her shortly after she had indeed visited the local Optician only to be told she would have to wait a week for an appointment. On that occasion she was upset and distressed and I advised she should go back to the Surgery.

On the evening of the 7<sup>th</sup> September when she contacted me she was crying and telling me her eyes were sore and painful and that she also had problems with her eyelids and skin peeling and please could I help, I said I would ring the surgery on her behalf and advised she was likely to have to give permission for me to speak about her with them.

I thought perhaps if I could speak with the on call Doctor, a prescription might be arranged which I would be happy to pick up, take to the Chemist and then deliver to her. I was aware that the Chemist in Ponthir closes at 6 30 pm and remains closed on the weekend so I felt if this were a possibility time was of the essence.

On that basis and with the sole intention of trying to help her I rang the surgery.

I am very aware of the rules around confidentiality and made clear that the lady if contacted would be happy to give permission for me to discuss her situation and hopefully get her the help she needed..

I asked if I could speak with the duty Doctor, and explained why but that request was denied and my message that there was a very distressed old lady in considerable discomfort was not met with the assistance I had hoped for.

Yes I did feel that this patient was not in receipt by her own tearful account to me of the help she felt she needed and I made no progress with the receptionist with either my request to speak to the Dr or to

try and obtain a prescription to assist her

Neither was the receptionist willing to contact the lady to obtain her consent for me to talk on her behalf

On that basis I was frustrated at clearly not going to be able to help her. I did therefore state that I felt this was unacceptable and in the capacity of sitting on the Stakeholders Health Board for ABUHB as an Elected Member I was going to report the matter to the ABUHB.

It was not my intention to do anything other than try and act as a go between in order to help this distressed old lady and yes I did subsequently report the matter to the Health Board In the event, not being able to obtain any help for her from the surgery and knowing her appointment to be seen was some days away I felt sad , frustrated and sorry that I had to go back to her unable to offer any immediate help.

As a retired nurse I advised her to make a supply of normal saline and explained how she could bathe her eyes with that in the hope it might ease some of her discomfort and if that were not the case she should seek help from the local Emergency Department. I have no reason other than to believe the lady in question was in considerable discomfort her manner on her call to me was very distressed and in contacting this surgery my only intention was to try and help her, sadly to no avail.

In respect of the accusation that I have made derogatory comments about the surgery on Face Book, I totally refute that accusation and would ask where is the evidence ? an accusation also made on hearsay is totally unacceptable and vexatious.

Thank you  
Joan Watkins

Mae'r Cyngor yn croesawu gohebiaeth yn Gymraeg, Saesneg neu yn y ddwy iaith. Byddwn yn cyfathrebu â chi yn ôl eich dewis. Ni fydd gohebu yn Gymraeg yn arwain at oedi.

The Council welcomes correspondence in English or Welsh or both, and will respond to you according to your preference. Corresponding in Welsh will not lead to delay.

#### Disclaimer/Ymwadiad

This email contains information intended for the addressee only and may be confidential, the subject of legal or professional privilege, or be otherwise protected from disclosure. If you are not the intended recipient of this message, please notify the sender immediately and do not disclose, distribute or copy the email to any other party. This email and any attached file are the property of Newport City Council.

When you email Newport City Council, you consent to the Council monitoring and reading any such emails for the purposes of security and legislative compliance. For the full disclaimer please access <http://www.newport.gov.uk/disclaimer>.

Mae'r e-bost hwn yn cynnwys gwybodaeth y bwriedir ar gyfer y derbynnydd yn unig a gall fod yn gyfrinachol, yn destun ragorfaint gyfreithiol neu broffesiynol, neu fel arall wedi'i diogelu rhag cael ei rhyddhau. Os nad chi yw derbynnydd bwriadedig y neges hon, a fydddech crystal â rhoi gwybod i'r anfonwr ar unwaith a pheidio â datgelu, dosbarthu neu gopïo'r e-bost i unrhyw barti arall. Mae'r e-bost hon ac unrhyw ffeiliau atodedig yn eiddo i Gyngor Dinas Casnewydd.

Pan fyddwch yn anfon e-bost at Gyngor Dinas Casnewydd, rydych yn cydsynio i'r Cyngor fonitro a darllen unrhyw e-byst o'r fath at ddibenion cydymffurfio â diogelwch ac â deddfwriaeth. I weld yr ymwadiad llawn ewch i <http://www.newport.gov.uk/ymwadiad>

# **APPENDIX 14**

**From:** [Watkins, Joan \(Elected Member\)](#)  
**To:** [Leigh McAndrew](#)  
**Subject:** Complaint  
**Date:** 07 July 2021 12:51:39

---

Good Afternoon Mr McAndrew

Thank you for your recent correspondence in respect of the complaint made against me by Ms Caroline Perkins. I can only add my comments as follows

At the time it was solely my intention to help a very vulnerable and distressed old lady . In contacting the surgery and on reflection I should not have stated my status as a Councillor or as a member of the Stakeholders Health Board, I was acting in the moment and concerned with regard to Mrs Griffiths distress, she having told me that she had only been offered an appointment some days away, I really was hopeful I could speak to the GP to obtain help for her as stated previously.

I am fully aware of confidentiality and did not wish to discuss in depth Mrs Griffith's medical details merely to ask if a script could be provided which I could pick up and take to the chemist. I also was very clear that Mrs Griffith could be contacted to give permission for me to represent her on this occasion.

I do now accept my advice to this lady should have been to go to A& E and that will be my advice in any future situations, I would only say in mitigation I had 30 years working as a Community Nurse and Midwife where I was able to contact GPs directly and that may have informed my trying to do so here.

I accept in the heat of the moment my manner may have been quite forceful and have offered apology for that

With regard to my objecting to the notice displayed regarding GP appointments I did see this for myself and it was brought to my attention by a number of residents who found it unhelpful and concerning,

The notice I refer to stated a 10 minute consultation and only one item of health to be the subject of the consultation, it did not state anything else. I raised my and others concerns and objections as I felt this notice could be off putting for many older people particularly.

In conclusion I can only add with regard to my own health { I have a wedge fracture and .collapsed discs in my lower spine together with a hip injury caused separately by a fall} On one occasion when I had an appointment with the GP Ms Perkins was insistent I could only see the Practice Nurse given I was being prescribed Morphine at the time that was not acceptable to me and indeed the GP became aware and intervened on my behalf Ms Perkins attitude on that occasion made me tearful and upset I mention this because the history there is very negative. Ms Perkins has also accused me of making negative comments re the Surgery on Facebook she has not been able to substantiate that and indeed I would never do such a thing and absolutely refute her allegations.

I have learned lessons here which I will take with me going forward.

Thank you Kind Regards Joan Watkins

yn ôl eich dewis. Ni fydd gohebu yn Gymraeg yn arwain at oedi.

The Council welcomes correspondence in English or Welsh or both, and will respond to you according to your preference. Corresponding in Welsh will not lead to delay.

#### Disclaimer/Ymwadiad

This email contains information intended for the addressee only and may be confidential, the subject of legal or professional privilege, or be otherwise protected from disclosure. If you are not the intended recipient of this message, please notify the sender immediately and do not disclose, distribute or copy the email to any other party. This email and any attached file are the property of Newport City Council.

When you email Newport City Council, you consent to the Council monitoring and reading any such emails for the purposes of security and legislative compliance. For the full disclaimer please access <http://www.newport.gov.uk/disclaimer>.

Mae'r e-bost hwn yn cynnwys gwybodaeth y bwriedir ar gyfer y derbynnydd yn unig a gall fod yn gyfrinachol, yn destun ragorffraint gyfreithiol neu broffesiynol, neu fel arall wedi'i diogelu rhag cael ei rhyddhau. Os nad chi yw derbynnydd bwriadedig y neges hon, a fyddochystal â rhoi gwybod i'r anfonwr ar unwaith a pheidio â datgelu, dosbarthu neu gopïo'r e-bost i unrhyw barti arall. Mae'r e-bost hon ac unrhyw ffeiliau atodedig yn eiddo i Gyngor Dinas Casnewydd.

Pan fyddwch yn anfon e-bost at Gyngor Dinas Casnewydd, rydych yn cydsynio i'r Cyngor fonitro a darllen unrhyw e-byst o'r fath at ddibenion cydymffurfio â diogelwch ac â deddfwriaeth. I weld yr ymwadiad llawn ewch i <http://www.newport.gov.uk/ymwadiad>

# APPENDIX 15

## Conjunctivitis

Conjunctivitis is an eye condition caused by infection or allergies. It usually gets better in a couple of weeks without treatment.

### Check if you have conjunctivitis

Conjunctivitis is also known as red or pink eye.

It usually affects both eyes and makes them:

- red
- burn or feel gritty
- produce pus that sticks to lashes
- itch
- water



Conjunctivitis that produces sticky pus is contagious.



If eyes are red and feel gritty, the conjunctivitis is also usually contagious.



Conjunctivitis caused by allergies like hay fever makes eyes red and watery but is not contagious.

## If you're not sure it's conjunctivitis

Find out about other conditions that can cause red eyes (Link: [www.nhs.uk/conditions/red-eye/](http://www.nhs.uk/conditions/red-eye/))

## How to treat conjunctivitis yourself

There are things you can do to help ease your symptoms.

- Boil water and let it cool down before you gently wipe your eyelashes to clean off crusts with a clean cotton wool pad (1 piece for each eye).
- Hold a cold flannel on your eyes for a few minutes to cool them down.

Do not wear contact lenses until your eyes are better.

## Stop infectious conjunctivitis from spreading

### Do

- ✓ wash your hands regularly with warm soapy water
- ✓ wash your pillow cases and face cloths in hot water and detergent
- ✓ cover your mouth and nose when sneezing and put used tissues in the bin

### Don't

- ✗ do not share towels and pillows
- ✗ do not rub your eyes

## Staying away from work or school

You do not need to stay away from work or school unless you or your child are feeling very unwell.

## A pharmacist can help with conjunctivitis

Speak to a pharmacist about conjunctivitis. They can give you advice and suggest eyedrops or antihistamines (Link: [www.nhs.uk/conditions/antihistamines/](http://www.nhs.uk/conditions/antihistamines/)) to help with your symptoms.

If you need treatment for a child under 2, you'll need a prescription from a GP.

➔ Find a pharmacy (Link: <https://www.nhs.uk/service-search/find-a-pharmacy/>)

### See a GP if:

- your baby has red eyes – get an urgent appointment if your baby is less than 28 days old
- you wear contact lenses and have conjunctivitis symptoms as well as spots on your eyelids – you might be allergic to the lenses
- your symptoms have not cleared up after 2 weeks

### Coronavirus (COVID-19) update: how to contact a GP

It's still important to get help from a GP if you need it. To contact your GP surgery:

- visit their website
- use the NHS App (Link: [www.nhs.uk/using-the-nhs/nhs-services/the-nhs-app/](http://www.nhs.uk/using-the-nhs/nhs-services/the-nhs-app/))
- call them

Find out about using the NHS during COVID-19 (Link: [www.nhs.uk/conditions/coronavirus-covid-19/social-distancing/using-the-nhs-and-other-health-services/](http://www.nhs.uk/conditions/coronavirus-covid-19/social-distancing/using-the-nhs-and-other-health-services/))

### Get advice from 111 now if you have:

- pain in your eyes
- sensitivity to light
- changes in your vision, like wavy lines or flashing
- very red eyes (1 eye or both eyes)
- a baby less than 28 days old with red eyes

These can be signs of a more serious eye problem.

111 will tell you what to do. They can arrange a phone call from a nurse or doctor if you need one.

Go to [111.nhs.uk](https://111.nhs.uk/) (Link: [https://111.nhs.uk/?utm\\_source=nhsuk&utm\\_campaign=conditions&utm\\_content=conjunctivitis](https://111.nhs.uk/?utm_source=nhsuk&utm_campaign=conditions&utm_content=conjunctivitis)) or call 111.

#### ▼ [Other ways to get help](#)

##### Get an urgent GP appointment

A GP may be able to help you.

Ask your GP practice for an urgent appointment.

## Treatment from a GP

Treatment will depend on the cause of your conjunctivitis.

If it's a bacterial infection, you might be prescribed antibiotics. But these will not work if it's caused by a virus (viral conjunctivitis) or an allergy.

Some sexually transmitted infections (STIs) can cause conjunctivitis. This type takes longer to get better.

Page last reviewed: 22 February 2021  
Next review due: 22 February 2024

This page is intentionally left blank

## Schedule of Unused Material held by PSOW

<b>Code of Conduct Investigation</b> <b>Accused Member: Councillor Joan Watkins</b> <b>Council: Newport City Council</b>		<b>PSOW Case Ref:</b> <b>202001914</b>
<b>No</b>	<b>Description of Material</b>	<b>Reason not relied upon</b>
1.	'IN - Complainant - Recording of call between Cllr W and receptionist (1st call)' – Audio recording of first telephone call provided by Complainant on 18/08/2020.	Transcript available at Appendix 12.
2.	'IN - Complainant - Recording of call between Cllr W and Receptionist (2nd call)' – Audio recording of second telephone call provided by Complainant on 18/08/2020.	Transcript available at Appendix 12.
3.	'Member Code of Conduct Training presentation - May 2017.' – Powerpoint presentation provided by Monitoring Officer on 23/10/2020.	Not relevant to the matters investigated.
4.	'Members Code of Conduct Training May 2017 -handout' – Provided by Monitoring Officer on 23/10/2020.	Not relevant to the matters investigated.
5.	'Declaration file for Councillor Joan Watkins' – Provided by Monitoring Officer on 23/10/2020.	Not relevant to the matters investigated.

6.	'IN - Third Party - ABUHB - Information provided (Incorrect)' – Information provided by the Health Board on 17/11/2020.	Incorrect information. Correct information subsequently provided and available at Appendix 6.
7.	'ENC: Draft witness statement' – Draft witness statement provided by Complainant on 19/11/2020.	Draft version of witness statement. Final version available at Appendix 7.
8.	'IN - Third Party - ABUHB - Confirming complaint made by Accused Member' - Information provided by the Health Board on 19/11/2020.	Confirmation email from the Health Board. Substantive information subsequently provided and available at Appendix 6.
9.	'HOME - Code of Conduct Interview – Recording' – Video recording of Microsoft Teams interview dated 01/03/2021.	Video recording of interview with Accused Member – transcript available at Appendix 10.
10.	'IN - Accused Member - Constituent's concerns about GP Practice' – Email received from Accused Member on 10/05/2021.	Information not relevant to the matters investigated.

## **PROCEDURE FOR STANDARDS COMMITTEE HEARINGS**

### **1. Interpretation.**

In this Procedure, the following words and phrases shall have the meanings assigned to them unless the context otherwise requires:

- 1.1 “Committee” means the Standards Committee or any Standards Sub-Committee to which it has delegated the conduct of the hearing;
- 1.2 “Democratic Services Officer” means the officer of the Council responsible for providing clerical and administrative support to the Committee, including the recording of decisions.
- 1.3 “Investigating Officer” means
  - (a) in the case of an investigation undertaken under Section 71(2) of the Local Government Act 2000, the Ombudsman or his Investigator who referred the report to the Council and includes his or her nominated representative.
  - (b) In the case of an investigation referred for local investigation under Section 70(4) of the Local Government Act 2000, means the Monitoring Officer, Deputy Monitoring Officer or other investigating officer, and his or her nominated representative.
- 1.4 “Legal Advisor” means the officer responsible for providing legal advice to the Committee. This may be the Monitoring Officer, another legally qualified officer of the Council, or someone appointed for this purpose from outside the Council.
- 1.5 “Member” means the elected or co-opted member of the Council (or community council) who is the subject of the allegation being considered by the Standards Committee, unless stated otherwise. It also includes the member’s nominated representative.
- 1.6 “The Monitoring Officer” means the officer for the time being appointed by the Council under section 5 of the Local Government and Housing Act 1989 and shall include, where appropriate, the person appointed as Deputy Monitoring Officer.
- 1.7 “The Chairman” means the person presiding at the hearing;

### **2. Modification of Procedure.**

The Chairman may agree to depart from or vary this Procedure in any particular instance where he/she is of the opinion that such a variation is necessary in the interests of fairness and transparency.

### **3. Representation.**

The Member may be represented or accompanied during the meeting by a solicitor, counsel or (with the permission of the Committee) another person. The costs of any such representation must be met by the Member, unless Standards Committee has expressly agreed to meet all or any part of that cost (and subject always to the financial cap on indemnities set by the Council, from time to time).

#### **4. Legal advice**

The Committee may take legal advice from its Legal Advisor at any time during the hearing or while they are considering the outcome. The substance of any legal advice given to the Committee should be shared with the Member and the Investigating Officer if they are present.

#### **5. Setting the Scene**

5.1 At the start of the hearing, the Chairman shall introduce each of the members of the Committee, the Legal Adviser and the Democratic Services Officer and shall invite the Member (if present), the Investigating Officer (if present) and any other persons in attendance to introduce themselves.

5.2 After all the Committee and everyone involved have been formally introduced, the Chairman will explain the procedure which the Committee will follow in the conduct of the hearing. The Committee will conduct the proceedings as informally as possible but will ensure that the Member is given a fair hearing, according to the rules of natural justice. The hearings will not usually be recorded and a verbatim note of the proceedings will not be taken, unless there are exceptional circumstances and good reason to do so.

5.3 The hearing will be conducted in English unless the Member expresses a preference to have the hearing conducted in Welsh and the Committee agrees that it is reasonably practicable to do so. If a hearing is conducted in Welsh, an instantaneous translation service will be provided for the Committee and any other persons attending the hearing who request it.

5.4 The Member has the right to make representations to the Committee and to be represented by counsel, a solicitor or any other person. The Member will be entitled to give evidence, call witnesses, question any witnesses and address the Committee both on the evidence and generally on the subject matter of the hearing. The right to make representations will not extend to the person making the complaint, though this may be allowed by the Committee if it is considered that their attendance would assist the Committee with any matter relevant to the proper determination of the complaint.

5.5 The Committee may limit the number of witnesses called by the Member, where this is conducive to the efficient and judicial hearing of the case. The circumstances in which the Committee may impose such a limitation include, for example, where it appears to the Committee that such witnesses will not be presenting significant new evidence or facts, or where an excessive number of witnesses are being called by the Member to give character testimony.

5.6 Witnesses will not be allowed to sit in the public gallery prior to being called to give evidence before the Committee and, where the Committee meeting is held in private, they will be required to leave after giving their evidence. A designated waiting room will be available for witnesses until they are called.

5.7 Evidence before the Committee may be given orally or by written statement. At any stage during the proceedings the Committee can request the attendance of any person making a written statement or any other person they consider will be able to assist them, but the Committee has no power to require the attendance of any person. Members of the Committee can ask questions of anybody present, at any

time. No cross-examination of witnesses will be allowed by the parties, but questions can be directed through the chair.

- 5.8 The Committee can receive evidence of any fact that appears to it to be relevant even though such evidence would be inadmissible in proceedings before a court of law. The Committee shall not refuse to admit any relevant evidence
- 5.9 Any witnesses may be required to give evidence on oath or affirmation, where there are disputes of fact. The Member and the Investigating Officer shall be entitled to request that witnesses be required to give evidence on oath or affirmation, but the final decision shall rest with the Committee.
- 5.10 The Public Service Ombudsman for Wales (“the Ombudsman”) shall be entitled to attend before the Committee for the purposes of:
  - (a) presenting the Investigating Officer’s Report and/or explaining any matters in it; and
  - (b) otherwise playing such part or assisting the Committee as the Committee considers appropriate.
- 5.11 The Investigating Officer may attend on behalf of the Ombudsman, and the Ombudsman/Investigating Officer may be represented by Counsel or a solicitor.
- 5.12 The usual procedure to be followed is set out in the following paragraphs, but the Committee is free to depart from that procedure where it considers it appropriate to do so. The Committee will decide factual evidence on the balance of probabilities. There will be four possible stages to a hearing.

## **6. Stage 1 – Preliminary procedural issues**

The following procedural matters shall be dealt with in the following order:-

### **6.1. Disclosure of interests.**

The Chairman shall ask the members of the Committee to disclose the existence and nature of any personal and/or prejudicial interests that they may have in the matter and to withdraw from the consideration of the matter, if so required.

### **6.2 Quorum.**

At least 3 members of the Committee must be present at all times during the hearing for the meeting to be quorate. The 3 members must include a majority of independent members. If the Committee is dealing with a complaint against a community councillor, then it must include at least one community councillor representative, but there is no requirement for him/her to actually attend the meeting for the hearing to be quorate. The Chairman shall confirm that the Committee is quorate before proceeding with the hearing;

### **6.3 Exclusion of Press and Public**

The hearings should generally be conducted in public. The Committee should only exclude the press and public where “exempt information” within the meaning of Schedule 12A of the Local Government Act 1972 is likely to be disclosed during the

hearings and the public interest in maintaining confidentiality outweighs the public interest in disclosure. There is a presumption that the public interest is best served by holding hearings in public unless there are overriding and compelling reasons to the contrary. It is expected that a Standards Committee would normally hear evidence and submissions in relation to an alleged breach of the Code of Conduct in public. Among other things, this recognises a member's right under Article 6 of the European Convention on Human Rights to a fair and public hearing. However, the legislative framework recognises there may be circumstances in which it is appropriate for the Standards Committee to consider matters in private, including when deliberating the evidence and submissions it has received prior to making a determination.

The Chairman shall, in turn, ask the Member, the Investigating Officer and the Legal Adviser whether they wish to ask the Committee to exclude the press and public from all or part of the hearing. If any of them so request, they should be invited to put forward their reasons for so doing and the Chairman shall ask for responses from the others. The Committee shall then resolve, by majority vote, whether to exclude the press and public from all or any part of the hearing.

Where the agenda papers or any reports have been classified as confidential Part 2 items and withheld in advance of the meeting, and the Committee does not resolve to exclude the press and public, the papers should now be provided to the press and public.

The Standards Committees (Wales) Regulations (as amended) expressly provide that Standards Committee may exempt from publication agendas, records or information connected to the consideration of a misconduct report, until such time as the misconduct proceedings are concluded, that is when any time limit for appealing to the Adjudication Panel has expired or any such adjudication has been completed. This recognises there may be circumstances in which it is appropriate for Standards Committee to consider matters in private, including when deliberating the evidence and submissions it has received prior to making a determination

#### 6.4 Hearing procedure

The Chairman shall confirm that all present know and understand the procedure which the Committee will follow in determining the matter.

#### 6.5 Proceeding in the absence of any Member.

If the Member fails to attend or is not represented at the hearing, the Committee may:

- (a) hear and decide the matter in the absence of the Member, if it is satisfied that the Member was duly notified of the hearing and that there is no good reason for such absence or
- (b) adjourn the hearing.

Before deciding to hear and determine any matter in the absence of the Member, the Committee shall consider any written representations submitted by the Member and whether the Member had indicated that he/she did not intend to attend the hearing.

Where the Member has failed to attend, without good reason and the Committee has decided the matter in his/her absence, there is no further right of appeal or re-hearing of the matter.

If the Standards Committee is satisfied (after receiving a medical certificate) that any party is unable, through sickness, to attend the hearing and that the party's inability is likely to continue for a long time, the Standards Committee may make such arrangements as may appear best suited, in all the circumstances of the case, for disposing fairly of the matter.

## **7. Stage 2 – Findings of Fact**

- 7.1 After dealing with any preliminary issues, the Committee will next seek to resolve any remaining disputes of fact that have been identified in the Investigating Officer's Report.
- 7.2 If there is no disagreement about the facts, the Committee can move on to the next **Stage 3** of the hearing.
- 7.3 If there is disagreement, the Ombudsman/Investigating Officer, if present, should be invited to make any necessary representations to support the relevant findings of fact in the Investigation Report. With the Committee's permission, the Ombudsman / Investigator may call any necessary supporting witnesses to give evidence. The Committee may give the Member an opportunity to challenge any evidence put forward by any witnesses called by the Ombudsman / Investigating Officer.
- 7.4 The Member should then have the opportunity to make representations to support his or her version of the facts and, with the Committee's permission, to call any witnesses to give evidence.
- 7.5 At any time, the Committee may question any of the people involved or any of the witnesses, and may allow the Ombudsman/Investigating Officer to challenge any evidence put forward by witnesses called by the Member.
- 7.6 If the Member disagrees with any relevant fact in the Ombudsman/Investigator's report, without having given prior notice of the disagreement, he or she must give good reasons for not mentioning it before the hearing. If the Ombudsman/ Investigating Officer is not present, the Committee will consider whether or not it would be in the public interest to continue in his or her absence. After considering the Member's explanation for not raising the issue at an earlier stage, the Committee may then:
  - (a) Continue with the hearing, relying on the information in the Ombudsman/Investigating Officer's Report;
  - (b) Allow the Member to make representations about the issue, and invite the Ombudsman/Investigating Officer to respond and call any witnesses, as necessary; or
  - (c) Postpone the hearing to arrange for appropriate witnesses to be present, or for the Ombudsman/Investigating Officer to be present if he or she is not already.
- 7.7 At the conclusion of the representations as to matters of fact, the Chairman shall ensure that each member of the Committee is satisfied that he/she has sufficient factual information to enable him/her to determine whether there has been a failure to comply with the Code of Conduct, as set out in the Investigating Officer's Report.

- 7.8 The Committee will then adjourn the meeting and retire in private to consider its decision. The Committee shall reach its decision on the balance of probability based on the evidence which it has received at the hearing.
- 7.9 The Committee may, at any time, reconvene the meeting in order to seek additional evidence from the Investigating Officer, the Member or any of the witnesses, or to seek advice from the Monitoring Officer or Legal Advisor. If the Committee requires any further information, it may adjourn the proceedings pending the production of further evidence.
- 7.10 Once the decision has been reached, the meeting shall be reconvened and the Chairman will announce the Committee's findings of facts.

### **8. Stage 3 – Did the Member fail to follow the Code?**

- 8.1 The Committee will then need to consider whether or not, based on its findings of fact and/or the facts that have been agreed by the parties, the Member has failed to comply with the Code of Conduct, on the basis set out in the Investigating Officers' Report. The function of the Committee is to make a determination based on the failures to comply with the Code of Conduct set out in the Investigation Report and any additional or alternative breaches of the Code that may come to light during the hearing shall not be taken into account in reaching a decision.
- 8.2 The Committee shall invite the Investigating Officer to make representations regarding the alleged breaches of the Code of Conduct by the Member, as set out in the Investigation Report, having regard to the findings of fact or agreed facts.
- 8.3 The Member should then be invited to respond to the representations from the Investigating Officer and give reasons why he or she has not failed to follow the Code of Conduct.
- 8.4 The Committee may, at any time, question anyone involved on any point they raise in their representations.
- 8.5 The Member should be invited to make any final relevant points.
- 8.6 The Committee will then ask all those present to leave the room and will retire in private to consider its decision. The Democratic Services Officer and Legal Adviser will remain to take notes and give legal advice respectively.
- 8.7 Once a decision has been reached and the meeting reconvened, the Chairman will announce the Committee's decision as to whether or not the Member has breached the Code of Conduct
- 8.8 If the Committee decides that there is no evidence of any failure to comply with the Code of Conduct and no further action needs to be taken, the Member will be informed at this point. In this case, the Committee may also consider whether it should make any general recommendations to the Council (or community council, as the case may be).

### **9. Stage 4 – If the Member has failed to comply with the Code**

- 9.1 If the Committee finds that a failure to comply with the Code of Conduct has occurred, the Committee will invite the Ombudsman/Investigating Officer whether in his/her

opinion the breach of the Code is such that the Committee should impose any sanction and, if so, what the appropriate sanction should be.

- 9.2 The Committee will then invite the Member to respond and to make representations as to what action the Committee should take, including any mitigating factors.
- 9.3 The Committee may question the Ombudsman/Investigating Officer and Member, and take legal advice, to make sure they have the information they need in order to make an informed decision.
- 9.4 The Committee will then adjourn to and retire in private to consider whether the failure to comply with the Code of Conduct warrants no action, a censure, or a suspension of the Member, before announcing its decision.
- 9.5 In coming to its decision, the Committee must determine one of the following:-
  - (a) That the Member has failed to comply with the Code of Conduct but that no action needs to be taken; or
  - (b) That the Member has failed to comply with the Code of Conduct and should be censured; or
  - (c) That the Member has failed to comply with the Code of Conduct and should be suspended or partially suspended for a period not exceeding 6 months or, if shorter, for the remainder of that person's term of office .

## **10. Decision of the Committee.**

- 10.1 The decision of the Committee may be taken by a simple majority of votes cast, with the Chairman having a second and casting vote, in the case of equality of voting. The decision will record whether it was unanimous or taken by a majority.
- 10.2 Once the Committee has reached a decision, the meeting shall be reconvened and the Chairman will announce the Committee's decision. The decision will be recorded in the Minutes of the meeting by the Democratic Services Officer and the Legal Adviser/Monitoring Officer will, in consultation with the Chairman, prepare a written record of the Committee's decision, setting out the relevant findings of fact and the reasons for the decision.
- 10.3 The Committee may also consider whether or not it should make any recommendations to the Council (or community council, as the case may be) with a view to promoting high standards of conduct among Members.
- 10.4 Where a document refers to evidence that has been heard in private, only a summary of the document will be entered in the Minutes, with such material omitted as the Committee may direct.

## **11. Procedure after the Committee determination.**

- 11.1 As soon as possible after the hearing, the written decision of the Committee will be sent to the Member, the person who made any allegation which gave rise to the investigation (if known) and the Ombudsman. Where the Standards Committee has made its determination pursuant to arrangements with the monitoring officer or

Standards Committee of another relevant authority, notice of the decision must also be sent to the Standards Committee of that authority

- 11.2 If the Committee impose a period of suspension or partial suspension, then that period of suspension or partial suspension will commence on the day after the expiry of 21 days from receiving the written notification of the Committee's determination (in order to allow for any appeal to the Adjudication Panel for Wales, as set out below). If an appeal is lodged, then any such sanction, if upheld, will not commence until the day after the final determination of the appeal process.
- 11.3 Within 14 days after the expiry of the time allowed to lodge a notice of appeal (i.e. 14 days after the 21 day appeal period), or upon receipt of notification of the conclusion of an appeal process, the Committee must cause to be produced a Report on the outcome of the investigation and send a copy to the Ombudsman, the Monitoring Officer, the Member and take reasonable steps to send a copy to any person who made any allegation which gave rise to the investigation.
- 11.4 Upon receipt of the Report of the Committee, the Monitoring Officer must, for a period of 21 days, publish the Report on the Council web site, make copies available for public inspection and not later than 7 days after the Report is received from the Committee give public notice, by advertisement, that copies of the Report are available and specify the date (being a date not more than 7 days after public notice is first given) from which the period of 21 days will begin. If the matter involves a Community Councillor, a copy of the Report will be sent to the Clerk of that Community Council.

## **12. Orders for Costs and Expenses**

- 12.1 The Committee has no power to make an award of any costs or expenses arising from any of its proceedings.

## **13. Appeals**

- 13.1 Where the Committee decides that a Member has failed to comply with the Code of Conduct, the Member may seek permission to appeal against the determination to an Appeals Tribunal drawn from the Adjudication Panel for Wales. The appeal process is in accordance with the Local Government Investigations (Functions of Monitoring Officers and Standards Committees) (Wales) Regulations 2001 as amended.
- 13.2 A Member wishing to appeal against the determination of a Standards Committee will first need to obtain the permission of the President (or another nominated member) of the Adjudication Panel for Wales. The requirement to obtain permission to appeal is intended to ensure that only appeals that have a reasonable prospect of success (in whole or in part) will proceed. A member will have no right to challenge, or indeed seek to delay implementation of, a sanction imposed by the Standards Committee on entirely frivolous or spurious grounds
- 13.2 The application for permission to appeal must be instigated by giving notice in writing within 21 days of receiving notification of the Committee's determination to the President of the Adjudication Panel for Wales,
- 13.3 The application for permission to appeal must specify:
  - (a) The grounds for appeal; and

- (b) Whether or not the person giving notice of appeal consents to the appeal being conducted by way of written representations.
- 13.4 The application for permission to appeal will be decided by the President of the Adjudication Panel for Wales or a member of the panel nominated by the president of the Adjudication Panel to exercise this function. Unless the president or the person nominated considers that special circumstances render a hearing desirable, the decision on whether to grant permission to appeal is to be made in the absence of the parties. In reaching a decision on whether to grant permission to appeal, the president of the Adjudication Panel for Wales or the nominated panel member must have regard to whether the appeal or part of it has a reasonable prospect of success.
- 13.5 The President of the Adjudication Panel for Wales or the nominated panel member must decide whether to grant permission to appeal and give notice of the decision no more than 21 days after receipt of the application for permission to appeal, or where further information has been requested, no more than 14 days after the end of the period specified for providing that information.
- 13.6 The President of the Adjudication Panel for Wales or the nominated panel member must notify the decision to:
  - (a) the person seeking permission to appeal;
  - (b) the Ombudsman; and
  - (c) the Standards Committee which made the determination that is the subject of the application for permission to appeal.
- 13.7 If permission to appeal is refused the notice must also include the reasons for that decision.
- 13.8 If permission to appeal is granted, the President of the Adjudication Panel for Wales or the nominated panel member must refer the matter to an Appeals Tribunal

#### **14. Referral Back from the Adjudication Panel**

- 13.1 In circumstances where there is a referral back to Standards Committee from the Adjudication Panel for Wales with a recommendation that a different sanction should be imposed, the Committee shall meet as soon as reasonably practicable to consider the recommendations of the Appeals Tribunal and shall determine whether to uphold its original determination or accept the recommendation.
- 13.2 As soon as possible after meeting to reconsider its determination, the written decision of the Committee will be sent to the Member, the person who made any allegation which gave rise to the investigation (if known), the Ombudsman and the President of the Adjudication Panel for Wales.

**FLOW-CHART FOR FULL HEARINGS**

