

ANNUAL GOVERNANCE STATEMENT 2012/13

Cabinet Member Cllr Neal Davey
Responsible Officer Head of Communities & Governance

Reason for Report: To provide the Committee with the final versions of the 2012/13 Annual Governance Statement (Appendix A) and Action Plan (Appendix B).

RECOMMENDATION(S):

- 1) The Committee approve the final version of the 2012/13 Annual Governance Statement and Action Plan and request that the Leader of the Council and Chief Executive sign the Annual Governance Statement.

Financial Implications: Failure to ensure that the Council has good governance arrangements could result in the external auditor needing to do more work and, therefore, result in an increase in audit fee.

Legal Implications: None.

Risk Assessment: Failure to produce an Annual Governance Statement would result in the Council breaching the Accounts and Audit Regulations 2003 (Amended 2006).

1.0 Introduction

- 1.1 The purpose of this report is to agree the final versions of the 2012/13 Annual Governance Statement (Appendix A) and Action Plan (Appendix B), following recommendations made at the Special Audit Committee meeting on 30 July 2013.
- 1.2 As recommended by the External Auditor, the Action Plan has been streamlined to focus on the priority actions with a supplementary list of suggestions for improvement. Part 1 of Appendix B lists actions 1-21 (the priority actions) to be completed over the next six months. Part 2 (actions 22-34) details the longer term actions to be completed in the next financial year. The suggestions for improvement are listed in Part 3 of Appendix B – these will be checked when preparing the Annual Governance Statement for 2013/14 and where appropriate, will be accelerated accordingly if action has not been taken.
- 1.3 Guidance requires that the most senior Member and officer sign off the Annual Governance Statement so it is recommended that the Committee ask the Leader of the Council and the Chief Executive to sign off the statement prior to it being published on the website by the 30th September.
- 1.4 The first AGS progress report will be presented to the Committee at their meeting on 19 November 2013.

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Circulation of the Report: Management Team and Cllr Neal Davey

List of Background Papers: None

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1.0 SCOPE OF RESPONSIBILITY

- 1.1 Mid Devon District Council is responsible for ensuring that its business is conducted in accordance with the law and proper standards, and that public money is safeguarded and properly accounted for, and used economically, efficiently and effectively. Mid Devon District Council also has a duty under the Local Government Act 1999 to make arrangements to secure continuous improvement in the way in which its functions are exercised, having regard to a combination of economy, efficiency and effectiveness.
- 1.2 In discharging this overall responsibility, Mid Devon District Council is responsible for putting in place proper arrangements for the governance of its affairs, facilitating the effective exercise of its functions, and which includes arrangements for the management of risk.
- 1.3 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*. A copy of the code is on our website at www.midevon.gov.uk or can be obtained from the Head of Communities & Governance. This statement explains how Mid Devon District Council has complied with the code and also meets the requirements of Accounts and Audit (England) Regulations 2011, regulation 4(3), which requires all relevant bodies to prepare an annual governance statement.

2.0 THE PURPOSE OF THE GOVERNANCE FRAMEWORK

- 2.1 The governance framework comprises the systems and processes, culture and values, by which the authority is directed and controlled and its activities through which it accounts to, engages with and leads its communities. It enables the authority to monitor the achievement of its strategic objectives and to consider whether those objectives have led to the delivery of appropriate services and value for money.
- 2.2 The system of internal control is a significant part of that framework and is designed to manage risk to a reasonable level. It cannot eliminate all risk of failure to achieve policies, aims and objectives and can therefore only provide reasonable and not absolute assurance of effectiveness. The system of internal control is based on an ongoing process designed to identify and prioritise the risks to the achievement of Mid Devon District Council's policies, aims and objectives, to evaluate the likelihood and potential impact of those risks being realised and the impact should they be realised, and to manage them efficiently, effectively and economically.

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2.3 The governance framework has been in place at Mid Devon District Council for the year ended 31 March 2013 and up to the date of approval of the Annual Report and Statement of Accounts for the 2012/13 financial year.

3.0 THE GOVERNANCE FRAMEWORK

3.1 The Council's Governance Framework addresses the way the Council is controlled and managed, both strategically and operationally, and how it will deliver its' services. The structures and processes, risk management and other internal control systems are in place to manage the barriers to achieving organisational objectives.

3.2 The Local Code of Corporate Governance is reviewed on an annual basis by the Audit and Committee 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.

3.3 The key elements of the systems and processes that comprise the Council's Governance Framework are:

3.4 Identifying and communicating the authority's vision of its purpose and intended outcomes for citizens and service users

3.4.1 The Council's Constitution makes clear reference to the Council's purpose; how it operates; how it will engage citizens, the rights of citizens and the values of the organisation.

3.4.2 The Council's Corporate Plan covers the period of 2012-2015 and clearly defines the Council's five priorities, which are:

- Thriving Economy
- Better Homes
- Empowering our Communities
- Caring for our environment
- Managing our resources

3.4.5 For each priority in the 2012-2015 Corporate Plan there is a comment on the Council's long term vision, details of aims and objectives and deliverable actions with details of the lead officer and target dates (over the three year period) for completion. The Corporate Plan is published on the Council's website – both a full version and a summary leaflet.

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3.5 Reviewing the authority's vision and its implications for the authority's governance arrangements

3.5.1 The last full review of the Corporate Plan took place during the 2011/12 financial year for the period of 2012 to 2015. The next scheduled review of the Corporate Plan is in 2015 following the next District Council elections.

3.5.2 The Council's Corporate Plan outlines the authority's vision and is aligned to the Governance framework in the following ways:

- The Corporate Plan is linked to both the Medium Term Financial Plan and the Workforce Plan to ensure that the implications on the Council's finances and workforce are considered when the vision and priorities are set.
- The Full Corporate Plan and summary document are available to local people on paper or on the internet, and copies can be made available for people in alternative formats.
- Every report (whether it be to the Cabinet, Scrutiny Committee, Audit Committee, the Policy Development Groups or a Regulatory Committee) is required to outline how the recommended action helps to achieve one or more of the Corporate Plan priorities..
- The Council's performance reporting system (SPAR.net) includes all of the performance indicators associated with the Corporate Plan. Reporting of performance against targets is mandatory throughout the Council, and reported to the PDGs, Scrutiny Committee, Audit Committee and Cabinet. Where performance against target is unsatisfactory or not reported, the responsible officer is required to offer an explanation to Management Team.
- There are strategies and action plans that sit below the Corporate Plan such as the Economic Development Strategy and action plan, which is reviewed regularly.

3.6 Translating the vision into objectives for the authority and its partnerships

3.6.1 The Council's Corporate Plan contains the vision of the Council and sets out the top level objectives for delivering this vision in the areas listed in section 3.4.2 with targets covering the three year period of the Corporate Plan. Where appropriate there are strategies and action plans that link to the corporate priorities, such as the Economic Development Strategy and Action Plan setting out actions for

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completion. Where appropriate there are also actions within these plans that link with partnership working.

3.7 Measuring the quality of services for users, for ensuring they are delivered in accordance with the authority's objectives and for ensuring that they represent the best use of resources and value for money

3.7.1 As outlined in sections 3.4 and 3.5 there are a number of Performance Indicators on the Council's performance reporting system (SPAR.net) that measure the outcomes of service delivery and these include Local Indicators some of which are former National Indicators (NIs) and Best Value Performance Indicators (BVPIs).

3.7.2 Services within the Council have their own processes for measuring their performance and the quality of services that they provide for users and this information is included in their Service Business Plans. The Service Business Plan template was reviewed and updated during the 12/13 financial year. A working group of service managers who use the Business Plan template were consulted. Each service area follows a standard template, which includes the following headings and Appendices:

- Service Vision
- Description of the Service
- Objectives – short term and Medium to long term
- Legislation changes
- Policy Framework
- Consultation
- Appendix A: Service Action Plans
- Appendix B: Service Risk Report (taken from the SPAR system)
- Appendix C: Service Performance Report (taken from the SPAR system)
- Appendix D: Service Workforce and Training Plan
- Appendix E: Service Financial Forecast and Savings Plan
- Appendix F: Service Marketing Plan (if applicable)
- Appendix G: Service Benchmarking Information
- Appendix H: Service Procurement Plan
- Appendix I: Service Contingency Plan

3.7.3 The Council has a Community Engagement Strategy which clearly outlines how the Council will consult with its citizens and also includes a timetable for consultations throughout the year e.g. wider consultation on the budget as well as more service focused consultation. The Strategy has previously been updated every two years and was last updated in March 2013. The action plan is reviewed and updated on an annually basis in March. The Community Engagement Strategy will now be reviewed and updated every three years. Both the Strategy

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and the action plan are reviewed by the Community Well Being PDG before going to the Cabinet for approval.

- 3.7.4 The Council asks for feedback from customers and users of services through the citizens panel (surveyed three times a year), the Mid Devon Equalities Forum and a number of service specific customer satisfaction surveys. The Council has a section on it's website where feedback on consultations is posted and we have a "you said, we did" page giving details of changes that have been made as a result of customer feedback.
- 3.7.5 The Council is committed to using its resources in the most economic, efficient and effective way and has undertaken a number of projects in the last year to either reduce expenditure or generate income. Wherever possible, when a member of staff leaves the authority as assessment is done to see if the role can be absorbed within the existing establishment before reviewing options for replacement.
- 3.8 Defining and documenting the roles and responsibilities of the executive, non-executive, scrutiny and officer functions, with clear delegation arrangements and protocols for effective communication in respect of the authority and partnership arrangements**
- 3.8.1 The Council has adopted a Constitution which sets out how it operates, and assigns clear roles and responsibilities for decision making bodies and individuals within the Council.
- 3.8.2 The Articles and Terms of Reference within the Council's constitution clearly define the roles and responsibilities of:
- Full Council
 - The Cabinet
 - Scrutiny Committee
 - Audit Committee
 - The Policy Development Groups
 - The Regulatory Committees (including Planning Committee, Licensing Committee, Regulatory Committee and other Bodies)
- 3.8.3 The Council has a clearly defined Scheme of Delegation, which is also contained within the Constitution. This document sets out the powers of the Council, the powers of the Cabinet, delegations to Cabinet Members and Officers and the matters delegated to the Committees. The Scheme of Delegation to Officers includes specific reference to the statutory posts of Head of Paid Service, Monitoring Officer and Section 151 Officer.

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- 3.8.4 Cabinet Members are able to make decisions individually subject to certain provisos. The scheme of delegation within the Constitution outlines the details and also contains the decision recording form. Delegated decisions are published on the website and are also discussed at Cabinet, if and when any decision is taken by a Cabinet Member.
- 3.8.5 The main decision-making committee is the Cabinet. Each Cabinet Member is assigned a portfolio of services (which has been aligned with the Management Team structure) requiring them to work very closely with their relevant Head(s) of Service in the pursuance of the Council's goals. Regular meetings between Cabinet Members and Heads of Service take place during which service performance, risk and budgetary control are discussed as well as any other issues affecting service delivery. The Cabinet and Management Team also meet on a monthly basis.
- 3.8.6 The Council also has a Scrutiny Committee which comprises of non-cabinet members whose duties include: reviewing and scrutinising decisions made by the Cabinet, exercising the right to call in decisions if necessary, and appointing review groups to look at particular issues of local concern.
- 3.8.7 As well as the Scrutiny Committee the Council also has an Audit Committee which provides an independent assurance on the adequacy of the Council's governance arrangements including its risk management framework and associated control environment. The Committee also provides an independent scrutiny of the Council's financial and non-financial performance. Following the changes to the Standards regime in the Localism Act the Audit Committee also picked up and issues previously covered by the Standards Committee in July 2012. However, in April 2013 Full Council voted to revert back to a separate Standards Committee.
- 3.8.8 A protocol on member and officer relations is included in the Constitution to assist in understanding and promoting effective communication.
- 3.8.9 The Council's Management Team provides corporate leadership and meets on a regular basis and considers performance management, risk management, financial management, internal control, efficiency and value for money issues. Where officers attend external meetings with Partners updates are provided to colleagues at Management Team meetings.
- 3.8.10 Staff are kept regularly updated on all relevant issues via the Core Brief which is discussed at the Senior Officers Forum and also through the

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Council's weekly staff newsletter 'the Link'. Members are kept informed via the Members Weekly Information Sheet.

3.9 Developing, communicating and embedding codes of conduct, defining the standards of behaviour for members and staff

- 3.9.1 There were a number of changes in this area in the 2012/13 financial year. The Localism Act 2011 abolished the standards board regime but introduced new duties to promote and maintain high standards of conduct. These changes came into effect from the 1st July 2012.
- 3.9.2 In accordance with the requirements of the Localism Act 2011 the Council drew up a new Code of Conduct for Members in June 2012. On 27th June 2012 Full Council approved the Code of Conduct with the caveat of being given the opportunity to consider and discuss all options for both the code and it's policing. In February 2013 a group of Members along with the Monitoring Officer and Member Services Officers met to discuss these issues. Subsequently the Code of Conduct has been amended to simplify it and this was approved by Full Council in April 2013.
- 3.9.3 The Codes of Conduct for both Officers and Elected Members are contained within the Council's Constitution. These are both kept under review and updated as necessary. The Officers Code of Conduct is issued and explained to officers during their induction. Thereafter, the Codes of Conduct are available on the Council's website.
- 3.9.4 A Members working group is currently working with the Monitoring Officer to review the Constitution in light of the new Association of Council Secretaries and Solicitors (ACSeS) Model Constitution.
- 3.9.5 The Council holds both a register of interests and gifts and hospitality register for both officers and members. Internal Audit reviewed the Councils arrangements for gifts and hospitality and the Register of Interests in the 2012/13 financial year. The Head of Communities & Governance and Monitoring Officer reminded all officers of the need to declare any gifts & hospitality or register any interests.
- 3.9.6 As outlined in section 3.8.7, following the changes to the Standards Regime, the Council opted to incorporate the role of the Standards Committee into the role of the Audit Committee and this took effect from the 1st July 2012. As per 3.9.2, in April 2013 Full Council also approved that the Council revert to having a separate Standards Committee.
- 3.9.7 The Monitoring Officer and Deputy Monitoring Officers carried out training/briefing sessions for District Councillors and Town and Parish Councillors during the September and October 2012 to talk to

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Councillors about the changes to the Standards Regime. The Monitoring Officer also spoke to Parish Clerks about ethical standards at the Annual Clerks Meeting in March 2013.

- 3.9.8 On 12th December 2012, the Head of Communities and Governance was appointed as the new Monitoring Officer by Full Council.
- 3.9.9 The Council's website has comprehensive information available as to how members of the public can make a complaint about a Councillor whether it relates to a District, Town or Parish Councillor. Following the changes to the Standards Regime the procedure for dealing with a complaint about a Councillor was reviewed and amended and is published on the Council's website.
- 3.9.10 The Council has disciplinary and grievance procedures in place, which are accessible to officers through the Intranet pages. Any instances of alleged breaches of the Code of Conduct would be dealt with in accordance with these procedures.
- 3.10 Reviewing the effectiveness of the authority's decision-making framework, including delegation arrangements, decision-making in partnerships and robustness of data quality**
- 3.10.1 The Constitution details how decisions will be made by the Council – specifically Article 13. Article 4 of the Constitution outlines the decisions that will be made by Full Council.
- 3.10.2 The Cabinet is the main decision making committee. Article 7 of the Constitution details the role of the Cabinet and the scheme of delegation also outlines which Cabinet Members are responsible for which areas. The Constitution also contains information on Cabinet Procedure Rules.
- 3.10.3 The Scrutiny Committee have the right to call in decisions made by Cabinet or individual Cabinet members that non-cabinet members feel have not been made in accordance with Article 13 within 5 working days of the Cabinet decision or delegated decision form being published.
- 3.10.4 In the 2012/13 financial year the Scrutiny Committee did not call in any decisions made by the Cabinet as a whole or individually under the delegated powers.
- 3.10.5 The Council has a Data Quality Policy in place which is reviewed every 3 years. This last went to Audit Committee for approval in May 2011 and is due to be reviewed and taken back to the Audit Committee for approval in May 2014. The Committee report procedure requires that

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reports going to Committee must go to Audit for Data Quality checking prior to the agenda going out.

3.11 Reviewing the effectiveness of the framework for identifying and managing risks and demonstrating clear accountability

3.11.1 The Council has a Risk Management Strategy, which is updated annually and clearly outlines the roles and responsibilities within the Council for Risk Management as well as the Risk Management process, which includes guidance on:

- Identifying corporate and operational risks
- Assessing the risks for likelihood and impact
- Identifying mitigating controls
- Allocating responsibility for the mitigating controls

3.11.2 The Audit Committee is responsible for reviewing and approving the Risk Management Strategy and the current document was approved on 19th March 2013. The Head of Communities & Governance attends the staff induction sessions to ensure that all new staff are aware of the risk management strategy and their responsibilities. The Head of Communities and Governance has run risk assessment sessions for members of staff on the dates of 2nd October and 6th November 2012 and 30th January, 25th February and 4th March 2013. Further sessions are being scheduled in 2013/14 for those staff that have not been able to attend previous sessions.

3.11.3 As per section 3.7.2 each Service Business Plan contains an appendix on Risk Management and a report is downloaded from SPAR.net which contains all risks relating to the service area.

3.11.4 During the 2012/13 financial year a large piece of work was undertaken with all Service Areas to ensure that all of their risks were uploaded into the SPAR.net system, including Health and Safety Risks.

3.11.5 Due to the large piece of work with SPAR.net the key business risks were not reported to the Management Team, Cabinet, Audit Committee, Scrutiny Committee and the three Policy Development Groups as frequently as detailed in the Risk Management Strategy section on actions for 2012/13. However, reports did go to the relevant Committees for the last half of the financial year.

3.12 Ensuring effective counter-fraud and anti-corruption arrangements are developed and maintained

3.12.1 The Council has policies with regard to Anti-Fraud & Anti-Corruption and Anti-Money Laundering (and covering the Bribery Act). Both

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policies were reviewed, updated and approved by the Audit Committee on 20th September 2011. They are scheduled to be reviewed every three years and are next due to be reviewed and taken back to Committee in 2014.

3.12.2 There is a flow diagram, which accompanies the Anti-Fraud & Anti-Corruption Policy, which clearly outlines the process for reporting any suspected cases of fraud, corruption or financial irregularity and the steps that will be taken to deal with any allegations that are made. The Head of Communities & Governance attends the Corporate Induction sessions with new members of staff to inform them of the policies and they are accessible to all staff through the audit pages on the Intranet (Sharepoint).

3.13 Ensuring effective management of change and transformation

3.13.1 The Council has processes and procedures in place for managing change.

3.13.2 Internal change whether it relates to people or systems and procedures is dealt with using a business case which is discussed at Management Team. The Chief Executive and Head of Human Resources and Development meet monthly with the Union. The Pay and grading Group and Joint Negotiation and Consultative Committee are groups where Management work with the Union on staff related issues.

3.13.3 The Workforce Plan also focuses on change management in relation to staffing and succession planning. The Human Resource Business Partners work closely with their Service Managers to deal effectively with change. The Council has an annual appraisal process (from March to end August) in place where training and development needs are identified. These are then fed into the annual training plan which is produced and this feeds into the budget setting process.

3.13.4 Where change relates to systems or processes relevant departments across the Council work together on projects. ICT play a key role on any projects relating to systems.

3.13.5 In 2012/13 a cross departmental team worked on the changes impacting on the public in relation to Welfare Reform. This project included consultation with the public, risk assessments and equality impact assessments.

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- 3.14 Ensuring the authority's financial management arrangements conform with the governance arrangements of the CIPFA *Statement on the Role of the Chief Financial Officer in Local Government (2010)* and, where they do not, explain why and how they deliver the same impact**
- 3.14.1 The Council has appointed the Head of Finance as the Chief Financial Officer and Section 151 Officer. The Head of Finance reports directly to the Chief Executive and is a Member of the Council's Management Team.
- 3.14.2 The Head of Finance is a qualified Accountant and has a line of professional accountability for finance staff throughout the organisation.
- 3.14.3 The Head of Finance meets regularly with the Cabinet Member for Finance to ensure that he is fully briefed on all financial matters.
- 3.14.4 The Head of Finance has direct access to the Audit Committee and the External Auditors.
- 3.14.5 Regular financial monitoring reports go to the Cabinet to provide Members with timely, accurate and impartial financial advice and information to assist in decision making.
- 3.14.6 Regular financial information and update reports are presented to the Scrutiny Committee and the Policy Development Groups.
- 3.14.7 The Authority has a Medium Term Financial Plan which is populated with prudent financial information and forecasts to ensure that the Authority has a clear picture of the financial challenges that it faces going forward.
- 3.14.8 The MTFP forms a key part of the Budget setting process and Service Managers, Management Team and Members all have an input into this process before the Budget is set and agreed by Full Council each year in February.
- 3.14.9 The Council has a robust Treasury Management Strategy in accordance with the CIPFA Guidance in place and this is reviewed every six months.
- 3.15 Ensure the authority's assurance arrangements conform with the governance requirements of the *CIPFA Statement on the Role of the Head of Internal Audit (2010)* and, where they do not, explain why and how they deliver the same impact**
- 3.15.1 The Audit Team Leader is the equivalent of the Head of Internal Audit and the postholder is a qualified accountant. The Audit Team Leader

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manages the Internal Audit section and they do not have any other line management responsibilities.

3.15.2 The Audit Team leader reports to the Head of Communities and Governance except where Internal Audit are reviewing one of her areas and then they report directly to the Chief Executive.

3.15.3 The Audit Team Leader has access to the Chief Executive, Head of Finance (as Section 151 Officer) and the chairman and vice chairman of the Audit Committee and reports to the Audit Committee in her own right.

3.15.4 The Audit Team Leader ensures that the Audit Service work to the Internal Audit Standards – previously the Code of Audit Practice for Internal Audit in Local Government 2006 and from 1st April 2013 the Internal Auditing Standards.

3.16 Ensuring effective arrangements are in place for the discharge of the Monitoring Officer function

3.16.1 Article 12 in the Council's Constitution outlines the functions of the Head of Communities & Governance as the Monitoring Officer.

3.16.2 The Council, at its meeting on 12th December 2012, appointed the Head of Communities & Governance as its Statutory Monitoring Officer and she has one deputy Monitoring Officer (the Assistant Solicitor) to support her. The Monitoring Officer is responsible for ensuring the Council conducts its business lawfully and she has a duty to report to Full Council any proposal, decision or emission that would give rise to unlawfulness or maladministration.

3.16.3 If any Committee wants to make a decision the members must, when reaching decisions, have regard to any relevant advice provided to them by the Authority's Monitoring Officer and/or the Head of Finance (as Section 151 Officer).

3.17 Ensuring effective arrangements are in place for the discharge of the Head of Paid Service function

3.17.1 Article 12 in the Council's Constitution outlines the functions of the Chief Executive as the Head of Paid Service.

3.17.2 The Head of Paid Service role and responsibilities are laid out in the Chief Executives job description and he also receives an annual appraisal from Members.

3.17.3 The Chief Executive does not hold the post of Section 151 Officer or Monitoring Officer.

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3.18 Undertaking the core functions of an audit committee, as identified in CIPFA's *Audit Committees – Practical Guidance for Local Authorities*

3.18.1 The Council's Audit Committee undertakes the core functions as per the CIPFA guidance and has been in existence since January 2009.

3.18.2 The Audit Committee provide independent assurance on the adequacy of the risk management, control and governance environment as well as scrutinising the Council's financial and non-financial performance. The Committee also oversees the financial reporting process and is responsible for reviewing and approving the Annual Report and Accounts.

3.18.3 During the 2012/13 financial year, following the changes to the Standards Regime, the Audit Committee have also been dealing with any items that would have previously been covered by the Standards Committee. However, Full Council voted in April 2013 to revert back to having a separate Standards Committee.

3.18.3 Members of the Audit Committee and their substitutes are provided with training as and when it is appropriate.

3.18.4 The Audit Committee are acting in accordance with the CIPFA guidance listed above as well as the guidance from the CIPFA Better Governance Forum March 2013 – *Audit Committee Update – helping audit committees to be effective*.

3.19 Ensuring compliance with relevant laws and regulations, internal policies and procedures, and that expenditure is lawful

3.19.1 The Council has a comprehensive set of financial and contract procedure rules which are contained within the Council's Constitution. These were reviewed, updated and approved in the 2012/13 financial year. This document sets out the overall framework that governs the management of the Council's finances.

3.19.2 The Council has a clearly defined Scheme of Delegation, which is also contained within the Constitution. This document is reviewed and updated, as and when required in light of any specific amendments that need to be made if the structure of the Council changes for any reason.

3.19.3 The internal audit process examines procedure notes and manuals held by service areas and highlights any areas where the notes/manuals are missing or are found to be inadequate. They also highlight any breaches against the Financial Regulations, Contract Procedure Rules and Constitution. Any areas in which improvement

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can be made are highlighted in the audit report along with recommendations for improvement.

3.19.4 Committee reports are considered for risks and financial and legal issues by Management Team prior to being distributed to Members.

3.19.5 Internal Audit examines the Council's policies and procedures in the course of its work and highlights any areas where these are not being adhered to. Any areas in which improvement can be made are highlighted in the audit report along with recommendations for improvement.

3.20 Whistle-blowing, and the process for receiving and investigating complaints from the public

3.20.1 The Council has a Whistle-blowing Policy which was last reviewed, updated and approved by the Audit Committee on 20th September 2011. This policy is subject to review every three years and is next due to be presented to the Audit Committee in September 2014.

3.20.2 The Scrutiny Committee reviewed the Whistle-blowing Policy in May 2012 and have agreed to have a report made to them on a six-monthly basis so that they can monitor the effectiveness of the Policy. The Head of Communities & Governance provided the Scrutiny Committee with updates on 15th October 2012 and 20th May 2013.

3.20.3 The Head of Communities & Governance attends the Corporate Induction sessions with new members of staff to inform them of the policies and they are accessible to all staff through the audit pages on the Intranet (Sharepoint).

3.20.4 The Council has a clearly defined complaints procedure, which lists the steps for making a complaint and how to make a formal complaint. The procedure also gives guidance on how to contact the Ombudsman if the member of the public wishes to take the matter further.

3.20.5 There is also information available on how to make a complaint about a Councillor. The matter would be referred to the Monitoring Officer and ultimately the matter would be referred to the Standards Committee if the complaint related to a breach of the Code of Conduct.

3.21 Identifying the development needs of members and senior officers in relation to their strategic roles, supported by appropriate training

3.21.1 Each member has an induction as well as training that is relevant to their particular role (i.e. dependent on which Committee they are

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serving on). Members that serve on the Policy Development Groups are given specific training on the topics that fall under their remit.

- 3.21.2 Members that serve on the regulatory committees such as Planning and Licensing are given specific training due to the specialist nature of these areas.
- 3.21.3 Each member has had a one to one with an officer from our Member Services team with the result being to draw up a personal development plan for the member, which includes training needs and also any areas of training that they request.
- 3.21.4 Briefing sessions for members are held on a regular basis which all members are invited to attend. Details of these sessions are publicised through the member's newsletter called the Weekly Information Sheet (WIS).
- 3.21.5 The Council has a Member Development Group and the Chairman of this group is the lead member for member development. The lead member provides updates to the Cabinet on the outputs from the work of this group and the Scrutiny Committee review feedback from training courses on a six monthly basis (following the demise of the Standards Committee from 1st July 2012).
- 3.21.6 The Council has successfully achieved, and been awarded with the Member Development Charter and is currently preparing for the next assessment under this charter.
- 3.21.7 All Senior Officers (Management Team) have job descriptions and an annual appraisal with the Chief Executive which identifies training needs. All Management Team members have regular one to ones with the Chief Executive where feedback is given. Each Head of Service is also responsible for keeping their knowledge up to date and booking to attend courses, seminars etc if needed.
- 3.22 Establishing clear channels of communication with all sections of the community and other stakeholders, ensuring accountability and encouraging open consultation**
- 3.22.1 The Council has a Community Engagement Strategy and accompanying action plan which was approved by the Community Well Being PDG in March 2013, which clearly outlines how the Council will consult with its citizens and also includes a timetable for consultations throughout the year.
- 3.22.2 The Council has a dedicated Consultation and Youth Involvement Officer who has worked with, and is continuing to work with, various

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stakeholder groups in the Mid Devon area on a number of consultations.

- 3.22.3 There is a 'have your say' section on the front of the Council's website for links to current consultations and for the results to be displayed here. The feedback in relation to consultation is published there and after every consultation the results are fed back to the groups taking part.
- 3.22.4 All data collected from surveys and consultation exercises form a report and a summary is sent to the participants or they are told where and when the results will be displayed (usually our website). Further work is being completed to ensure that the information is being fed back in a version which suits them and their needs .e.g. a learning disability group would want the results in a different format to a senior officer.
- 3.22.5 The Citizens' Panel receive a feedback note stating the findings for each questionnaire explaining how the Council has reacted to the findings i.e. if we made a change due to the findings or if not, why not.
- 3.22.6 The Consultation and Youth Involvement Officer has formed a group of Consultation Champions and created a number of methods for departments to use including street surveys and online surveys. The Citizens' Panel is reviewed on a regular basis to ensure that it is balanced in line with the profile of the Mid Devon community.
- 3.22.7 The Council has an approved Single Equalities Scheme following the changes to the Equalities Bill and the Public Sector Equality Duty which came into effect in April 2011.
- 3.22.8 The Council works with the Mid Devon Equalities Forum whose membership is stakeholders from groups who represent the various equality strands including age, disability and ethnic minority groups. As well as this group the Council runs Member & Community days where elected members visit groups and projects out in their communities.

3.23 Enhancing the accountability of service delivery and effectiveness of other public service providers

- 3.23.1 As listed in Article 6 of the Constitution the Council's Scrutiny Committee and Policy Development Groups (PDGs) are able to "review and scrutinise the performance of other public sector bodies in the area and invite local reports from them by requesting them to address Scrutiny and local people about their activities and performance".
- 3.23.2 Members of the Scrutiny Committee are on the Joint East and Mid Devon Crime and Disorder Scrutiny Panel which reviews what has been delivered by the Community Safety Partnership.

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- 3.23.3 During the 2012/13 financial year the Scrutiny Committee have had the Police and Local MP in to answer questions and have also had working groups looking at Ageing Well and Health and Wellbeing.
- 3.23.4 The Community Well Being PDG have reviewed the grants that the Council pay to outside organisations and have also called in organisations receiving grants to challenge them on benefits and costs.
- 3.23.5 During the 2012/13 financial year representatives from the Districts have been working with colleagues on the Public Health agenda.
- 3.23.6 In March 2013 the Council undertook a joint Peer Review with Devon County Council to examine the local economy and the growth agenda. Work is ongoing to deliver the recommendations that arose from the Peer Challenge working with Devon County Council and the Heart of the South West Local Enterprise Partnership.

3.24 Incorporating good governance arrangements in respect of partnerships and other group working as identified by the Audit Commission's report on the governance of partnerships, and reflecting these in the authority's overall governance arrangements.

- 3.24.1 The Council has very few strategic partnerships but these are assessed using the partnership toolkit and have been reviewed during the collation of the Annual Governance Statement. This includes information on the contribution the Council makes to the partnership, whether the partnership has formal terms of reference and how the Council benefits from continued involvement.

4.0 REVIEW OF EFFECTIVENESS

- 4.1 Mid Devon District Council has responsibility for conducting, at least annually, a review of the effectiveness of its governance framework including the system of internal control. The review of effectiveness is informed by the work of the executive managers within the authority who have responsibility for the development and maintenance of the governance environment, the Audit Team Leader's annual audit outturn report, and also by comments made by the external auditors and other review agencies and inspectorates.
- 4.2 The effectiveness of the governance framework has been evaluated through:
- The Head of Legal & Democratic Services (from 1st April 2012 to 12th December 2012) in his role as Monitoring Officer has a duty to monitor and review the operation of the Council's Constitution

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to ensure that its aims and principles are given full effect. The Council reviews the Constitution regularly to incorporate any necessary changes.

- The Head of Communities & Governance (from 13th December 2012 to current) in her role as Monitoring Officer has a duty to monitor and review the operation of the Council's Constitution to ensure that its aims and principles are given full effect. The Council reviews the Constitution regularly to incorporate any necessary changes.
- The Head of Finance in his role as the Chief Financial Officer and Section 151 Officer has a duty to lead and direct financial strategy and operations. This includes regular communication and provision of financial information to officers and Members
- The role of the Cabinet is to exercise all of the Council's functions which are not the responsibility of any other part of the Council. The Cabinet provides leadership to the overall activities of the Council.
- The Council has a Scrutiny Committee, which has the role of reviewing and scrutinising decisions made or actions taken in connection with the discharge of any of the Council's functions. They can look at particular decisions in depth, before making recommendations to the Cabinet as well as being able to 'call-in' a decision that has been made by the Cabinet but not yet implemented, to enable consideration as to whether the decision has been made in accordance with the proper process as laid out in Article 13 of the Constitution.
- The Council has an Audit Committee to provide effective leadership to the Council on audit and governance issues, and independently contributes to the overall process for ensuring that effective systems are maintained for internal control, risk management and corporate governance.
- The Council's Standards Committee (from 1st April 2012 to 30th June 2012) had the role of promoting and maintaining high standards of conduct by Councillors and co-opted members as well as reviewing and monitoring the Code of Conduct for members. The Code of Conduct includes specific reference to the Register of Members' Interests, procedures for declaring interests at Committee meetings and protocols for accepting gifts and hospitality and member/employee relations. The Standards Committee also advises and trains members of the Code of Conduct and deals with any alleged breaches to the

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Code. The Standards Committee also had an overview of complaints handling and Ombudsman investigations, as well as dealing with local investigations. From the 1st July 2012 to 31st March 2013 these areas came under the remit of the Audit Committee following the changes to the Standards Regime.

- The Council has an Internal Audit section, which is totally independent of any service area, with the Audit Team Leader reporting to the Head of Communities & Governance who reports directly to the Chief Executive. The Head of Communities & Governance and Audit Team Leader regularly report to the Audit Committee and present the following reports on an annual basis:
 - Four-year Strategic Audit Plan (March)
 - Annual Audit work plan (March)
 - Internal Audit Strategy (March)
 - Internal Audit Charter (March)
 - Regular reports outlining progress against the annual audit work plan
 - Outturn Internal Audit report (covering the whole financial year) (June)
 - Risk Management Strategy and Action Plan (March)
 - Code of Corporate Governance (March)
 - Annual Governance Statement plus progress reports
 - Performance and Risk Report
 - Whistle-blowing Policy (three yearly next due 2014)
 - Anti-fraud and Anti-Corruption Policy (three yearly next due 2014)
 - Anti-Money Laundering Policy (three yearly next due 2014)
 - Data Quality Strategy and Action Plan (three yearly next due 2014)
- Reviews of the Council's key (core) financial systems by Internal Audit against known evolving risks on an annual basis. Cyclical reviews by Internal Audit of internal controls in operation within each service area against known and evolving risks – e.g. changes to systems of staff
- The relevant Head of Service, Chief Executive and all five Members of the Audit Committee receive copies of Audit reports. Any issues arising from these reports are discussed at the Audit Committee.
- Annual Internal Audit outturn report, to the Audit Committee for 2012/13, highlights the work of Internal Audit including an

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opinion on the overall adequacy and effectiveness of the Council's internal control environment

- Annual reviews of the Council's financial accounts and records by the external auditor leading to their opinion as published in the Annual Audit and Inspection Letter and Governance Report
- Strategic risk review and evaluation of controls in place to manage risks together with the commencement of specific project risk assessment
- External Audit and Inspection also contributes to the review of effectiveness.

4.3 We have been advised on the implications of the result of the review of the effectiveness of the governance framework by the Audit Committee, and that the arrangements continue to be regarded as fit for purpose in accordance with the governance framework. The areas already addressed and those to be specifically addressed with new actions planned are outlined below.

5.0 SIGNIFICANT GOVERNANCE ISSUES

5.1 At the current time, there are no significant governance issues but a number of recommendations for improvement are set out in Appendix B. The action plan details the governance issues that have been identified, the proposed action, the responsible officer and the target date for completion.

5.2 The work of Internal Audit identified two systems that were classed as poorly controlled – Standby and Payroll.

5.3 The key issues highlighted in the Standby report were the lack of structure to the manning of the service and in the absence of agreed standards for performance the service and MDDC are laid open to potential censure and even litigation.

5.4 The key issues highlighted in the Payroll Report were with the system and cover for the Payroll Manager. There were also issues around some calculations being based on calendar days rather than working days and areas of policy that needed to be referred to the Pay and Grading Group. It was felt that the implementation of the new HR system in 2013 will go a long way to addressing these issues and the Payroll Manager now has a member of staff supporting him and providing cover.

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- 5.5 There have been significant improvements to both areas since the audits were carried out: For Payroll and HR generally the new system has been successfully installed and gone live after 2 months parallel running. This has resolved a significant proportion of weaknesses which were evident in the old system as the new system is fully integrated with HR records. For Standby the main weaknesses were also to do with HR matters such as job description and transparent recruitment procedures. These are also now largely resolved as the first vacancy was advertised and filled successfully in February. One important remaining recommendation is the risk assessments for this area in particular Lone Working for the Standby Operative role. Progress against this recommendation will be regularly reviewed.
- 5.6 The Audit Committee will continue to receive regular reports on the progress being made on implementing Internal Audit recommendations throughout the financial year.
- 5.7 We propose over the coming year to take steps to address the above matters to further enhance our governance arrangements. We are satisfied that these steps will address the need for improvements that were identified in our review of effectiveness and will monitor their implementation and operation as part of our next annual review.

Signed:

Name: Kevin Finan
Position: Chief Executive
Date: 24th September 2013

Peter Hare-Scott
Leader of the Council
24th September 2013

Part 1: Priority Actions (2013-2014)

Consultation		
<ul style="list-style-type: none"> Results from external consultation exercises are published on the “Get Involved” page of the website – there is no central location for internal consultation results 		
Agreed Approach	Responsible Officer	Target Date
1. Publish results from internal consultation exercises on SharePoint	Communications Manager	December 2013

General		
<ul style="list-style-type: none"> A number of officers within the authority carry out cross-council functions (such as First Aid, Fire Warden, Child Protection and Dignity at Work) – leave for these officers is authorised by service line managers and it was not possible to identify procedures that ensured there was adequate minimal cover at all times for these functions 		
Agreed Approach	Responsible Officer	Target Date
2. Make sure there is adequate holiday cover for first aiders, fire wardens, child protection officers and dignity at work advisors	Heads of HR and Development / Housing and Property Services	July 2013

Fraud and Corruption		
<ul style="list-style-type: none"> No annual report is produced on counter fraud and corruption activity 		
Agreed Approach	Responsible Officer	Target Date
3. Produce an annual report for the Audit Committee on Counter Fraud and Corruption activity and performance	Head of Communities and Governance	June 2014

Health and Safety		
<ul style="list-style-type: none"> Internal Audit identified a number of actions for improvement in their recent Health and Safety Audit, including the need to improve staff/Unison representation at the Health and Safety Committee and produce a Business Plan and Job Description for the Corporate Health and Safety Advisor 		

Agreed Approach	Responsible Officer	Target Date
4. Complete actions arising from the Health and Safety Audit	Head of Environmental Services	October 2013

Internal Controls		
<ul style="list-style-type: none"> The Social Media Policy was due for review May 2013 – it is currently worded directly at Officers rather than Officers and Members 		
Agreed Approach	Responsible Officer	Target Date
5. When updating the Social Media Policy, include a section directed at Members	Head of ICT	September 2013

Performance Management		
<ul style="list-style-type: none"> Performance reports are not published in one place on the Council’s website Performance and Risk reports did not go quarterly to Members as stated in the Risk Management Strategy The Schedule of committee meetings does not dovetail well with quarterly reporting of performance and risk It would be useful for Members to see details of savings made through smarter procurement 		
Agreed Approach	Responsible Officer	Target Date
6. Develop the Performance page of the Council’s website to include all performance reports	Head of Communities and Governance	August 2013
7. Liaise with Member Services on their annual review of the schedule of meetings to accommodate timely reporting of performance and risk	Head of Communities and Governance	September 2013
8. Present report to Cabinet and Policy Development Groups detailing the savings made through smarter procurement	Head of Finance	December 2013

Risk Management	
<ul style="list-style-type: none"> “Opportunities” (risks with a positive impact) and “Issues” (risks that have already occurred / occurring or the likelihood is “definite”) are hidden within the Council’s Risk Register Project risk assessments are being scored against a 4x4 risk matrix rather than the 5x5 risk matrix as per the Council’s Risk Management Strategy 	

- Job Descriptions do not reflect the responsibility of Service Managers towards Risk Management within their services
- The Emergency Plan needs updating

Agreed Approach	Responsible Officer	Target Date
9. Develop and implement an "Opportunity Management Strategy" to complement our "Risk Management Strategy"	Head of Communities and Governance	With next review of Risk Management Strategy: March 2014
10. Amend Project Risk Assessment template to conform to the 5x5 risk scoring matrix	Head of ICT	July 2013
11. Amend Job Description template to include a general section regarding responsibility toward Risk Management (as with Health and Safety and Equality and Diversity)	Head of HR and Development	Revised template by July 2013 (to be used for all new and revised job descriptions thereon in)
12. Update the Emergency Plan	Head of Environmental Services	December 2013

Training and Information for New Starters

- The induction programme currently does not cover:
 - a) Finance Regulations
 - b) Procurement Policy
 - c) Scheme of delegation
- There is not an up-to-date policy regarding volunteers

Agreed Approach	Responsible Officer	Target Date
13. Amend Induction Programme	Head of HR and Development	December 2013
14. Review and update policy for volunteers (including induction)	Head of HR and Development	March 2014

Actions carried forward from 2011-12 Action Plan

Agreed Approach	Responsible Officer	Revised Target Date
15. Put together a formal communication strategy incorporating internal & external communications – suggest this follows a review of internal and external communications	Head of Customer Services	November 2013

<p>16. Carry out refresher training on the CRM system for handling of complaints, to include:</p> <ul style="list-style-type: none"> – Complaint status: upheld, not upheld or comment noted – Completing the field to say lessons learnt and what has changed as a result – To attach any relevant documents to the CRM system 	<p>Head of Customer Services</p>	<p>September 2013</p>
<p>17. Complete update of the Business Continuity Plan, to include a quick summary guide for all employees</p>	<p>Head of ICT</p>	<p>September 2013</p>
<p>18. Complete review of SharePoint and develop an action plan to include all key strategic documents in one easily accessible place</p>	<p>Head of ICT</p>	<p>March 2014</p>
<p>19. Finalise and update the internal audit customer survey</p>	<p>Internal Audit Team Leader</p>	<p>First feedback report to September 2013 Audit Committee meeting</p>
<p>20. Publish the Events Safety Guide on the Council's website</p>	<p>Head of Communities and Governance</p>	<p>September 2013</p>
<p>21. Send updated Performance Policy to Management Team for approval (including updates regarding Business Plan monitoring) and distribute summary guide for Members</p>	<p>Head of Communities and Governance</p>	<p>October 2013</p>

Part 2: Long Term Actions (2014-2015)

Corporate and Business Planning		
Agreed Approach	Responsible Officer	Target Date
<ul style="list-style-type: none"> There is a need to review and improve the Corporate and Business Planning process to ensure that there is a golden thread so that all service areas can see how they link into the overall objectives of the Council. Likewise, the Corporate Plan should reflect the Council's values. Aspirational direction for the Council should be reflected in the revised Corporate Plan as "Member Pledges" rather than specific targets In order to agree which actions would best achieve strategic aims and objectives, the Executive Management Team should risk assess options, based on risk/benefit profiles (including time and cost) 		
22. Review the Corporate Plan to achieve the "Golden Thread" by building in strategic objectives that reflect our statutory duties as well as social duties and aspirations	Head of Communities and Governance	June 2015
23. Include organisational "values", Cabinet Member "pledges" and a Council Mission Statement in the next update of the Corporate Plan	Head of Communities and Governance	June 2015 (following District election)
24. Include a communication strategy (internal and external) of the Corporate Plan in its next revision including a diagram depicting the reporting structure against the Corporate objectives	Head of Communities and Governance	June 2015
25. Embed Risk Management into the strategic planning process when agreeing on approaches to meet aims	Head of Communities and Governance	March 2015
26. Amend Risk and Performance Reports following review of Corporate Plan so that it is divided into objectives	Head of Communities and Governance	July 2015
27. Agree balance of budgets vs performance alongside corporate priorities	Head of Finance	December 2015 (for 2015/16)

General		
Agreed Approach	Responsible Officer	Target Date
<ul style="list-style-type: none"> Need to agree the hierarchy of debt payments Also, with the focus on "openness and transparency" other authorities have been recommended as examples of good practice for having easy-to-follow sections of their website dedicated to FOI data (including a frequently asked for tab) 		

28. Review and update a Corporate Debt Policy	Head of Finance	31/03/2015
29. Research Redbridge Council's " Datashare " site and Winchester City Council's " Open Data Portal " and report to Management Team on potential to run similar on our website	Head of ICT	April 2014

Performance Management

- There is a need to improve record keeping of performance management of key partners
- Corporate Health indicators to be reported on (monitoring number of cases for: sickness absence, accidents and incidents, use of counselling services, referrals to occupational health, bullying and harassment, number of capability cases, number of grievance cases, number of legal challenges, judicial review requests) plus (financial spend, fraud and corruption, complaints, consultations)

Agreed Approach

	Responsible Officer	Target Date
30. Develop a performance report to Committee against the organisational "values"	Head of HR and Development	April 2014
31. Develop KPIs for the Council's key partnerships and incorporate them into the quarterly monitoring report	Head of Finance	For reporting from April 2014 onwards

Risk Management

- Risks in Committee Reports to Members are not linked always to the Risk Register and there is a tendency to report on risk of failure to deliver desired change or approach against strategic objective, rather than the risks/benefits offered by choosing the desired option
- Outcomes of insurance claims are not being reported to Members

Agreed Approach

	Responsible Officer	Target Date
32. Amend risk section of Committee Report template to include "risk/benefit profiles" and run training session at Senior Officers Forum	Head of Communities and Governance	Following review of Risk Management Strategy in March 2014
33. Amend quarterly Risk Report to include Risk Register, Incidents and Issues Log (including outcomes), Opportunities Register	Head of Communities and Governance	Following review of Risk Management Strategy in March 2014
34. Arrange Senior Officers Forum briefing and item in The Link to remind staff to report "near misses" as well as actual incidents	Head of Environmental Services	April 2014

Part 3: Suggestions for Improvement

Annual Governance Statement	
<ul style="list-style-type: none"> There are some staff (at all levels) that are uncertain about the purpose of an “Annual Governance Statement” The Annual Governance Statement evidence schedule does not include in-year evidence gathering 	Responsible Officer
35. Arrange 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	Head of Communities and Governance
36. Review preparation timetable allowing for in-year evidence gathering	Head of Communities and Governance

Assurance	
<ul style="list-style-type: none"> There is no central collation for staff to be able to access external assurance reports other than their being reported to Management Team and Cabinet (as appropriate). 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. 	Responsible Officer
37. Until SharePoint has been revised ensure that Assurance reports are put on the Audit Pages of SharePoint	Head of Communities and Governance
38. Set up a folder on the new SharePoint for external assurance reports (performance and audit information page)	Head of ICT
39. Make sure Member Job Descriptions include role regarding assurance	Head of Communities and Governance
40. Ensure that the recommendations arising from the Peer Challenge report are reviewed by the Cabinet on a quarterly basis	Head of Communities and Governance

Complaints	
<ul style="list-style-type: none"> Housing Services is one of few services that use a “lessons learnt” form detailing complaints, background information, decision and any resulting changes The Local Government Ombudsman has changed the complaints report process and no longer produces draft reports in April each year 	Responsible Officer
41. Roll out lessons learnt form (used by Housing) to service areas to complete following a complaint	Housing Services Manager

42. Legal to keep an internal record of the number of complaints to the Ombudsman and outcomes	Legal Services Manager
Consultation	
<ul style="list-style-type: none"> Local business networks could be more involved in consultation with the Council 	
Agreed Approach	
43. Consult with Business Forum on budget setting	Responsible Officer Head of Finance
Fraud and Corruption	
<ul style="list-style-type: none"> The Fraud and Corruption Plan does not get approved by Members The policies for fraud and corruption and whistle-blowing are next due for review in 2014 	
Agreed Approach	
44. Ensure that the Counter Fraud and Corruption Plan is taken to Audit Committee for approval when next updated	Responsible Officer Head of Communities and Governance
45. Review the Council's Whistle-blowing arrangements against the British Standard PAS 1998:2008 Whistle-blowing arrangements code of practice before the policy next goes back to the Audit Committee in September 2014 for approval	Head of Communities and Governance
General	
<ul style="list-style-type: none"> There are gaps in the FOI Publication Scheme Catalogue. There is a lack of documentation evidencing key governance issues have been discussed at meetings (at all levels) Data regarding Freedom of Information requests handled and dealt with by service areas direct is not always reported to the Freedom of Information Officer 	
Agreed Approach	
46. Update FOI Publication Scheme Catalogue	Responsible Officer Head of ICT
47. Arrange Senior Officers Briefing to reinforce need for minutes or action points from meetings (at all levels) to record discussion of governance (eg risk management, external assurance reports) and agreed outcomes	Head of Communities and Governance
48. Arrange briefing at Senior Officers Forum and item in The Link to remind staff to forward all Freedom of Information requests to the Freedom of Information Officer	Head of ICT

Internal Controls	
<ul style="list-style-type: none"> • Most services use a variation of a “conflict of interest / disclosure” form, however there are some services that have yet to put this into use • The Dignity at Work Policy is due for review • The Health and Safety policies have their review dates listed on their front sheets, however, a single reference sheet with review dates for all the Health and Safety policies was not located • There was limited evidence for awareness training following changes to the Code of Corporate Governance 	Responsible Officer
Agreed Approach	
49. Put together review schedule for Health and Safety policies and upload to SharePoint	Head of Environmental Services
50. Ensure all services use a “conflict of interest / disclosure” form	Head of Communities and Governance
51. Review Dignity at Work Policy and arrange refresher training for Advisors	Head of HR and Development
52. Ensure awareness training is provided for key staff and all Members to make known any changes in the Code of Corporate Governance	Head of Communities and Governance

Organisational Objectives	
<ul style="list-style-type: none"> • The Constitution is currently being reviewed by the Constitution Working Group with several changes to layout and content proposed • Some services have not completed a Business Plan for 2013/14 	
Agreed Approach	Responsible Officer
53. Establish a communication plan to communicate key changes in Constitution to Officers and Members	Head of Communities and Governance
54. All Service Business Plans to be presented to Executive Management Team	Chief Executive

Performance Management	
<ul style="list-style-type: none"> • There is a lack of evidence to suggest that targets are reviewed where apparent poor performance is a reflection of impacting factors beyond officer control • Produce an annual performance report on how we have performed against the Corporate Plan 	
Agreed Approach	Responsible Officer
55. Arrange Member briefing session to encourage Committees to set or approve SMART targets to improve below target performance and/or revise target where necessary	Head of Communities and Governance

56. Arrange a briefing at Senior Officers Forum to remind SPAR Managers to suggest SMART Targets in their Management Comments as required	Head of Communities and Governance
57. Produce a performance report and publish it on the website	Head of Communities and Governance

Risk Management	
<ul style="list-style-type: none"> Project risk assessments on SharePoint are not accessible to the Council's Risk Management Officer There is some uncertainty from Service Managers regarding their authority with risks/opportunities and risk tolerance The Corporate Risk Register has been reviewed with Heads of Service – there is now a need to reinforce this by recording strategic risks at service level and encouraging services to treat the risk register as a “live” data source through SPAR 	
Agreed Approach	Responsible Officer
58. Make project risk assessments accessible to Risk Management Officer by: <ul style="list-style-type: none"> d) Amending settings on SharePoint e) Adding project risks to SPAR 	Head of ICT
59. Arrange briefing at Senior Officers Forum to reinforce empowerment of Service Managers regarding risk tolerance	Head of Communities and Governance
60. Review the risk register further by adding Service Business Plan risks to SPAR	Head of Communities and Governance

Section 151 Officer	
<ul style="list-style-type: none"> The Financial Regulations have been updated Members need to be kept informed about performance regarding the HRA Borrowing 	
Agreed Approach	Responsible Officer
61. Roll out training / workshops for Officers and Members following update to Financial Regulations	Head of Finance
62. Ensure performance reports regarding the HRA Borrowing are presented to the appropriate committee at regular intervals	Head of Finance
63. Ensure the Financial Regulations are included in the Policy Review Programme	Head of Finance

Training and Information for New Starters

<ul style="list-style-type: none"> • New Starters are not informed of Corporate Objectives until their Corporate Induction • There is some confusion over two electronic learning systems used: e-learning is used by Learning and Development and CALMs is used by ICT to roll out ICT policy updates and corporate health and safety induction training – it would be good to have one system used for all policy updates across the Council • Manual workers (except those in Grounds Maintenance) do not receive a copy of the Learning and Development Newsletter 	<p>Responsible Officer</p> <p>Head of HR and Development</p> <p>Head of HR and Development and Head of ICT</p> <p>Head of HR and Development</p>
<p>Agreed Approach</p>	
<p>64. Add Corporate Plan Summary Leaflet and Code of Corporate Governance to information sent to New Starters</p>	
<p>65. Review need and effectiveness of e-Learning system and CALMs system and utilise for all Council policy updates</p>	
<p>66. Make sure all manual workers receive the Learning and Development Newsletter</p>	