

OBJECTIVE 1: Establishing principal statutory obligations and organisational objectives

Step 1: Mechanism established to identify principal statutory obligations

Example	Responsibilities for statutory obligations are formally established
Information	<p>Constitution: Mid Devon District Council has a Constitution setting out how it operates, how decisions are made and the procedures which are followed to ensure that these are efficient, transparent and accountable to local people. Some of these processes are required by the law, while others are a matter of Council choice. The Constitution is divided into 15 articles which set out the basic rules governing the Council's business.</p>
	<p>Committee Terms of Reference: these are contained in Part 2 of the Constitution (Articles, 4, 6, 7, 8, 10).</p>
	<p>Minutes of Delegations to Officers and Committees: A list of delegated responsibilities is contained within Part 3 of the Constitution.</p> <p>Senior officers can make other delegated decisions of authority, for which they need to complete the appropriate form (as contained in the Constitution). There were no delegated officers decisions in 2012/13.</p> <p>Decisions for delegation of authority from Cabinet Members are agreed at Cabinet meetings and are recorded accordingly in the minutes. For example, at the Cabinet meeting on 2 August 2012, the Cabinet RESOLVED that the Head of Communities and Governance be authorised, in consultation with the Cabinet Member for Planning and Economic Regeneration, to:</p> <p>(i) Consider bids for and appoint a Business Advice Service for an initial period of 6 months with the option of extending for a further 12 months;</p> <p>(ii) Review bids submitted for the High Street Innovation funding and award funding for projects (keeping the relevant Ward Member(s) informed).</p> <p>Cabinet Members can also make delegated decisions for services within their portfolio. They need to complete and sign a Cabinet Member decision form, giving details about consultation regarding the decision and any potential risks. There were six Cabinet Member decisions in 2012/13.</p>
	<p>Council Committee Structure:</p> <p>The Full Council</p> <p>The Full Council, comprising 42 Members, meets several times each year in the Council Chamber to decide the Council's overall</p>

	<p>policies and set the budget.</p> <p>The Cabinet</p> <p>In addition to recommending major strategies to the Council, the Cabinet is responsible for the most significant and day to day decisions which are not delegated to officers.</p> <p>Scrutiny Committee</p> <p>There is a Scrutiny Committee which supports the work of the Cabinet and the Council as a whole. They consider issues, review services and make recommendations to the Cabinet and the Council on its policies, budget and service delivery issues. Scrutiny also monitors the decisions of the Cabinet and can in certain circumstances "call-in" a decision which has been made but not yet implemented. There were no "call-in's" in 2012-13.</p> <p>Policy Development Groups</p> <p>There are three Policy Development Groups (Managing The Environment, Decent and Affordable Homes, and Community Well-being) which assist the Council and the Cabinet in the development of the budget and policy framework by in-depth analysis of current provision, performance and policy issues and undertake all preparatory work in the development of policy.</p> <p>Other Committees</p> <p>In addition the Council has Audit (carrying out the Standards Function from July 1st 2012), Planning, Standards (disbanded from 1 July 2012), Licensing and Regulatory Committees.</p>
	<p>Management Team: Officers, in paid employment, carry out the policies set by the elected members and deliver services to the local community. The head of paid service is the Chief Executive Kevin Finan. He is supported by a Management Team of 8 key officers to fulfil the Council's statutory obligations.</p> <p>There has been a Management Team restructure during 2012/13 whereby the post of Head of Legal and Democratic Services was not replaced, but was subsumed into three existing Heads of Services' roles (the Head of Communities and Governance was approved at Full Council on 12 December 2012 to take on the role of Monitoring Officer, Member Services and Electoral Services report direct to the Chief Executive and Legal Services report to the Head of HR and Development). Due to the increased priority placed on Customer Services an additional post was created Head of Customer First</p>
<p>Evidence</p>	<ul style="list-style-type: none"> • Constitution • Management Team Job Descriptions • Structure Charts • Minutes of Meetings recording decisions of delegated authority

	<ul style="list-style-type: none"> • Cabinet Member Decisions
Potential for Improvement:	<ul style="list-style-type: none"> • Need to communicate key changes in Constitution to Officers and Members
Assurance	We can place reliance upon this control

Step 1: Mechanism established to identify principal statutory obligations

Example	Record held of statutory obligations
Information	<p>Accessible record of statutory obligations (eg central registry, legal library, intranet)</p> <p>The members of the Legal team have access to Westlaw UK, which is an on-line subscription service legal resource providing up to date legislation (including all statutory obligations). The website is at the following link: http://www.westlaw.co.uk/</p>
Evidence	<ul style="list-style-type: none"> • Legal Library (Invoice for 2013 Subscription)
Assurance	We can place reliance upon this control

Step 1: Mechanism established to identify principal statutory obligations

Example	Effective procedures to identify, evaluate, communicate, implement, comply with and monitor legislative change exist and are used
Information	<p>Review of established processes in place</p> <p>Constitution</p> <p>The Council’s Constitution and policies are reviewed regularly in line with internal changes and legislative changes. The whole Constitution (excluding the Financial and Contract Procedure Rules) was last updated in April 2012. The Constitution is in the process of being revised during 2012/13 with a Constitution Working Group consisting of 4 Members, the Monitoring Officer and Member Services Officer, following changes to the Management Team Structure, updated Financial Regulations and the revised Members Code of Conduct.</p> <p>The Corporate Plan</p> <p>The Corporate Plan is fully reviewed every three years, with the last full review taking place in 2012. Each year in-between, a smaller scale review is undertaken to update the Corporate Plan in line with any legislative or other change (such as economic or political).</p> <p>Service Business Plans are updated annually and demonstrate how services plan to implement known forthcoming changes as identified in the Corporate Plan, Constitution and other policies and strategic documents as well as legislation changes. Review of the Business Plan template this year – including views of a working group of officers.</p> <p>Rolling review of policies and strategies to committees</p> <p>A schedule of policies and strategic documents due for review is published at the start of each financial year by the Committee Clerks, with the individual policies being added to their respective committee’s forward plan.</p> <p>Where there are legislative changes that affect the Council’s policies, these are reviewed and updated in line at the time of the change and the policy review schedule is also updated accordingly. For example, there have recently been changes to policies following the Localism Act such as Housing and flexible tenancies.</p> <p>All policies and reports regarding changes in legislation are presented to Management Team for discussion before going to committee.</p> <p>The overarching Health & Safety policy statement goes to the CWB PDG for information and noting and then to Cabinet for approval/noting. Health and Safety Policies are not included in the review schedule as they are not agreed by a full Member committee. Instead they go to the Health and Safety Committee for approval, which consists of Management representatives, Union representatives and a Member champion. They are then presented to Management Team for final approval. Some Health</p>

and Safety policies (such as the no-smoking policy) are approved by the Joint Negotiating and Consultative Committee.

Internal Audit check for compliance with statutory and legislative requirements at each audit. There are ten core audits, Internal Audit are required to carry out annually. These are:

- Council Tax and National Non-Domestic Rates (Business Rates)
- Income and Cash Collection
- Main Accounting System
- Housing Benefits
- Creditors
- Housing Rents
- Treasury and Cash Flow Management
- Payroll
- Recovery
- Car Park Income

In addition, they carry out Systems Audit Reviews over a rolling four-year work programme.

Internal Audit will make recommendations for changes to policies, procedures or general practice as necessary. Each recommendation is then either agreed or disagreed by the relevant Head of Service and (if agreed) given a target date for completion. The Audit Team Leader monitors achievement of targets by completion date and reports on this to the Audit Committee on a quarterly basis.

Appointment of suitably qualified and experienced employees, selected against accurate and specific job descriptions and person specifications

The Council has a vacancy approval form and guidance notes which must be completed and signed off by the Service Manager and relevant accountant (for budget checks) prior to the recruitment process. The vacancy approval form and corresponding Job Description and Person Specification is then passed to the Chief Executive and Head of HR and Development for discussion and approval. Where a vacancy has arisen due to a restructure, then a Business Case must be attached to the Vacancy Approval Form and this is passed to Management Team for approval.

Applicants for vacancies are required to complete a standard application form for employment. The form contains fields for recording details of qualifications and experience. Each application form received is cross-checked against criteria within the Person Specification at stage one of the recruitment selection process. Appropriate applicants are selected for interview. The

	<p>successful person is required to provide copies of their relevant qualifications where it is deemed as “essential” to the requirements of the post.</p> <p>References are requested from two referees for each new employee as evidence that they hold the relevant experience.</p> <p>Employees who are required to hold a driving licence for their job, are required to provide a copy of their driving licence. If they are required to use their own vehicle, they also need to provide proof that they have insurance (with business use). The employee’s line manager will complete a driving licence/insurance form on their first day as part of induction, only if they have seen the originals as proof. The form is then kept on the employee’s file.</p> <p>All successful applicants have to complete and return a Pre-Employment Health Declaration Questionnaire before they commence employment at the Council. If, on the questionnaire, they indicate that they have a health condition that could affect their ability to do the job, then the form is sent to an Occupational Therapist for assessment.</p>
	<p>Evidence of effective arrangements for internal and external communication:</p> <p>The Council uses a variety of methods to communicate information about relevant changes in legislation both internally and externally.</p> <p>Internal</p> <p>SharePoint</p> <p>SharePoint is the Council’s intranet, which is used to publish key relevant documents about legislation or policy changes that affect local government. For example, full and summary versions of the Equality Act 2010 are available to view on SharePoint.</p> <p>The Link</p> <p>The Council’s communication team produce a weekly officer’s newsletter ‘The Link’, which is used to convey corporate messages, meeting dates and key events.</p> <p>Senior Officers’ Forum</p> <p>In addition to The Link, Senior Managers meet monthly to discuss corporate issues and any matters arising from Management Team meetings (the minutes of which are made available on the staff intranet). These meetings are called “Senior Officers Forums”, from which a “Core Brief” is published documenting the items discussed. Information contained within the Core Brief is disseminated to all staff via team meetings and is available to view on the Council’s intranet SharePoint.</p> <p>Staff Briefings</p> <p>Where there is cross-cutting legislation change that affects multiple service areas, Managers have arranged Staff Briefings. For example, the Localism Act affected Housing, Economic Development and Planning services and officers from beyond those areas also needed to be aware of the changes. Three staff briefings were arranged (one for each specific topic):</p>

- Friday 9 March 2012 – 10.00am – Governance: led by Amy Tregellas and Simon Johnson
- Friday 9 March 2012 – 2.00pm – Planning: led by Jonathan Guscott
- Monday 12 March 2012 – 3.00pm – Housing: led by Nick Sanderson and Claire Fry

Staff were informed of the briefings via articles in The Link and an all officers reminder email. The Head of Service gave a presentation and allowed for discussion and question and answer time for staff attending to get a better understanding. The slides and details of the discussions were then published on SharePoint for all officers to view.

Service Managers will also staff briefings with their teams to pass on important corporate or legislative news that affects the service.

Staff Forums with Management Team

Staff forums are held (approximately every 3-6 months) with the Chief Executive and usually the Head of Human Resources and Development. Dependent on the topics to be covered, other members of Management Team are invited to attend, for example the Head of Finance if matters concerning budget cuts are to be debated. Staff representatives from the various services are rotated so that different people are given the opportunity to attend and ask questions. Currently, staff are being consulted on whether this approach to communication is effective or, if not, to come up with alternative ideas such as having a regular slot on the weekly Management Team meeting for question time.

All Officer Emails

A select number of Officers have authority to send out “all Officer” emails that contain important information such as information about Government Grant Settlement and advanced notice of any planned system downtime. Notification of all internal and external vacancies, plus publication of agendas is also emailed to all officers.

UNISON

UNISON will email their members updates about any policy, legislation or proposed structure change for their information and / or consultation.

Members

The Council’s Member Services team produce a weekly information sheet ‘WIS’ for Members detailing a weekly diary of events and key corporate news pertinent to Members and the Council.

External

- Website – the front page of the Council’s website shows the most recent press releases and links to service areas for more detailed service specific information.
- Press Releases

- Parish Matters - 'Parish Matters' is published monthly and distributed to town and parish councils across Mid Devon. It is also published on the Council's website.
- Mid Devon Talk - Mid Devon Talk magazine is distributed through a combination of retail outlets, schools and community venues and inserting it in the Mid Devon Star and Crediton Country Courier.
- Service newsletters – some services send out a regular newsletter to their customers either by mail, the Council's website, or both.
- Service leaflets – the Council has many leaflets in use across its services to give customers a summary of information relevant to a specific topic. These leaflets are available on request, or on collection from a stand in reception at the Council's offices, or downloadable from the Council's website.
- Annual Reports – Housing Services, Council Tax and Planning produce Annual Reports for their services and publish these on the website. Housing Services send a copy to all tenants and leaseholders and Council Tax send a copy of their report to all Mid Devon residents with the annual Council Tax bills.
- E-Bulletins – the Grants and Funding Officer sends out a daily e-bulleting to all customers on a contact list with details of any new grants, including government grants.

The Council has a policy for notifying customers about sudden changes in services, for example, in times of extreme weather. For example:

- **Website:** Information about any changes is posted on our website www.middevon.gov.uk and regularly updated.
- **Facebook:** Our Facebook page (<http://www.facebook.com/middevon1>) is also continually updated.
- **Twitter:** www.twitter.com/middevondc
- **Press information** - Details are passed to the local press and radio and, where possible, they use the information.
- **Contact network** - Not everyone has access to a computer so we have developed a method of cascading information to as many people as we can. We have a network of contacts such as local post offices, local shops, customers with prominent roadside household windows and large workplaces who have agreed/volunteered to be added to an email or text message distribution list to display information in their local area.

Tenants / Residents

- Housing News 4U Newsletter – The Housing Services section sends out a quarterly newsletter which contains information from the Council and tenants. The newsletter includes a regular feature titled “Updates from Number 10” which provides a summary of key legislation changes affecting tenants and the Housing Service. The newsletter is sent to all Council tenants and leaseholders. It is also published on the Council's website.

Appropriate induction training has been given to specific post holders

All new employees are required to go through an induction on their first day. Line Managers are responsible for going through

the day-to-day aspects appropriate to the employee's job, as detailed on the Induction Checklist. Any service or job specific areas of importance are also covered by the Line Manager induction (for example, if the new employee is required to act as an emergency contact, the Line Manager will explain this process to them and direct to any necessary policies for the employee to read).

As part of the induction process, all employees must complete Health and Safety training and access the ICT Training and e-Learning Centre on the Council's intranet (SharePoint) to become familiar with key Council policies. A number of training modules (Data Protection, Freedom of Information and Information Security) are listed as well as corporate policies (Data Protection, Email Use, Information Security Incident, Internet Use, Removable Media and Software and Legislation Compliance). At the end of each module the user has to complete a small exam online to indicate that the user has understood the subject. The required pass mark is 50%. All users must pass these modules and accept policies before they are allowed access to areas of the network, including the shared drive.

Line managers print off policies for non-computer users in their team, for them to read and sign.

As part of the procurement and contract process, external contractors must agree to comply with our Data Protection policies and provide evidence of their own policies relating to Health and Safety.

In addition to the service induction, all employees attend a corporate induction. Officers from across the Council perform mini-presentations summarising key aspects of their areas. This includes:

- Chief Executive: Corporate Priorities
- Leader of the Council: Role of Elected Members
- Communications Officer: Communications Guidelines
- Unison Representative: UNION information
- Head of Communities & Governance: Governance, Risk Management, Audit, Whistle-blowing Policy, Anti-Fraud and Corruption Policy, Equalities, Performance Management, Officer Code of Conduct
- Head of Customer Services: Council's Customer Care Policy and Complaints Policy
- Head of ICT: Data Protection, FOI and Government Marking Scheme
- HR Business Partner: HR Policies and WinTime
- Learning and Development: Appraisal training and Learning and Development opportunities

Awareness training tailored to job profiles has been provided

In addition to the Health and Safety and corporate policy training at induction, employees have access to other awareness

	<p>training according to their job needs.</p> <p>In 2011/12 Managers completed a Health and Safety Needs Analysis spreadsheet, showing which job roles in their service area need particular awareness training in varying aspects of health and safety. Any follow-up training is identified at appraisals (and completion of a service training plan) or through cyclical refreshers.</p> <p>Most of the Health and Safety courses are provided through the e-Learning system for those employees who have identified this as conducive to their learning styles and have been granted a licence. The system allows employees to work through online modules for a particular course. Manual workers (eg Building Maintenance Operatives, Grounds Maintenance Operatives, Refuse and Recycling Collectors and Leisure staff) are given practical training where required instead of via e-Learning. Likewise other, more detailed, courses are contained as part of the annual learning and development programme, with classroom based/workshop style learning for all officers.</p> <p>Examples of the awareness training offered (at varying levels) includes: Child Protection, Manual Handling, Accident Investigation, Domestic Violence, health and Safety at Work, Risk Management, Asbestos.</p> <p>The Learning and Development Manager sends out a monthly Learning and Development Newsletter to all officers advertising upcoming courses for staff or their managers to request places if it is agreed suitable for their role.</p> <p>Inspection of reports to Members on implications of new legislation</p> <p>All committee reports are circulated to Management Team and Cabinet Members prior to being published with the relevant agenda. The report template includes a field for legal implications.</p> <p>Evidence that assurance has been given to Chief Executive (or equivalent) that all relevant legislative changes have been reported and addressed.</p> <p>As above. The Chief Executive is a member of Management Team.</p>
<p>Completed Actions from 11/12 AGS</p>	<ul style="list-style-type: none"> • Corporate Plan Annual Performance Report • New Business Plan template including fields for consultation information, policies due for review and legislation changes
<p>Evidence</p>	<ul style="list-style-type: none"> • Constitution • Corporate Plan • Business Plans and Work Plans • Policy Review Schedule • Internal Communication

	<ul style="list-style-type: none"> • External Communication • Vacancy Approval, New Starter and Induction Paperwork • Training Programmes and Paperwork • Report Template • Examples of reports with legal implications
<p>Comments for Improvement</p>	<ul style="list-style-type: none"> • Put together review schedule for Health and Safety policies and upload to SharePoint • Add the following to induction programme: <ul style="list-style-type: none"> ➢ Finance Regulations ➢ Procurement Policy (plus partnering arrangements and tendering - covered in Constitution?) ➢ Scheme of delegation • Carry forward action to review Internal Communications • Carry forward action to establish an Internal Communication Strategy • Add Corporate Plan Summary Leaflet to information sent to New Starters • Review need and effectiveness of e-learning system – also confusing about the CALMs system also being used for policy updates and training. • Manual workers (except in Grounds Maintenance) don't receive a copy of the Learning and Development Newsletter
<p>Assurance</p>	<p>We can place some reliance upon this control</p>

Step 1: Mechanism established to identify principal statutory obligations

Example	Effective action is taken where areas of non-compliance are found in either mechanism or legislation
Information	<p>Review of evidence to demonstrate that action has been taken to overcome identified areas of non-compliance, for example:</p> <p>All Internal Audit reports are reported to Audit Committee for their information. The Internal Audit Team Leader produces a quarterly progress report detailing the number of actions completed/outstanding arising from audits.</p> <hr/> <p>Evidence of corrective action being taken in response to upheld complaints against the authority:</p> <p>The Council encourages complaints, comments and compliments from customers so that it can maintain a high level of service (http://www.middevon.gov.uk/index.aspx?articleid=663). To support this, the Council has a Complaints Policy (Have Your Say).</p> <p>Stage 1 and Stage 2 Complaints</p> <p>All complaints are logged on a central system. Complaints are initially sent to the Service Manager to investigate (Stage 1). Where a complaint is not upheld, complainants are given the opportunity to escalate their complaint to the Head of Service (Stage 2).</p> <p>An annual summary reports, detailing number per service area and a brief outline of general theme of complaints, is sent to Senior Managers and Members via a Cabinet report (the report for 2012/13 is being presented to Cabinet on the 1st August 2013).</p> <p>There were two qualifying claims for compensation in 2012/13 within the Housing Repairs Service: £20 for a missed appointment and £11.22 for a damaged blind.</p> <p>Ombudsman Complaints</p> <p>Where a complaint is not upheld by the Head of Service, complainants are advised that they can contact the Local Government Ombudsman (or Housing Ombudsman for Housing complaints) to investigate if they wish.</p> <p>During the 2012/13 financial year, Mid Devon District Council received 449 FOI requests. Two complaints were made to the ICO during this period. The ICO upheld one decision, but required no further action. The second complaint was withdrawn after the ICO issued a preliminary assessment that also upheld our decision.</p> <p>Feedback – “You Said, We Did”</p> <p>Each year, the Council publishes information on the website about upheld complaints received and details of the corrective action taken for the previous financial year. An annual summary from the Local Government Ombudsman is also published on the website, showing how many complaints they received about the Council that financial year and how many, following</p>

	<p>investigation, they deemed to be justified.</p> <p>Housing Services monitor complaints relating to tenants or the Housing Service. Each quarter a newsletter “Housing News 4U” is sent to all tenants and leaseholders, which contains an article about things we’ve changed in the Housing Service as a result of feedback.</p> <p>The Council’s Monitoring Officer handles any complaints about Members.</p> <p>Incidents</p> <p>There were 12 potential or actual security instances in 2012/13.</p> <p>MDDC reported 5 RIDDOR incidents to the HSE in 2012/13 (all for over 7 day absences) plus 2 RIDDOR reports for Leisure Services. No HSE investigations were carried out.</p> <p>The Council’s Scrutiny Committee can make recommendations to the Cabinet where they have identified an area for improvement. For example:</p> <p>The Scrutiny Committee (11 March 2013) recommended to Cabinet (28 March 2013) that a training session be held for all Chairmen, Vice-Chairmen and relevant Officers regarding the use of the exemption clause in the Access to Information Act regarding the exclusion of the press and public</p>
Completed Actions from 11/12 AGS	<ul style="list-style-type: none"> • Council Complaints Policy updated to better manage vexatious complaints
Evidence	<ul style="list-style-type: none"> • Audit Committee Reports and Minutes • Business Plans • Have Your Say – Council Complaint’s Policy • Stage 1 and 2 Complaints Information • FOI Reports • Satisfaction surveys • Housing News 4U Newsletters
Comments for Improvement	<ul style="list-style-type: none"> • Roll out lessons learnt form (used by Housing) to other service areas to complete following a complaint • The Local Government Ombudsman have changed their process and no longer produce draft reports in April each year.

	Recommend Legal keep an internal record of the number of complaints that went to the Ombudsman and the number upheld.
Assurance	We can place reliance on this control

Step 2: Mechanism in place to establish organisational objectives

Example	Consultation with stakeholders on priorities and objectives
Information	<p>Results from internal and / or external consultation exercises have been analysed and published</p> <p>Results from external consultation exercises are published on the Council’s website.</p>
	<p>Internal Consultation</p> <p>Results from internal consultation are analysed by the relevant Service Manager and/or Head of Service. Any outcomes are then published in the officer’s internal newsletter “The Link”. Members will also be informed of key outcomes via their internal newsletter “WIS”.</p> <p>Internal consultation carried out in 2012/13 included:</p> <ul style="list-style-type: none"> • Remote Working • SharePoint • Essential Car User <p>In addition, officers have the chance to regularly raise questions through the Have Your Say Forum on SharePoint, Burning Question feature in The Link and through the Staff Forum.</p>
	<p>External Consultation</p> <p>The Council has a Community Engagement Strategy detailing the various methods of consultation with local residents and businesses. The Forward Planning Team have also adopted a Statement of Community Involvement, identifying methods of communication with the community about aspects of planning.</p> <p>The Council uses a variety of methods for consultation including Street Surveys, Focus Groups, Road Shows and Exhibitions, Open Meetings, Online Surveys, and Mystery Shopping. Some services also use satisfaction surveys to measure customer satisfaction with a particular service the Council has provided.</p> <p>Citizens Panel</p> <p>Panellists are asked to be part of the panel for three years and take part in up to four surveys a year. These surveys can be conducted by post or email. Some members also volunteer to take part in telephone or face-to-face interviews and attend focus groups.</p> <p>The three surveys conducted in 2012/13 were:</p>

- 015 – Experience / satisfaction with Taxi and Private Hire vehicles
- 014 - Assessing the impact of the proposed changes to Council Tax Benefit
- 013 - Reputation and Satisfaction / Forward Planning

Mid Devon Connect

Mid Devon District Council has formed a partnership with a range of organisations in order to provide a more efficient service to our customers.

Mid Devon Connect (MDC) Aims:

- To improve access to services & reduce rural isolation
- To bring information and advice to people, in places where they meet
- To engage with the public on a range of issues
- To deliver public service campaigns
- To work with partners to co-ordinate our efforts and share resources

To do this we are trialling different events to reach the public.

Mid Devon Connect Events in 2012/13:

Date	Event	Audience
Saturday 28 April	Thorverton WI Market	Older residents / Rural
Wednesday 19 September	Petroc Freshers Fayre	Students / Young people
Saturday 22 September	Children's Centre - big bounce event	Families
Friday 28 September	Westexe 'have your say'	All
Saturday 29 September	Family Fun Day at Culm Valley Leisure Centre	Families
Wednesday 21 November	Winter Warmth and Wellbeing AGE UK	Older residents

Consultation Activities in 2012/13

- Draft Supplementary Planning Document: provision of parking in new development
- Community Engagement Strategy 2013-16
- Tiverton Hospital - future service
- Review of Hackney Carriage/Private Hire Policy
- Supplementary Planning Document: provision of parking in new development
- Lords Meadow Leisure Centre - Development Project
- Cotteylands Play Area
- Tenancy Strategy
- Gambling Act 2005 - Statement of Principles
- Local Welfare Support Service
- Budget 2012/13
- Mid Devon Local Plan Part 3: Development management policies
- Assessing the impact of proposed changes to Council Tax Benefit
- Business First
- Changes to Lords Meadow Leisure Centre
- Dog Control Order
- Tiverton Hospital
- Statement of Community Involvement
- Parks and Open spaces - Tiverton

Public attendance at Committee Meetings

Members of the public are welcome to attend Council, Cabinet, Scrutiny, Audit, Policy Development Groups and other Committee meetings to listen to the debate. There is a slot at the beginning of each committee's agenda for public representation "Public Question Time", where members of the public can voice their opinions on a subject due to be discussed at that meeting. Members of the public may also be able to speak either for or against planning applications at Planning

Committee.

Petitions

Anyone that lives, works or studies in Mid Devon can let us know their concerns by submitting a petition. We welcome petitions online, by post or by email.

Our response to a petition may include one or more of the following:

- taking the action requested
- consideration at a Council meeting
- holding an inquiry/public meeting/consultation or meeting with petitioners
- undertaking research
- referral to our Scrutiny Committee for consideration
- writing to the organiser setting out our views about the request in the petition.

If a petition has more than 1500 signatures it will be discussed at a meeting of the Full Council which all councillors can attend. The person organising the petition will be invited to present it (five minutes) and the councillors will then decide what action to take.

There was one petition in 2012/13 - 'Petition against car parking Price rise' which was presented to Council on 27 June 2012.

This was debated by Full Council and they decided to review car parking in 12 months time. A further petition was received in ??? As a result of the petition

Youth Forum

The [Youth Forum](#) is designed for children and young people to contact us and ask questions. Pupils have found it useful as part of their Citizenship lessons.

General consultation

The Council uses its various communication methods to consult the public including Mid Devon Talk, Parish Matters, Press Releases.

Tenant/Resident Consultation

The Council's Housing Services section have a Tenant Involvement Agreement (also known as a Tenant Compact) detailing our aims and objectives for involving and consulting with tenants, leaseholders and residents on our housing estates.

The Housing Service offers a wide range of opportunities for tenants to get involved (see structure at <http://www.middevon.gov.uk/index.aspx?articleid=7956>) including:

	<ul style="list-style-type: none"> • The Scrutiny and Improvement Group • Housing News 4U: editorial panel • Tenant Inspectors who inspect void properties and assist with reviewing work undertaken as part of the planned maintenance contract • Estate Representatives • Complaints Panel • Local Voice Events • Devon Housing Options Events • Focus Groups (such as the one which reviewed the ASB policy and procedures in 2012) • Tenant training <p>During 2013, we are running a number of “Making Your Money Go Further” events involving different agencies eg DWP, Children’s Centres, CHAT to enable us to consult with tenants and also to provide them with money-saving tips and help and advice about how to maximise income, and to respond to welfare reform. At these events, we are providing cookery demonstrations and there are children’s activities so that tenants with families are able to attend.</p> <p>Housing Services consult the tenant Scrutiny and Improvement Group (SIG) on strategic decisions and policies affecting the Housing Service. The SIG routinely analyses performance data, reviews policies and procedures and is about to commence work on a service review relating to rechargeable repairs.</p> <p>Information is published on the Council’s website and in the Housing Service Newsletter “Housing News 4U”, which is sent to all tenants and leaseholders, about changes to Housing policies etc.</p> <p>The Housing Service also regularly uses Facebook and Twitter to engage with tenants.</p>
Evidence	<ul style="list-style-type: none"> • Community Engagement Strategy • Statement of Community Involvement • Internal Consultation • External Consultation • Tenant/Resident Consultation • Tenant Involvement Strategy / Agreement • Minutes of Meetings with Public Representation

Comments for Improvement	<ul style="list-style-type: none">• Publish results from internal consultation exercises on SharePoint• Updated Events Safety Guidance to include information about equality impact of events
Assurance	We can place reliance upon this control

Step 2: Mechanism in place to establish organisational objectives

Example	The authority's priorities and organisational objectives have been agreed (taking into account feedback from consultation)
Information	<p>Authority's approved and published strategic plan takes account of all consultation and local and national priorities</p> <p>The Corporate Plan is prepared in consultation with local residents and businesses as well as Elected Members and Senior Managers.</p>
	<p>Priorities and objectives in strategic partnerships are aligned with corporate priorities and objectives</p> <p>The Economic Development Strategy and Community Engagement Strategy meet and feed into the Strategic Aims of the Council as detailed in the Corporate Plan.</p> <p>The Council is currently consulting on a Housing Strategy, which will feed into the corporate priority of "Decent and Affordable Homes" and working towards putting together an Older Persons Strategy in line with the "Community Well Being" priority.</p>
Evidence	<p>Minutes of approval and details of consultation for the following Strategic Documents:</p> <ul style="list-style-type: none"> • Community Engagement Strategy • Economic Development Strategy • Corporate Plan
Comments for Improvement	<ul style="list-style-type: none"> • Need diagram showing relationship between strategic documents
Assurance	We can place reliance upon this control

Step 2: Mechanism in place to establish organisational objectives

Example	Priorities and objectives are aligned to principal statutory obligations and relate to available funding
Information	<p>Corporate priorities and objectives are clearly set out in the strategic plan</p> <p>The Council has set five priorities until 2015. These are:</p> <ul style="list-style-type: none"> • Thriving economy • Better homes • Empowering our communities • Caring for our environment • Managing our resources <p>Our Corporate Plan shows how we will achieve progress in these areas.</p> <hr/> <p>Strategic plan takes account of annual budget and medium term financial plan</p> <p>The Head of Finance produces an annually updated Medium Term Financial Strategy (MTFS) which takes account of the Council's key strategies (i.e. Service Plans, Treasury Management Plan, Asset Management Plan, Work Force Plan and Capital Strategy and ultimately can then demonstrate it has the financial resources to deliver the priorities/pledges included within the Corporate Plan). This was last updated in October 2012.</p> <hr/> <p>Financial plans take account of strategic partnership contributions and income streams</p> <p>Included within the overarching Medium Term Financial Strategy is a Medium Term Financial Plan (MTFP) which models all potential changes in funding levels, new initiatives, unavoidable costs and proposed service savings.</p>
Evidence	<ul style="list-style-type: none"> • Corporate Plan • Medium Term Financial Strategy / Plan
Assurance	We can place reliance upon this control

Step 2: Mechanism in place to establish organisational objectives

Example	Objectives are reflected in departmental plans and are clearly matched with associated budgets
Information	Clear terms of reference are set for the preparation of departmental and/or service plans The Council has rolled out a new Business Plan template for 2013/14. This was presented to Senior Managers at the Senior Officers' Forum with guidance notes.
	Departmental and/or service plans clearly reflect corporate objectives and match approved funding The new Service Business Plans will include an appendix for financial information. When the Corporate Plan is next updated in 2015, the Business Plan template will be revised to show the links to the new corporate priorities.
	Annual reports are produced on the outcome of departmental and/or service plans Progress of achievement against Business Plans is being monitored by Corporate Management Team on a quarterly basis.
Evidence	<ul style="list-style-type: none"> • Business Plans • Business Plan Guidance Notes
Assurance	We can place partial reliance upon this control

Step 2: Mechanism in place to establish organisational objectives

Example	The authority's objectives are clearly communicated to staff and to all stakeholders, including partners
Information	<p>A communication strategy in respect of the corporate objectives has been developed, approved and implemented.</p> <p>The Corporate Plan was last updated in 2012 and is next due to be updated in 2015. Performance against the Corporate Plan is reported to Members via Committee reports on a quarterly basis.</p>
	<p>Evidence of consultation with stakeholders (eg public and internal surveys) and strategic partners on service provision against cost</p> <p>Budget briefings with members and PDGs in Autumn consider possible savings from officers – those savings are then passed in terms of recommendations to the Cabinet for consideration.</p> <p>We have access to DCLG website for benchmarking information, but this is only used for basic trends due to lack of detailed information such as how much earmarked reserves are being used to build budgets. Also lack of detail about how budgets are broken down into service costs : performance ratios and recharges.</p>
	<p>Documented meetings across departments to discuss key objectives in corporate and departmental and / or service plans</p> <p>Service Managers discuss progress against objectives at service team meetings, but these are not documented.</p>
	<p>Corporate objectives and aims are set out in key documents (eg annual plans) on the authority's website and intranet site</p> <p>The Corporate Plan is published on the Council's website.</p>
Completed Actions from 11/12 AGS	The Summary Leaflet of the Corporate Plan was produced and distributed to all staff with their pay slips. It is also available on the Council's website.
Evidence	<ul style="list-style-type: none"> • Corporate Plan Summary Leaflet • Internal Consultation • External Consultation
Comments for	<ul style="list-style-type: none"> • Consult with Business Forum on budget setting

Improvement	<ul style="list-style-type: none"> • Agree balance of budgets vs performance alongside corporate priorities • NNDR consultation takes place after figures have been agreed • Include a communication strategy of the Corporate Plan in its next revision • Develop the Performance page of the Council’s website to include all performance reports
Assurance	We can place partial reliance upon this control

Step 3: Effective corporate governance arrangements are embedded within the authority

Example	Code of corporate governance established
Information	<p>Mid Devon District Council has approved and adopted a code of corporate governance, which is consistent with the principles of the CIPFA/SOLACE Framework Delivering Good Governance in Local Government. This statement explains how Mid Devon District Council has complied with the code and also meets the requirements of regulation 4(2) of the Accounts and Audit Regulations 2003 as amended by the Accounts and Audit (Amendment) (England) Regulations 2006 in relation to the publication of a statement on internal control.</p> <p>A copy of the code is on the Council’s website, or can be obtained from the Head of Communities & Governance.</p>
Evidence	<ul style="list-style-type: none"> • Code of Corporate Governance
Comments for Improvement	<ul style="list-style-type: none"> • Communications and Reputation Guidelines need to specify how the Council plans to inform others about key Council annual documents including the Corporate Plan and Code of Corporate Governance
Assurance	We can place reliance upon this control

Step 3: Effective corporate governance arrangements are embedded within the authority

Example	Review and monitoring arrangements in place
Information	<p>The Code itself incorporates a review date and/or a system for continuous update in response to changed requirements.</p> <p>The Local Code of Corporate Governance is reviewed annually by the Audit Committees and was last reviewed in March 2013. Members and senior officers are responsible for putting in place proper arrangements for the stewardship of the resources at its disposal.</p>
	<p>There are clear arrangements for continuously monitoring compliance with the Code eg reports on compliance are regularly submitted to the committee charged with corporate governance responsibility.</p> <p>Compliance against the Code of Corporate Governance is reviewed annually as part of the Annual Governance Statement. A draft report and action plan is presented to the Audit Committee in June and a finalised version in September.</p>
	<p>An annual report on compliance with the Code of Corporate Governance is prepared and submitted to members</p> <p>The Head of Communities and Governance reports to the Audit Committee each March together with a revised Code of Corporate Governance for the new financial year.</p>
	<p>Internal / external audit reports on adequacy of corporate governance arrangements</p> <p>The External Auditor presented their Annual Governance Report to the Audit Committee on 25 September 2011.</p> <p>Governance arrangements are reviewed annually with the update of the Code of Corporate Governance and the review of the Annual Governance Statement.</p>
	<p>An action plan is prepared to address any significant weaknesses in complying with the Code and is continuously monitored by the authority or committee charged with corporate governance responsibility</p> <p>An action plan to improve governance arrangements is drawn up with the review of the Annual Governance Statement. Quarterly progress monitoring reports are presented to the Audit Committee.</p>
Evidence	<ul style="list-style-type: none"> • Code of Corporate Governance • Annual Governance Statement

	<ul style="list-style-type: none"> • AGS Action Plan and Progress Monitoring Reports
Comments for Improvement	<ul style="list-style-type: none"> • Add review date to Code of Corporate Governance document
Assurance	We can place reliance upon this control

Step 3: Effective corporate governance arrangements are embedded within the authority

Example	Committee charged with governance responsibilities
Information	<p>Responsibility for overseeing corporate governance has been formally delegated to an appropriate committee. The Council’s Audit Committee is responsible for overseeing corporate governance.</p>
	<p>Committee terms of reference clearly demonstrating responsibility for corporate governance issues have been approved by the authority The Audit Committee’s Terms of Reference are included in the Council’s Constitution, which was last reviewed in April 2012 and is in the process of a full update.</p>
	<p>Terms of reference are sufficiently comprehensive to ensure that all appropriate aspects of corporate governance are covered The terms of reference for the Audit Committee (as detailed in the Constitution) includes:</p> <ul style="list-style-type: none"> • The Constitution and Financial and Contract Procedure Rules • Anti fraud and anti corruption and whistle blowing policies and the Council’s Complaint process • Risk Management Strategy the effectiveness of the Council’s Risk Management process • The Annual Governance Statement • The Code of Corporate Governance • Compliance with the Council’s own and other published standards and controls.
	<p>Agendas and minutes from the committee charged with corporate governance responsibility indicate that the responsibility is being discharged adequately in accordance with terms of reference Agendas and Minutes of the Audit Committee are available of the Council’s website. They show regular reports from Officers of the Council regarding Governance (eg performance and risk management).</p>
	Evidence
Assurance	We can place reliance upon this control

Step 3: Effective corporate governance arrangements are embedded within the authority

Example	Governance training provided to key officers and all members
Information	<p>Induction training for key new officers and all new members incorporate suitable coverage on corporate governance issues according to responsibilities</p> <p>The Head of Communities and Governance attends the Corporate Induction for new employees and gives a presentation on Internal Audit, Governance (including the Code of Corporate Governance), Risk Management and Equality and Diversity.</p>
Evidence	<ul style="list-style-type: none"> • Corporate Induction Programme
Comments for Improvement	<ul style="list-style-type: none"> • Recommend new employees read the Code of Corporate Governance <p>Ongoing awareness training is provided as appropriate to key staff and all members to ensure that changes in the Code are made known within the authority</p> <ul style="list-style-type: none"> • Articles in The Link and WIS / Officer and Member briefing session following changes to the Code
Assurance	We can place reliance upon this control.

Step 3: Effective corporate governance arrangements are embedded within the authority

Example	Staff, public and other stakeholder awareness of corporate governance
	The Code has been published and is accessible to all staff, the public and other stakeholders The Code of Corporate Governance is published on the Council's website.
Evidence	<ul style="list-style-type: none">• Code of Corporate Governance
Comments for Improvement	<ul style="list-style-type: none">• There is a general staff awareness training programme
Assurance	We can place some reliance upon this control

Step 4: Performance management arrangements are in place

Example	Comprehensive and effective performance management systems operate routinely
Information	<p>There is a clearly defined performance management framework that identifies:</p> <ul style="list-style-type: none"> - All sources of performance measures - Who is responsible for achieving each measure - Who is responsible for collating the data for each one - Who determines and approves the performance measures - Who receives reports on performance and how often - How data quality is assured - How performance data is captured and its integrity is maintained - How poor performance is addressed - How performance is driven upwards over time <p>The Council uses the performance monitoring system SPAR.net to record key service performance indicators. Quarterly performance reports are prepared by the Internal Audit Team who are responsible for maintaining SPAR.net. There are three summary reports for each of the Policy Development Groups and a full report for the Cabinet and Audit Committee.</p> <p>Performance targets against corporate priorities are set by the Policy Development Groups and Cabinet as part of the business planning process in February. These are the targets reported on. In addition, services can request extra service level performance indicators for monitoring by their Head of Service. These are also recorded on SPAR.net.</p> <p>The performance reports show the annual target for current year, the annual performance achieved in the previous year and quarterly progress toward achieving the annual target this year. The report is illustrated with smiley faces to show whether the Council is meeting/exceeding its target, nearly meeting, or way below target.</p> <p>Service Business Plans have a KPI section for recording service performance targets. They show performance trends for each target over the past 3 years, target for current year and target for next year to show how performance is being driven upwards over time.</p> <p>SPAR.net is set up so that a designated officer is assigned the role of “PI Owner”, responsible for updating the performance information. The Head of Service is responsible for signing-off PIs making sure that they include comments about performance achieved against target. There is the option to add source links to the PIs on SPAR.net so that the figures can be checked by Audit when putting together the monitoring reports. Audit also check performance and data quality as part of core and service</p>

audits.

The Planning service also prepare a quarterly performance report for the Planning Committee and Customer Services reports on performance regarding complaints received to Cabinet.

Some performance targets are set by external groups/authorities. For example, there is a Devon-wide target to recycle 50% of household waste by 2014/15. These targets are also monitored using SPAR.net and reported to Committees on a quarterly basis.

Poor Performance

The quarterly performance report has narrative with explanations for targets that are not being met.

In cases of poor performance, service managers are responsible for assessing the reasons for the poor performance and implementing an action/improvement plan to address it. This can include training for officers/members, using the capability policy, revising policies and procedures or reviewing existing service standards/KPIs to reflect realistic targets.

Reports resulting from internal or external reviews of performance management

KPI Reports

Housing Services produce a monthly performance report detailing trend comparisons with previous year and comment field. This is sent to the Cabinet Member for Housing, the tenant Scrutiny and Improvement Group, all Housing officers and it is also published on the website. Housing Services also produce a monthly service newsletter (inHOUSE) for performance information and Housing-related information, which is sent to all Housing officers.

Biannual Revenues and Benefits Performance Report to Cabinet

This report lists numbers of claims to date and £amount, the £amount of Council Tax and Business Rates collected to date and performance compared to that period in the year previous and nationally. In addition, monthly income reports are sent to the Chief Executive, the Head of Finance and the Cabinet Member for Finance.

Management Team

Management Team (consisting of all senior Council managers) receive verbal updates regarding financial monitoring at their weekly meeting. All committee reports are circulated to Management Team prior to publishing and key reports are discussed at Management Team.

Housing Rent Levels and Arrears

Housing have a schedule for reporting information on rent income to senior managers.

Treasury Management (cashflow/borrowing)

This is reported on twice a year in the Treasury Management report.

	<p>Litigations and complaints</p> <p>Complaints are recorded on the CRM system for all areas of the Council. Summary reports, detailing number per service area and a brief outline of general theme of complaints, are sent to Senior Managers via a Cabinet report.</p> <p>Year-on-year comparison of achievement against performance targets (eg in annual reports)</p> <p>The performance reports show the annual target for current year, the annual performance achieved in the previous year and quarterly progress toward achieving the annual target this year.</p> <p>Service Business Plans have an appendix for recording service performance targets. They show performance trends for each target over the past 3 years, target for current year and target for next year to show how performance is being driven upwards over time.</p> <p>The Head of Finance publishes an annual summary of accounts each year, after year end, showing how well the Council has met their annual budget.</p> <p>Housing Services produce an annual report which gives performance information on rent collection.</p> <p>Revenues produce an annual Council Tax leaflet “What do I get for my money?”, which shows how the Council Tax money is shared amongst authorities and how Mid Devon spend the money; plans for this year, compared to last year’s spending.</p>
	<p>Departmental and/or service benchmarking results</p> <p>Due to limited financial resources and disparity amongst benchmarking figures, the only service that uses Benchmarking statistical data is Housing Services (through HouseMark).</p> <p>Other services benchmark informally through peer networking groups, comparing different methods, ratios and customer feedback.</p> <p>Annual reports issued by, or in relation to, strategic partnerships</p> <p>Mid Devon District Council is not directly responsible for the issue of annual reports in relation to strategic partnerships.</p>
<p>Evidence</p>	<ul style="list-style-type: none"> • Performance Reports • Housing Performance Reports • inHOUSE Newsletter • Housing Rent Performance

	<ul style="list-style-type: none"> • Annual Reports • Peer Challenge • Business Plans • Data Quality Policy • Committee Terms of Reference (Constitution)
Comments for Improvement	<ul style="list-style-type: none"> • Set SMART targets for improvement in committee reports • Need reports on HRA borrowing
Assurance	We can place reliance upon this control

Step 4: Performance management arrangements are in place

Example	Key performance indicators are established and monitored
Information	<p>Appropriate key performance indicators (KPIs) have been established and approved for each service element and are included in departmental and service business/annual plans</p> <p>All performance indicators are monitored on the Council's Performance Management system SPAR.net, for which the Internal Audit Team are the system administrators. At the start of each financial year, the Internal Auditors will meet with Service Managers to set up the PIs for that year.</p> <p>Business Plans are produced on an annual basis and reported to Management Team for approval. The business plan template includes an appendix for performance indicators., run automatically from SPAR.net.</p> <p>A robust monitoring system has been approved and implemented / There are regular reports on progress on delivering approved KPIs</p> <p>All PIs are monitored on SPAR.net, from which quarterly progress reports are produced for Management Team and Committees.</p> <p>There is an approved mechanism for reviewing the continuing suitability of KPIs and for securing continuous improvement</p> <p>The suitability of KPIs is reviewed by Cabinet Members as required or when prompted by Senior Managers. Each performance report includes a Management Comments for those KPIs that are performing below target. Cabinet Members are asked to approve any suggestions regarding amendments to targets or note changes in approach to meeting targets.</p>
Evidence	<ul style="list-style-type: none"> • Business Plans • Performance Reports to Committees • Partnership Performance Reports
Comments for Improvement	<ul style="list-style-type: none"> • KPIs have been developed and are monitored in respect of key partnerships
Assurance	We can place reliance upon this control

Step 4: Performance management arrangements are in place

Example	The authority knows how well it is performing against its planned outcomes
Information	<p>Regular reports are presented to members on the delivery of authority, departmental and partnership performance targets</p> <p>Quarterly performance reports are prepared by the Internal Audit Team who are responsible for maintaining the Council's performance monitoring system SPAR.net. There are three summary reports for each of the Policy Development Groups and a full report for the Cabinet and Audit Committee.</p> <p>The Planning service also prepare a quarterly performance report for the Planning Committee and Customer Services reports on performance regarding complaints received to Cabinet.</p> <p>Housing hold regular update meetings (formal and informal) with their Cabinet Member regarding service performance including partnership performance regarding Planned Maintenance.</p>
	<p>Internal performance indicators</p> <p>In addition to the KPIs set by Committees, services can set extra service level performance indicators (also recorded on SPAR) and service standards / service level agreements for monitoring by their Head of Service.</p>
	<p>Regular budget monitoring reports (capital and revenue, current year and medium-term)</p> <p>Accountants meet regularly with their service managers to monitor budgets and discuss any service changes that may impact on budgets. In addition, the Head of Finance presents regular financial monitoring reports to Management Team and Committees.</p>
	<p>Voluntary benchmarking exercises with peer groups</p> <p>The Council voluntarily took part in a Peer Challenge exercise, which focussed on Economic Development (one of our Corporate Priorities). The feedback from this Peer Challenge is being used to develop a revised Economic Development Strategy Action Plan.</p>
	<p>EFQM model adopted</p> <p>The Council is developing a new Performance Policy which reflects the EFQM Model of Excellence:</p>

	<p>©EFQM 2012</p>
Evidence	<ul style="list-style-type: none"> • Medium Term Financial Plan • Financial Monitoring Reports to Committees • Business Plans • Service Level Agreements • Service Standards • Peer Challenge Papers
Comments for Improvement	<ul style="list-style-type: none"> • Monitoring of performance against Service Standards – inconsistent across the Council
Assurance	We can place reliance upon this control

Step 4: Performance management arrangements are in place

Example	Knowledge of absolute and relative performance achieved is used to support decisions that drive improvements in outcomes
Information	<p>Monitoring reports are regularly presented to the appropriate committee</p> <p>Quarterly performance reports are prepared by the Internal Audit Team who are responsible for maintaining the Council’s performance monitoring system SPAR.net. There are three summary reports for each of the Policy Development Groups and a full report for the Cabinet and Audit Committee.</p> <p>The Planning service also prepare a quarterly performance report for the Planning Committee and Customer Services reports on performance regarding complaints received to Cabinet.</p> <p>The Revenues and Benefits services produce a combined performance report to Cabinet every six months.</p> <p>The reports include detailed performance results, both absolute and relative to peer authorities, a clear indication of below target, on target and at, or above, target results, highlighting areas where corrective action is necessary</p> <p>The KPI monitoring reports include columns for:</p> <ul style="list-style-type: none"> - KPI description - Target - Previous year’s actual performance - Performance against target this year to date (spilt into quarters) - Performance against target – cumulative to date - Status (smiley face to show whether performance is above target, on target, or below target) - Management comments – this column is only completed for below target KPIs and should include details of a SMART target to improve performance, wherever possible <p>Committee reports on below par performance include SMART action plans to improve performance</p> <p>KPI Performance reports for 2012/13 were amended to include a Management Comments field for comments on below target performance. Managers should include details of a SMART target to improve performance wherever possible.</p> <p>Performance targets in subsequent corporate and departmental and/or service business plans are revised in the</p>

	<p>light of actual performance</p> <p>The Service Business Plan template and process has been revised for 2013/14. There should be quarterly progress monitoring by Management Team on Business Plans, which will result in reviewing performance targets based on actual performance.</p> <p>Targets in the Corporate Plan have been revised where achievement of targets is unlikely or where legislation changes. For example, in the 2010 Corporate Plan we had a target for providing energy efficiency measures, however, the qualifying criteria (set by Government) changed after the target was set, which meant it was no longer a realistic attainable target. Therefore, when reviewing the Business Plan the following year, this target was changed.</p> <p>Continuous improvement is strived for by increasing the difficulty of performance targets when they have been met over a period (eg movements on KPI results)</p> <p>The Council is continuously seeking to improve performance however this is not always reflected in KPI targets. Instead, services are striving to maintain high performance levels from previous years with reduced resources in future years. Where this is not possible, performance targets will be reviewed whilst maintaining the vision of achieving most with least resources available.</p> <p>Performance trends are established and reported upon over the medium term and are fed into the corporate and departmental and/or service planning process and into the planning process of key partnerships</p> <p>Few services across the Council monitor performance trends that identify peaks and troughs year on year. Housing Services monitor this for all of their KPIs and Customer First monitor this for call handling and reception waiting times. This information is used to determine where extra resources might need to be focused at different times of the day or year.</p> <p>Performance targets are adjusted in the light of the performances of peer authorities</p> <p>Most of the Council's Service Managers meet with peer networking groups and discuss best practice and performance. Instead of adjusting performance targets, they are trying out different processes to achieve the same high level of performance with reduced resources, learning from each other's experiences, successes and failures.</p>
Evidence	<ul style="list-style-type: none"> • Housing Performance Reports • Committee Performance Reports • New Business Plan process guidance notes
Comments for Improvement	<ul style="list-style-type: none"> • Committees need to set or approve SMART targets to improve below target performance and/or revise target where necessary • Arrange a briefing at Senior Officers Forum to remind SPAR Managers to suggest SMART Targets in their Management

	Comments as required.
Assurance	We can place reliance upon this control

Step 4: Performance management arrangements are in place

Example	The authority continuously improves its performance management
Information	<p>The performance management systems are regularly reviewed and updated to take account of changes in organisational structure, new performance measurement frameworks (ie new Government initiatives, new internal performance measures etc) and other factors</p> <p>The Council's Management Team underwent a restructure in 2012, as did the Council's Cabinet in May 2013. The responsibility for Performance Indicators was updated accordingly in line with the revised reporting structure. The responsible officers on the Council's performance monitoring system SPAR.net were also changed where applicable.</p> <p>SPAR.net is updated annually with new KPIs based on those agreed by Committees and service business plans. The Committee approved KPIs are linked to the Council's key objectives in the Corporate Plan and SPAR.net is updated to show these links.</p>
	<p>The performance management arrangements are revised in line with external or internal review of the arrangements</p> <p>Performance Management arrangements are regularly reviewed and Members are given the opportunity to have a say in the information presented to them.</p> <p>The Council has updated the Service Business Plan template and process for 2013/14. One of the revisions is that the template now includes an Action Plan for key actions, which is to be monitored for progress on a quarterly basis by Management Team.</p>
	<p>Performance management arrangements are reviewed to assimilate new techniques and/or technology eg developments in performance management information systems</p> <p>There are ad hoc meetings of a SPAR User Group where representatives from the authorities using SPAR.net meet together and discuss best practice regarding the system, areas for improvement and suggestions for change. The last meeting took place in October 2011. SPAR administrators also have access to an online forum with NEXUS whereby the different authorities can share tips and ask questions.</p> <p>NEXUS will circulate system updates to the authorities. Our responsible ICT officer applies these updates to our localised version of SPAR.net.</p>
	<p>Performance management arrangements are developed and monitored in relation to key partnerships</p> <p>Examples of key partnerships include ICT partnerships with new software suppliers and Planned Maintenance partnerships with housing contractors.</p> <p>The Head of ICT meets with suppliers for new software such as the leisure system to discuss progress regarding implementation</p>

	<p>and functionality ie does the system meet the agreed scope? There have been instances with the leisure system where it was failing to deliver agreed functions effectively; these were tackled with the supplier through regular contact and feedback meetings.</p> <p>The Planned Maintenance team meet monthly with their key partners such as their gas contractor to monitor their performance, including number of jobs carried out and tenant satisfaction.</p>
Progress from 2011/12	<p>A Performance Management Policy has been drafted.</p> <p>The KPI monitoring reports were amended for 2012/13 to include comments from Service Managers for KPIs that are performing below target. The report appearance has changed as well because the reports are now being run straight from SPAR.net, whereas they had previously been produced manually.</p>
Evidence	<ul style="list-style-type: none"> • SPAR User Group Agendas/Minutes • SPAR updates • Performance Management meetings with key partners
Comments for Improvement	<p>Develop KPIs for the Council's key partnerships and incorporate them into the quarterly monitoring report</p>
Assurance	<p>We can place reliance upon this control</p>

OBJECTIVE 2: Identify principal risks to achievement of objectives

Step 1: The authority has robust systems and processes in place for the identification and management of strategic and operational risk

Example	There is a written strategy and policy in place for managing risk
Information	<p>Existence of approved strategy and policy document</p> <p>We have an established Risk Management Strategy available on the Council's website.</p>
	<p>Evidence of formal approval (eg management board / committee minutes)</p> <p>The current Risk Management Strategy was approved by the Audit Committee on 19 March 2013.</p>
	<p>Evidence of formal review (eg management board/committee minutes), document version number and date)</p> <p>The Audit Committee approve the Risk Management Strategy on an annual basis, receive regular update reports on the corporate risk register and provide independent assurance of the Council's Risk Management arrangements. Performance and key business risk reports are presented to the Cabinet, Audit Committee, Scrutiny Committee and our three Policy Development Groups.</p>
	<p>Examples of dissemination eg Induction briefings, awareness sessions, policy and strategy published on intranet, strategic diagnostic questionnaire results</p> <p>The Head of Communities and Governance attends the Corporate Induction for new employees and gives a presentation on Internal Audit, Governance (including the Code of Corporate Governance), Risk Management and Equality and Diversity.</p> <p>In addition, as part of the Learning and Development programme, the Head of Communities and Governance provides awareness training to selected officers and Management Team.</p> <p>The Member Induction programme was held in May 2011 after the Elections at which the Audit Team Leader attended gave a talk on performance and risk management. The Member Induction Programme will next be carried out in 2015.</p>

Evidence	<ul style="list-style-type: none"> • Risk Management Strategy • Corporate Induction Programme • Risk Management Awareness Training • Member Induction Programme
Comments for Improvement	<p>Risk Management Awareness Training for Members</p> <p>Evidence of communication strategy, possibly covered in strategy document</p> <p>Partnership risk registers</p>
Assurance	<p>We can place reliance upon this control</p>

Step 1: The authority has robust systems and processes in place for the identification and management of strategic and operational risk

Example	The authority has implemented clear structures and processes for risk management which are successfully implemented
Information	<p>Management board/committee minutes (to show risk management is seen as a priority and is supported by personal interest and input)</p> <p>The Corporate Risk Register is reported to Management Team quarterly for their review and information. In addition the Head of Communities and Governance provides updates from risk board meetings (such as the Health and Safety Committee and the Corporate Equality Group).</p> <hr/> <p>Job Descriptions of senior and operational managers and corporate risk manager</p> <p>The Head of Communities and Governance is responsible for maintaining the Corporate Risk Register. All Heads of Service are responsible for undertaking risk assessments for their service areas and implementing mitigating controls (as outlined in their job descriptions and the Risk Management Strategy).</p> <hr/> <p>Internal audit reports and external audit comments on risk management system</p> <p>Internal Audit identify potential strategic and operational risks and issues as part of their audits and recommend mitigating actions for approval by the relevant service managers.</p> <p>The Audit Committee discussed on the 15 January 2013 the effectiveness of the SPAR Performance and Risk reports and Progress on Audit Recommendations Reports. They agreed they would continue to receive reports from SPAR.</p> <p>The External Auditor attends the Audit Committee meetings and provides updates on findings from their audits regarding internal controls and risk.</p> <hr/> <p>Annual Business plans</p> <p>Each service produces an annual Business Plan, which is sent to Management Team for final approval.</p> <hr/> <p>Link between internal audit and risk management functions is clearly defined in terms of reference of internal audit</p> <p>The Internal Audit Terms of Reference states the links between Internal Audit's responsibility in managing/identifying the different types of risk and their corresponding management systems.</p>

	<p>Responsibility for risk management function, including partnership risk management, is set at appropriate senior level</p> <p>The Risk Management Strategy sets out the roles and responsibilities for Risk Management, setting it as the Head of the Communities and Governance has overall responsibility for Risk Management with the Heads of Service being responsible for their individual service areas (as outlined in their job descriptions).</p> <p>Designated authority/service representatives on partnerships should report any risk management issues to their Head of Service to be dealt with in accordance with the Risk Management Strategy.</p> <p>Committee reports setting out options for change include an appropriate risk assessment, including the “no change” option</p> <p>The template Committee report has a field for Risk Management information, to be used for highlighting any risks related to the content of the report.</p>
Evidence	<ul style="list-style-type: none"> • Job Descriptions • Business Plans • Internal Audit Terms of Reference • Report Template
Comments for Improvement	<p>Expand on Risk Management Duties in Job Descriptions to make clear</p> <p>The corporate business plan and financial plan assess risks as appropriate and in particular take account of new and emerging risks facing the authority</p> <p>Partnership risks are assessed before agreements are signed</p>
Assurance	<p>We can place reliance upon this control</p>

Step 1: The authority has robust systems and processes in place for the identification and management of strategic and operational risk

Example	The authority has developed a corporate approach to the identification and evaluation of risk which is understood by all staff
Information	<p>Systematic procedures for risk identification and evaluation have been agreed and are consistently applied across all business units and partnerships</p> <p>In line with the Risk Management Strategy, the Council has a Risk Assessment Policy.</p> <p>Heads of Service are responsible for making sure Risk Assessments are carried out in their service areas. The Council has a template Risk Assessment form for different types of risk including:</p> <ul style="list-style-type: none"> • Business Risks (recorded on Business Plans) • Health and Safety Risks (General Risk Assessment Form) • DSE Risk Assessment • Project Risks • Delegated Decisions • Fire Risk Assessment <p>A copy of each completed Risk Assessment is forwarded to the Council's Health and Safety Advisor for any action and the Internal Audit Team Leader for collating with the Risk Register.</p> <hr/> <p>Examples of dissemination eg induction, briefings, awareness sessions, strategic diagnostic questionnaire results</p> <p>The Risk Management System has been developed during 2012/13 and a number of briefing and training sessions took place:</p> <p>Briefing update presentations to Senior Officers at the Senior Officers' Forum</p> <p>SPAR Training sessions regarding updating risks on SPAR</p> <p>Risk Management Workshops (have been amended to include information about the SPAR system)</p> <p>Presentation to Management Team to agree the risk tolerance, reporting frequency and refresher regarding Management Team responsibilities to decision-making regarding risks above the risk tolerance level.</p>

Evidence	<ul style="list-style-type: none">• Risk Assessment Policy• Risk Assessment Templates• Risk Assessment Awareness Training
Comments for Improvement	Event Safety Guide
Assurance	We can place reliance upon this control

Step 1: The authority has robust systems and processes in place for the identification and management of strategic and operational risk

Example	The authority has well defined procedures for recording and reporting risk
Information	<p>Evidenced by review of risk management strategy and policy</p> <p>The Risk Management Strategy is reviewed annually each March and is then approved by the Audit Committee. At its last review, amendments were made to reflect the new Risk Management system (SPAR).</p>
	<p>Examination of corporate and partnership risk registers</p> <p>The Corporate Risk Register is reported to Management Team on a quarterly basis. All risks that score 15+ or have an impact score of 5 are included in the Risk Register. Management Team are provided with an internal report (showing potential causes and effects) and then complete the committee report, showing their decision (ie to transfer, terminate, etc) and if appropriate any mitigating actions and a target risk score. This is then reported to the Audit Committee and Cabinet, plus Policy Development Group (if applicable).</p>
	<p>Key risk indicators have been determined and there is evidence of monitoring against these risks</p> <p>The Head of Communities and Governance (and the Internal Audit Team Leader) report on Performance and Risk to Management Team and Committees on a quarterly basis.</p>
	<p>Evidence of regular and frequent reporting of risk to political and management board level</p> <p>In addition to the Performance and Risk reports, all Committee reports include a risk field for information relating to risk.</p>
	<p>Evidence of risk based auditing being carried out</p> <p>Internal Audit identify potential strategic and operational risks and issues as part of their audits and recommend mitigating actions for approval by the relevant service managers.</p>
	<p>Evidence of risks not properly addressed identified in internal audit reports etc being fed into the risk management process</p> <p>Internal Audit score rank their actions based on a High, Medium or Low priority. All high priority risk-based actions are added to the Corporate Risk Register.</p>
	<p>Environmental scanning reports are fed into the risk management process so as to identify new and</p>

	<p>emerging risks</p> <p>The Head of Environmental Services receives regular environmental updates (such as flood warnings or heatwave warnings). These are forwarded onto other members of Management Team to advise their services accordingly, for example the Head of Housing and Property Services will inform the Repairs Manager if there is likely to be a heavy freeze as it may impact on the number of repair calls.</p>
Evidence	<ul style="list-style-type: none"> • Internal Audit reports • Corporate Risk Register (Performance and Risk Reports) • Management Team Minutes
Comments for Improvement	<ul style="list-style-type: none"> • Committee dates do not allow for quarter 4 performance and risk reports to be sent to committee until June, meaning q1 is not reported on until August.

Step 1: The authority has robust systems and processes in place for the identification and management of strategic and operational risk

Example	The authority has well established and clear arrangements for financing risk
Information	<p>Evidence that the authority’s policy for risk financing is regularly reviewed in the light of costs and alternative risk mitigation strategies</p> <p>Insurance cover, excess levels, sums insured figures and premiums are reviewed each year at the time of renewal, with the Insurance Officer, Service Manager and Head of Financial Services</p>
	<p>All legal requirements for insurance are met</p> <p>The Council has a number of insurance policies including Property, Casualty (Public and Employers Liability) Motor, Engineering, Computer plus Officials Indemnity Cover (which provides cover for any financial loss suffered by a third party as a result of a statutory decision/power taken by the Authority).</p>
	<p>Evidence that self-insurance provisions are subject to annual independent actuarial valuation and that contributions to the fund are adjusted accordingly</p> <p>The Council currently has quite a high excess level on some of its cover (£10k) therefore, we do self-insure for any minor claims that fall under the excess amount (although Motor is £250 excess so usually claim for all motor). Each year we review how much the Council has paid out on un-insured losses and the Insurance Officers would liaise with the Head of Financial Services to ensure on-going reserves/excesses are set at an appropriate level.</p>
	<p>Insurance claims being managed in accordance with “Woolf” principles</p> <p>Insurance claims are handled in accordance with the Woolf principals by the timescales that we and the Insurers have to adhere to, which are:</p> <ul style="list-style-type: none"> • Letter of claim received by MDDC (the insured) • Submitted to Zurich Municipal within 24 hours • Zurich Municipal to acknowledge claim within 21 days • From date of acknowledgement Zurich have 90 days to investigate liability after which they must make a decision on whether to admit or deny liability.

	<p>Evidence of monitoring the incidence of successful and unsuccessful claims and of feeding the results back into the policy for risk financing accordingly</p> <p>Fortunately we don't get a high number of claims. All claims are discussed with the Service Manager and if we are receiving a number of claims in one particular area then this would be raised with the Head of Service and the Head of Financial Services and I would normally also involve the Health and Safety Officer.</p> <p>The Head of Financial Services reviews the insurance renewal information each year. The Insurance Officer gathers all the relevant information from the Service Managers to discuss with the Head of Finance.</p>
Evidence	<ul style="list-style-type: none"> • Insurance certificates are on SharePoint (under Finance then Insurance).
Assurance	<p>We can place reliance upon this control</p>

Step 1: The authority has robust systems and processes in place for the identification and management of strategic and operational risk

Example	The authority has developed a programme of risk management training for relevant staff
Information	<p>Training programme for risk management</p> <p>The Council’s Risk Officers (the Head of Communities and Governance and the Support Officer) and the Internal Audit Team Leader attend Risk Management CPD as required, or through membership with ALARM. A series of Risk Management Workshops is run for Council officers as identified at their appraisals. Staff who are designated as SPAR editors attend training for updating the Risk Management System.</p> <p>Training needs analysis (both specialist staff development and general awareness)</p> <p>Service Managers identify training needs at annual appraisals, including Risk Management awareness. For specialist awareness training, such as Asbestos Awareness, this is identified as a requirement for designated postholders and the Learning and Development Manager arranges refresher training on a cyclical basis.</p> <p>Regular newsletter or other means of communicating risk management issues to staff</p> <p>The Council’s Risk Officers communicate Risk Management through the internal newsletter The Link, or if more appropriate, through presentations at the Senior Officers’ Forum.</p> <p>Induction programme includes risk management</p> <p>The Head of Communities and Governance attends the Corporate Induction to talk about Risk Management.</p>
Evidence	<ul style="list-style-type: none"> • Health and Safety Needs Analysis • Corporate Induction Programme • Risk Management Workshops • SPAR Training
Comments for Improvement	<ul style="list-style-type: none"> • Appropriate responsibilities for risk management incorporated into job descriptions and appraisals

Assurance

We can place reliance upon this control

Step 1: The authority has robust systems and processes in place for the identification and management of strategic and operational risk

Example	The corporate risk management board (or equivalent) adds value to the risk management process
<p>Information</p>	<p>Corporate risk management board or equivalent terms of reference</p> <p>The Council's Corporate Management Team acts as the Corporate Risk Management Board. The Council's senior Risk Management Officer (Head of Communities and Governance) is a member of Corporate Management Team and regularly provides updates on risk management including:</p> <ul style="list-style-type: none"> ➤ Advising and supporting Corporate Management Team on risk strategies ➤ Identifying areas of overlapping risk ➤ Driving new risk management initiatives ➤ Communicating risk management and sharing good practice ➤ Providing and reviewing risk management training ➤ Regularly reviewing the risk register(s) ➤ Coordinating the results for risk reporting <p>In addition, the Council has a Corporate Equalities Group and Health and Safety Committee focusing entirely on risks and good practice in those areas. Membership of these groups consists of senior managers and union representatives with responsibilities for championing either equalities or health and safety in their service area. The Council's senior risk officer (Head of Communities and Governance) chairs both groups. Minutes of both the Corporate Equalities Group and Health and Safety Committee are fed back to Management Team and any recommendations for change are reported to Management Team for final approval.</p> <p>Minutes of corporate risk management board</p> <p>The Corporate Management Team is responsible for corporate risk management.</p>
<p>Evidence</p>	<ul style="list-style-type: none"> • Head of Communities and Governance Job Description • Corporate Equalities Group • Health and Safety Committee

	<ul style="list-style-type: none">• Corporate Management Team• Reports to corporate management team
Assurance	We can place reliance upon this control

Step 1: The authority has robust systems and processes in place for the identification and management of strategic and operational risk

Example	A corporate risk officer has been appointed with the necessary skills to analyse issues and offer options and advice
Information	<p>Job Description of corporate risk officer</p> <p>The Corporate Risk Officer is the Head of Communities and Governance. Key duties (as outlined in the Job Description) include:</p> <ul style="list-style-type: none"> • Supporting decision making and policy formulation • Providing support in the risk identification and analysis process • Providing support in prioritising risk mitigation action • Providing advice and support in determining risk treatments • Inspiring confidence in managers
	<p>Evidence of the corporate risk officer reporting to corporate management team on risk management issues</p> <p>The Head of Communities and Governance reports quarterly on the Corporate Risk Register to Management Team. In addition she provides updates from risk meetings such as the Corporate Equalities Group and the Health and Safety Committee.</p>
	<p>Evidence of training on current risk management topics / membership of appropriate organisations (eg ALARM)</p> <p>The Head of Communities and Governance has joined the Risk Management Membership ALARM.</p>
Evidence	<ul style="list-style-type: none"> • Head of Communities and Governance Job Description
Comments for Improvement	<ul style="list-style-type: none"> • Attend local ALARM events/meetings for CPD purposes
Assurance	We can place reliance upon this control

Step 1: The authority has robust systems and processes in place for the identification and management of strategic and operational risk

Example	Managers are accountable for managing their risks
Information	<p>Evidence of manager involvement in risk identification and analysis process</p> <p>The Risk Assessment process is:</p> <ul style="list-style-type: none"> - Officer completes risk assessment - Risk Assessment is passed to Head of Service to score - Risks are updates or added to SPAR - Head of Service receives notification of SPAR updates <hr/> <p>Risk owners detailed in corporate / departmental risk register(s)</p> <p>Where a mitigating action is agreed, a responsible officer is designated to make sure that action is completed.</p> <hr/> <p>Risk owners assigned in relation to key partnerships</p> <p>The Head of Service is the risk owner, but all officers are responsible for reporting risks.</p> <hr/> <p>Evidence of (at least) annual review of risk at service/operational levels and of partnership risks</p> <p>The Risk Management System SPAR sends out reminder emails for risk reviews every:</p> <ul style="list-style-type: none"> - 3 months for high risks - 6 months for medium risks - 12 months for low risks <hr/> <p>Analysis of completed control and risk self-assessment questionnaires</p> <p>Officers are required to complete some self-assessment risk questionnaires such as:</p> <ul style="list-style-type: none"> - DSE – checking their office, furniture and equipment layout is not conducive to ill health effects - Stress – a stress questionnaire is available on the e-learning system for officers to identify any potential stress triggers - Maternity Health – a questionnaire to be completed with line managers to make sure that there is

	nothing about a pregnant employee's duties that could affect the health of the mother-to-be or that of her child
Evidence	<ul style="list-style-type: none"> • Risk Assessments
Comments for Improvement	<ul style="list-style-type: none"> • Job descriptions of managers outline their risk management responsibilities
Assurance	We can place reliance upon this control

Step 1: The authority has robust systems and processes in place for the identification and management of strategic and operational risk

Example	Risk management is embedded throughout the organisation
Information	<p>Evidence of a general risk management culture at all levels</p> <p>The Council's Risk Officers are actively engaged in improving risk management awareness at all levels of the Authority. The SPAR training programme regarding the Risk Management System has assisted progress in this.</p>
	<p>Risk management training programme</p> <p>A series of Risk Management Workshops is run for Council officers as identified at their appraisals. Staff who are designated as SPAR editors attend training for updating the Risk Management System. For specialist awareness training, such as Asbestos Awareness, this is identified as a requirement for designated postholders and the Learning and Development Manager arranges refresher training on a cyclical basis.</p>
	<p>Evidence of managers' involvement in risk management aspects of business planning</p>
Evidence	<ul style="list-style-type: none"> • Risk Management Training
Comments for Improvement	<ul style="list-style-type: none"> • Results of strategic diagnostic survey to ascertain the extent to which risk management is understood by each category of officer (senior management, operational managers etc) and members
Assurance	We can place partial reliance upon this control

Step 1: The authority has robust systems and processes in place for the identification and management of strategic and operational risk

Example	Risks in partnership working are fully considered
Information	Evidence of risk assessments being undertaken before the commencement of major projects, preferably in the report on which the decision to proceed is based Check whether risk assessment paper went to MT re HR project LMLC?? TIC??
	Evidence that risk assessments are regularly reviewed during the project period Project Risk Assessments (such as that for the new HR system) are reviewed regularly by the Project Team.
	Evidence that partnership arrangements are reviewed in terms of risk before they are entered into and, subsequently, that the risks are reviewed
Evidence	<ul style="list-style-type: none"> • Project Risk Assessments
Comments for Improvement	<ul style="list-style-type: none"> • Evidence that potential partners are required to produce and submit risk assessments • Evidence that there are effective arrangements in place for risk sharing (eg in the partnering contract terms and conditions or agreement)
Assurance	We can place partial reliance upon this control

Step 1: The authority has robust systems and processes in place for the identification and management of strategic and operational risk

Example	Where employed, risk management information systems meet users' needs
Information	<p>Evidence of risk information being updated promptly</p> <p>The Corporate Risk Register is updated following any changes as agreed by Management Team in order to produce the Committee report.</p>
	<p>Review of accuracy and usefulness of output from information systems</p> <p>The Audit Committee discussed on the 15 January 2013 the effectiveness of the SPAR Performance and Risk reports and Progress on Audit Recommendations Reports. They agreed they would continue to receive reports from SPAR.</p>
	<p>Evidence that users were/are consulted on initial implementation and further development</p> <p>Users in high risk service areas such as leisure, housing and property services were consulted regarding how they wanted their risks set up on SPAR (eg by risk or by leisure centre).</p>
	<p>Interviews with users to assess suitability of the system for their needs</p> <p>The Internal Audit Team Leader has met with the Council's Health and Safety Adviser and the Senior Risk Management Officer to discuss the viability of using the Council's Performance Monitoring System SPAR.net as a central Risk Register. The system has a Risk Management function which had previously been underutilised, offering the ability to produce Risk Management reports from across all service areas.</p> <p>Two Internal Auditors attended the SPAR User Group in October 2011 and discussed the system's uses and limitations with regard to Risk Management with the Senior Risk Officer of another authority who already had SPAR.net hosting their Risk Management information. They were able to get visitor access to the other authority's system to see the system in use and introduce Risk Management monitoring using the SPAR.net system at Mid Devon.</p>
Evidence	<ul style="list-style-type: none"> • Audit Committee Minutes
Assurance	We can place reliance upon this control

OBJECTIVE 3: Identify and evaluate key controls to manage principal risks

Step 1: The authority has robust system of internal control which includes systems and procedures to mitigate principal risks

Example	There are written financial regulations in place which have been formally approved, regularly reviewed and widely communicated to all relevant staff
Information	<p>Financial regulations and instructions exist and are reviewed and updated regularly</p> <p>The Financial Regulations are part of the Council's Constitution and provide a framework for managing the Council's financial affairs. They apply to every member and officer of the Council and anyone acting on its behalf. All financial and accounting procedures must be carried out in accordance with the regulations.</p> <p>Financial monitoring reports are presented to the Cabinet each month.</p> <p>The Financial Regulations were last fully reviewed in 2012/13 are currently included as part of the Council's Constitution. They are also published separately on the Council's website. The Constitution is in the process of being updated, which when completed the Financial Regulations will be extracted and kept as a separate document.</p> <p>Evidence of formal approval</p> <p>The updated Financial Regulations were approved by the Audit Committee on 9th April 2013 and then approved by Full Council on the 24th April 2013.</p> <p>Authority has adopted CIPFA code on Treasury Management</p> <p>Examples of dissemination eg induction, briefings, awareness sessions, accessible in finance manuals and/or on intranet site</p> <p>The Financial Regulations are on the Council's website. Only those staff involved with contracts or tendering are briefed on the Contract Procedure Rules as part of their service induction. The Procurement Team are also on hand to offer advise as and when required.</p> <p>A summary of key changes or updates to the Financial Regulations are communicated to staff via The Link. For example:</p>

	(item on changes to limits)
	Reports to audit committee or equivalent confirming compliance or identifying extent of non-compliance with regulations and instructions
	<p>Report approving annual treasury management and investment strategy</p> <p>The Treasury Management Strategy is reviewed and updated annually. The Treasury Management Strategy and Annual Investment Strategy for 20/13/14 was approved by Cabinet on 28 February 2013.</p>
	External audit assessment of compliance with Prudential Code
Updates from 2011/12	The Financial Regulations have been fully reviewed and updated.
Evidence	Outturn report on Treasury Management
Comments for Improvement	Make sure the Financial Regulations are included in the Policy Review Programme.
Assurance	We can place reliance upon this control

Step 1: The authority has robust system of internal control which includes systems and procedures to mitigate principal risks

Example	There are written contract standing orders in place which have been formally approved, regularly reviewed and widely communicated to all relevant staff
Information	Standing orders exist, are reviewed and updated regularly to cover new procedures such as partnering arrangements and on-line tendering The Contract Standing Orders are pages 31 – 45 of the Financial Procedure Rules.
	Evidence of formal approval The updated Financial Regulations were approved by the Audit Committee on 9 th April 2013 and then approved by Full Council on the 24 th April 2013.
	Examples of communication and dissemination eg induction, briefings, awareness sessions, accessible in finance manuals and/or on intranet site The Contract Procedure Rules are on the Council's website (pages 31-45 of Financial Procedure Rules). Only those staff involved with contracts or tendering are briefed on the Contract Procedure Rules as part of their service induction. The Procurement Team are also on hand to offer advise as and when required.
Evidence	Pages 31-45 of Finance Procedure Rules
Comments for Improvement	Make sure any changes or updates to the Contract Procedure Rules are communicated to staff either via Senior Officers Forum or The Link.
Assurance	We can place reliance upon this control

Step 1: The authority has robust system of internal control which includes systems and procedures to mitigate principal risks

Example	There is a whistle blowing policy in place which has been formally approved, regularly reviewed and widely communicated to all relevant staff
Information	Whistle blowing policy exists and has been reviewed and updated regularly The Whistle blowing Policy is reviewed and updated annually. The last update of the Policy was in 20th September 2011.
	Evidence of formal approval The Whistle blowing Policy is approved by the Audit Committee. They looked at the recent revision at their meeting on: date
	Examples of communication and dissemination eg induction, briefings, awareness sessions, accessible on website and intranet site The Whistle-blowing Policy is communicated to all new staff at the Induction session and is available for all staff to access on SharePoint.
	Evidence of effectiveness of policy (eg reports on incidence of usage, evidence on annual declarations on fraud to Audit Commission)
Evidence	Whistle Blowing Policy Audit Committee Minutes
Comments for Improvement	Make sure any revisions to policy are communicated through internal communication channels.
Assurance	We can place reliance upon this control

Step 1: The authority has robust system of internal control which includes systems and procedures to mitigate principal risks

Example	There is a counter fraud and corruption policy in place which has been formally approved, regularly reviewed and widely communicated to all relevant staff
Information	Counter fraud and corruption policy exists and has been reviewed and updated regularly The Anti-Fraud and Corruption Policy is reviewed and updated annually. The Policy was last updated in May 2013.
	Evidence of formal approval The Anti-Fraud and Corruption Policy is approved by the Audit Committee. They looked at the recent revision at their meeting on date.
	Examples of dissemination (briefings, induction, awareness sessions, accessible on website and intranet site) The Anti-Fraud and Corruption Policy is communicated to all new staff at the Induction session and is available for all staff to access on SharePoint.
	Evidence of effectiveness of policy (eg reports on identified fraud, annual AF70 returns to Audit Commission, reports on results of National Fraud Initiatives)
	Review of register of gifts and hospitality
Evidence	Anti-Fraud and Corruption Policy Audit Committee Minutes
Comments for Improvement	Make sure any revisions to policy are communicated through internal communication channels.
Assurance	We can place reliance upon this control

Step 1: The authority has robust system of internal control which includes systems and procedures to mitigate principal risks

Example	There are codes of conduct in place which have been formally approved and widely communicated to all relevant staff
Information	Codes of conduct have been agreed, including national schemes The Council's Constitution contains the Officers' Code of Conduct. The Constitution was last fully updated in April 2012 and is in the process of being revised during 2012/13 with a Constitution Working Group consisting of 4 Members, the Monitoring Officer and Member Services Officer, following changes to the Management Team Structure, updated Financial Regulations and the revised Members Code of Conduct.
	Evidence of formal approval
	Examples of dissemination eg induction, briefings, awareness sessions, accessible on intranet site All staff receive a copy of the Code of Conduct when they start employment with the Council.
Evidence	Constitution
Comments for Improvement	What about volunteers and work experience?
Assurance	We can place reliance upon this control

Step 1: The authority has robust system of internal control which includes systems and procedures to mitigate principal risks

Example	A register of interests is maintained, regularly updated and reviewed
Information	Inspection of register of interests (members and staff)
	Evidence of regular updating and review by senior officer(s)
Evidence	
Comments for Improvement	
Assurance	We can place reliance upon this control

Step 1: The authority has robust system of internal control which includes systems and procedures to mitigate principal risks

Example	Where a scheme of delegation has been drawn up, it has been formally approved and communicated to all relevant staff
Information	Scheme of delegation incorporates adequate controls and sanctions
	Evidence of formal approval
	Examples of communication and dissemination eg induction, briefings, awareness sessions, accessible on intranet site
	Regular reports on the operation of the scheme (eg compliance, budget monitoring, year-end balances)
Evidence	
Comments for Improvement	
Assurance	

Step 1: The authority has robust system of internal control which includes systems and procedures to mitigate principal risks

Example	A corporate procurement policy has been drawn up, formally approved and communicated to all relevant staff
Information	Procurement policy exists and has been reviewed and updated regularly to take account of new initiatives eg drive towards wider consortia arrangements, shared services The Procurement Policy is out of date - it is scheduled to be updated in 2013.
	Examples of dissemination eg induction, briefings, awareness sessions, accessible on intranet site Officers who are involved with the procurement process are briefed on its contents when they start employment at the Council, either by their line manager or by the Procurement Manager.
	Evidence of effectiveness of policy (eg benchmarking results, best value review, internal / external audit review)
Evidence	
Comments for Improvement	Update Procurement Policy Evidence of formal approval
Assurance	

Step 1: The authority has robust system of internal control which includes systems and procedures to mitigate principal risks

Example	Business / service continuity plans have been drawn up for all critical service areas
Information	<p>Current business / service continuity plans exist covering all critical service areas and are readily accessible</p> <p>The Business Continuity Plan is in the process of being updated. The Business Recovery Team Key Officer contact information has been updated and distributed to appropriate personnel. A copy is also on a restricted access page of SharePoint.</p> <p>A hierarchical flowchart demonstrating priority services and functions will be completed in 2013 with a basic “what to do” guide for all staff.</p>
	<p>Evidence of regular testing</p> <p>Senior Officers undertook a flu pandemic exercise in date and a schedule of further testing exercises is being developed for 2013/14.</p>
	<p>Evidence of regular review in the light of the results of testing and for changes in structures, procedures, information systems, responsibilities etc</p> <p>Real events (such as power failures) highlight any parts of the plan that work well or need improvement and are evaluated and the plan is updated accordingly.</p>
Evidence	Business Continuity Plan
Comments for Improvement	<p>Make sure there is adequate holiday cover for first aiders and child protection officers</p> <p>The Business Continuity Plan and Emergency Plan need updating</p>
Assurance	We can place partial reliance upon this control

Step 1: The authority has robust system of internal control which includes systems and procedures to mitigate principal risks

Example	The corporate / departmental risk register(s) includes expected key controls to manage principal risks
Information	Risk register sets out principal risks and sets out appropriate key controls to manage them The Council fully reviewed the Corporate Risk Register in 2012/13 to include all service business risks with a risk score of 15+ or impact score of 5. The Risks are being recorded on the Council's Risk Management System SPAR.net and include information about responsible officer, mitigating actions and target dates.
	Key controls are monitored, reviewed and updated regularly The Corporate Risk Register is reported to Management Team on a quarterly basis for review and comment. Any feedback is used to update the Register accordingly.
	Use of risk management workshops to underpin the process and review of register and key controls The Head of Communities and Governance facilitates risk management workshops for staff who have identified this as a training need. In addition, the Support Officer runs training sessions on the Risk Management System for all SPAR.net users.
	Risk owners are assigned to manage principal risks Heads of Service are assigned responsibility for risks within their service areas.
	Partnership risks are considered
Evidence	Corporate Risk Register Performance and Risk Reports
Comments for Improvement	
Assurance	We can place reliance upon this control

Step 1: The authority has robust system of internal control which includes systems and procedures to mitigate principal risks

Example	Key risk indicators have been drawn up to track the movement of key risks and are regularly monitored and reviewed
Information	<p>Appropriate key risk indicators are documented</p> <p>The Council has adopted a scoring matrix based on a rating of 5 x 5 (impact x likelihood) as detailed in the Risk Management Strategy. The Risk Management System SPAR.net records the risk scores for risks and this is shown in risk reports.</p>
	<p>Evidence of regular monitoring</p> <p>SPAR.net emails assigned officers reminders to review risks based on their scores:</p> <ul style="list-style-type: none"> - Low scores every 12 months - Medium scores every 6 months - High scores every 3 months <p>The Corporate Risk Register is reviewed quarterly and scores are updated based on progress of mitigating actions and other changes to cause and likelihood (such as legislation).</p>
	<p>Evidence of changes in risk indicators (and reasons for change) emanating from appropriate information sources (eg where internal audit findings are used to change the perceived level of risk)</p> <p>Any risks identified by Internal Audit as being “high” are added to the Corporate Risk Register or amended accordingly.</p>
Evidence	<p>Corporate Risk Register</p> <p>Risk Management Strategy</p>
Comments for Improvement	Build in risk scores into committee report template.
Assurance	We can place reliance upon control

Step 1: The authority has robust system of internal control which includes systems and procedures to mitigate principal risks

Example	The authority's internal control framework is subject to regular independent assessment
Information	Internal audit plans and reports The Council has its own Internal Audit team that undertakes annual core audits plus cyclical systems audits as detailed in their work plan.
	Annual report / opinion of Head of Internal Audit The Internal Audit Team Leader presents an Internal Audit Outturn Report to the Audit Committee each year. The report for 2012/13 went to the date meeting.
	External Audit reports
Evidence	Internal Audit Charter Internal Audit Work Plan Internal Audit Reports Internal Audit Outturn Report External Audit Reports
Assurance	We can place reliance upon this control

Step 1: The authority has robust system of internal control which includes systems and procedures to mitigate principal risks

Example	A corporate health and safety policy has been drawn up, formally approved, is subject to regular review and has been communicated to all relevant staff
Information	<p>Health and safety policy exists and has been reviewed and updated regularly</p> <p>The Council has a main Health and Safety Policy and a number of policies relating to specific aspects of health and safety. Each policy is reviewed every four years.</p>
	<p>Policy covers partnerships</p> <p>Partners/Contractors commit to oblige by the Council’s Health and Safety Policies when they sign a contract with us.</p>
	<p>Evidence of formal approval</p> <p>The Health and Safety Policies are approved by the Health and Safety Committee, the JNCC (if appropriate eg the No Smoking Policy) and then by Management Team.</p>
	<p>Examples of dissemination eg induction, briefings, awareness sessions, inclusion of policy on website and intranet site</p> <p>All new employees are required to undertake health and safety policy training when they commence employment at the Council (on their first day). Refresher training and specialised awareness training is run for staff who have this identified as a training need or through cyclical updates.</p>
	<p>Evidence of effectiveness of policy eg number of cases investigated by Health and Safety Executive – and the number of cases proven</p> <p>There have been no cases of incidents investigated by the Health and Safety Executive in 2012/13. However, the Health and Safety Executive do review practices at the Council such as in Environmental Services. At their last inspection, two improvement notices were served and working practices were updated accordingly. At their follow-up visit the Health and Safety Executive approved the new arrangements.</p>
	<p>Review of number of reported incidences and “near misses”</p> <p>The Health and Safety Committee receive sickness absence and accident/incident statistics at their quarterly</p>

	meetings. This information is reviewed and recommendations for changes in policy or training are made accordingly.
Evidence	Health and Safety Policies
Comments for Improvement	Review Schedule What about training re updates to policies?
Assurance	We can place reliance upon this control

Step 1: The authority has robust system of internal control which includes systems and procedures to mitigate principal risks

Example	A corporate complaints policy / procedure has been drawn up, formally approved, communicated to all relevant staff, the public and other stakeholders is regularly reviewed
Information	<p>Complaints policy / procedure exists and has been reviewed and updated regularly The Council has adopted a Customer Care Charter (Service Standards) which detail our complaints policy – this was last reviewed in ???</p> <p>Procedure is compliant with all relevant statutory requirements The policy was updated to reflect the changes in Housing regarding the Housing Ombudsman.</p> <p>Evidence of formal approval</p> <p>Examples of dissemination eg induction, briefings, awareness sessions, inclusion of policy on website and intranet site The Council’s Summary Leaflet “Have Your Say” is available on the website. The Head of Customer Services attends the Corporate Induction to explain about the policy and service standards (customer care charter).</p> <p>Leaflets / posters highlighting complaints procedure The Council has a “Have Your Say” leaflet available on the website and in Council Offices.</p> <p>Complaints files All complaints, compliments and comments are recorded on the Council’s CRM system.</p> <p>Committee reports summarising complaints dealt with analysed by outcome The Head of Customer Services produces an annual summary detailing number of complaints received per service area and any policies or procedures we have changed as a result. The report for 2012/13 is due to go to Cabinet in August 2013.</p>
Updates from 2011/12 AGS	Reviewed and updated the Complaints Policy with regard to vexatious complaints

Evidence	Corporate Complaints Policy / Customer Care Charter Complaints Leaflet Reports to Committee / Minutes of Meetings re new Policy Annual Complaints Report to Committee
Comments for Improvement	
Assurance	We can place reliance upon this control

OBJECTIVE 4: Obtain assurance on the effectiveness of key controls

Step 1: **Appropriate assurance statements are received from designated internal and external assurance providers:**

- **The authority has identified appropriate sources of assurance**
- **Appropriate external assurances are identified and obtained**

Example	The authority has determined appropriate internal and external sources of assurance
Information	<p>Minutes of committee at which report on assurances was considered</p> <p>Each internal and external assurance report is circulated to Management Team and the service’s Cabinet Member for their consideration and to agree on appropriate follow-up actions.</p> <p>With regard to sources of assurance specific to the key controls within the Annual Governance Statement, a statement of evidence is prepared and presented to Members of the Audit Committee at a special briefing meeting prior to the draft Annual Governance Statement going to Committee in June.</p> <hr/> <p>Sources of assurance are appropriate to the authority</p> <p>Most sources of assurance across the Council are established by Government bodies. The Council has engaged with a couple of extra bodies where their expertise is considered valuable to the service. For example, Leisure Services consult QLM regarding risk management practices within the leisure industry. We have also established an “Equality Forum” for consulting with representatives from different community groups on how well our different policies and publications meet customers’ needs.</p> <p>Where appropriate, the Council has made use of critical friends to provide assurance on areas of corporate priority and make recommendations. For example, we took part in a “peer challenge” in March 2013 looking at Economic Development.</p> <p>In addition to the general sources of assurance, the responsible AGS officers consult with Heads of Service, Internal Audit and Members to identify appropriate examples that meet each key control including substantiating evidence.</p>
Progress from	Formal notes and action points are now recorded at the briefing meeting with Members of the Audit

2011/12	Committee.
Evidence	Internal Audit Reports External Assurance Reports Equality Forum Mid Devon Peer Challenge
Comments for Improvement	People need to be better at documenting evidence – not recording the fact that some of these reports go to MT and have been discussed.
Assurance	We can place reliance upon this control

Step 1: Appropriate assurance statements are received from designated internal and external assurance providers

Example	Appropriate key controls on which assurance is to be given have been identified and agreed
Information	<p>Briefing notes, guidance, instructions etc given to appropriate managers regarding what is expected of them</p> <p>Heads of Service were sent forms prior to the AGS meetings that included a covering paragraph explaining the purpose of the AGS. The forms clearly state what information is needed and provides suggestions for examples of evidence.</p> <p>Officers involved in the Economic Development Peer Challenge were sent briefing papers beforehand that explained the purpose and scope of the Peer Challenge.</p>
Evidence	<p>Peer Challenge papers</p> <p>AGS forms</p>
Comments for Improvement	Book a session at Senior Officers Forum to discuss the Annual Governance Statement, what it covers, why we need to complete it and the information we need from services.
Assurance	We can place partial reliance upon this control

Step 1: Appropriate assurance statements are received from designated internal and external assurance providers

Example	Departmental assurances are provided
Information	<p>Departmental heads sign off on adequacy of controls (ie provide annual governance assurance statements)</p> <p>As part of the Annual Governance Statement evidence collection and review process, each Head of Service is required to sign a “declaration” regarding the adequacy of controls within their services.</p>
	<p>Supporting documentation provided by departmental heads re review and monitoring arrangements that key controls have been in operation for the period and will continue to operate until accounts signed off</p> <p>Each year, the Head of Communities and Governance and the Business Support Officer for Communities and Governance prepare question packs covering the key controls and meet with the Heads of Service to discuss how their service meets these controls. This includes examining both documented and non-documented evidence (ie working practice) with relevant examples for the financial year.</p>
	<p>Completed Control and Risk Self-Assessment questionnaires</p> <p>These questionnaires are covered by both the Heads of Service key control declaration forms (which allows Heads of Service to record any on-going issues) and the AGS meetings.</p>
	<p>Annual governance assurance evaluated by officer team or committee charged with the responsibility of preparing the AGS. Evaluation to include ‘reality checking’ of sample of assurance statements.</p> <p>The Annual Governance Statement meetings with Heads of Service, provide the opportunity for the responsible officers to discuss in detail the examples provided by Heads of Service to ensure they adequately meet the key controls. This includes following up evidence suggestions by speaking to officers at lower levels to find out more information. Wherever possible, documented evidence is requested to add to the AGS file.</p> <p>Heads of Service and their teams are encouraged to identify areas for improvement or highlight aspects of their work that has changed (for the better or not).</p> <p>Following compilation of the evidence log, a draft statement of evidence is prepared and presented to Members of the Audit Committee in June for their review, comment and feedback. The AGS officers can then carry out any specific checks as requested by the committee before the presentation of the final AGS report in</p>

	September.
Improvements from 2011/12	Information presented to Members in June includes the full evidence log.
Evidence	Heads of Service Signed Declarations Minutes of AGS meetings
Assurance	We can place reliance upon this control

Step 1: Appropriate assurance statements are received from designated internal and external assurance providers

Example	External assurance reports are collated centrally
Information	<p>Sources of external assurance relevant to authority are identified and agreed, including partnerships</p> <p>Examples of general external assurance reports include:</p> <ul style="list-style-type: none"> • DWP Reports • External Audit reports (Audit Commission until Oct 2012 then Grant Thornton) • Peer Challenge report (on site visit March 2013) • Electoral Commission • RIPA Report – Office of Surveillance Commissioners • Local Government Ombudsman Annual Report • QLM Annual Leisure report (H&S) • HSE (focus on waste) • Code of Compliance (ICT) • Equality Forum Mid Devon • Information Commissioner’s Office – FOI decision notices • Planning Inspectorate • Institute of Cemeteries and Crematory Management <p>Due to the above covering the majority of key controls within the Annual Governance Statement, the responsible AGS officers have not requested additional sources of external assurance.</p> <p>Reports are reviewed by relevant senior management team and reported to appropriate committee</p> <p>All external audit reports go to Management Team and are discussed with the relevant officers before they are finalised and go to the Audit Committee.</p>

	<p>Action plans are prepared and approved as appropriate</p> <p>Recommendations are reviewed and agreed with Service Managers and Cabinet Member for example, the Head of Communities and Governance has met with the Cabinet Member for Regeneration and the Economic Development Team to discuss the recommendations from the Peer Challenge. An Action Plan has been drafted for Cabinet approval.</p> <p>Follow up reports on recommendations are requested and reviewed by relevant senior management team and progress is regularly reported to relevant committee</p> <p>Where an external assurance provider has made recommendations to improve performance, the appropriate service will make regular updates to Management Team and their Cabinet Member. For example, the Head of Environmental Services has provided updates to Management Team regarding the HSE Improvement Notices.</p> <p>With regard to the Annual Governance Statement, Action Plan quarterly progress monitoring reports are prepared and reported to the Audit Committee.</p>
<p>Evidence</p>	<p>Management Team minutes</p> <p>Committee minutes</p> <p>Senior management team minutes</p> <p>Follow up reports to appropriate committee</p>
<p>Comments for Improvement</p>	<p>There is no central collation for external assurance reports other than their being reported to Management Team and Cabinet (as appropriate). Recommend there being a folder set up on SharePoint for such reports.</p> <p>The Annual Governance Statement Action Plan should include actions from other assurance reports so that they are monitored in one place.</p> <p>We do not have any specific sources of external assurance covering partnerships.</p>
<p>Assurance</p>	<p>We can place partial reliance upon this control</p>

Step 1: Appropriate assurance statements are received from designated internal and external assurance providers

Example	Internal Audit Arrangements
Information	<p>Reports of Head of Internal Audit to audit committee or equivalent throughout the year</p> <p>The Internal Audit Team Leader regularly reports to Audit Committee regarding Internal Audit arrangements, including progress reports on Internal Audit recommendations.</p>
	<p>Annual report of Head of Internal Audit, including opinion on internal control and risk management framework</p> <p>The Internal Audit Team Leader reports presents an annual “Internal Audit Outturn Report” to Audit Committee. The report for 2012/13 went to Audit Committee on 25 June 2013.</p>
Progress from 2011/12	High priority audit recommendations are reviewed by the Audit Committee on a regular basis.
Evidence	<p>Internal Audit Outturn Report 2012/13</p> <p>Audit Committee Minutes</p> <p>Internal Audit Progress Reports</p>
Assurance	We can place reliance upon this control

Step 1: Appropriate assurance statements are received from designated internal and external assurance providers

Example	Corporate Governance Arrangements
<p>Information</p>	<p>Annual corporate governance assurance statement</p> <p>The Code of Corporate Governance is reviewed annually by the Head of Communities and Governance. It was last approved by the Audit Committee in March.</p> <p>The responsible AGS officers produce a draft Annual Governance Statement in June of each year, which is sent to the Audit Committee to agree an Action Plan to improve areas of weakness. A final version of the Annual Governance Statement is published each September.</p> <p>In addition to being sent to the Audit Committee, both the Code of Corporate Governance and Annual Governance Statement are published on the Council’s website.</p>
	<p>Internal or external audit review of corporate governance arrangements</p> <p>The Head of Communities and Governance and the Business Support Officer for Communities and Governance review the Annual Governance Statement each year. This includes meeting with Heads of Service and compiling an evidence log as well as preparing an Action Plan.</p> <p>Internal Audit review risk management and performance management arrangements as part of every audit as well as other areas such as Health and Safety. Compliance with Legislation and the Council’s Constitution and Financial Regulations is also reviewed and recommendations are made where appropriate.</p>
	<p>Monitoring reports to committee on delivery of action plans in response to reviews of corporate governance</p> <p>Annual Governance Statement Action Plan progress monitoring reports are sent to the Audit Committee (and Management Team) each quarter.</p> <p>In addition, the Audit Committee receives a copy of each Internal Audit report and high priority recommendations are regularly monitored by the Committee.</p>
<p>Updates from 2011/12</p>	<p>The AGS Action Plan monitoring reports have been amended to include a “status” column, consisting of smiley faces that indicate if an action has been completed or evaluated, is in progress, or is behind target. Where actions are behind target, revised target dates are shown.</p>

Evidence	Audit Committee Reports: <ul style="list-style-type: none">➤ Draft Annual Governance Statement➤ Final Annual Governance Statement➤ Action Plan Progress Monitoring Reports
Assurance	We can place reliance upon this control

Step 1: Appropriate assurance statements are received from designated internal and external assurance providers

Example	Performance monitoring arrangements
<p>Information</p>	<p>Annual and in-year reports on delivery of key performance indicators by internal and/or external review agencies</p> <p>The Council has established a performance reporting system so that:</p> <ul style="list-style-type: none"> - The Policy Development Groups and Planning Committee receive quarterly performance indicator progress reports for their reporting services - The Council’s Cabinet and Audit Committee receive full performance indicator reports for the whole Council - Management Team receive these reports for comment before they are sent to Committee. <p>In addition the Committees receive other performance reports as requested, for example, the Council’s Revenues and Benefits Service produce a combined service performance report to Cabinet every six months.</p>
<p>Improvements from 2011/12</p>	<p>Action to update performance policy.</p> <p>Following the 2011/12 Annual Governance Statement, the Council now produces a Corporate Plan Annual Performance Report.</p>
<p>Evidence</p>	<p>Committee minutes</p>
<p>Comments for Improvement</p>	<p>The Council has amended its performance reporting system for 2013/14 to include quarterly updates to Management Team on the progress of actions in Service Business Plans.</p> <p>The updated Performance Policy has yet to be finalised and agreed by Management Team – to complete.</p> <p>Update Performance page on Council’s website to include performance reports.</p> <p>Committees to be more proactive in amending targets or recommending SMART actions to improve performance where targets are not being met.</p>
<p>Assurance</p>	<p>We can place reliance on this control</p>

OBJECTIVE 5: Evaluate assurances and identify gaps in control / assurance

Step 1: The authority has made adequate arrangements to identify, receive and evaluate reports from the defined internal and external assurance providers to identify areas of weakness in controls

Example	Responsibilities for the evaluation of assurances are clearly defined throughout the organisation
Information	<p>Minutes of committee meetings</p> <p>Each internal and external assurance report is circulated to Management Team and the service's Cabinet Member for their consideration and to agree on appropriate follow-up actions.</p> <p>With regard to sources of assurance specific to the key controls within the Annual Governance Statement, a statement of evidence is prepared and presented to Members of the Audit Committee at a special briefing meeting prior to the draft Annual Governance Statement going to Committee in June.</p>
	<p>Job Descriptions</p> <p>The Council's designated Annual Governance Officers (the Head of Communities and Governance and the Support Officer) list responsibilities relating to the Annual Governance Statement within their Job Descriptions.</p>
	<p>Committee Terms of Reference</p> <p>The Audit Committee provides independent assurance of the adequacy of the risk management framework and the associated control environment. This includes receiving and evaluating internal audit reports, external audit reports and the Annual Governance Statement.</p>
Progress from 2011/12	Job Descriptions for key Member roles including, Leader, Deputy Leader, Cabinet Member, Chairman of the Council and Chairmen of Committee Meetings are being developed by the Constitution Working Group.
Evidence	Terms of Reference (within the Constitution)
Comments for Improvement	Make sure Member Job Descriptions include role regarding assurance Training plans
Assurance	We can place partial reliance upon this control

Step 1: The authority has made adequate arrangements to identify, receive and evaluate reports from the defined internal and external assurance providers to identify areas of weakness in controls

Example	Mechanism established for collecting governance assurances
Information	<p>Overall responsibility allocated to governance senior officer groups</p> <p>The Head of Communities and Governance has overall responsibility for collecting governance assurances. The assurance collection work is shared with the Support Officer for Communities and Governance.</p>
	<p>Required assurances are agreed and recorded</p> <p>The Governance Officers meet with Heads of Service to discuss and request assurances. All information is recorded in an Evidence Register.</p>
	<p>Central record of all assurances</p> <p>A “Source of Assurance” document is prepared with hyperlinks to all supporting evidence to back-up information in the Evidence Register.</p>
	<p>Clear guidance as to evaluation procedure including assurance over risks, independence and objectivity of assurances</p> <p>-</p>
	<p>Defined evaluation mechanism</p> <p>Each Objective, Step and Example contained in the Evidence Register is examined and scored as being either that:</p> <ul style="list-style-type: none"> - We can place reliance upon this control (all suggested examples have been met, assurances provided and control proven effective) - We can place partial reliance upon this control (most suggested examples have been met, nearly all assurances provided and control proven effective in the main) - We cannot place reliance upon this control (most suggested examples have not been met, assurances have not been provided or controls are proven ineffective)

	<p>Timetable for completion by statutory deadline</p> <p>A clear timetable is established:</p> <ul style="list-style-type: none"> - Meetings with Heads of Service and evidence collection from April through to May - Presentation of draft Statement to Members in June - Make checks as necessary based on Member feedback - Presentation of final Statement to Members in September
	<p>Gap assessment – performed and challenged</p> <p>The Annual Governance Statement is assessed through gap analysis based on suggested evidence examples provided by CIPFA.</p>
	<p>Terms of reference and key responsibilities</p> <p>Key responsibilities for the collation of evidence and production of the Annual Governance Statement is listed in Governance Officers' Job Descriptions.</p> <p>The Audit Committee Terms of Reference detail their responsibility.</p>
	<p>Record of assurances required and received is held and is complete</p> <p>The Source of Assurance document lists hyperlinks to all supporting evidence.</p>
	<p>Scoring matrix/methodology (a consistent and reliable assessment process and the conclusions drawn are in line with the evidence produced)</p>
	<p>Gap assessment results and actions arising there from</p> <p>The Evidence Register details information resulting from gap analysis. Where there are gaps, comments for improvement are listed.</p>
	<p>Minutes of meetings</p> <p>Meetings with the Heads of Service are noted on an AGS Evidence Form.</p>
	<p>Annual report of Head of Internal Audit – including opinion on Internal control and risk management</p>

	<p>framework</p> <p>The Internal Audit Team Leader presented the Internal Audit Outturn Report for 2012/13 to Audit Committee on 25 June 2013.</p> <p>Reports of external auditor and other external review agencies</p> <p>The External Auditor is due to present their Annual Governance Report for 2012/13 to the Audit Committee at their meeting on 24 September 2013.</p>
<p>Evidence</p>	<p>AGS File (electronic and paper)</p> <p>AGS forms</p> <p>Head of Communities and Governance Job Description</p> <p>Support Officer's Job Description</p> <p>Internal Audit Outturn Report</p>
<p>Comments for Improvement</p>	<p>Approved written guidance re evaluation</p> <p>An agreed timetable, allowing for in-year evidence gathering and assessment and for the period between the year-end and the date of the governance assurance statement (timetable driven by that for the production of the annual statement of accounts)</p>
<p>Assurance</p>	<p>We can place reliance upon this control</p>

OBJECTIVE 6: Action plan to address weaknesses and ensure continuous improvement of the system of corporate governance

Step 1: There is a robust mechanism to ensure that an appropriate action plan is agreed to address identified control weaknesses and is implemented and monitored

Example	An action plan is drawn up and approved
Information	<p>Prioritised action plan, setting out actions, responsibilities and timescales, approved at appropriate level</p> <p>The Annual Governance Statement Action Plan is drafted identifying area of weakness and suggested improvement action, responsible officers and timescale (target date).</p> <p>The draft Action Plan is presented to Management Team for input before being reported to Audit Committee for approval.</p>
Progress from 2011/12	The Action Plan lists area of weakness as well as improvement action.
Evidence	<p>Management Team Minutes</p> <p>Audit Committee Minutes</p> <p>Action Plan</p>
Assurance	We can place reliance upon this control

Step 1: There is a robust mechanism to ensure that an appropriate action plan is agreed to address identified control weaknesses and is implemented and monitored

Example	All actions are SMART
Information	<p>Each action on prioritised action plan is compliant with SMART list:</p> <ul style="list-style-type: none"> • Specific • Measurable • Achievable • Realistic • Time-bound <p>The Action Plan details specific actions with target dates. All actions have been set with Heads of Service to be completed within a realistic timescale. Measure of success will be fulfilment of the actions.</p>
Evidence	Action Plan
Assurance	We can place reliance upon this control

Step 1: There is a robust mechanism to ensure that an appropriate action plan is agreed to address identified control weaknesses and is implemented and monitored

Example	Actions communicated and responsibilities assigned
Information	<p>Responsibilities for each action are defined in action plan An appropriate Head of Service is designated responsibility for each action.</p>
	<p>Evidence of distribution of action plan to those who require it The Action Plan is presented to Management Team for their approval before going to Audit Committee. (date)</p>
Evidence	<p>Action Plan Management Team Minutes</p>
Comments for Improvement	<p>Next year we need to find out how Heads of Service communicate actions to their services.</p>
Assurance	<p>We can place reliance upon this control</p>

Step 1: There is a robust mechanism to ensure that an appropriate action plan is agreed to address identified control weaknesses and is implemented and monitored

Example	Implementation timescales agreed
Information	Target dates included in action plan The Action Plan includes target dates for completion. Where there are multiple sub actions for a main target, these are given individual target dates.
Evidence	Action Plan
Assurance	We can place reliance upon this control

Step 1: There is a robust mechanism to ensure that an appropriate action plan is agreed to address identified control weaknesses and is implemented and monitored

Example	On-going review of progress and of continuing appropriateness of action
Information	<p>Timetabled reviews</p> <p>Progress against actions is monitored on a quarterly basis.</p>
	<p>Progress reports</p> <p>Quarterly progress monitoring reports are prepared and presented to Management Team and Audit Committee.</p>
	<p>Internal audit or other review of implementation of agreed actions</p> <p>Actions are reviewed with the next review of Corporate Governance (as part of the Annual Governance Statement process). Heads of Service can discuss actions at Management Team as required.</p>
Evidence	AGS Progress Reports
Assurance	We can place reliance upon this control

OBJECTIVE 7: Annual Governance Statement

Step 1: **An Annual Governance Statement has been drafted in accordance with the statutory requirements and timetable set out in the Accounts and Audit Regulations 2003, as revised by the Accounts and Audit (Amendment) (England) Regulations 2006 and is in accordance with the CIPFA guidance.**

Example	Responsibility for the compilation of the Annual Governance Statement has been assigned
Information	Documented key responsibilities The Head of Communities and Governance is responsible for the production of the Annual Governance Statement as detailed in her Job Description.
Evidence	Head of Communities and Governance Job Description
Assurance	We can place reliance upon this control

Step 1: **An Annual Governance Statement has been drafted in accordance with the statutory requirements and timetable set out in the Accounts and Audit Regulations 2003, as revised by the Accounts and Audit (Amendment) (England) Regulations 2006 and is in accordance with the CIPFA guidance.**

Example	There is an Annual Governance Statement production timetable that meets the statutory deadline
Information	Annual Governance Statement timetable is linked to that for the preparation of statutory accounts Both the Draft Annual Governance Statement and Final Accounts are reported to the Audit Committee at their June meeting each year.
Evidence	Audit Committee Work Plan
Assurance	We can place reliance upon this control

Step 1: An Annual Governance Statement has been drafted in accordance with the statutory requirements and timetable set out in the Accounts and Audit Regulations 2003, as revised by the Accounts and Audit (Amendment) (England) Regulations 2006 and is in accordance with the CIPFA guidance.

Example	The Annual Governance Statement is reviewed, challenged and approved by the authority
Information	Terms of reference assigned to senior officers group The Head of Communities and Governance has overall responsibility for the Annual Governance Statement. Once prepared, it is presented to Corporate Management Team for their input and feedback before being reported to Audit Committee.
	Annual Governance Statement is compliant with CIPFA guidance
Evidence	Head of Communities and Governance Job Description Management Team Minutes
Assurance	We can place reliance upon this control

Step 1: An Annual Governance Statement has been drafted in accordance with the statutory requirements and timetable set out in the Accounts and Audit Regulations 2003, as revised by the Accounts and Audit (Amendment) (England) Regulations 2006 and is in accordance with the CIPFA guidance.

Example	Governance assurance statement is prepared, incorporating all the required elements of the statement on internal control
Information	Format of governance assurance statement clearly incorporates required elements of the statement on internal control
	Governance assurance statement is prepared by a senior officer group under terms of reference defined by the authority The Head of Communities and Governance has overall responsibility for the Annual Governance Statement. Once prepared, it is presented to Corporate Management Team for their input and feedback before being reported to Audit Committee.
	Statutory timetable is followed Both the Draft Annual Governance Statement and Final Accounts are reported to the Audit Committee at their June meeting each year.
Evidence	Annual Governance Statement
Assurance	We can place reliance upon this control

OBJECTIVE 8: Report to Cabinet / Executive Committee

Step 1: An annual report to the authority (or delegated committee) on the Annual Governance Statement is presented, in accordance with the CIPFA pro forma

Example	Responsibility for reporting is clearly defined
Information	Initial report explaining the requirement to produce an annual governance assurance statement incorporating the SIC should establish the reporting arrangements / responsibilities of all involved and set out who should sign the annual governance assurance statement after approval by the authority or designated committee
	The covering report to Audit Committee presenting the Annual Governance Statement details the requirements about production of the Annual Governance Statement
	Reports identifying any changes to initial arrangements
Evidence	Annual Governance Statement Report to Audit Committee
Assurance	We can place reliance upon this control

Step 1: An annual report to the authority (or delegated committee) on the Annual Governance Statement is presented, in accordance with the CIPFA pro forma

Example	The signatories to the annual governance assurance statement and SIC are defined and are appropriate in accordance with statutory requirements
Information	The Head of Communities and Governance is responsible for the production of the Annual Governance Statement as detailed in her Job Description.
Evidence	Head of Communities and Governance Job Description
Assurance	We can place reliance upon this control

Step 1: An annual report to the authority (or delegated committee) on the Annual Governance Statement is presented, in accordance with the CIPFA pro forma

Example	The report is likely to be published in a timely fashion with the statutory accounts
Information	Assessment of the current position in relation to the statutory deadline Both the Draft Annual Governance Statement and Final Accounts are reported to the Audit Committee at their June meeting each year.
Evidence	Audit Committee Minutes
Assurance	We can place reliance upon this control

Sources of Assurance

1.0	Annual Governance Statement
1.1	Heads of Service Signed Declarations: <ul style="list-style-type: none">➤ Chief Executive➤ Head of Finance➤ Head of Environmental Services➤ Head of HR and Development➤ Head of Customer Services➤ Head of Communities and Governance➤ Head of Planning and Regeneration➤ Head of ICT➤ Head of Housing and Property Services
1.2	Minutes of AGS meetings: <ul style="list-style-type: none">➤ Chief Executive➤ Head of Finance➤ Head of Environmental Services➤ Head of HR and Development➤ Head of Customer Services➤ Head of Communities and Governance➤ Head of Planning and Regeneration➤ Head of ICT➤ Head of Housing and Property Services
1.3	Annual Governance Statement File (electronic and paper)

	<ul style="list-style-type: none"> ➤ AGS forms
<p>1.4</p>	<p>Annual Governance Statement</p> <ul style="list-style-type: none"> ➤ Annual Governance Statement ➤ Annual Governance Statement Action Plan ➤ Covering Report ➤ Audit Committee Work Plan ➤ Audit Committee Terms of Reference (within Constitution) ➤ Head of Communities and Governance Job Description ➤ Support Officer’s Job Description
	<p>Annual Governance Statement Reports:</p> <ul style="list-style-type: none"> ➤ Annual Governance Statement: Audit Committee 26 June 2012 (DRAFT 2012/13) Management Team Audit Committee 25 September 2012 (FINALISED 2011/12) Management Team ➤ AGS Action Plan Progress Updates: Audit Committee 25 September 2012 Management Team Audit Committee 15 January 2013 Management Team ➤ External Auditor Annual Governance Report 2011/12:

[Audit Committee 25 September 2012](#)

2.0 Assurance

External Assurance Reports:

External Audit reports – Audit Commission until Oct 2012 then Grant Thornton

Peer Challenge report (on site visit March 2013)

Electoral Commission

RIPA Report – Office of Surveillance Commissioners

Local Government Ombudsman Annual Report

QLM Annual Leisure report (H&S)

HSE (focus on waste)

Code of Compliance (ICT)

Equality Forum Mid Devon

Information Commissioner’s Office – FOI decision notices

Planning Inspectorate

Institute of Cemeteries and Crematory Management

Management Team minutes

Committee minutes

Senior management team minutes

Follow up reports to appropriate committee

- **Data Quality Policy**

Internal Audit reports to Audit Committee and Progress Reports

Progress Report: [25 September 2012](#)

Progress Report: [20 November 2012](#)

Progress Report: [15 January 2013](#)

Progress Report: [19 March 2013](#)

3.0

Communication

Communication Guidelines

Internal Communication

- **The Link**

- **Senior Officers Forum**

Data Protection Presentation

- **Core Brief**

- **HR e-Newsletter**

- **Staff Forum Notes**

18 April 2012

6 August 2012

- **Staff Briefings**

Reminder in The Link

All Officers email

Presentations:

- Friday 9 March 2012 – 10.00am – Governance: led by Amy Tregellas and Simon Johnson
- Friday 9 March 2012 – 2.00pm – Planning: led by Jonathan Guscott
- Monday 12 March 2012 – 3.00pm – Housing: led by Nick Sanderson and Claire Fry

- **All Officer Emails**

Formula Grant Settlement

Staff Car Parking Charges

Salary Payments

Internal and External Vacancies

	<p>Data Security Important / Data Security Again</p> <p>Additional: Mobile Phone Users</p> <ul style="list-style-type: none"> • UNISON emails
	<ul style="list-style-type: none"> • Satisfaction surveys
	<p>External Communication</p> <p>Parish Matters</p> <p>Mid Devon Talk</p> <p>Service Newsletters</p> <p>Website</p> <p>Facebook</p> <p>Twitter</p> <p>Press Releases</p>
4.0	Complaints
	<p>Corporate Complaints Policy / Customer Care Charter</p> <p>Complaints Leaflet</p> <p>Reports to Committee / Minutes of Meetings re new Policy</p> <p>Annual Complaints Report to Committee</p> <ul style="list-style-type: none"> • Have Your Say – Council Complaint’s Policy • Annual Report on Complaints, Comments and Compliments (for 2011/12): Cabinet 30 August 2012 • FOI – ICO Report (upheld complaint) • FOI – ICO Report (withdrawn complaint)
	number of compensation payments made as per Repairs Service Standards eg resulting from missed or late visit or from damage

5.0	Consultation
	<ul style="list-style-type: none">• Community Engagement Strategy• Statement of Community Involvement• Internal Consultation• External Consultation• Petitions: Full Council 27 June 2012• Tenant/Resident Consultation<ul style="list-style-type: none">➤ SIG Minutes➤ Repairs Roadshow➤ Satisfaction SurveysSTAR Survey➤ Policy Focus Groups➤ Tenant Involvement Agreement➤ Tenant Involvement Facebook➤ Tenant Involvement Twitter• Tenant Involvement Strategy / Agreement <p>Minutes of Meetings with Public Representation</p>
	<p>Minutes of Meetings with Public Representation:</p> <p>Cabinet: 7 June 2012</p> <p>Cabinet: 2 August 2012</p> <p>Audit Committee: 20 November 2013</p>

	<ul style="list-style-type: none"> • Feedback from Consultation <ul style="list-style-type: none"> • Website: Getting Involved • Housing News 4U Newsletters: <ul style="list-style-type: none"> ➤ inHOUSE 30 – April ➤ inHOUSE 32 – June ➤ inHOUSE 33 – July ➤ inHOUSE 34 – October ➤ inHOUSE 35 – December ➤ inHOUSE 36 - February
6.0	General
	<p>Legal Library:</p> <p>Westlaw Invoice for 2013 Subscription</p> <p>Examples of reports with legal implications</p> <p>Standards reports</p>
	<p>Management Team Job Descriptions:</p> <ul style="list-style-type: none"> ➤ Chief Executive - Kevin Finan ➤ Head of Communities & Governance - Amy Tregellas ➤ Head of Environmental Services - Paul Williams ➤ Head of Financial Services - Andrew Jarrett ➤ Head of Housing & Property Services - Nick Sanderson ➤ Head of HR & Development - Jill Stimpson ➤ Head of ICT - Christina Cross ➤ Head of Planning & Regeneration - Jonathan Guscott

➤ [Head of Customer Services – Liz Reeves](#)

Structure Charts:

- [Management Team](#)
- [Environmental Services](#)
- [Waste and Recycling](#)
- [Financial Services](#)
- [Human Resources and Development](#)
- [ICT, Communities and Governance, Communications](#)
- [Lords Meadow Leisure Centre](#)
- [Culm Valley Leisure Centre](#)
- [Exe Valley Leisure Centre](#)
- [Housing – Building Services](#)
- [Housing Services](#)
- [Legal and Democratic](#)
- [Planning](#)

Cabinet Member Decisions:

- [Business Advice Service](#)
- [Crediton Methodist Church](#)
- [High Street Innovation Fund](#)
- [Lords Meadow Refurbishment](#)
- [SEED Fund Allocations June](#)
- [SEED Fund Grant November](#)

Minutes of Meetings recording decisions of delegated authority:

- [Cabinet: 2 August 2012 \(items 36 and 40\)](#)

	<ul style="list-style-type: none"> ➤ Cabinet: 25 October 2012 (item 66) ➤ Cabinet: 22 November 2012 (item 76) ➤ Cabinet: 31 January 2013 (item 98) ➤ Cabinet: 28 February 2013 (item 114)
7.0	Internal Controls
•	<ul style="list-style-type: none"> • Constitution <ul style="list-style-type: none"> - Current Constitution - Minutes of Full Council Meeting approving Constitution: 2011 - Constitution Working Group Papers - Updated Financial Regulations - Minutes of Meeting approving Financial Regulations <p>Committee Terms of Reference (Constitution)</p>
	<p>Review of Constitution:</p> <p>Cabinet 25 October 2012</p> <p>Audit Committee 20 November 2012</p>
•	<ul style="list-style-type: none"> • Code of Corporate Governance <ul style="list-style-type: none"> • Committee Work Plan (to show Code is scheduled for review in advance) <p>Audit Committee Reports (re Code of Corporate Governance)</p>
	<p>Procurement</p> <p>Procurement Strategy</p> <p>Evidence that as part of the procurement and contract process, external contractors must agree to comply with our Data Protection policies and</p>

	provide evidence of their own policies relating to Health and Safety.
	Changes to Standards Regime: Cabinet 7 June 2012
	Approval of policies and other strategic documents: <ul style="list-style-type: none">• Economic Development Strategy: Cabinet 10 May 2012• Statement of Community Involvement: Cabinet 10 May 2012• Neighbourhood Management Policy: Cabinet 7 June 2012• Health and Safety Policy: Cabinet 5 July 2012• Tenancy Inspection Policy: Cabinet 2 August 2012• Housing ASB Policy: Cabinet 2 August 2012• Complaints Procedure (re Members): Audit Committee 25 September 2012• High Hedges Policy: Cabinet 27 September 2012• Tree Policy: Cabinet 27 September 2012• Asbestos Management Policy: Cabinet 27 September 2012• Complaints and Feedback Policy: Cabinet 27 September 2012• Tenancy Strategy: Cabinet 3 January 2013• Private Sector Housing Renewal Policy: Cabinet 3 January 2013• Leisure Pricing Strategy: Cabinet 3 January 2013• Tenancy Policy: Cabinet 31 January 2013

	<ul style="list-style-type: none"> • Capital Programme: Cabinet 31 January 2013 • Treasury Management Strategy and Annual Investment Strategy for 20/13/14: Cabinet 28 February 2013 • Risk Management Strategy: Audit Committee 19 March 2013 • Code of Corporate Governance: Audit Committee 19 March 2013 • Internal Audit Charter and Internal Audit Strategy 2013/14: Audit Committee 19 March 2013 • Street Naming and Numbering Policy and Procedure: Cabinet 28 March 2013 • Pay Policy: Cabinet 28 March 2013
8.0	Organisational Objectives (Corporate and Business Planning)
	<p>Strategic Documents</p> <ul style="list-style-type: none"> • Community Engagement Strategy Strategy document Minutes of approval Details of Consultation • Economic Development Strategy Strategy document and Action Plan Minutes of approval – Cabinet 10 May 2012 Details of Consultation (Businesses, Individuals, Voluntary Sector, Town and Parish) • Corporate Plan Corporate Plan document (full version and summary version) Minutes of approval

Details of Consultation

Business Plans and Work Plans

- [Four Year Strategic Audit Plan and Audit Programme for 2013/14](#)
- [Internal Audit Target Completion Report](#)

Business Plans

- Benefits
- Bereavement Services
- Building Maintenance
- Care Services
- Communications
- Customer Services
- Electoral Services
- Environment and Enforcement
- Environmental Health
- Finance
- Grounds Maintenance
- HR, Payroll and Learning and Development
- ICT Services
- Internal Audit
- Legal
- Leisure
- Licensing and Community Safety
- Local Land Charges
- Member Services

	<ul style="list-style-type: none"> - Open Spaces - Pannier Market - Planning - Private Sector Housing - Property Services - Revenues - Tenancy Services - Waste and Recycling • Business Plan Guidance Notes
	<p>Corporate Priorities and New Starters:</p> <ul style="list-style-type: none"> - Luke Smith - Jo Pope - Rachael Taylor - Stacey Butt - Charlotte Pratt
9.0	Performance Management
•	• Committee Minutes Approving KPI Targets:

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Performance Reports to Committees:

Revenues and Benefits: [Cabinet 10 May 2012](#)

Revenues and Benefits: [Cabinet 22 November 2012](#)

Corporate Performance and Risk: [Audit Committee 19 March 2013](#)

Corporate Performance and Risk: [Cabinet 28 March 2013](#)

Customer First complaints report:

Housing Performance Report:

Cabinet

Scrutiny

Community Wellbeing

Decent and Affordable

Homes

Managing the Environment

Audit Committee

- **Annual Reports**

- Annual Accounts 2011/12 ([Audit Committee 26 June 2012](#)) / Finalised Accounts 2011/12 ([Audit Committee 25 September 2012](#))
- Housing Services Annual Report
- Council Tax Leaflet
- Annual Monitoring Report ([Cabinet 3 January 2013](#))
- Internal Audit Outturn Report ([Audit Committee 25 June 2013](#))
- Committee Annual Reports ([Full Council 24 April 2013](#))
- Corporate Plan Annual Performance Report

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- **Partnership Performance Reports:**

Community Safety Partnership

•	Service Level Agreements
•	Service Standards
•	Peer Challenge Papers
•	Performance Management meetings with key partners eg Planned Maintenance / ICT
	<p>Service Performance Reports</p> <ul style="list-style-type: none"> • inHOUSE Newsletter: • Housing Performance: <ul style="list-style-type: none"> Performance Report Neighbourhood Team Meeting Minutes Neighbourhood Team Report Rent Levels Reporting Structure Rent Levels Reporting Information Weekly Rent Arrears Statistics Debt Analysis Report Current Tenant Dwelling Rent Arrears by Stages Former Tenant Rent Arrears Credits – Neighbourhood Teams Arrears Totals by Area <p>➤</p>
	Benchmarking
	<p>Appraisal Form</p> <p>Skills Audit and Competency Framework</p>

10.0	Risk Management
	<p>Review of accuracy and usefulness of output from information systems</p> <ul style="list-style-type: none">• Audit Committee Minutes: 15 January 2013• Audit Committee Minutes: 19 March 2013 <p>Business Continuity Plan Risk Management Strategy</p>
	<p>Training Programmes and Paperwork</p> <ul style="list-style-type: none">• Health and Safety Needs Analysis Spreadsheet• Awareness Training – Attendance Sheet• E-Learning Course List by Service Area• Report Template (page 85 in Constitution)
	<p>Health and Safety Policies</p> <ul style="list-style-type: none">• Asbestos Policy• COSHH Policy• Fire Risk Assessment Policy• First Aid Policy• Lone Working Policy• Manual Handling Policy• DSE Policy• Health and Safety Policy• No Smoking Policy• Permit to Work Policy

	<ul style="list-style-type: none"> • Risk Assessment Policy • Stress Policy • Violence Policy
•	<ul style="list-style-type: none"> • Project Risk Assessments
•	<ul style="list-style-type: none"> • Risk Management Strategy • Corporate Induction Programme • Risk Management Awareness Training Member Induction Programme
•	<ul style="list-style-type: none"> • Insurance certificates are on SharePoint (under Finance then Insurance).
•	<ul style="list-style-type: none"> • Head of Communities and Governance Job Description • Corporate Equalities Group: <ul style="list-style-type: none"> ➤ Terms of Reference ➤ Minutes • Health and Safety Committee: <ul style="list-style-type: none"> ➤ Terms of Reference ➤ Minutes • Corporate Management Team: <ul style="list-style-type: none"> ➤ Terms of Reference? ➤ Minutes • Reports to corporate management team
	<p>Committees making decisions regarding risk:</p> <p>Housing Services – Draft Fire Risk (in communal areas): Cabinet 7 June 2012</p>

	<p>Right to Buy – Reinvesting Receipts in new Affordable Rented Homes: Cabinet 7 June 2012</p> <p>Housing – ASB Issues: Cabinet 2 August 2012</p> <p>Play area risk assessments and safety inspections: Cabinet: 28 March 2013</p>
<ul style="list-style-type: none"> • 	<ul style="list-style-type: none"> • Job Descriptions • Business Plans • Internal Audit Terms of Reference <p>Report Template</p> <ul style="list-style-type: none"> • Risk Management Strategy • Corporate Induction Programme • Risk Management Awareness Training <p>Member Induction Programme</p>
<ul style="list-style-type: none"> • 	<ul style="list-style-type: none"> • Risk Assessment Policy • Risk Assessment Templates <p>Risk Assessment Awareness Training (including SOF, CMT, SPAR Training, Risk Workshops)</p> <ul style="list-style-type: none"> • Internal Audit reports • Corporate Risk Register (Performance and Risk Reports) <p>Management Team Minutes</p> <p>Emergency Plan</p>
11.0	Training and Information for New Starters
	<p>Vacancy, New Starter and Induction Paperwork</p> <ul style="list-style-type: none"> ➤ Vacancy Approval Form

	<ul style="list-style-type: none"> ➤ Business Case for Vacancies (Management Team minutes) ➤ Examples of New Starters evidencing appropriate qualifications / experience: <ul style="list-style-type: none"> ➤ Grounds Maintenance Operative (VAF, JD, Driving Licence, Employment Health Questionnaire) ➤ Planning Assistant (VAF, JD, Planning Degree, Driving Licence, Car Insurance with Business Use, Employment Health Questionnaire) ➤ Housing Policy Officer (VAF, JD, Professional Qualification, Employment Health Questionnaire) ➤ Induction Checklist ➤ Corporate Induction Programme ➤ Corporate Induction – Attendee List
•	
12.0	Section 151 Officer
	<p>Financial Regulations</p> <p>Evidence of Approval: Cabinet</p>
•	<ul style="list-style-type: none"> • Medium Term Financial Plan
	<p>Financial Monitoring Reports</p> <p>Revenue and Capital Outturn Reports:</p> <p>Cabinet 7 June 2012</p> <p>Treasury Management Outturn Reports:</p> <p>Cabinet 7 June 2012</p> <p>Cabinet 28 February 2013</p>

Half Year Investment Performance and Review of Treasury Management Strategy 2012/13

[Cabinet 25 October 2012](#)

Salaries and Major Income Streams:

[Cabinet 5 July 2012](#)

Financial Monitoring 2012/13

[Cabinet 2 August 2012](#)

[Cabinet 30 August 2012](#)

[Cabinet 27 September 2012](#)

[Cabinet 25 October 2012](#)

[Cabinet 22 November 2012](#)

[Cabinet 3 January 2013](#)

[Cabinet 31 January 2013](#)

[Cabinet 28 February 2013](#)

[Cabinet 28 March 2013](#)

Medium Term Financial Strategy:

[Cabinet 25 October 2012](#)

Budget Update:

[Cabinet 22 November 2012](#)

13.0

Fraud and Corruption

	Whistle Blowing Policy
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	Audit Committee Minutes
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