



**Borough of Tamworth**

Marmion House,  
Lichfield Street, Tamworth,  
Staffordshire B79 7BZ.

Enquiries: 01827 709 709  
Facsimile: 01827 709 271

## **AUDIT AND GOVERNANCE COMMITTEE**

30 May 2018

Dear Councillor

A meeting of the Audit and Governance Committee will be held in **Committee Room 1, Marmion House, Lichfield Street, Tamworth, B79 7BZ on Thursday, 7th June, 2018 at 6.00 pm.** Members of the Committee are requested to attend.

Yours faithfully

A handwritten signature in black ink, consisting of a stylized 'A' and 'S' followed by a long horizontal line.

### **A G E N D A**

#### **NON CONFIDENTIAL**

- 1 Appointment of Vice Chair**
- 2 Apologies for Absence**
- 3 Minutes of the Previous Meeting (Pages 5 - 8)**
- 4 Declarations of Interest**

*To receive any declarations of Members' interests (pecuniary and non-pecuniary) in any matters which are to be considered at this meeting.*

*When Members are declaring a pecuniary or non-pecuniary interest in respect of which they have dispensation, they should specify the nature of such interest. Members should leave the room if they have a pecuniary or non-pecuniary interest in respect of which they do not have a dispensation.*

**5 Update from External Auditors**

(To receive any updates from the external auditors)

**6 Regulation of Investigatory Powers Act 2000 (Pages 9 - 12)**

(Report of the Solicitor to the Council and Monitoring Officer)

**7 Constitution & Scheme of Delegation (To Follow)**

(Report of the Solicitor to the Council & Monitoring Officer)

**8 Annual Governance Statement & Code of Corporate Governance (Pages 13 - 100)**

(Report of The Head of Internal Audit)

**9 Audit & Governance Committee Self-Assessment 2017/18 (Pages 101 - 104)**

(Report of the Head of Internal Audit)

**10 Internal Audit Annual Report and Quarter 4 Performance Report (Pages 105 - 138)**

(Report of the Head of Internal Audit)

**11 Internal Audit Customer Satisfaction Survey 2017/18 (Pages 139 - 140)**

(Report of the Head of Internal Audit)

**12 Public Sector Internal Audit Standards & Quality Assurance and Improvement Programme (Pages 141 - 154)**

(Report of the Head of Internal Audit)

**13 Audit and Governance Committee Timetable (Pages 155 - 158)**

(Discussion Item)

*People who have a disability and who would like to attend the meeting should contact Democratic Services on 01827 709264 or e-mail committees@tamworth.gov.uk preferably 24 hours prior to the meeting. We can then endeavour to ensure that any particular requirements you may have are catered for.*

To Councillors: M Summers, R Claymore, C Cooke, J Faulkner, M Gant, M Greatorex  
and R Kingstone

This page is intentionally left blank



## MINUTES OF A MEETING OF THE AUDIT AND GOVERNANCE COMMITTEE HELD ON 28th MARCH 2018

**PRESENT:** Councillor M Summers (Chair), Councillors R Ford (Vice-Chair), C Cooke, J Faulkner and M Gant

**Officers:** Stefan Garner (Director of Finance), Angela Struthers (Head of Internal Audit Services) and Lynne Pugh (Chief Accountant)

**Visitors:** J Gregory and L Griffiths from Grant Thornton

### **54 APOLOGIES FOR ABSENCE**

Apologies for absence were received from Councillors M Greatorex and R Kingstone.

### **55 MINUTES OF THE PREVIOUS MEETING**

The minutes of the meeting held on 8<sup>th</sup> February 2018 were approved and signed as a correct record.

*(Moved by Councillor R Ford and seconded by Councillor M Gant)*

### **56 DECLARATIONS OF INTEREST**

There were no declarations of Interest.

### **57 THE AUDIT PLAN FOR TAMWORTH BOROUGH COUNCIL**

**RESOLVED:** The Committee endorsed the report.

*(Moved by Councillor M Summers and seconded by Councillor C Cooke)*

### **58 INFORMING THE AUDIT RISK ASSESSMENT FOR TAMWORTH BOROUGH COUNCIL**

**RESOLVED:** The Committee endorsed the report.

*(Moved by Councillor J Faulkner and seconded by Councillor M Gant)*

**59 REVIEW OF THE TREASURY MANAGEMENT STRATEGY STATEMENT, MINIMUM REVENUE PROVISION POLICY STATEMENT AND ANNUAL INVESTMENT STATEMENT 2018/19 AND THE TREASURY MANAGEMENT STRATEGY STATEMENT AND ANNUAL INVESTMENT STRATEGY MID-YEAR REVIEW REPORT 2017/18**

**RESOLVED:** The Committee considered the Treasury Management Reports, as detailed within the reports attached at Annex 1 and Annex 2 and highlighted no changes for recommendation to Cabinet.

*(Moved by Councillor R Ford and seconded by Councillor C Cooke)*

**60 FINAL ACCOUNTS 2017/18 ACTION PLAN**

**RESOLVED:** The Committee agreed:

1. The target of 25<sup>th</sup> May 2018 for closure of the final accounts and production of the statement for 2017/18 be approved;
2. staffing resources be committed to the provision of appropriate information and support in order to meet the published timescales and the Committee receive progress updates (if required);
3. CMT receive a fortnightly update until completion of the audit; and
4. the Statement be presented to the Audit & Governance Committee on 26<sup>th</sup> July 2018.

*(Moved by Councillor J Faulkner and seconded by Councillor M Gant)*

**61 FINANCIAL GUIDANCE**

**RESOLVED:** Members endorsed the changes to Financial Guidance.

*(Moved by Councillor M Summers and seconded by Councillor C Cooke)*

**62 INTERNAL AUDIT PLAN & CHARTER**

**RESOLVED:** The Committee endorsed the attached Internal Audit Charter and Plan 2018-2019.

*(Moved by Councillor R Ford and seconded by Councillor C Cooke)*

**63 RISK MANAGEMENT UPDATE**

**RESOLVED:** The Committee endorsed the report.

*(Moved by Councillor M Gant and seconded by Councillor R Ford)*

**64 AUDIT & GOVERNANCE COMMITTEE SELF-ASSESSMENT**

**RESOLVED:** Members of the Committee completed the self-assessment checklist at Appendix A in order to formulate the improvement plan.

*(Moved by Councillor M Summers and seconded by Councillor M Gant)*

**65 AUDIT AND GOVERNANCE COMMITTEE TIMETABLE**

The Committee reviewed the timetable.

---

Chair

This page is intentionally left blank



## AUDIT & GOVERNANCE COMMITTEE

07 JUNE 2018

### REPORT OF THE SOLICITOR TO THE COUNCIL AND MONITORING OFFICER

#### REGULATION OF INVESTIGATORY POWERS ACT 2000

##### **Purpose**

The Council's Code of Practice for carrying out surveillance under the Regulation of Investigatory Powers Act 2000 (RIPA) specifies that quarterly reports will be taken to Audit & Governance Committee to demonstrate to elected members that the Council is complying with its own Code of Practice when using RIPA.

##### **Recommendation**

**That Audit and Governance Committee endorse the RIPA monitoring report for the quarter to 31 March 2018.**

##### **Executive Summary**

The Council has a number of statutory functions that involve officers investigating the conduct of others with a view to bringing legal action against them. The Council has also been given powers under the Regulation of Investigatory Powers Act 2000 (RIPA) which enable it to carry out Directed Surveillance in certain strict circumstances. RIPA provides a legal framework for the control and regulation of surveillance and information gathering techniques which public bodies such as Tamworth Borough Council have to comply with. These powers have been amended and changed in accordance with various pieces of legislation. The last change resulted in a revised RIPA Policy being approved by the Council on 12 December 2017.

The Protection of Freedoms Act 2012 now requires that local authority authorisations under RIPA for Directed Surveillance or CHIS can only become effective on the granting of an order approving the authorisation by a Justice of the Peace. Further a local authority can now only have an authorisation under RIPA for the use of Directed Surveillance where the local authority is investigating criminal offences which attract a maximum custodial sentence of six months or more or criminal offences relating to the underage sale of alcohol or tobacco under the Licensing Act 2003 or the Children and Families Act 2014.

No Directed Surveillance has been carried out by the Council since 2011 and it is not envisaged that there will be any appreciable change in the foreseeable future. By adhering to Policy the Council ensure that the acquisition and

disclosure of data is lawful, necessary and proportionate so that the Council will not be held to be in breach of Article 8 (the right to respect for private family life, home and correspondence ) of the European Convention on Human Rights.

In July 2017 the Office of the Surveillance Commissioner (OSC) conducted an inspection into the RIPA policy, procedures, documentation and training utilised at the Council. Arising from the inspection it has been recommended that guidance regarding use of internet and SNS for research of persons and how this might meet the requirement as directed surveillance or CHIS should be drawn up, inserted into our policy and procedures and actively disseminated to staff.

Training took place in October 2017 for officers who previously had no RIPA training and for members with refresher training being delivered for those officers previously trained. Further training will be arranged through Netconsent. The feedback from the training has been positive and going forward training for RIPA has been added to the Corporate Training Programme.

The practice that quarterly reports on the use of RIPA powers be submitted to Audit & Governance Committee will continue.

### **Options Considered**

Obligations arising under RIPA for the authority are statutory therefore there the only option is compliance.

### **Resource Implications**

Support for the RIPA obligations and functions are met from existing budget and existing staff resources.

### **Legal/Statutory and Risk Implications**

The recording of applications, authorisations, renewals and cancellations of investigations using covert surveillance techniques or involving the acquisition of communications data is covered by the Regulation of Investigatory Powers Act 2000.

The Regulation of Investigatory Powers Act was introduced to regulate existing surveillance and investigation in order to meet the requirements of Article 8 of the Human Rights Act. Article 8 states: Everyone has the right to respect for his private and family life, his home and his correspondence, There shall be no interference by a public authority with the exercise of this right except such as in accordance with the law and is necessary in a democratic society in the interests of national security, public safety or the economic well-being of the

Country, for the prevention of disorder or crime, for the protection of health or morals, or for the protection of the rights and freedoms of others.

RIPA investigations can only be authorised by a local authority where it is investigating criminal offences which (1) attract a maximum custodial sentence of six months or more or (2) relate to the sale of alcohol or tobacco products to children.

There are no risk management or Health and Safety implications.

**Sustainability Implications**The legislation requires the Authority to record and monitor all RIPA applications, keep the records up to date and report quarterly to a relevant Committee.

### **Background Information**

The RIPA Code of Practice produced by the Home Office in April 2010 and updated in January 2016 introduced the requirement to produce quarterly reports to elected members to demonstrate that the Council is using its RIPA powers appropriately and complying with its own Code of Practice when carrying out covert surveillance. This requirement relates to the use of directed surveillance and covert human intelligence sources (CHIS).

The table below shows the Council's use of directed surveillance in the current financial year to provide an indication of the level of use of covert surveillance at the Council. There have been no applications under RIPA in the period from 1 January 2018 to 31 March 2018.

The table outlines the number of times RIPA has been used for directed surveillance, the month of use, the service authorising the surveillance and a general description of the reasons for the surveillance. Where and investigation is ongoing at the end of a quarterly period it will not be reported until the authorisation has been cancelled. At the end of the current quarterly period there were no outstanding authorisations.

There have been no authorisations for the use of CHIS.

#### **Financial year 2017/18**

<b>Month</b>	<b>Service</b>	<b>Reason</b>
--------------	----------------	---------------

No applications

#### **Background papers**

None

*"If Members would like further information or clarification prior to the meeting please contact Jane M Hackett Solicitor to the Council and Monitoring Officer on Ext.258"*

This page is intentionally left blank

## AUDIT & GOVERNANCE COMMITTEE

7th JUNE 2018

### REPORT OF THE HEAD OF INTERNAL AUDIT SERVICES

#### ANNUAL GOVERNANCE STATEMENT & CODE OF CORPORATE GOVERNANCE

##### EXEMPT INFORMATION

None

##### PURPOSE

To inform Members of the Committee of the process followed in producing an Annual Governance Statement and revised Code of Corporate Governance in accordance with statutory requirements, and to approve the proposed draft Annual Governance Statement and Code of Corporate Governance.

##### RECOMMENDATIONS

**That the proposed**

- a) Annual Governance Statement be agreed by the Committee as appropriate for presentation to the External Auditor and for inclusion in the Annual Statement of Accounts; and**
- b) Code of Corporate Governance be agreed.**

##### EXECUTIVE SUMMARY

Regulation 6(1)(a) of the Accounts and Audit Regulations 2015 requires the Authority to conduct, at least once in a year, a review of the effectiveness of its system of internal control and include a statement reporting on the review with any published Statement of Accounts. This statement on the review of the effectiveness of its system of internal control is the Annual Governance Statement.

The preparation and publication of an Annual Governance Statement in accordance with “Delivering Good Governance in Local Government: Framework (2016)(CIPFA/SOLACE)” – and fulfils the statutory requirement. The Account & Audit Regulations 2015 stipulate that the Annual Governance Statement must be “prepared in accordance with proper practices in relation to the accounts”.

The Framework defines the principles that should underpin the governance of each local government organisation. It provides a structure to help individual authorities with their approach to governance. Authorities should test their governance structures and partnerships against the principles contained in the Framework by:

- Reviewing existing governance arrangements
- Developing and maintaining an up-to-date local code of governance, including arrangements for ensuring ongoing effectiveness
- Reporting publicly on compliance with their own code on an annual basis and on how they have monitored the effectiveness of their governance arrangements in the year and on planned changes.

The term “local code” essentially refers to the governance structure in place as there is an expectation that a formally set out local structure should exist, although in practice it may consist of a number of local codes or documents.

To achieve good governance, each authority should be able to demonstrate that its governance structures comply with the core and sub-principles contained in the Framework. Each authority should therefore develop and maintain a local code of governance/governance arrangements reflecting the principles set out in the Framework.

Authorities are required to prepare an annual governance statement in order to report publicly on the extent to which they comply with their own code of governance, which in turn, is consistent with the good governance principles in the Framework.

The key elements of the structures and process that comprise the Authority’s governance arrangements do not need to be described in detail on the Annual Governance Statement if they are already easily accessible through the Code of Corporate Governance.

The Accounts and Audit Regulations 2015 require that the Statement should be approved by a Committee of the Council – the Audit and Governance Committee is charged with this function.

The proposed Annual Governance Statement 2017/18 arising from these processes is attached as **Appendix 1** for Members’ consideration. It should be noted that the Annual Governance Statement only includes significant governance issues.

To achieve good governance, the Authority should be able to demonstrate that it is complying with the core and supporting principles contained in the Framework and should therefore develop and maintain a local Code of Corporate Governance appropriate to its circumstances and comprising the requirements for best practice as set out in the Framework. As such the Code of Corporate Governance 2018/19 has been reviewed and is attached as **Appendix 2**. The Code indicates what is expected as per the Framework (what assurance do we want) and what we have in place (what assurance do

we get) to ensure that the principles of good governance are met. The review has identified minor areas for improvement which had already been recognised by the Authority and action plans to address these are already in place. **Appendix 3** provides a summary of these areas. The Authority can demonstrate that it complies with the core and supporting principles and complies with best practice.

#### **RESOURCE IMPLICATIONS**

None

#### **LEGAL/RISK IMPLICATIONS**

Failure to produce an Annual Governance Statement would result in non-compliance with the Accounts and Audit Regulations 2015. There is a risk that failures in Governance would not be identified.

#### **SUSTAINABILITY IMPLICATIONS**

None

#### **BACKGROUND INFORMATION**

None

#### **REPORT AUTHOR**

Angela Struthers, Head of Internal Audit Services

#### **LIST OF BACKGROUND PAPERS**

Managers Assurance Statements

#### **APPENDICES**

**Appendix 1 Annual Governance Statement 2017/18**

**Appendix 2 Code of Corporate Governance 2018/19**

**Appendix 3 Action Plan Arising From The 2017/18 Assurance Process**

This page is intentionally left blank



## Annual Governance Statement 2017/18

### What is Governance?

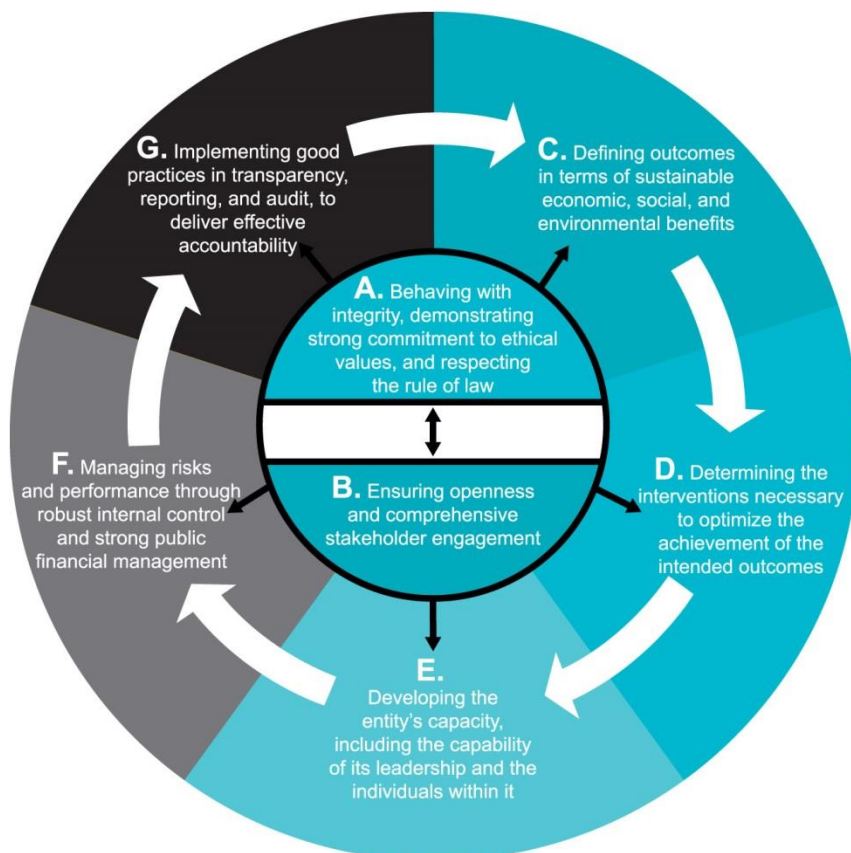
*Governance comprises the arrangements put in place to ensure that the intended outcomes for stakeholders are defined and achieved.*

*To deliver good governance in the Authority, both governing bodies (Members) and individuals working for the Authority must try to achieve the Authority's objectives whilst acting in the public interest at all times.*

*Acting in the public interest implies primary consideration of the benefits for society, which should result in positive outcomes for service users and other stakeholders.*

### The Core Principles of Good Governance

The diagram below, taken from the International Framework: Good Governance in the Public Sector (CIPFA/IFAC. 2014) (the "International Framework"), illustrates the various principles of good governance in the public sector and how they relate to each other.



## Responsibility

The Authority is responsible for ensuring that its business is completed in line with the law and statutory legislation, and that public money is spent wisely and properly accounted for. We will ensure that we continually improve the way we provide our services whilst taking into account value for money.

We will ensure that we put in place proper arrangements to ensure our risks are managed, and that controls and the governance process are in place.

We have approved and adopted a Code of Corporate Governance which is consistent with principles of the CIPFA/SOLACE Framework *Delivering Good Governance in Local Government*. The Code demonstrates the supporting principles which underpin the core principles and identifies the assurance as outlined in the Framework. It also demonstrates what level of assurance we get and thus, identifies any areas for improvement. This forms the assurance framework for good governance and demonstrates that we know our governance arrangements are working. Links to all supporting evidence identified in the assurance framework are contained within the Code of Corporate Governance and are not repeated in this statement. The Code of Corporate Governance document is available on the Council's website.

## Our Outcomes

Our desired outcomes for 2017-20 are detailed in the **Corporate Plan**. The Corporate Plan details our Vision and sets out our Thematic Priorities.

Our Vision is:

“One Tamworth, Perfectly Placed – Open for business since the 7<sup>th</sup> century AD”

Our thematic priorities are:

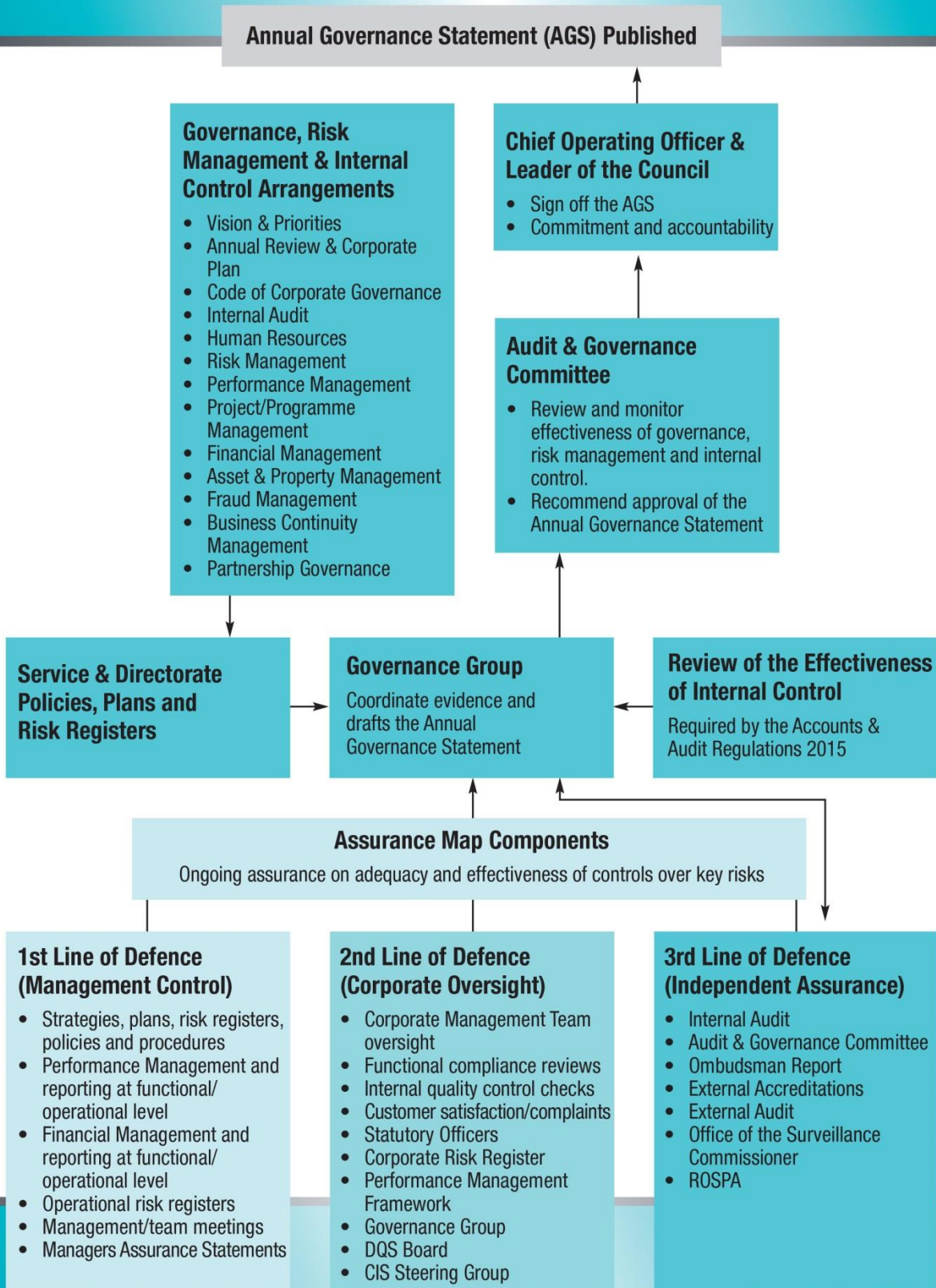
Living a Quality Life in Tamworth  
Growing Stronger Together in Tamworth  
Delivering Quality Services in Tamworth.

Under each thematic priority, we detail our ambitions and how we are going to realise these. All outcomes we aim to achieve, along with changes we want to see and supporting information are detailed in the Corporate Plan.

For each activity or process we complete, we ensure that the appropriate governance arrangements are in place.

# The Assurance Framework

The diagram below shows how the Assurance Framework is made up



## **What have we done to monitor and evaluate the effectiveness of our governance arrangements during 2017/18 .**

The Authority has the responsibility for conducting, at least annually, a review of the effectiveness of its governance framework including the system of internal control.

The review of the effectiveness of the system of internal control is informed by:

- The work of Internal Audit which is detailed in the Head of Internal Audit Services Annual Report;
- Responsibility of Corporate Management Team for the development and maintenance of the internal control environment; and
- Reports received from our External Auditors and any other review agencies or inspectorates.

During 2017/18, the following actions have contributed to the evaluation of the effectiveness of the governance arrangements;

- The Governance Group has reviewed and updated against the Code of Corporate Governance in line with the principles of the CIPFA/SOLACE Framework *Delivering Good Governance in Local Government*;
- Both the CIPFA Statement on the Role of the Chief Finance Officer and the CIPFA Statement on the Role of the Head of Internal Audit were reviewed and updated. Both officers comply with expected roles;
- The Head of Internal Audit Services reports to the Audit & Governance Committee on a quarterly basis and provides an opinion on the overall effectiveness of the system of internal control based upon the work completed. The statement for the 2017/18 financial year is as follows:

“I am satisfied that sufficient internal audit work has been undertaken to allow us to draw a reasonable conclusion as to the adequacy and effectiveness of the organisation’s risk management, control and governance processes. Overall in my opinion, based upon the reviews performed during the year, the Authority has:

- adequate and effective risk management arrangements;
  - adequate and effective governance; and
  - has adequate and effective control processes.
- From the 1<sup>st</sup> April 2013, Internal Audit is required to comply with the Public Sector Internal Audit Standards. As part of this requirement, Internal Audit are required to complete an annual self-assessment against the Standards and produce a Quality Assurance & Improvement Programme(QAIP) which identifies areas for improvement both to ensure compliance with the Standards and other quality areas. The self-assessment against the standards and the QAIP are reported to the Audit & Governance Committee;

- Our External Auditors report to each Audit & Governance Committee. In their Annual Audit Letter, they gave an unqualified opinion on the Statement of Accounts, an unqualified conclusion in respect of the Authority securing economy, efficiency and effectiveness, and an unqualified opinion on the production of the Whole of Government Accounts;
- The Ombudsman report on the enquiries and complaints they received in 2016/17 was reported to the Audit & Governance Committee in October 2017;
- Managers Assurance Statements have been completed by Directors and Heads of Service and have not identified any significant control issues;
- The Corporate Risk Register is owned and reviewed on a quarterly basis by the Corporate Management Team and reported in the Quarterly Healthcheck to Cabinet and also reported in the risk management update to the Audit & Governance Committee. There are no significant risks on the Corporate Risk Register;
- The Performance Management Framework ensures that the Financial Healthcheck is reported to Cabinet on a quarterly basis and made readily available on the Authority's website;
- The Authority retained The Code of Connection Certificate after completing an annual assessment against the Code which included assessments against governance, service management and information assurance conditions. Compliance with the Code of Connection ensures access to the Public Services Network;
- In July 2017, the Office of the Surveillance Commissioner completed an assessment of the Authority's RIPA policy and procedures, the results of which were reported to the Audit & Governance Committee in October 2017. The Policy was reviewed and updated and approved by the Audit & Governance Committee in February 2018. A quarterly update report is presented to the Audit & Governance Committee on the use of RIPA powers. During 2017/18, no RIPA authorisations were made;
- Financial Regulations, Contract Standing Orders and Financial Guidance are reviewed on a regular basis with the last review being approved by the Audit & Governance Committee in March 2018 and made available to staff;
- No issues were raised through the Counter Fraud and Corruption and Whistleblowing Policies;
- There were no data security breaches/lapses during the financial year;
- To assist in a more co-ordinated approach to managing projects, a Corporate Project Management template and process has been devised and made available to Officers;

- The governance framework for Information Services has been reviewed and updated;
- We have put in place an action plan for the introduction of the General Data Protection Rules which come into force in May 2018;
- A self-assessment of the Audit & Governance Committee's effectiveness was completed on the 28<sup>th</sup> March 2018;
- The Chairs of the Audit & Governance and Scrutiny Committees submitted their Annual Reports to Full Council;
- The Authority complies with the Transparency Code;
- Counter fraud work continues to be completed with the retained expertise of in-house staff to investigate corporate fraud;
- Internal Audit completes an annual assessment of the risk of fraud which is reported to the Audit & Governance Committee. Assessments against the CIPFA Code of Practice on Managing the Risk of Fraud and Corruption, the Fighting Fraud & Corruption Strategy & Checklist have been completed. Having considered all of the principles, we are satisfied that the Authority has adopted a response that is appropriate for its fraud and corruption risks and commits to maintain its vigilance to tackle fraud;
- The Anti-Money Laundering Policy was reviewed and approved by the Audit & Governance Committee in February 2018;
- The Diversity & Equalities Scheme 2015-19 was approved by Cabinet in July 2017; The Pay Policy 2017 was approved by Appointment & Staffing Committee in February 2017;
- In the last eighteen months, activity has progressed around the implementation of the organisation's response to the General Data Protection Regulations (GDPR). This has seen a project group formed to manage the implementation and a Corporate Information Governance Group representing all services within the organisation. Awareness has been raised through corporate communications, distribution of merchandise such as stationery and desk calendars and delivery of information through InfoZone. Specialist staff have been trained to practitioner level to ensure local knowledge for the implementation and subsequent maintenance. These officers have also been formally nominated as Data Protection Officer and Deputy Data Protection Officer. An Information Asset Register has been developed internally which holds details of approximately 500 datasets held by the organisation. This register will produce information such as retention schedules and disposal logs. Mandatory training is being developed for all staff and will take the form of a combination of e-learning, classroom sessions and information dissemination through InfoZone. Staff not under-taking this mandatory training will have their access to the organisation's network suspended following agreement at CMT and with Trade Unions Liaison Group. A notification

process has been developed to ensure that staff can recognise potential and actual security breaches and ensure that notifiable incidents are handled appropriately. Web pages are being redesigned based on feedback from the organisation that the original pages weren't appropriate. These pages will be available by mid-April. An Information Security Policy is being developed which will be disseminated through NetConsent in 2018;

- Partnership working arrangements continue to strengthen and further develop with both our statutory and community and voluntary sector partners. A number of projects and new ways of working have been developed in 2017/18. The Place Based Approach continues to grow and further develop; this is a collaborative partnership approach that uses multi skilled teams, universal services, voluntary sector organisations, and communities at the right time to improve outcomes for children, young people, vulnerable people and our community. As part of this Place Based Approach we have been working in partnership to identify community and voluntary sector organisations that can offer children, families and vulnerable people help and support at the earliest opportunity. We are currently exploring the most effective ways to share this information with our partners and communities. We value our community and voluntary sector and the work they do within our community. We contribute to the sector through funding projects that support the vision and corporate priorities of the Council. In 2017/18 we awarded a total of 34 grants through our Community and Voluntary Sector Grant Programme and our Arts Grant Programme; the total value of this funding was £17,766.02;
- Work is continuing on a number of actions to address the financial position in future years:
  - Delivering Quality Services project – the demand management approach to shift demand to more efficient methods of service delivery – online and automation (Interactive Voice Response). A savings target of £100k p.a. has already been included within the MTFS together with reduced CRM costs of £62k p.a. from 2019/20;
  - Recruitment freeze – where possible, temporary 12 month appointments are now only being made; there is a robust challenge / re-justification process in place for all vacant posts with a requirement to investigate alternative options including restructuring to fill vacancies / looking at what we can stop doing.
  - Spend freeze – Managers have previously been required to restrict / limit spending to essential spend only (there was a £1.6m underspend in 2016/17 – although the majority was windfall income, c. £0.57m was lower level underspend). Savings of over £150k p.a. have been included within the MTFS;
  - Alternative investment options arising from the Commercial Investment Strategy (as well as the Treasury Management Investment Strategy, including any prudential borrowing opportunities) to generate improved returns of c. 5% p.a. (plus asset growth) including:

- Set up of trading company to develop new income streams;
  - Local investment options – Lower Gungate / Solway Close development including the potential to drawdown funding from the Local Growth Fund / Local Enterprise Partnerships (GBS and Staffordshire);
  - Investments in a Diversified Property Fund;
- Review of reserves / creation of fund for transformation costs (if needed), and
- Targeted Savings – to identify potential areas for review in future years;
- The Authority has both a moral and legal obligation to ensure a duty of care for children and adults with care and support needs across its services. We are committed to ensuring that all children and adults with care and support needs are protected and kept safe from harm whilst engaged in services organised and/or provided by the Council. We do this by:
  - Having a Safeguarding Children & Adults at Risk of Abuse & Neglect Policy and procedures in place;
  - Having Safeguarding Children & Adults Processes which give clear, step-by-step guidance if abuse is identified;
  - Safeguarding training programme in place for staff and members;
  - Carrying out of the appropriate level of Disclosure and Barring Service (DBS) checks on staff and volunteers;
  - Working closely with Staffordshire Safeguarding Children’s Board & Staffordshire & Stoke-on-Trent Adult Safeguarding Partnership; and
- The Authority recognises that it has a responsibility to take a robust approach to slavery and human trafficking. In addition to the Authority’s responsibility as an employer, it also acknowledges its duty as a Borough Council to notify the Secretary of State of suspected victims of slavery or human trafficking as introduced by section 52 of the Modern Slavery Act 2015. The Authority is committed to preventing slavery and human trafficking in its corporate activities and to ensuring that its supply chains are free from slavery and human trafficking. The Authority has included modern slavery and human trafficking information within the corporate safeguarding policy and training. The Council will continue to develop and strengthen its approach to modern slavery and trafficking in 2018/19. The Tamworth Vulnerability Partnership continues to meet each morning to ensure that partner organisations are working together to coordinate efforts to support children, young people, families and vulnerable people across Tamworth.



## Declaration

We have been advised on the implications of the result of the review of the effectiveness of the Governance Framework by the Audit & Governance Committee and that the arrangements continue to be regarded as fit for purpose. The significant governance issues highlighted in the 2016/17 Annual Governance Statement still remain significant issues during 2017/18 with additional governance issues highlighted during 2017/18 and are detailed at **Annex 1** with actions completed to date to address the issues. Other minor issues highlighted through the assurance gathering process have been noted with planned actions to address these issues. Monitoring of the completion of all these issues will be completed through reporting to the Audit & Governance Committee.

We propose over the coming year to take steps to address those matters raised 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 operations as part of our next review.

Signed

D Cook

A Barratt

Leader

Chief Operating Officer

Date

On behalf of the Authority

This information can be produced on request in other formats and languages. Please contact Internal Audit Services on 01827 709234 or email [enquiries@tamworth.gov.uk](mailto:enquiries@tamworth.gov.uk)

*This is an electronic copy without an electronic signature. The original was signed as dated above and a copy can be obtained from the Executive Director Corporate Services*

## Significant Governance Issues 2017/18

The significant governance issues identified in relation to the Authority achieving its vision in 2016/17 remain significant issues for 2017/18 and are detailed below:

No	Issue	Action 2016/17	Update 2017/18
1	<p><b>Medium Term Financial Strategy (MTFS)</b></p> <p>Whilst actions have been taken to ensure that the MTFS remains balanced, this is still a significant risk to the Authority. Revenue Support grant will be removed around 2020. Opportunities and risks associated with the 100% Business Rates Retention will need to be identified. The increasing demands of our customers also need to be considered.</p>	<p>Sustainability Strategy savings targets approved as part of the Policy Changes on an annual basis are reviewed as part of the MTFS and Budget setting process each year.</p> <p>Quarterly updates are also provided to Cabinet as part of the Performance Management Framework and include the delivery of planned savings, additional National Non Domestic Rates (NDR) income and government grants.</p> <p>We await an update from the Government on the revised timetable on the 100% Business Rate Retention.</p>	<p>Work is continuing on a number of actions to address the financial position in future years:</p> <ul style="list-style-type: none"> <li>• Delivering Quality Services Project – the demand management approach to shift demand to more efficient methods of service delivery – online and automation (Interactive Voice Response). A savings target of £100k p.a. has already been included within the MTFS together with reduced CRM costs of £62k p.a. from 2019/20;</li> <li>• Recruitment freeze – where possible, temporary 12 month appointments are now only being made; there is a robust challenge / re-justification process in place for all vacant posts with a requirement to investigate alternative options including restructuring to fill vacancies / looking at what we can stop doing.</li> </ul>

No	Issue	Action 2016/17	Update 2017/18
			<p>This means we have the opportunity to increase the vacancy allowance from 5% to 7.5% c. £45k p.a. year on year for the General Fund (£14k p.a. – HRA); It should be noted that staffing in some services e.g. planning, are key to the delivery of the Council’s economic growth agenda and have significant demand from the public and local businesses but can also experience severe recruitment difficulties – which may lead to the use of market supplements to attract staff.</p> <ul style="list-style-type: none"> <li>• Spend freeze – Managers have previously been required to restrict / limit spending to essential spend only (there was a £1.6m underspend in 2016/17 – although the majority was windfall income, c. £0.57m was lower level underspend). Savings of over £150k p.a. have been included within the MTFS;</li> <li>• Alternative investment options arising from the Commercial Investment Strategy (as well as the Treasury Management Investment Strategy, including any prudential borrowing opportunities) to generate improved returns of c. 5% p.a. (plus asset growth) including: <ul style="list-style-type: none"> <li>○ Set up of trading company to develop</li> </ul> </li> </ul>

No	Issue	Action 2016/17	Update 2017/18
			<p>new income streams;</p> <ul style="list-style-type: none"> <li>○ Local investment options – Lower Gungate / Solway Close development including the potential to drawdown funding from the Local Growth Fund / Local Enterprise Partnerships (GBS and Staffordshire);</li> <li>○ Investments in a Diversified Property Fund;</li> </ul> <p>Note: these would represent long term investments of between 5 – 10 years (minimum) in order to make the necessary returns (after set up costs).</p> <ul style="list-style-type: none"> <li>● Review of reserves / creation of fund for transformation costs (if needed), and</li> <li>● Targeted Savings – to identify potential areas for review in future years.</li> </ul> <p>Uncertainty remains over the work progressing with regard to business rates retention (and the associated impact on the Council's business rates income and associated baseline and tariff levels) – it has recently been announced that Councils will be able to retain 75% of business rates collected from 2020/21 rather than 100% as previously planned. In addition, the</p>

No	Issue	Action 2016/17	Update 2017/18
			Government are also consulting on a review of the distribution methodology, the 'Fair Funding Review' as well as the planned Business Rates Reset (when a proportion of the growth in business rates achieved since 2013/14 will be redistributed) - both of which will also take effect from 2020/21. <b>There is a high risk that this will have a significant effect on the Council's funding level from 2020/21;</b>
2	<p><b>Regeneration/Capital Projects</b></p> <p>The Authority needs to ensure that capital projects are managed effectively to ensure that they are delivered and grant monies are spent appropriately and timely.</p> <p>There is a risk that developers will not develop timely in accordance with the Local Plan need.</p>	<p>Cabinet have received updates on the Commercial Investment Strategy (CIS), and have approved a steering group be formed comprising Members and Officers to oversee the implementation of projects delivered within the CIS. The last meeting of this group was May 2017.</p> <p>Cabinet have also received regular updates on projects that sit outside of the CIS such as the Tinkers/Kerria regeneration and the Enterprise Quarter project.</p> <p>Work has commenced on an inward</p>	<p>Significant re-profiling of capital scheme spend is forecast for 2017/18 into 2018/19 – c.£20m relating mainly to Housing Regeneration Schemes, works to High Rise flats and the works at the Assembly Rooms.</p> <p>The majority of this is beyond the control of the Council and has been forecast with the reasons understood.</p> <p>It is anticipated that this spend will now occur during 2018/19 with firm plans in place for such but the situation will be closely monitored and any potential issues will be highlighted at the earliest opportunity.</p> <p><b>Review of Asset Holdings and Asset Management Plan</b></p>

No	Issue	Action 2016/17	Update 2017/18								
		investment strategy which will assist in encouraging growth and development within the Borough.	<p>The Council's Asset Management Plan will be reviewed on an ongoing basis. This will identify any assets held by the Council that are no longer either required or fit for purpose and appropriate recommendations made regarding retention for alternative use or disposal.</p> <p>The Corporate Asset Management Strategy was last updated in 2015 relating to the following assets:</p> <table border="1" data-bbox="1317 687 2078 884"> <thead> <tr> <th data-bbox="1317 687 1832 762">Asset Description</th> <th data-bbox="1832 687 2078 762">Value (31/03/15)</th> </tr> </thead> <tbody> <tr> <td data-bbox="1317 762 1832 802">Investment Properties</td> <td data-bbox="1832 762 2078 802">£14,588,052</td> </tr> <tr> <td data-bbox="1317 802 1832 842">Land and Buildings</td> <td data-bbox="1832 802 2078 842">£6,537,500</td> </tr> <tr> <td data-bbox="1317 842 1832 884"><b>Total</b></td> <td data-bbox="1832 842 2078 884"><b>£21,125,552</b></td> </tr> </tbody> </table> <p>It details an estimated 10 year maintenance cost for each asset (<b>totalling c.£8m</b>) based on the inspections that had been undertaken.</p> <p><b>Long Term Strategic Plan</b></p> <p>It has been identified that the Council, through the Corporate Capital strategy and through the development of a long term strategic plan, needs to take a longer-term view of the assets required to deliver its Corporate Plan priorities and to support its</p>	Asset Description	Value (31/03/15)	Investment Properties	£14,588,052	Land and Buildings	£6,537,500	<b>Total</b>	<b>£21,125,552</b>
Asset Description	Value (31/03/15)										
Investment Properties	£14,588,052										
Land and Buildings	£6,537,500										
<b>Total</b>	<b>£21,125,552</b>										

No	Issue	Action 2016/17	Update 2017/18
			Medium Term Financial Strategy (MTFS), including spend required (and associated potential funding streams) to address the identified maintenance and repairs backlog for corporate assets.
3	<p><b>Disabled Facilities Grants</b></p> <p>There is a risk that the Authority will not be fully funded to deliver the need for Disabled Facilities Grants.</p>	<p>The pan-Staffordshire position in respect of the transfer of DFG Funding from the Better Care Fund (BCF) held by the County Council has not been fully resolved and is currently be reviewed through the Chief Executive Group.</p> <p>Progress has been made on the 'whole systems' review of the DFG processes. We are currently working in a Partnership Board with Districts and County to progress the equitable distribution. .</p> <p>For 2017/2018 allocation, we are currently working with the County Council on a 'Pass Through Agreement' for the forthcoming year. We have a statement from the County</p>	<p>The contract for delivery of the pan-Staffordshire delivery of DFG's has now been tendered, evaluated and the contract awarded for delivery commencing 1<sup>st</sup> April 2018.</p> <p>The pan Staffordshire Partnership Board has been set up which meets quarterly.</p> <p>The allocation of funding for 2018/19 will follow the same principles as for the previous year while the new contract beds in, and will be reviewed in time for 2019/20.</p>

No	Issue	Action 2016/17	Update 2017/18
		<p>Council identifying the current years distribution, but there are a number of deductions – Minor Works and the pro-rata contribution towards the Project Management costs of the ‘whole systems review’. At the Chief Executive Officer Group meeting on 13<sup>th</sup> July, 2017 the CEO of Staffordshire County Council undertook to take back these issues and to press for a resolution ASAP.</p>	



## Significant Governance Issues 2017/18

No	Issue	Action 2017/18
1	<p><b>Senior Management Review</b></p> <p>The Authority has commenced the first phase of the Senior Management Review. This has meant that the most senior managers in the organisation have been offered the option to explore voluntary redundancy. This is because we need to reduce the number of senior managers in order to meet budget deficits. All applications for voluntary redundancy together with the supporting business cases will be considered to see what impact they will have on the organisation which will help to shape a potential new leaner senior management structure. However, we have recognised there is a risk in the capacity to deliver services with a</p>	<p>The Authority will continue to monitor and assess the capacity to deliver services taking into account Delivering Quality Services.</p>

No	Issue	Action 2017/18
	reduction in staffing numbers.	
2	<p><b>GDPR</b></p> <p>Whilst activity has progressed around the implementation of the organisation's response to the General Data Protection Regulations (GDPR), there are still significant risks around potential data loss resulting in a significant fine and reputational damage.</p>	<p>A Project Group has been formed to manage the implementation of GDPR. Awareness has been raised through corporate communications, specialist staff have been trained to practitioner level to ensure local knowledge for the implementation and subsequent maintenance. Mandatory training is being developed for all staff.</p>
3	<p><b>Welfare &amp; Benefit Reform</b></p> <p>There is a risk of reduced income corporately due to welfare reform changes (including council tax support scheme and Universal Credit with further austerity measures from the Welfare reform Act 2015). As well as the potential for reduced income and an increase in bad debts, there are additional impacts arising</p>	<p>The Authority will continue to proactively manage and monitor corporate income levels on a monthly basis and report this to CMT. Staff will be trained to deal with the impact and we will be commissioning 3<sup>rd</sup> sector support as well as providing additional resources in key service areas. In addition, we will provide financial advice and support for vulnerable clients.</p>

No	Issue	Action 2017/18
	from increased needs in services – eg homelessness, requirement for additional support to vulnerable people, increased issues of ASB etc meaning an increase in demand on 3 <sup>rd</sup> sector and statutory agency services.	

This page is intentionally left blank

# TAMWORTH BOROUGH COUNCIL

## CODE OF CORPORATE GOVERNANCE 2018/19

### Introduction

Good Governance comprises the arrangements put in place to ensure that the intended outcomes for stakeholders are defined and achieved.

The International Framework: Good Governance in the Public Sector (CIPFA/IFAC, 2014) (the “International Framework”), states that:

*To deliver good governance in the public sector, both governing bodies and individuals working for public sector entities must try to achieve their entity’s objectives while acting in the public interest at all times.*

*Acting in the public interest implies primary consideration of the benefits for society, which should result in positive outcomes for service users and other stakeholders.*

### Our Commitment

The Authority is committed to upholding the highest possible standards of good corporate governance, as good governance leads to high standards of management, strong performance, effective use of resources, increased public involvement and trust in the Council and ultimately good results.

Good governance flows from shared values, culture and behaviour and from sound systems and structures. This Code of Corporate Governance is a public statement which sets out the framework through which the Council meets its commitment to good corporate governance and is based on the following principles;

- Behaving with integrity, demonstrating strong commitment to ethical values, and respecting the rule of the law
- Ensuring openness and comprehensive stakeholder engagement
- Defining outcomes in terms of sustainable economic, social, and environmental benefits
- Determining the interventions necessary to optimise the achievement of the intended outcomes
- Developing the entity’s capacity of its leadership and the individuals within it
- Managing risks and performance through robust internal control and strong public financial management
- Implementing good practices in transparency, reporting, and audit, to deliver effective accountability

This Code describes how the Council demonstrates its commitment to these seven principles and indicates what the Council has completed to achieve the commitment. It shows our own governance structure underpinned by the principles and demonstrated how we operate effectively.

**Core Principle A: Behaving with integrity, demonstrating strong commitment to ethical values, and respecting the rule of law**

Supporting Principle	Ensuring members and officers behave with integrity and lead culture where acting in the public interest is visibly and consistently demonstrated thereby protecting the reputation of the organisation.
What Assurance Do We Want	Codes of Conduct Individual sign off with regard to compliance with code Induction for new members and staff on standard of behaviours expected Performance appraisals
What Assurance Do We Get	<p>There is a Members' Code of Conduct which forms part of the <a href="#">Constitution</a> and is approved on an annual basis. Each member is required to sign two copies of the Code, retain one for themselves and one is held by Democratic Services. The Code of Conduct for employees is also in the <a href="#">Constitution</a>. Members are required to sign up to the Code of Conduct on annual basis. The Code of Conduct for officers is issued to employees through NetConsent on an annual basis.</p> <p>There is a protocol for Member/Officer relations detailed in the Constitution.</p> <p>The <a href="#">Constitution</a> details Rules of Procedures for Committee meetings. Codes and protocols are also included in the Gifts &amp; Hospitality Policy and Register of Interests.</p> <p>Key Officers and Members are required to complete an annual disclosure regarding any related party interests as part of the annual statement of accounts process.</p> <p>There is a Corporate training matrix detailing mandatory training required for all officers.</p> <p>Members have at least one training event each year which relates to Conduct. They have access to the Monitoring Officer at all times.</p> <p>Other protocols included in the Constitution relate to Pre-Election, Member involvement in Commercial Transactions, use of Council facilities, printing and postage, Dealing with Planning Matters and Monitoring Officer Protocol.</p> <p>The Audit and Governance Committee remit includes review of Standards of Conduct for Members as required by the Localism Act 2011 – reports are produced to the Audit and Governance Committee.</p> <p>There is a Chief Officer conduct committee and a Statutory Officer conduct committee.</p> <p>There is an E-induction programme in place which is currently being reviewed.</p> <p>There is a personal development review process in place which is currently being reviewed.</p> <p>Roll out of Corporate Values and Behaviours has commenced with officers. Following the Senior Management Review, we will commence further roll out to members</p>
What is missing	<p>Review of E-induction programme is currently being completed with roll out in 2018/19(Low)</p> <p>The Personal Development Review process is currently being reviewed (Low)</p>

Supporting Principle	Ensuring members take the lead in establishing specific standard operating principles or values for the organisation and its staff and that they are communicated and understood. These should build on the Seven Principles of Public Life (the Nolan Principles).
What Assurance Do We Want	Communicating shared values with members, staff, the community and partners.
What Assurance Do We Get	<p>The Members Code of Conduct is built upon the Seven Principles of Public Life. The Code of Conduct is included in the <a href="#">Constitution</a>.</p> <p>The <a href="#">Corporate Plan</a> identifies that corporate values will be co-designed by employees across the organisation and customer service standards will be co-designed with service users and will be addressed by the current development of a Community Offer project and the revision of the Organisational Development Strategy.</p> <p>In addition to the activity planned for the Tamworth Listens process / State of Tamworth debate, consultation is planned to gauge residents', business and other core stakeholders' views on the Council's priorities to achieve the 'Vision' considering areas of spending or where savings could potentially be made.</p> <p>The consultation is carried out through 3 online surveys. A survey that is tailored for businesses, a full survey aimed at residents and a survey that is tailored for the voluntary and community sector.</p> <p>The online residents survey is promoted using social networking/media sites and through email contact databases.</p> <p>The business survey is promoted through business social networking sites and business email contact databases. The voluntary and community sector survey is promoted through email contact databases.</p> <p>The Customer Service strategy is under review. A Customer Access Survey was completed in March 2017 to identify what can be done to improve customer service. A Customer Standards Survey was completed in March 2018.</p>
What is missing	Nothing identified

Supporting Principle	Leading by example and using these standard operating principles or values as a framework for decision making and other actions.
What Assurance Do We Want	Decision making practices Declaration of interests made at meetings Conduct at meetings Shared values guide decision making Develop and maintain an effective standards committee
What Assurance Do We Get	Rules of procedure for Committee meetings detailed in the <a href="#">Constitution</a> . Report format set out to ensure key information is provided to Members to inform decision making. Declarations of interests completed at all <a href="#">Committee meetings</a> and recorded on the website. <a href="#">Annual declarations</a> made by members – register of Interests. Nolan principles (values) detailed with the Code of Conduct. The <a href="#">Audit &amp; Governance Committee</a> takes on the role of Standards Committee and independent members sit on the Committee for Standards matters. Monitoring Officer dedicated to member issues with early intervention and resolution practised leading to good Member/Officer relationships. The Council's commitment to equality and diversity is demonstrated in its policy and plan (2015-19)
What is missing	Nothing identified



Supporting Principle	Demonstrating, communicating and embedding the standard operating principles or values through appropriate policies and processes which are reviewed on a regular basis to ensure that they are operating effectively.
What Assurance Do We Want	<p>Anti-fraud and corruption policies are working effectively</p> <p>Up-to-date register of interests (members and staff)</p> <p>Up-to-date register of gifts and hospitality</p> <p>Whistleblowing policies are in place and protect individuals raising concerns</p> <p>Whistleblowing policy has been made available to members of the public, employees, partners and contractors</p> <p>Complaints policy and examples of responding to complaints about behaviour</p> <p>Changes/improvements as a result of complaints received and acted upon</p> <p>Members and officers code of conduct refers to a requirement to declare interests</p> <p>Minutes show declarations of interest were sought and appropriate declarations made.</p>
<p>What Assurance Do We Get</p> <p>Page 41</p>	<p><a href="#">The Counter Fraud and Corruption Policy Statement, Strategy &amp; Guidance Notes</a> are reviewed and updated on an annual basis. They are approved by the <a href="#">Audit &amp; Governance Committee</a>. The Policy is made available on the intranet and issued through NetConsent for staff acceptance.</p> <p>All staff and members are required to Register their interests. <a href="#">Members interests</a> are made public on the website.</p> <p>Gifts and hospitality register is maintained by the Monitoring Officer. Reminders are sent to Members and Officers on the requirement to Register Gifts &amp; Hospitality.</p> <p>The <a href="#">Whistleblowing Policy</a> is reviewed and updated on an annual basis and made available on the intranet.</p> <p>The <a href="#">Tell Us Policy</a> is made available on the website and details the comments, complaints and complements process. The Tell Us Policy has been reviewed and approved by Cabinet in December 2017 for adoption in April 2018 and it includes a feedback mechanism to ensure that the action is completed. Training will be completed for staff on the adoption of the new Policy.</p> <p>The Delivering Quality Services programme identifies changes to working practices through customer demand transformation.</p> <p>Codes of Conduct require members and officer to declare interests</p> <p><a href="#">Committee meeting minutes</a> detail declarations made</p> <p>Ombudsman Investigations are reported to Audit &amp; Governance Committee.</p> <p>There is an Anti-Money Laundering Policy in place that was reviewed and approved in February 2018 by the Audit &amp; Governance Committee.</p>
What is missing	Nothing identified

Supporting Principle	Seeking to establish, monitor and maintain the organisation's ethical standards and performance
What Assurance Do We Want	Scrutiny of ethical decision making Championing ethical compliance at governing body level
What Assurance Do We Get	<p>The Council has in place three <a href="#">Scrutiny Committees</a> –Corporate, Health &amp; Wellbeing and Infrastructure, Safety &amp; Growth which provide effective scrutiny to the achievement of the strategic priorities. The <a href="#">Scrutiny Committees</a> join together to scrutinise the Budget.</p> <p>The Scrutiny Committees have the right to “call in” decisions made by the Executive. The Scrutiny Committees make use of the Forward Plan to shape projects and improve accountability and decision making. The Scrutiny Committee function is currently being reviewed for effectiveness by the Constitution Working Group.</p> <p>Agendas and minutes for the <a href="#">Scrutiny Committees</a> are made available on the Council's website and reported to the <a href="#">Full Council</a>.</p> <p>Each chair of the Scrutiny Committee reports annually to Full Council.</p> <p>There is an Audit and Governance Committee with the roles as required by the CIPFA/Solace framework (as well as the Standards function).</p> <p>The Constitution Working Group meets at the beginning of each year to discuss the Constitution and focuses on the Scrutiny function,</p> <p>The Deputy leader of the Council and Portfolio holder for Assets &amp; Finance is the Governance lead in the Authority.</p> <p>Roll out of Corporate Values and Behaviours has commenced with officers. Following the Senior Management Review, we will commence further roll out to members</p>
What is missing	On-going review of the effectiveness/process of the Scrutiny Committees More co-ordinated approach required. Training for members to improve effectiveness (Medium)

Supporting Principle	Underpinning personal behaviour with ethical values and ensuring they permeate all aspects of the organisation's culture and operation
What Assurance Do We Want	Provision of ethical awareness training
What Assurance Do We Get	<p>Members receive induction training which covers expected behaviours and ethics. Complaints received about Members Conduct are administered by the Monitoring Officer. Following the Localism Act, the Standards Committee has been abolished. Issues in relation to Members Standards of Conduct are now operated in terms of the Localism Act 2011. A Code of Practice approved by Council is in place which outlines the process to be followed in relation to complaints of members conduct. It also provides the procedure for complaints that are to be dealt with by the <a href="#">Audit &amp; Governance Committee</a>. Two independent persons have been appointed and provided with training on the function.</p> <p>Training is provided on a periodic basis for:</p> <ul style="list-style-type: none"> <li>Equalities (MERIT);</li> <li>Situational awareness / HAT;</li> <li>Customer Service;</li> <li>RESPECT</li> </ul> <p>Roll out of Corporate Values and Behaviours has commenced with officers. Following the Senior Management Review, we will commence further roll out to members</p>
What is missing	Nothing identified
Supporting Principle	Developing and maintaining robust policies and procedures which place emphasis on agreed ethical values.
What Assurance Do We Want	<p>Appraisal processes take account of values and ethical behaviour</p> <p>Staff appointments policy</p> <p>Procurement policy</p>
What Assurance Do We Get	<p>PDR's take into account corporate priorities. The PDR process identifies training needs required by the officer for continued professional development and in order to deliver the vision and priorities of the Authority. New and vacant post procedure in place.</p> <p>Recruitment processes are carried out by trained officers.</p> <p>Procurement Policy in place which requires compliance standards that apply to procurement, including:</p> <ul style="list-style-type: none"> <li>• Compliance with National and European legislation; all procurement will be undertaken in accordance with UK and European statutes and regulations;</li> <li>• Financial regulations external and internal; all procurement will be undertaken in accordance with the</li> </ul>

<p style="writing-mode: vertical-rl; transform: rotate(180deg);">Page 4</p>	<p>Council's Standing Orders and Financial Regulations;</p> <ul style="list-style-type: none"> <li>• Health &amp; Safety standards;</li> <li>• Environmental Impact and Sustainability; the Council will aim to procure from suppliers and to use goods and services which have the least impact on the environment and minimise energy consumption whilst maintaining quality and value for money;</li> <li>• Equality and Diversity – the Council is committed to eliminating inequalities in all areas of activity including procurement, and the procurement process will not discriminate on the grounds of age, disability, gender, race, religion or sexuality;</li> <li>• Safeguarding Children &amp; Adults at Risk of Abuse &amp; Neglect standards</li> </ul> <p>Social Value is included within the Procurement Strategy which requires Officers to consider social value issues in the procurement of major works or services i.e. impact on local labour, local economy/businesses, apprenticeships etc.</p> <p>Under the requirements of the Modern Slavery Act 2015, suitability questionnaires for tenderers need to be completed to ensure that the commercial organisations confirm that they are compliant with the annual reporting requirements contained with Section 54 (transparency in supply chains etc) of the Act.</p>
<p>What is missing</p>	<p>Nothing identified</p>
<p>Supporting Principle</p>	<p>Ensuring that external providers of services on behalf of the organisation are required to act with integrity and in compliance with high ethical standards expected by the organisation.</p>
<p>What Assurance Do We Want</p>	<p>Agreed values in partnership working:</p> <ul style="list-style-type: none"> <li>- Statement of business ethics communicates commitment to ethical values to external suppliers</li> <li>- Ethical values feature in contracts with external service providers</li> </ul> <p>Protocols for partnership working</p>
<p>What Assurance Do We Get</p>	<p><a href="#">Conditions of contract</a> for provision of service details bribery and corruption. This is available on the website Partnership Guidance Policy and toolkit in place</p> <p>This is designed to help the Council work with its partners to ensure that all partnerships have good systems of governance. We define governance as the processes, procedures and policies that deal with important issues like accountability, probity and audit. It is crucial that all members of partnerships should conform to codes of practice for the good of all involved. The toolkit ensures that:</p>

	<p>The Council is clear about its purpose and can clearly define its expected outcomes for the people of Tamworth when entering into partnerships;  The Council's own agreed priorities and objectives are being met;  There is clarity about accountability and responsibility for outcomes;  Partnership activity and outcomes are monitored, reviewed and evaluated;  Risks for the Council and for the Partnership are assessed and agreed;  Each Partnership has a clear focus during its lifetime and has in place an effective exit strategy;  Partnerships are empowered and their legal status understood;  Reviews are undertaken to evaluate success and promote progression and improved effectiveness.  The Seven Principles of Public Life are detailed within the <a href="#">Counter Fraud &amp; Corruption Policy Statement, Strategy &amp; Guidance Notes</a> which has been issued to staff through NetConsent. They are also detailed in the Members Code of Conduct.</p>
What is missing	Nothing identified

Supporting Principle	Ensuring members and staff demonstrate a strong commitment to the rule of the law as well as adhering to relevant laws and regulations.
What Assurance Do We Want	Statutory provisions Statutory guidance is followed Constitution
What Assurance Do We Get	The Solicitor to the Council provides legal advice to the Authority and has access to additional Legal support from neighbouring authorities and private practice. . Monitoring Officer and Section 151 Officer roles in place – review key decisions for legal and financial compliance. Legal updates from officers regarding changes to legislation, regulations, codes of practice, etc. are provided Statutory guidance is followed by all departments. The <a href="#">Constitution, which includes the Scheme of Delegation to Officers</a> is reviewed and approved annually by Full Council. Any substantial amendments required are approved by the Full Council.
What is missing	Nothing identified
Supporting Principle	Creating the conditions to ensure that the statutory officers, other key post holders and members are able to fulfil their responsibilities in accordance with legislative and regulatory requirements.
What Assurance Do We Want	Job descriptions/specifications Compliance with the CIPFA Statement on the Role of the Chief Finance Officer in Local Government (2015) Terms of reference Committee support
What Assurance Do We Get	Job descriptions and personal specifications in place Compliance with the CIPFA Statement on the Role of the Chief Finance Officer in Local Government Statutory officers terms of reference detailed with the <a href="#">Constitution</a> Democratic support provided for Committee including a Scrutiny Officer to support Members.
What is missing	Nothing identified

Supporting Principle	Striving to optimise the use of the full powers available for the benefit of citizens, communities and other stakeholders
What Assurance Do We Want	Record of legal advice provided by officers
What Assurance Do We Get	<p>Details of legal advice provided to officers is maintained where appropriate and an electronic file created. Officers have the relevant training in their service sector appropriate to their position to ensure advice provided to citizens is correct, relevant and accurate.</p> <p>Committee reports require legal and risk implications to be identified as part of the decision making process. All Cabinet Reports are approved by the Monitoring Officer and the S151 Officer.</p>
What is missing	Nothing identified
Supporting Principle	Dealing with breaches of legal and regulatory provisions effectively
What Assurance Do We Want	<p>Monitoring officer provisions</p> <p>Record of legal advice provided by officers</p> <p>Statutory provisions</p>
What Assurance Do We Get	<p>The Solicitor to the Council is responsible for the legal operation of the Council. The post holder is also the designated Monitoring Officer for member issues. Committee reports require legal and risk implications to be identified as part of the decision making process.</p> <p>Statutory provisions are followed and preserved</p>
What is missing	Nothing identified

Supporting Principle	Ensuring corruption and misuse of power are dealt with effectively.
What Assurance Do We Want	Effective anti-fraud and corruption policies and procedures Local test of assurance (where appropriate)
What Assurance Do We Get	<p><a href="#">The Counter Fraud and Corruption Policy Statement, Strategy and &amp; Guidance Notes</a> are reviewed and updated on annual basis and approved by the <a href="#">Audit &amp; Governance Committee</a>. The document is made available on the Authority's website and the Intranet and has been issued to staff through NetConsent (Policy acceptance system)</p> <p>The <a href="#">Whistleblowing Policy</a> is approved on an annual basis by the <a href="#">Audit &amp; Governance Committee</a> and made available on the Authority's website and the intranet.</p> <p>Managers are required to complete annual assurance statements to confirm compliance or otherwise with laid down expected principles and policy.</p>
What is missing	Nothing identified



## Core Principle B: Ensuring openness and comprehensive stakeholder engagement

Supporting Principle	Ensuring an open culture through demonstrating, documenting and communicating the organisation's commitment to openness
What Assurance Do We Want	Annual report Freedom of Information Act publication scheme Online council tax information Authority's goals and values Authority website
What Assurance Do We Get	<p>The Corporate Plan is published on the website</p> <p>There is a <a href="#">publication scheme</a> in place. FOI disclosures are recorded on the website.</p> <p>On-line <a href="#">Council Tax information</a> is made available – as well as published financial information in line with the Transparency Code of Practice (Accounts, budget, pay Policy etc.)</p> <p>The Authority's goals and values are detailed in the <a href="#">performance information</a> and <a href="#">Corporate Plan</a>.</p> <p>The share vision "<a href="#">One Tamworth, Perfectly Placed</a>" – <a href="#">Open for business since the 7<sup>th</sup> Century A.D. and corporate priorities</a> have been developed with our partner organisations so that the strategic priorities of all organisations are more closely aligned to the needs of the community based upon the most recent data and intelligence provided by each organisation. In addition, the views of Tamworth residents helped shape the priorities. During 2015/16, the vision and corporate priorities and objectives were reviewed and updated to give the Authority direction and focus and refreshed in 2018/19.</p> <p>Each service area develops a business plan with outcomes, and performance indicators linked to the vision and priorities.</p> <p>The website is fully functional and has available information to aid citizens.</p>
What is missing	Nothing identified

Supporting Principle	Making decisions that are open about actions, plans, resource use, forecasts, outputs and outcomes. The presumption is for openness. If that is not the case, a justification for the reasoning for keeping a decision confidential should be provided.
What Assurance Do We Want	Record of decision making and supporting materials
What Assurance Do We Get	<p>The Forward Plan is maintained for all key decisions and follows the access to information rules and regulations regarding publication and notice.</p> <p>All <a href="#">agenda items</a> (reports) are made available on the website 5 working days prior to the meeting. Minutes are published on the website;</p> <p>All reports identify restrictions on publication;</p> <p>An Annual Report from the Leader of the Council detailing any reports that have not met the required notice is made in accordance with the Access to Information Regulations; and</p> <p>The budget process aims to be open and transparent with an initial Process Plan approved in July, detailed base budget in November and Policy changes to arrive at the following years budget approved in February. Appropriate action is taken and relevant Notices published in terms of the access to information rules and regulations when urgent items and private items are considered</p>
What is missing	Nothing identified
Supporting Principle	Providing clear reasoning and evidence for decisions in both public records and explanations to stakeholders and being explicit about the criteria, rational and considerations used. In due course, ensuring that the impact and consequences of those decisions are clear.
What Assurance Do We Want	<p>Decision making protocols</p> <p>Report pro-formas</p> <p>Record of professional advice in reaching decisions</p> <p>Meeting reports show detail of advice given</p> <p>Discussions between members and officers on the information needs of members to support decision making</p> <p>Agreement on the information that will be provided and timescales</p> <p>Calendar of dates for submitting, publishing and distributing timely reports is adhered to</p>
What Assurance Do We Get	<p><a href="#">All decisions</a> are made in accordance with the protocol as per the Constitution</p> <p>Report formats are set on ModGov including key information to make informed decisions</p> <p>The report author is noted on the report and is normally an officer.</p> <p>Reports require legal and financial sign off.</p> <p>Portfolio holders / Cabinet are required to sign off the reports before publication / consideration – following</p>

	<p>discussions / agreement.</p> <p>A <a href="#">Forward Plan</a> is produced detailing the key decisions that will be made over the following one to four months. The forward plan is published on a regular basis and at least monthly.</p> <p>A calendar of meetings is published annually.</p> <p>All Agendas and Minutes of meetings are published in accordance with statutory requirements</p>
What is missing	Nothing identified
Supporting Principle	Using formal and informal consultation and engagement to determine the most appropriate and effective interventions/course of action.
What Assurance Do We Want	<p>Community strategy</p> <p>Use of consultation feedback</p> <p>Citizen survey</p>
What Assurance Do We Get	<p>The <b>Tamworth Strategic Partnership (TSP)</b> brings together key local organisations from the public, private, voluntary and community sectors. All organisations work together to address the often complicated challenges needed to improve the quality of life for Tamworth communities.</p> <p>The partnership provides a platform to discuss, debate and progress issues and it is structured to deliver our <a href="#">Vision and Priorities</a> for Tamworth. The TSP also works to the <a href="#">Tamworth Strategic Plan</a>.</p> <p>A review of the TSP has been undertaken and the outcomes will be implemented later in the current financial year including the development of a new multi-agency Partnership Plan</p> <p>Various <a href="#">consultations</a> exercises are completed throughout the year. Details of the consultations are made available on the website and the results are published.</p> <p>Citizens panel in place.</p> <p>As part of the Tamworth Listens process – a <a href="#">Tamworth Question Time</a> event takes place which a panel of local leaders attend and members of the public can ask questions. These are then fed into the State of Tamworth Debate</p> <p>In addition to the activity planned for the Tamworth Listens process / State of Tamworth debate, consultation is planned to gauge residents', business and other core stakeholders' views on the Council's priorities to achieve the 'Vision' considering areas of spending or where savings could potentially be made.</p> <p>The consultation is carried out through 3 online surveys. A survey that is tailored for businesses, a full survey aimed at residents and a survey that is tailored for the voluntary and community sector.</p> <p>The online residents survey is promoted using social networking/media sites and through email contact databases.</p> <p>The business survey is promoted through business social networking sites and business email contact databases. The voluntary and community sector survey is promoted through email contact databases.</p> <p>The Customer Service Strategy is under review. A Customer Access Survey was completed in March 2017</p>

	<p>to identify what can be done to improve customer services and A Customer Standards Survey was completed in March 2018.</p> <p>Social media channels are being used to encourage more participation.</p> <p>There is a <a href="#">Tenant Involvement Strategy</a> in place and various forms of tenant involvement takes place throughout the year.</p> <p><a href="#">Statement of Community Involvement</a> in place for the Local Plan.</p> <p>There is a <a href="#">Community Safety Website</a> for the Community Safety Partnership</p>
What is missing	Nothing identified

Supporting Principle	Effectively engaging with institutional stakeholders to ensure that the purpose, objectives and intended outcomes for each stakeholder relationship are clear so that outcomes are achieved successfully and sustainably
What Assurance Do We Want	Communication strategy
What Assurance Do We Get	<a href="#">Tenant Involvement and Consultation Strategy</a> in place in Housing Communication Strategy currently being reviewed Partnership Guidance Policy and Toolkit in place This is designed to help the Council work with its partners to ensure that all partnerships have good systems of governance. We define governance as the processes, procedures and policies that deal with important issues like accountability, probity and audit. It is crucial that all members of partnerships should conform to codes of practice for the good of all involved.
What is missing	Communication Strategy currently being reviewed (Medium)
Supporting Principle	Developing formal and informal partnerships to allow for resources to be used more efficiently and outcomes achieved more effectively.
What Assurance Do We Want	Database of stakeholders with whom the authority should engage and for what purpose and a record of an assessment of the effectiveness of any changes
What Assurance Do We Get	There is a <a href="#">citizen's panel</a> in place and citizens can join the panel at any time. The panel is actively encouraged to take part in consultation exercises throughout the year. Partnership Guidance Policy and Toolkit in place This is designed to help the Council work with its partners to ensure that all partnerships have good systems of governance. We define governance as the processes, procedures and policies that deal with important issues like accountability, probity and audit. It is crucial that all members of partnerships should conform to codes of practice for the good of all involved.
What is missing	Nothing identified

Supporting Principle	Ensuring that partnerships are based on: <ul style="list-style-type: none"> <li>- Trust</li> <li>- A shared commitment to change</li> <li>- A culture that promotes and accepts challenge among partners</li> </ul> And that the added value of partnership working is explicit
What Assurance Do We Want	Partnership framework Partnership protocols
What Assurance Do We Get	Memorandum of Understanding in place with Lichfield District Council for the provision of shared services. <a href="#">Tamworth Strategic Partnership in place</a> Local Enterprise Partnership Combined Authority Partnership Guidance Policy and Toolkit in place This is designed to help the Council work with its partners to ensure that all partnerships have good systems of governance. We define governance as the processes, procedures and policies that deal with important issues like accountability, probity and audit. It is crucial that all members of partnerships should conform to codes of practice for the good of all involved.
What is missing	Nothing identified
Supporting Principle	Establishing a clear policy on the type of issues that the organisation will meaningfully consult with or involve individual citizens, service users and other stakeholders to ensure that service (or other) provision is contributing towards the achievement of intended outcomes
What Assurance Do We Want	Record of public consultations Partnership framework
What Assurance Do We Get	Results of Public consultations are made available on the website. <a href="#">Tamworth Strategic Partnership</a> Partnership Guidance Policy and Toolkit in place This is designed to help the Council work with its partners to ensure that all partnerships have good systems of governance. We define governance as the processes, procedures and policies that deal with important issues like accountability, probity and audit. It is crucial that all members of partnerships should conform to codes of practice for the good of all involved.
What is missing	Nothing identified

Supporting Principle	Ensuring that communication methods are effective and that members and officers are clear about their roles with regard to community engagement
What Assurance Do We Want	Communications strategy
What Assurance Do We Get	<p>The <a href="#">Tamworth Strategic Partnership (TSP)</a> brings together key local organisations from the public, private, voluntary and community sectors. All the organisation's work together to address the often complicated challenges needed to improve the quality of life for Tamworth communities.</p> <p>The partnership provides a platform to discuss, debate and progress issues and it is structured to deliver our <a href="#">Vision and Priorities</a> for Tamworth. The TSP also works to the <a href="#">Tamworth Strategic Plan</a></p> <p>Various consultations exercises are completed throughout the year. Details of the consultations are made available on the website and the results are published.</p> <p>There is a <a href="#">citizen's panel</a> in place and citizens can join the panel at any time. The panel is actively encouraged to take part in consultation exercises throughout the year.</p> <p>Tamworth Question Time event – an annual event which a panel of local leaders attend and members of the public can ask questions. These are then fed into the State of Tamworth Debate</p> <p>In addition to the activity planned for the Tamworth Listens process / State of Tamworth debate, consultation is planned to gauge residents', business and other core stakeholders' views on the Council's priorities to achieve the 'Vision' considering areas of spending or where savings could potentially be made.</p> <p>The consultation is carried out through 3 online surveys. A survey that is tailored for businesses, a full survey aimed at residents and a survey that is tailored for the voluntary and community sector.</p> <p>The online residents survey is promoted using social networking/media sites and through email contact databases.</p> <p>The business survey is promoted through business social networking sites and business email contact databases. The voluntary and community sector survey is promoted through email contact databases.</p> <p>The Customer Service strategy is under review. A Customer Access Survey was completed in March 2017 to identify what can be done to improve customer service and a Customer Standards Survey was completed in March 2018.</p> <p>Social media channels are being used to encourage more participation.</p> <p>There is a Tenant Involvement Strategy in place and various forms of tenant involvement takes place throughout the year.</p> <p>Statement of Community Involvement in place for the Local Plan.</p>
What is missing	Nothing identified

Supporting Principle	Encouraging, collecting and evaluating the views and experiences of communities, citizens, service users and organisations of different backgrounds including reference to future needs.
What Assurance Do We Want	Communications strategy Joint strategic needs assessment
What Assurance Do We Get	<p>There is a <a href="#">citizen's panel</a> in place and members are invited to take part in surveys. Typically, those citizens that will contribute to the survey are from the older generation.</p> <p>The <a href="#">Tamworth Strategic Partnership (TSP)</a> brings together key local organisations from the public, private, voluntary and community sectors. All organisations work together to address the often complicated challenges needed to improve the quality of life for Tamworth communities.</p> <p>The partnership provides a platform to discuss, debate and progress issues and it is structured to deliver our <a href="#">Vision and Priorities</a> for Tamworth. The TSP also works to the <a href="#">Tamworth Strategic Plan</a></p> <p>Various consultations exercises are completed throughout the year. Details of the consultations are made available on the website and the results are published.</p> <p>Citizens panel in place.</p> <p><a href="#">Tamworth Question Time</a> event – an annual event which a panel of local leaders attend and members of the public can ask questions. These are then fed into the State of Tamworth Debate which discussed securing services for future generations</p> <p>In addition to the activity planned for the Tamworth Listens process / State of Tamworth debate, consultation is planned to gauge residents', business and other core stakeholders' views on the Council's priorities to achieve the 'Vision' considering areas of spending or where savings could potentially be made.</p> <p>The consultation is carried out through 3 online surveys. A survey that is tailored for businesses, a full survey aimed at residents and a survey that is tailored for the voluntary and community sector.</p> <p>The online residents survey is promoted using social networking/media sites and through email contact databases.</p> <p>The business survey is promoted through business social networking sites and business email contact databases. The voluntary and community sector survey is promoted through email contact databases.</p> <p>The Customer Service strategy is under review. A Customer Access Survey was completed in March 2017 to identify what can be done to improve customer service and a Customer Standards Survey was completed in March 2018.</p> <p>Social media channels are being used to encourage more participation.</p> <p>There is a Tenant Involvement Strategy in place and various forms of tenant involvement takes place throughout the year.</p> <p>Statement of Community Involvement in place for the Local Plan.</p>



	Tamworth Listens annual event (currently being reviewed for this year) Tamworth Community Offer (RB)
What is missing	Nothing identified
Supporting Principle	Implementing effective feedback mechanisms in order to demonstrate how their views have been taken into account
What Assurance Do We Want	Communications strategy
What Assurance Do We Get	<p>The <a href="#">Tamworth Strategic Partnership (TSP)</a> brings together key local organisations from the public, private, voluntary and community sectors. All the organisations work together to address the often complicated challenges needed to improve the quality of life for Tamworth communities.</p> <p>The partnership provides a platform to discuss, debate and progress issues and it is structured to deliver our <a href="#">Vision and Priorities</a> for Tamworth. The TSP also works to the <a href="#">Tamworth Strategic Plan</a></p> <p>Various consultations exercises are completed throughout the year. Details of the consultations are made available on the website and the results are published.</p> <p>Citizens panel in place.</p> <p>Tamworth Question Time event – an annual event which a panel of local leaders attend and members of the public can ask questions. These are then fed into the State of Tamworth Debate</p> <p>In addition to the activity planned for the Tamworth Listens process / State of Tamworth debate, consultation is planned to gauge residents', business and other core stakeholders' views on the Council's priorities to achieve the 'Vision' considering areas of spending or where savings could potentially be made.</p> <p>The consultation is carried out through 3 online surveys. A survey that is tailored for businesses, a full survey aimed at residents and a survey that is tailored for the voluntary and community sector.</p> <p>The online residents survey is promoted using social networking/media sites and through email contact databases.</p> <p>The business survey is promoted through business social networking sites and business email contact databases. The voluntary and community sector survey is promoted through email contact databases.</p> <p>The Customer Service strategy is under review. A Customer Access Survey was completed in March 2017 to identify what can be done to improve customer service and a Customer Standards Survey was completed in March 2018.</p> <p>Social media channels as well as e-enabled services are being used to encourage more participation.</p> <p>There is a Tenant Involvement Strategy in place and various forms of tenant involvement takes place throughout the year.</p> <p>Statement of Community Involvement in place for the Local Plan.</p>
What is missing	Nothing identified

Supporting Principle	Balancing feedback from more active stakeholder groups with other stakeholder groups to ensure inclusivity
What Assurance Do We Want	Processes for dealing with competing demands within the community, for example a consultation
What Assurance Do We Get	<a href="#">Tamworth Listens</a> includes consultation with residents, businesses, and the voluntary sector (including budget consultation). Promotion of the consultation exercise is completed through press releases, active promotion on the website, and through social media. The citizens panel are invited and businesses and the voluntary sector are emailed to encourage them to participate. The majority of the responses came from residents and were over representative of the over 55 age group.
What is missing	
Supporting Principle	Taking accounts of the interests of future generations of tax payers and service users
What Assurance Do We Want	Reports Joint strategic needs assessment
What Assurance Do We Get Age 58	Citizens panel in place. <a href="#">Tamworth Question Time</a> event – an annual event which a panel of local leaders attend and members of the public can ask questions. These are then fed into the State of Tamworth Debate In addition to the activity planned for the Tamworth Listens process / State of Tamworth debate, consultation is planned to gauge residents', business and other core stakeholders' views on the Council's priorities to achieve the 'Vision' considering areas of spending or where savings could potentially be made. The consultation is carried out through 3 online surveys. A survey that is tailored for businesses, a full survey aimed at residents and a survey that is tailored for the voluntary and community sector. The online residents survey is promoted using social networking/media sites and through email contact databases. The business survey is promoted through business social networking sites and business email contact databases. The voluntary and community sector survey is promoted through email contact databases. The Council is working closely with partners as part of the Children, Families and Vulnerable People review to share and analyse key data with the aim to develop shared priorities for the development of Early Help approaches.
What is missing	Nothing identified

## Core Principle C: Defining outcomes in terms of sustainable economic, social and environmental benefits

Supporting Principle	Having a clear vision which is an agreed formal statement of the organisation’s purpose and intended outcomes containing appropriate performance indicators which provides the basis for the organisation’s overall strategy, planning and other decisions
What Assurance Do We Want	Vision used as a basis for corporate and service planning
What Assurance Do We Get	<p>The <a href="#">strategic framework</a> is designed to ensure that the Authority is an “outcome focused”, efficient corporate identity where customers are key. It sets out our vision “One Tamworth, Perfectly Placed” – Open for business since 7<sup>th</sup> Century A.D. and three strategic priorities aligned under “Living, Growing and Delivering in Tamworth”</p> <ul style="list-style-type: none"> <li>• Living a quality life in Tamworth</li> <li>• Growing strong together in Tamworth</li> <li>• Delivering quality services in Tamworth</li> </ul> <p>These priorities are underpinned by specific objectives, our core purpose, customer service standards and corporate values details which can be found in the <a href="#">Corporate Plan</a>.</p> <p>As detailed above, one of the three revised Corporate Priorities that will enable us to deliver the vision is ‘<b>Delivering Quality Services in Tamworth</b>’. This priority will be delivered primarily through a programme that will bring about the biggest change in the delivery of customer services that the authority has seen. Running alongside the changes in customer services, work has begun on Tranche II of <b>Agile working</b>. These two projects are being delivered as part of a corporate Continual Improvement Programme (previously the Corporate Change Programme).</p> <p>From talking and listening to our customers, and from capturing the demand placed on our services we know that:</p> <ul style="list-style-type: none"> <li>• we need to change the way we deliver customer services</li> <li>• customers want to access our services in a variety of ways and at a time and place that suits them</li> <li>• we have inconsistencies in the levels and types of service we provide to our customers</li> <li>• some of our high demand services are costly to deliver and we need to make them more efficient</li> <li>• we do not have a clear picture of the demand our customers place on us – what we do know is that customers rarely come in with one single request, invariably they have multiple requests for service in their ‘shopping basket’.</li> </ul> <p>During the financial year, the <a href="#">“My Staffs”</a> app was launched, providing people with another way to access council services on the move and a time to suit them.</p>

Almost 1.5k customers use the MyStaffs app which allows customers to obtain information about Tamworth Borough Council and Staffordshire County Council all in the same place.

The Webchat service was also launched, so that anyone with an enquiry about a TBC service can get in touch with the Council through the new “chat” window on the website.

The project identified Council Tax, Housing Benefits & Housing enquiries as the priority areas to focus when developing processes on the CRM to ensure the most effective processes are transferred and ensure improvements in customer services delivery.

We will work with our partners through facilitation and challenge, to improve the customer experience especially where the Authority is not the direct provider.

The Authority has seen an incremental shift away from the “command and control” top down management style and culture to one of a fully empowered organisation with clear lines of responsibility and accountability leading to a more outcome focused, customer driven and efficient way of working. The use of efficiency models and demand management techniques has resulted in the Authority becoming a multi-economy or hybrid organisation.

The Authority continues to work with others by using alternative delivery models for service provision. A Memorandum of Understanding has been adopted with Lichfield District Council to replace an existing informal arrangement for options of pursuing shared service arrangement with each other.

Every year, the Authority undertakes [consultation](#) with local people on a wide range of issues. During 2017/18, [consultation](#) was completed on the budget, Local Council Tax Reduction Scheme, Locally Important Heritage Assets (local list) and consultation on the Review of Parliamentary Constituency boundaries

[“Tamworth Listens”](#) is another consultation exercise of which the results feed into the [“State of Tamworth Debate”](#). The consultation exercise for the 2017/18 budget process was completed to gauge residents’, business and other core stakeholders’ views on the Council’s priorities to achieve the “Vision” considering areas of spending or where savings could be potentially be made. As part of this consultation exercise, a question time event was held for residents to attend and ask questions.

There are dedicated [Business Advice](#) and [Visit Tamworth](#) websites.

In terms of the Councils own housing stock and in compliance with the regulatory framework members have approved a regulatory framework ensuring tenants are plugged into the democratic process and have the opportunity to inform, share and influence key strategic decisions

There is a [Tenant Involvement and Consultation Strategy](#) in place and tenants are regularly consulted regarding the decisions which affect the management and maintenance of their homes. During 2018 tenants will be involved in a review of the Housing Revenue Account business plan via the Tenant Consultative

group. As part of the Tenant participation, there are formal groups for [Tenant Consultation](#) and Tenant Involvement and several informal groups in place. [Open House](#) is now communicated by way of an e-newsletter on a bi-monthly basis. It is still advertised on our website and will be available on request as a hard copy. A small number of hard copies will be made available in prominent places i.e. reception/TIC etc and a small number delivered to the 11 Housing Sheltered schemes around the Borough.

The [Vision](#) is used as a basis for the Corporate Plan and service delivery plans which are reviewed on an annual basis.

There is a Communication Strategy which details the way that the Authority communicates with the local community to better informed regarding their needs and aspirations.

The [Tamworth Strategic Partnership](#) (TSP) is an umbrella partnership that brings together key local agencies from the public, private, voluntary and community sectors. The TSP has terms of reference, vision and priorities, workstreams, a commissioning framework. Agenda and minutes are made available on the Authority's website.

The Authority produces an Annual Review and [Corporate Plan](#). Performance against the Corporate Plan is reported on a quarterly basis. The [Statement of Accounts](#) and the [Annual Audit Report](#) are made available on the website.

The budget setting process has faced significant constraints in Government funding in recent years - over 50% in real terms since 2010. The 4 year Local Government Finance Settlement confirmed that austerity measures are to continue with Revenue Support Grant (RSG) all but eradicated for most Councils by 2020 – and suggests that the key challenges that the Council is currently addressing are likely to become greater.

The Council has also adopted a route-map designed to position the Council so it could be Perfectly Placed to take advantage of every opportunity it either created or identified.

“From Surviving To Thriving” set out a number of opportunities based upon the principle that by focusing upon the growth of the economy, both the “people” and the “place” would benefit. The Council remains committed to promoting and stimulating economic growth and regeneration; meeting our housing needs; creating a vibrant town centre economy and protecting those most vulnerable in our communities. To this end, we pledge to explore and invest in viable and sustainable methods of generating income and moving towards financial independence.

The Sustainability Strategy delivered more than just ‘big ticket’ efficiencies, it brought about changes to working models, cultures and processes – Agile Working; Demand Management; Joint Working; Shared Services; Locality Delivery/ Commissioning all contributed to our journey.

The adoption of ‘Demand Management’ as the primary operating model and the targeting of resources via locality based commissioning and delivery has enabled greater effectiveness in service delivery as evidenced by customer satisfaction, award winning services and of course, the management of the Council’s finances.

Through its implementation, the Council will have far greater control upon the alignment of services or ‘supply’ to the increased needs and expectations of the public or ‘demand’.

Key to this will be the application of existing and new technology to capture, collate and analyse customer insight, intelligence and data so as to understand not just the ‘need’ but the cause, behaviours or decisions creating the need.

Then by the application of locality based commissioning for example, it can commission services that either intervene or prevent future need thereby reducing demand. The report entitled ‘**Creating Opportunities from an Uncertain Future**’ is available to all Members and is available to the public.

In summary, by adopting the model, supporting its implementation and measuring its progress, it will enable the Council to achieve its Vision and Priorities and fulfil its obligations.

- We will target resources upon those in most need and those most vulnerable.
- We will commission services that will both intervene/prevent future demand and reduce levels of vulnerability.
- We will, as a consequence, meet the Council’s stated intention to ensure that the vulnerable are a priority (Motion to Council on 26<sup>th</sup> November, 2014 refers).

This approach will change the organisation and how it works; will require Members to take difficult decisions and adhere to them; will involve managed risks and will sustain essential services critical in supporting the most vulnerable in our communities at a time when demand is increasing and resources reducing.

What is missing

Nothing identified

Supporting Principle	Specifying the intended impact on, or changes for, stakeholders including citizens and service users. It could be immediately or over the course of a year or longer
What Assurance Do We Want	Community engagement and involvement Corporate and service plans Community strategy
What Assurance Do We Get	<p>Every year, the Authority undertakes consultation with local people on a wide range of issues. During 2017/18, <a href="#">consultation</a> was completed on the budget, Local Council Tax Reduction Scheme, Locally important heritage assets (Local List) and the Consultation on the review of parliamentary constituency boundaries. .</p> <p>“<a href="#">Tamworth Listens</a>” is another consultation exercise of which the results feed into the “State of Tamworth Debate”. The consultation exercise for the 2017/18 budget process was completed to gauge residents’, business and other core stakeholders’ views on the Council’s priorities to achieve the “Vision” considering areas of spending or where savings could be potentially be made. As part of this consultation exercise, a question time event was held for residents to attend and ask questions.</p> <p>There are dedicated <a href="#">Business Advice</a> and <a href="#">Visit Tamworth</a> websites.</p> <p>In terms of the Councils own housing stock and in compliance with the regulatory framework members have approved a regulatory framework ensuring tenants are plugged into the democratic process and have the opportunity to inform, share and influence key strategic decisions</p> <p>There is a <a href="#">Tenant Involvement and Consultation Strategy</a> in place and tenants are regularly consulted regarding the decisions which affect the management and maintenance of their homes. During 2018 tenants will be involved in a review of the Housing Revenue Account business plan via the Tenant Consultative group. As part of the Tenant participation, there are formal groups for Tenant Consultation and Tenant Involvement and several informal groups in place. Open House is now communicated by way of an e-newsletter on a bi-monthly basis. It is still advertised on our website and will be available on request as a hard copy. A small number of hard copies will be made available in prominent places i.e. reception/TIC etc and a small number delivered to the 11 Housing Sheltered schemes around the Borough.</p> <p>The Vision is used as a basis for the Corporate Plan and service delivery plans which are reviewed on an annual basis.</p> <p>There is a Communication Strategy which details the way that the Authority communicates with the local community to better informed regarding their needs and aspirations.</p> <p>The <a href="#">Tamworth Strategic Partnership</a> (TSP) is an umbrella partnership that brings together key local agencies from the public, private, voluntary and community sectors. The TSP has terms of reference, vision and priorities, workstreams, a commissioning framework. Agenda and minutes are made available on the Authority’s website.</p> <p>The Authority produces a <a href="#">Corporate Plan</a>. Performance against the Corporate Plan is reported on a quarterly basis. The <a href="#">Statement of Accounts</a> and the <a href="#">Annual Audit Report</a> are made available on the website.</p>



	Corporate and service plans are reviewed and updated annually. They include actions to be completed
What is missing	Nothing identified
Supporting Principle	Delivering defined outcomes on a sustainable basis within the resources that will be available
What Assurance Do We Want	Regular reports on progress
What Assurance Do We Get	<p>The quarterly performance report details performance indicators, collections rates, an update on the sustainability strategy, progress against the corporate plan and the corporate risk register. The performance report is reported quarterly to <a href="#">Cabinet</a>.</p> <p>The Authority has in place a <a href="#">Tell Us scheme</a> which provides an avenues for service users to provide feedback on the services provided. This can either be in the form of comments, compliments or complaints. Guidance available about complaints refers to referrals to the Ombudsman. Guidance is made available to members of the public if they wish to make a complaint against a member of the Council. Complaints against members of the Council are dealt with by the Monitoring Officer in the first instance and ultimately reported to the <a href="#">Audit &amp; Governance Committee</a>.</p> <p>The Customer Service strategy is under review. A Customer Access Survey was completed in March 2017 to identify what can be done to improve customer services and a Customer Standards Survey was completed in March 2018.</p> <p>One of the three revised corporate priorities that will enable us to deliver the vision is “<b>Delivering Quality Services in Tamworth</b>”. This priority will be delivered primarily through the on-going project that will bring about the biggest change in the delivery of customer services.</p>
What is missing	Nothing identified



Supporting Principle	Identifying and managing risks to the achievement of outcomes
What Assurance Do We Want	Performance trends are established and reported upon Risk management protocols
What Assurance Do We Get	Performance trends are reported in the quarterly performance report. Risks are identified at a corporate and operational level and are monitored on a regular basis in line with the Risk Management Policy. The Corporate Risk Register is reported to the <a href="#">Audit &amp; Governance Committee</a> on a quarterly basis. The annual audit plan is developed around the audit risk assessment and through consultation with members of the Corporate Management Team who identify emerging risks within their service areas.
What is missing	Nothing identified
Supporting Principle	Managing service users expectations effectively with regard to determining priorities and making the best use of the resources available
What Assurance Do We Want	An agreed set of quality standard measures for each service element and included in service plans Processes for dealing with competing demands within the community
What Assurance Do We Get	Each service plan has actions plans and performance indicators. <a href="#">Corporate plan actions</a> aligned to the strategic priorities have action plans in place which are updated on a quarterly basis. The council has implemented a Demand Management model which aims to eliminate waste in processes The Quarterly Performance Report is reviewed by Corporate Scrutiny each quarter prior to being approved by Cabinet
What is missing	Nothing identified

Supporting Principle	Considering and balancing the combined economic, social and environmental impact of policies, plans and decisions when taking decisions about service provision
What Assurance Do We Want	Capital investment is structured to achieve appropriate life spans and adaptability for future use or that resources (eg land) are spent on optimising social, economic and environmental wellbeing: <ul style="list-style-type: none"> <li>- Capital programme</li> <li>- Capital investment strategy</li> </ul>
What Assurance Do We Get	There is a 3 year <a href="#">capital programme</a> in place which identifies capital spend and financing. The Capital Investment Strategy, Capital process guidance, full capital appraisal forms and outline capital bid forms are available on the intranet. Business plans are informed by Corporate Plan and take into account PEST impacts.
What is missing	Nothing identified
Supporting Principle	Taking a longer-term view with regard to decision making, taking account of risk and acting transparently where there are potential conflicts between the organisation's intended outcomes and short-term factors such as the political cycle or financial constraints
What Assurance Do We Want	Discussion between members and officers on the information needs of members to support decision making Record of decision making and support materials
What Assurance Do We Get	Full reports are prepared by officers and members. Portfolio Holders can discuss any issues prior to the committee meeting with the relevant officer. The Council publishes a Forward Plan which provides detail of all upcoming key decisions. Scrutiny Committees are encouraged to utilise the Forward Plan to inform their decision making process and can Call In any decisions for further scrutiny.  All <a href="#">agenda items and minutes</a> are available on the website with the exception of restricted agenda items. The Local Authorities (Executive Arrangements) (Meeting and Access to Information) Regulations 2012 requires that the Leader of the Council makes one report annually to the authority to include particulars of each urgent executive decision made and a summary of matters in respect of which each decision was made. For the period 1 <sup>st</sup> May 2016 to 30 <sup>th</sup> April 2017, the Leader of the Council reported that no such decisions had been taken by the Executive under Regulation 11, cases of special urgency. Resource and Legal/Risk implications are identified in Committee reports
What is missing	Nothing identified

Supporting Principle	Determining the wider public interest associated with balance conflicting interests between achieving the various economic, social and environmental benefits, through consultation where possible, in order to ensure appropriate trade-offs.
What Assurance Do We Want	Record of decision making and supporting materials Protocols for consultation
What Assurance Do We Get	All <a href="#">Committee decisions</a> are recorded in the minutes. Minutes and agendas are made available on the website. Where Officers have made <a href="#">decisions</a> which require approval by Portfolio holders, these are made available on the website. All consultation undertaken is made available on the website so that citizens can participate. Budget consultation protocol approved annually by Cabinet. Community Impact Assessments completed for all strategies, policies and procedures Equality and Diversity Scheme and supporting action plan
What is missing	Nothing identified
Supporting Principle	Ensuring fair access to services
What Assurance Do We Want	Protocols ensure fair access and statutory guidance is followed
What Assurance Do We Get	Equalities assessments are undertaken at each policy review <a href="#">Website accessibility</a> – is W3C1.0 compliance (standard) With the ability to change font sizes, or use alternative formats and languages. Hard copies of Committee agendas are made available on request. A hardcopy of each agenda is taken to each Committee meeting for public use.
What is missing	Nothing identified

## Core Principle D: Determining the interventions necessary to optimise the achievement of the intended outcomes

Supporting Principle	Ensuring decision makers receive objective and rigorous analysis of a variety of options indicating how intended outcomes would be achieved and including the risks associated with those options. Therefore ensuring best value is achieved however services are provided.
What Assurance Do We Want	Discussion between member and officers on the information needs of members to support decision making Decision making protocols Options appraisals Agreement of information that will be provided and timescales
What Assurance Do We Get	Leadership team meetings between members and officers are in place. (Executive Management Team). Regular update meetings are held between the Leader of the Council and the Chief Operating Officer, and relevant Chief officers and their Portfolio holders. The <a href="#">Constitution</a> details the decision making protocols and format of reports. Various options are required to be detailed in the <a href="#">Committee</a> reports so that members can make informed decisions. There is a set timetable in place for the production of agendas prior to the meeting taking place. Scrutiny Officer in place to support the Scrutiny function.
What is missing	Nothing identified

Supporting Principle	Considering feedback from citizens and service users when making decisions about service improvements or where services are no longer required in order to prioritise competing demands within limited resources available including people, skills, land and assets and bearing in mind future impacts.
What Assurance Do We Want	Financial strategy
What Assurance Do We Get	<p><a href="#">Budget consultation</a> is completed on an annual basis with citizen input which informs the financial strategy</p> <p>As part of the Tamworth Listens process, we hold a Tamworth Question Time event – an annual event which a panel of local leaders attend and members of the public can ask questions. These are then fed into the State of Tamworth Debate</p> <p>In addition to the activity planned for the Tamworth Listens process / State of Tamworth debate, consultation is planned to gauge residents', business and other core stakeholders' views on the Council's priorities to achieve the 'Vision' considering areas of spending or where savings could potentially be made.</p> <p>The consultation is carried out through 3 online surveys. A survey that is tailored for businesses, a full survey aimed at residents and a survey that is tailored for the voluntary and community sector.</p> <p>The online residents survey is promoted using social networking/media sites and through email contact databases. The business survey is promoted through business social networking sites and business email contact databases. The voluntary and community sector survey is promoted through email contact databases.</p> <p>MTFS approved annually takes into account budget consultation feedback – reported annually to Cabinet.</p>
What is missing	Nothing identified
Supporting Principle	Establishing and implementing robust planning and control cycles that cover strategic and operational plans, priorities and targets
What Assurance Do We Want	Calendar of dates for developing and submitting plans and reports that are adhered to
What Assurance Do We Get	<p>There is a performance management reporting cycle in place which timetables the performance reporting cycle.</p> <p>The <a href="#">Forward Plan</a> is published on the website detailing the expected agenda items for the following four months.</p>
What is missing	Nothing identified

Supporting Principle	Engaging with internal and external stakeholders in determining how services and other courses of action should be planned and delivered
What Assurance Do We Want	Communication strategy
What Assurance Do We Get	<p>As part of the Tamworth Listens process, we hold a Tamworth Question Time event – an annual event which a panel of local leaders attend and members of the public can ask questions. These are then fed into the State of Tamworth Debate</p> <p>In addition to the activity planned for the Tamworth Listens process / State of Tamworth debate, consultation is planned to gauge residents', business and other core stakeholders' views on the Council's priorities to achieve the 'Vision' considering areas of spending or where savings could potentially be made.</p> <p>The <a href="#">consultation</a> is carried out through 3 online surveys. A survey that is tailored for businesses, a full survey aimed at residents and a survey that is tailored for the voluntary and community sector.</p> <p>The online residents survey is promoted using social networking/media sites and through email contact databases.</p> <p>The business survey is promoted through business social networking sites and business email contact databases. The voluntary and community sector survey is promoted through email contact databases.</p> <p>Joint Scrutiny Committee (Budget) held annually to feedback Member concerns from residents.</p>
What is missing	Nothing identified

Supporting Principle	Considering and monitoring risks facing each partner when working collaboratively including shared risks
What Assurance Do We Want	Partnership framework Risk management protocol
What Assurance Do We Get	Partnerships risks are identified and monitored – risk registers are in place. Partnership Guidance Policy and Toolkit in place This is designed to help the Council work with its partners to ensure that all partnerships have good systems of governance. We define governance as the processes, procedures and policies that deal with important issues like accountability, probity and audit. It is crucial that all members of partnerships should conform to codes of practice for the good of all involved. Risks are identified at a corporate and operational level and are monitored on a regular basis in line with the Risk Management Policy. The Corporate Risk Register is reported to the <a href="#">Audit &amp; Governance Committee</a> on a quarterly basis.
What is missing	Nothing identified
Supporting Principle	Ensuring arrangements are flexible and agile so that the mechanisms for delivering outputs can be adapted to changing circumstances
What Assurance Do We Want	Planning protocols
What Assurance Do We Get	Protocols in place (constitution) to ensure annual delivery of: <ul style="list-style-type: none"> <li>1) MTFS;</li> <li>2) Budget Consultation;</li> <li>3) Tamworth Listens events;</li> <li>4) State of Tamworth debate;</li> <li>5) KPIs / Service Plans;</li> <li>6) Corporate Plan</li> </ul> <p>The Quarterly Performance Report is reviewed by Corporate Scrutiny each quarter prior to being approved by Cabinet</p>
What is missing	Nothing identified

Supporting Principle	Establishing appropriate key performance indicators (KPIs) as part of the planning process in order to identify how the performance of services and projects is to be measured
What Assurance Do We Want	KPIs have been established and approved for each service element and included in the service plan and are reported upon regularly
What Assurance Do We Get	Key performance indicators are in place within Service Plans and the Corporate Plan and monitored and reported on a regular basis through quarterly reports to Cabinet.
What is missing	Nothing identified
Supporting Principle	Ensuring capacity exists to generate the information required to review service quality regularly
What Assurance Do We Want	Reports include detailed performance results and highlights areas where corrective action is necessary
What Assurance Do We Get	A quarterly performance report is reported to <a href="#">Cabinet</a> . The report details progress against performance indicators with a red, amber, green traffic light scenario to prompt remedial actions.
What is missing	Nothing identified
Supporting Principle	Preparing budgets in accordance with organisational objectives, strategies and the Medium Term Financial Strategy
What Assurance Do We Want	Evidence that budgets, plans and objectives are aligned
What Assurance Do We Get	Budgets are set following <a href="#">budget consultation</a> with citizens. Budgets are aligned to the corporate objectives A joint report is approved annually by Council which approves the Vision, Corporate Priorities and Medium Term Financial Strategy aligning resource demands in support of the corporate priorities.
What is missing	Nothing identified
Supporting Principle	Informing medium and long term resource planning by drawing up realistic estimates of revenues and capital expenditure aimed at developing a sustainable funding strategy.
What Assurance Do We Want	Budget guidance and protocols Medium term financial plan Corporate plans
What Assurance Do We Get	The budget setting process has faced significant constraints in Government funding in recent years - over 50% in real terms since 2010. The 4 year Local Government Finance Settlement confirmed that austerity measures are to continue with Revenue Support Grant (RSG) all but eradicated for most Councils by 2020 – and suggests that the key challenges that the Council is currently addressing are likely to become greater.



The Council has also adopted a route-map designed to position the Council so it could be Perfectly Placed to take advantage of every opportunity it either created or identified.

“From Surviving To Thriving” set out a number of opportunities based upon the principle that by focusing upon the growth of the economy, both the “people” and the “place” would benefit. The Council remains committed to promoting and stimulating economic growth and regeneration; meeting our housing needs; creating a vibrant town centre economy and protecting those most vulnerable in our communities. To this end, we pledge to explore and invest in viable and sustainable methods of generating income and moving towards financial independence.

The Sustainability Strategy delivered more than just ‘big ticket’ efficiencies, it brought about changes to working models, cultures and processes – Agile Working; Demand Management; Joint Working; Shared Services; Locality Delivery/ Commissioning all contributed to our journey.

The adoption of ‘Demand Management’ as the primary operating model and the targeting of resources via locality based commissioning and delivery has enabled greater effectiveness in service delivery as evidenced by customer satisfaction, award winning services and of course, the management of the Council’s finances.

Through its implementation, the Council will have far greater control upon the alignment of services or ‘supply’ to the increased needs and expectations of the public or ‘demand’.

Key to this will be the application of existing and new technology to capture, collate and analyse customer insight, intelligence and data so as to understand not just the ‘need’ but the cause, behaviours or decisions creating the need.

Then by the application of locality based commissioning for example, it can commission services that either intervene or prevent future need thereby reducing demand. The report entitled **‘Creating Opportunities from an Uncertain Future’** is available to all Members and is available to the public.

In summary, by adopting the model, supporting its implementation and measuring its progress, it will enable the Council to achieve its Vision and Priorities and fulfil its obligations.

- We will target resources upon those in most need and those most vulnerable.

	<ul style="list-style-type: none"> <li>We will commission services that will both intervene/prevent future demand and reduce levels of vulnerability.</li> <li>We will, as a consequence, meet the Council's stated intention to ensure that the vulnerable are a priority (Motion to Council on 26<sup>th</sup> November, 2014 refers).</li> </ul> <p>This approach will change the organisation and how it works; will require Members to take difficult decisions and adhere to them; will involve managed risks and will sustain essential services critical in supporting the most vulnerable in our communities at a time when demand is increasing and resources reducing. The <a href="#">Corporate Plan</a> is reviewed and updated on an annual basis</p>
What is missing	Nothing identified
Supporting Principle	Ensuring the medium term financial strategy integrates and balance service priorities, affordability and other resource constraints.
What Assurance Do We Want	Feedback surveys and exit/decommissioning strategies Changes as a result
What Assurance Do We Get	<p><a href="#">Budget consultation</a> completed on an annual basis</p> <p>Consultation is planned to gauge residents', business and other core stakeholders' views on the Council's priorities to achieve the 'Vision' considering areas of spending or where savings could potentially be made. The consultation is carried out through 3 online surveys. A survey that is tailored for businesses, a full survey aimed at residents and a survey that is tailored for the voluntary and community sector.</p> <p>The online residents survey is promoted using social networking/media sites and through email contact databases.</p> <p>The business survey is promoted through business social networking sites and business email contact databases. The voluntary and community sector survey is promoted through email contact databases.</p> <p><a href="#">Joint Scrutiny Committee</a> (Budget) held annually to feedback Member concerns from residents.</p>
What is missing	Nothing identified
Supporting Principle	Ensuring the budgeting process is all-inclusive, taking into account the full cost of operations over the medium and longer term.
What Assurance Do We Want	Budgeting guidance and protocols

<p>What Assurance Do We Get</p>	<p><a href="#">Medium Term Financial Strategy</a></p> <p>Budget setting process approved by Cabinet in July each year – including a robust process for capital investment and policy changes which requires business cases to be prepared for consideration by Executive Management Team.</p> <p>As part of the Tamworth Listens process, we hold a Tamworth Question Time event – an annual event which a panel of local leaders attend and members of the public can ask questions. These are then fed into the State of Tamworth Debate</p> <p>In addition to the activity planned for the Tamworth Listens process / State of Tamworth debate, consultation is planned to gauge residents', business and other core stakeholders' views on the Council's priorities to achieve the 'Vision' considering areas of spending or where savings could potentially be made.</p> <p>The <a href="#">consultation</a> is carried out through 3 online surveys. A survey that is tailored for businesses, a full survey aimed at residents and a survey that is tailored for the voluntary and community sector.</p> <p>The online residents survey is promoted using social networking/media sites and through email contact databases.</p> <p>The business survey is promoted through business social networking sites and business email contact databases. The voluntary and community sector survey is promoted through email contact databases.</p> <p>Joint Scrutiny Committee (Budget) held annually to feedback Member concerns from residents.</p>
<p>What is missing</p>	<p>Nothing identified</p>

Supporting Principle	Ensuring the medium term financial strategy sets the context for ongoing decisions on significantly delivery issues or responses to changes in the external environment that may arise during the budgetary period in order for outcomes to be achieved whilst optimising resource usage
What Assurance Do We Want	Financial Strategy
What Assurance Do We Get	<a href="#">Medium Term Financial Strategy</a> and associated forecasts are considered by CMT, EMT and <a href="#">Cabinet</a> prior to review/scrutiny by Members at the <a href="#">Joint Scrutiny Committee</a> (Budget). It is then approved by Full <a href="#">Council</a> . These consider the need for any ongoing decisions on significant issues and appropriate budget changes made through the policy changes process or capital programming process. In year changes can be made using virements procedures (for both Officers and Cabinet) outlined within financial guidance (as well as use of contingencies). Financial impact assessment are included in reports to Committees.
What is missing	Nothing identified
Supporting Principle	Ensuring the achievement of “social value” through service planning and commissioning. The Public Services (Social Value) Act 2012 states that this is “the additional benefit to the community...over and above the direct purchasing of goods, services and outcomes”
What Assurance Do We Want	Service plans demonstrate consideration of “social value” Achievement of “social value” is monitored and reported upon Over the past 12 months the Council’s new repairs contractor Wates have worked with the Council and SCC to provide vocational training for young people within the care system. The Council has let a major building contract in connection with the regeneration of Tinkers Green and Kerria which will apprenticeship and training opportunities.
What Assurance Do We Get	Social Value is included within the Procurement Strategy which requires Officers to consider social value issues in the procurement of major works or services i.e. impact on local labour, local economy/businesses, apprenticeships etc.
What is missing	Nothing identified

**Core Principle E: Developing the entity's capacity, including the capability of its leadership and the individuals within it**

Supporting Principle	Reviewing operations, performance use of assets on a regular basis to ensure their continuing effectiveness.
What Assurance Do We Want	Regular reviews of activities, outputs and planned outcomes
What Assurance Do We Get	Quarterly reviews of operational business plans are in place which have performance indicators. As part of the capital programme, annual consideration of need for asset maintenance e.g. use of office space, regular stock condition surveys, asset management plan
What is missing	Nothing identified
Supporting Principle	Improving resource use through appropriate application of techniques such as benchmarking and other options in order to determine how the authority's resources are allocated so that outcomes are achieved effectively and efficiently.
What Assurance Do We Want	Utilisation of research and benchmarking exercise
What Assurance Do We Get	Research and benchmarking exercises are completed in appropriate areas. CIPFA benchmarking for corporate services completed as necessary. Housing Benchmarking undertaken through Housemark and accreditation via the Housing Quality Net work Review of assets use through the One Public Estate programme and liaison with Staffordshire County Council.
What is missing	Nothing identified

Supporting Principle	Recognising the benefits of partnerships and collaborative working where added value can be achieved.
What Assurance Do We Want	Effective operation of partnerships which deliver agreed outcomes
What Assurance Do We Get	Partnerships are in place for the delivery of some services. There is a Memorandum of Understanding in place with Lichfield District Council for the sharing of services Partnership Guidance Policy and Toolkit in place This is designed to help the Council work with its partners to ensure that all partnerships have good systems of governance. We define governance as the processes, procedures and policies that deal with important issues like accountability, probity and audit. It is crucial that all members of partnerships should conform to codes of practice for the good of all involved.
What is missing	Nothing identified
Supporting Principle	Developing and maintaining an effective workforce plan to enhance the strategic allocation of resources.
What Assurance Do We Want	Workforce plan Organisational development plan
What Assurance Do We Get	There are training and development plans in place for members and officers. Officers training and development is identified through the Personal Development Review (PDR). The recruitment process ensures that skills and knowledge are measured and tested appropriately. There is an E-Induction programme in place which is available to both officers and members. Job descriptions and personal specifications are in place for all posts and reviewed as required. All Statutory Officers are members of CMT. Job descriptions for members are included in the recently revised <a href="#">Constitution</a> . They detail the purpose, duties & responsibilities and skills required for all Councillors, Leader & Deputy Leader, Members of the Executive, Chairs of Committees and the Leader and Deputy Leader of the Opposition. Service reviews are informed by the Delivering Quality Services process.
What is missing	Workforce plan to be presented to CMT June 2018. (Medium) Organisational development plan to be presented to CMT June 2018. (Medium)

Supporting Principle	Developing protocols to ensure that elected and appointed leaders negotiate their respective roles early on in the relationship and that a shared understanding of roles and objectives is maintained.
What Assurance Do We Want	Job descriptions Chief Executive and Leader pairings have considered how best to establish and maintain effective communication.
What Assurance Do We Get	Job descriptions are in place for both members and officers. The Chief Operating Officer, the Head of Paid Service and the Leader hold regular meetings. Corporate Management Team and the Cabinet form together to form the Executive Management Team. There is a training and development plan which is developed through the PDR process. This process is in place for all officers Members' training is provided on induction and in specialist areas. Regular training is provided for the Regulatory Committees.
What is missing	Nothing identified

Supporting Principle	Publishing a statement that specifies the types of decisions that are delegated and those reserved for the collective decision making of the governing body.
What Assurance Do We Want	Scheme of delegation reviewed at least annually in the light of legal and organisational changes. Standing orders and financial regulations which are reviewed on a regular basis.
What Assurance Do We Get	The scheme of delegation and scheme of delegation log is reviewed at least annually. Financial Regulations, Contract Sanding Orders and Financial Guidance are reviewed and updated on an annual basis
What is missing	Nothing identified
Supporting Principle	Ensuring the Leader and the Chief Executive have clearly defined and distinctive leadership roles within a structure whereby the Chief Executive leads the authority in implementing strategy and managing the delivery of services and other outputs set by members and each provides a check and a balance for each other's authority.
What Assurance Do We Want	Clear statement of respective roles and responsibilities and how they will be put into practice.
What Assurance Do We Get	The <a href="#">Constitution</a> details the roles and responsibilities of the Leader and the Statutory Officers. Job Descriptions for members including the Leader are in the Constitution,
What is missing	Nothing identified

08



Supporting Principle	<p>Developing the capabilities of members and senior management to achieve effective shared leadership and to enable the organisation to respond successfully to changing legal and policy demands as well as economic, political and environmental changes and risks by:</p> <ul style="list-style-type: none"> <li>- -ensuring members and staff have access to appropriate induction tailored to their role and that ongoing training and development matching individual and organisational requirement is available and encouraged</li> <li>- Ensuring members and officers have the appropriate skills, knowledge, resources and support to fulfil their roles and responsibilities and ensuring that they are able to update their knowledge on a continuing basis.</li> <li>- Ensuring personal, organisational and system-wide development through shared learning, including lessons learnt from governance weaknesses both internal and external.</li> </ul>
<p>What Assurance Do We Want</p> <p style="writing-mode: vertical-rl; transform: rotate(180deg);">Page 81</p>	<p>Access to update courses/information briefing on new legislation  Induction programme  Personal development plans for members and officers  For example, for members this may include the ability to:</p> <ul style="list-style-type: none"> <li>- Scrutinise and challenge</li> <li>- Recognise when outside expert advice is required</li> <li>- Promote trust</li> <li>- Work in partnership</li> <li>- Lead the organisation</li> <li>- Act as a community leader</li> </ul> <p>Efficient systems and technology used for effective support  Arrangements for succession planning</p>
What Assurance Do We Get	<p>The PDR process identifies training needs for both Members and Officers  CPD/membership of professional bodies for up to date information/changes to legislation  Networking and membership of professional bodies encouraged  Members induction and training programme in place (e.g. finance, treasury management, planning, licensing).  E-learning solution being rolled out which covers a number of training areas</p>
What is missing	Nothing identified

Supporting Principle	Ensuring that there are structures in place to encourage public participation.
What Assurance Do We Want	Residents' panels Stakeholder forum terms of reference Strategic partnership frameworks
What Assurance Do We Get	Tenant participation is actively encouraged and completed in various formats. They provide training to tenants on a variety of day to day skills and confidence, as well as estate inspections, other events and meetings and customer satisfaction, feedback and consultation. The Citizens Panel is made up of local residents who are asked about local services. A Community Safety Partnership exist which has its own website – “Safer Tamworth”. The partnership brings together a number of organisations who work together to make the borough a safer place to work, live and socialise. Partnership frameworks in place for joint working Partnership Guidance Policy and Toolkit in place This is designed to help the Council work with its partners to ensure that all partnerships have good systems of governance. We define governance as the processes, procedures and policies that deal with important issues like accountability, probity and audit. It is crucial that all members of partnerships should conform to codes of practice for the good of all involved.
What is missing	Nothing identified
Supporting Principle	Taking steps to consider the leadership's own effectiveness and ensuring leaders are open to constructive feedback from peer reviews and inspections.
What Assurance Do We Want	Reviewing individual member performance on a regular basis taking account of their attendance and considering any training or development needs Peer reviews
What Assurance Do We Get	PDR process and job descriptions are in place for members.  Peer reviews have been completed previously and any recommendations have been acted upon.  Members attendance is recorded and monitored
What is missing	Nothing identified

Supporting Principle	Holding staff to account through regular performance reviews which take account of training or development needs.
What Assurance Do We Want	Training and development plan Staff development plans linked to appraisals Implementing appropriate human resource policies and ensuring that they are working effectively
What Assurance Do We Get	Training identified as part of the PDR process as part of continued professional development. One to one meetings are completed on a regular basis. Performance indicators are recorded on the Pentana and assigned to the relevant managers to monitor and update Conduct and Capability Procedures are in place Training for managers in strategic skills as well as soft skills HR policies in place and updated as required.
What is missing	Nothing identified

Supporting Principle	Ensuring arrangements are in place to maintain the health and wellbeing of the workforce and support individuals in maintaining their own physical and mental wellbeing.
What Assurance Do We Want	Human resource policies
What Assurance Do We Get	<p>Health and safety policies are in place</p> <p>Healthshield benefits for staff</p> <p>There is a Childcare vouchers scheme in place</p> <p>On-site Counselling service available to staff on a confidential basis</p> <p>HR policies are in place</p> <p>Well-being policy developed</p> <p>TBC signed up to national initiative 'Time for change'</p> <p>12 Mental Health First Aiders have been trained</p> <p>Robust management of attendance with support from Occupational Health Specialists</p> <p>Regular updates with Trade unions and / or representatives</p>
What is missing	Nothing identified

## Core Principle F: Managing risks and performance through robust internal control and strong public financial management

Supporting Principle	Recognising that risk management is an integral part of all activities and must be considered in all aspects of decision making
What Assurance Do We Want	Risk management protocol
What Assurance Do We Get	Risk Management Policy – reviewed and updated annually and approved by <a href="#">Audit &amp; Governance Committee</a> . There is a Corporate Risk Register which is owned by Corporate Management Team which is updated on a quarterly basis and reported to the <a href="#">Audit &amp; Governance Committee</a> . Operational risk registers are owned by managers and recorded on the Pentana system and linked to performance and service plans. Internal Audit work with managers to help them identify their risks and record them on the Pentana system. The Internal Audit plan takes into account the identified risks on the risk registers. All decisions made by Members have risks identified in the report
What is missing	Nothing identified
Supporting Principle	Implementing robust and integral risk management arrangements and ensuring that they are working effectively.
What Assurance Do We Want	Risk management strategy/policy formally approved and adopted and reviewed and updated on a regular basis.
What Assurance Do We Get	Risk Management Policy – reviewed and updated annually and approved by <a href="#">Audit &amp; Governance Committee</a> . All decisions made by Members have the risks identified
What is missing	Nothing identified

Supporting Principle	Ensuring that responsibilities for managing individual risks are clearly allocated.
What Assurance Do We Want	Risk management protocol
What Assurance Do We Get	Risk registers are in place for service areas as well as having a corporate risk register in place. Owners of the risks are assigned to owners to manage and review.  The Risk Management Policy details responsibilities for managing individual risks.
What is missing	Nothing identified
Supporting Principle	Monitoring service delivery effectively including planning, specification, execution and independent post implementation review.
What Assurance Do We Want	Performance map showing all key activities have performance measures Benchmarking information Cost performance (using inputs and outputs) Calendar of dates for submitting, publishing and distributing timely reports that are adhered to.
What Assurance Do We Get	The <a href="#">corporate plan</a> 2017-20 identifies key performance indicators aligned to the strategic priorities Benchmarking information is used for some services where appropriate/available Performance management cycle identifies the timetable for the submission of performance reports There is a Forward Plan in place which identifies key decisions to be made in the following four months The Asset Strategy Group identifies Post Implementation Reviews required for Capital Schemes on an annual basis.
What is missing	Nothing identified

Supporting Principle	Making decisions based on relevant, clear objective analysis and advice pointing out the implications and risks inherent in the organisation's financial, social and environmental position and outlook.
What Assurance Do We Want	Discussion between members and officers on the information needs of members to support decision making Publication of agendas and minutes of meetings Agreement on the information that will be needed and timescales
What Assurance Do We Get	Portfolio holders hold meetings with relevant staff All <a href="#">agenda and minutes</a> are published on the website. Agendas are published 5 working days prior to the committee meeting date. The <a href="#">forward plan</a> is a list of the council's key decisions that will be made over the next one to four months. These decisions will be made by either the Cabinet or by officers who have been delegated authority by the Cabinet. The <a href="#">forward plans</a> are published on the first working day of the month. The forward plan includes a short description of the decision to be made; who will make it; when the decision will be taken; details of the planned consultation with local people and other stakeholders; and contact details for further information (including reports and background papers).
What is missing	Nothing identified
Supporting Principle	Ensuring an effective scrutiny or oversight function is in place which encourages constructive challenge and debate on policies and objectives before, during and after decisions are made thereby enhancing the organisation's performance and that of any organisation for which it is responsible. (OR, for a committee system) Encouraging effective and constructive challenge and debate on policies and objectives to support balanced and effective decision making.
What Assurance Do We Want	The role and responsibility for scrutiny has been established and is clear Agenda and minutes of scrutiny meetings Evidence of improvements as a result of scrutiny. Planned work items identified at beginning of municipal year, Performance reporting reviewed, members now sit on tenant's consultative group.  Terms of reference Training for members Membership
What Assurance Do We Get	The roles and responsibilities, terms of reference for Scrutiny Committees are detailed in The <a href="#">Constitution</a> <a href="#">Agendas and minutes</a> are made available on the website. Scrutiny chairs report annually to full Council on

	<p>their workplan.</p> <p>Training is provided for members on the role of Scrutiny. There is a Scrutiny Officer in post to provide support to the Scrutiny Committees.</p> <p>When required to assist task and finish groups the Committees can co-opt external expertise</p> <p>Under the remit of the <a href="#">Scrutiny Committees</a>, they can call in decisions made by the Cabinet.</p>
What is missing	Nothing identified
Supporting Principle	Providing members and senior management with regular reports on service delivery plans and on progress towards outcome achievement.
What Assurance Do We Want	Calendar of dates for submitting, publishing and distributing timely reports that are adhered to
What Assurance Do We Get	There is a calendar of dates for the submission and publishing reports which is adhered to
What is missing	Nothing identified



Supporting Principle	Ensuring there is consistency between specification stages (such as budgets) and post implementation reporting (eg financial statements)
What Assurance Do We Want	Financial standards, guidance Financial regulations and standing orders
What Assurance Do We Get	Financial regulations, contract standing orders and financial guidance are in place and reviewed and updated annually. There is a robust project management process in place with post implementation reviews completed at the end of the project.
What is missing	Nothing identified
Supporting Principle	Aligning the risk management strategy and policies on internal control with achieving the objectives
What Assurance Do We Want	Risk management strategy Audit plan Audit reports
What Assurance Do We Get	The risk management strategy is reviewed, updated and approved annually by the <a href="#">Audit &amp; Governance Committee</a> . The Audit plan is based on an internal audit risk assessment which takes into account risks identified by Heads of Service and approved by the <a href="#">Audit &amp; Governance Committee</a> . Quarterly reports of progress against the audit plan are submitted to the Audit & Governance Committee Audit reports are concise and reported in a timely manner. All recommendations are followed up in a timely basis, the results of which are reported to the Audit & Governance Committee. All recommendations are assigned to the relevant officers who have access to the Pentana system so that they review and update up and coming recommendations
What is missing	Nothing identified
Supporting Principle	Evaluating and monitoring the authority's risk management and internal control on a regular basis
What Assurance Do We Want	Risk management strategy/policy has been formally approved and adopted and is reviewed and updated on a regular basis
What Assurance Do We Get	The Risk Management Policy/Strategy is reviewed, updated and then approved by the <a href="#">Audit &amp; Governance Committee</a> on an annual basis. Quarter updates of the risk management action plan are also submitted to the Committee.
What is missing	Nothing identified

Supporting Principle	Ensuring effective counter fraud and anti-corruption arrangements are in place
What Assurance Do We Want	Compliance with the Code of Practice on Managing the Risk of Fraud and Corruption (CIPFA 2014)
What Assurance Do We Get	Internal Audit measure against Compliance with the Code of Practice on Managing the Risk of Fraud and Corruption and this is reported to the <a href="#">Audit &amp; Governance Committee</a>
What is missing	Nothing identified
Supporting Principle	Ensuring additional assurance on the overall adequacy and effectiveness of the framework of governance, risk management and control is provided by the internal auditor.
What Assurance Do We Want	Annual Governance Statement Effective internal audit service is resource and maintained
What Assurance Do We Get	The <a href="#">Annual Governance Statement</a> is produced in accordance with the guideline alongside the Code of Corporate Governance. The Annual Governance Statement is signed by the Leader and the Chief Operating Officer.  The Internal Audit is adequately resourced and complies with the Public Sector Internal Audit Standards (PSIAS). An annual self-assessment against the PSIAS is completed and in line with the Standards and External Quality Assessment (EQA) is completed every five years. The EQA was completed in 2017 and confirmed compliance with the Standards.
What is missing	Nothing identified
Supporting Principle	Ensuring an audit committee or equivalent group or function which is independent of the executive and accountable to the governing body: <ul style="list-style-type: none"> <li>- Provides further source of effective assurance regarding arrangements for managing risk and maintaining an effective control environment</li> <li>- That its recommendations are listened to and acted upon</li> <li>-</li> </ul>
What Assurance Do We Want	Audit committee complies with best practice. See Audit Committees: Practical Guidance for Local Authorities and Police (CIPFA 2013) Terms of reference Membership Training

What Assurance Do We Get	<p>The terms of reference for the Audit &amp; Governance Committee are detailed within the <a href="#">Constitution</a>. Members of the Committee are independent of the Cabinet and the Chair reports annually to Full Council. The <a href="#">Audit &amp; Governance Committee</a> receive quarterly update reports on Risk Management which include a review of the Corporate Risk Register, an update of the risk management action plan and they approve the Risk Management Policy on an annual basis.</p> <p>Any recommendations made by the <a href="#">Audit &amp; Governance Committee</a> are recorded in the minutes and acted upon.</p> <p>The Audit &amp; Governance Committee complete an annual self-assessment against Audit Committee guidance issued by CIPFA and any areas for improvement are acted upon</p>
What is missing	Nothing identified
Supporting Principle	Ensuring effective arrangements are in place for the safe collection, storage, use and sharing of data, including processes to Safeguard personal data
What Assurance Do We Want	<p>Data management framework and procedures</p> <p>Designated data protection officer</p> <p>Data protection policies and procedures</p>
<p>What Assurance Do We Get</p> <p>Page 91</p>	<p>The Authority has in place a Corporate Data Register which details all the data held. We have various policies and procedures in place around data issues including:</p> <ul style="list-style-type: none"> <li>• Data Protection Policy,</li> <li>• IT Security Policy,</li> <li>• Access Control Policies and Procedures,</li> <li>• Asset Management Policies and procedures,</li> <li>• Human Resources security,</li> <li>• Business Continuity Management,</li> <li>• Physical and Environmental Security,</li> <li>• Systems and Acquisitions, development and maintenance,</li> <li>• Data Quality</li> </ul> <p>A Corporate Information Governance group is in place to manage the implementation of the organisation's response to the General Data Protection Regulations (GDPR).</p>
What is missing	Nothing identified

Supporting Principle	Ensuring effective arrangements are in place and operating effectively when sharing data with other bodies
What Assurance Do We Want	Data sharing agreement Data sharing register Data processing agreements
What Assurance Do We Get	Individual data sharing agreements are in place for areas within Revenues & Benefits, Economic Development, and Housing. These are detailed on the data sharing page on the intranet (data sharing register).
What is missing	Nothing identified
Supporting Principle	Reviewing and auditing regularly the quality and accuracy of data used in decision making and performance monitoring
What Assurance Do We Want	Data quality procedures and reports Data validation procedures
What Assurance Do We Get	Auditing of data is completed in accordance with the risk based internal audit plan. Data is validated as part of the internal controls in place within the various systems. Performance management is audited on a regular basis.
What is missing	Nothing identified
Supporting Principle	Ensuring financial management supports both long term achievement of outcomes and short-term financial and operational performance
What Assurance Do We Want	Financial management supports the delivery of services and transformational change as well as securing good stewardship
What Assurance Do We Get	The budget setting process has faced significant constraints in Government funding in recent years - over 50% in real terms since 2010. The 4 year Local Government Finance Settlement confirmed that austerity measures are to continue with Revenue Support Grant (RSG) all but eradicated for most Councils by 2020 – and suggests that the key challenges that the Council is currently addressing are likely to become greater.  The Council has also adopted a route-map designed to position the Council so it could be Perfectly Placed to take advantage of every opportunity it either created or identified.  “From Surviving To Thriving” set out a number of opportunities based upon the principle that by focusing upon the growth of the economy, both the “people” and the “place” would benefit. The Council remains

committed to promoting and stimulating economic growth and regeneration; meeting our housing needs; creating a vibrant town centre economy and protecting those most vulnerable in our communities. To this end, we pledge to explore and invest in viable and sustainable methods of generating income and moving towards financial independence.

The Sustainability Strategy delivered more than just 'big ticket' efficiencies, it brought about changes to working models, cultures and processes – Agile Working; Demand Management; Joint Working; Shared Services; Locality Delivery/ Commissioning all contributed to our journey.

The adoption of 'Demand Management' as the primary operating model and the targeting of resources via locality based commissioning and delivery has enabled greater effectiveness in service delivery as evidenced by customer satisfaction, award winning services and of course, the management of the Council's finances.

Through its implementation, the Council will have far greater control upon the alignment of services or 'supply' to the increased needs and expectations of the public or 'demand'.

Key to this will be the application of existing and new technology to capture, collate and analyse customer insight, intelligence and data so as to understand not just the 'need' but the cause, behaviours or decisions creating the need.

Then by the application of locality based commissioning for example, it can commission services that either intervene or prevent future need thereby reducing demand. The report entitled '**Creating Opportunities from an Uncertain Future**' is available to all Members and is available to the public.

In summary, by adopting the model, supporting its implementation and measuring its progress, it will enable the Council to achieve its Vision and Priorities and fulfil its obligations.

- We will target resources upon those in most need and those most vulnerable.
- We will commission services that will both intervene/prevent future demand and reduce levels of vulnerability.
- We will, as a consequence, meet the Council's stated intention to ensure that the vulnerable are a priority

	(Motion to Council on 26 <sup>th</sup> November, 2014 refers).  This approach will change the organisation and how it works; will require Members to take difficult decisions and adhere to them; will involve managed risks and will sustain essential services critical in supporting the most vulnerable in our communities at a time when demand is increasing and resources reducing.
What is missing	Nothing identified
Supporting Principle	Ensuring well-developed financial management is integrated at all levels of planning and control, including management of financial risks and controls
What Assurance Do We Want	Budget monitoring reports
What Assurance Do We Get	Budget monitoring reports are available monthly and ad hoc as required. Accountants complete regular budget monitoring reports with Heads of Service. Managers have access to up to date budget monitoring information at all times.
What is missing	Nothing identified

## Core Principle G: Implementing good practices in transparency, reporting, and audit to deliver effective accountability

Supporting Principle	Writing and communicating reports for the public and other stakeholders in an understandable style appropriate to the intended audience and ensuring that they are easy to access and interrogate. Striking a balance between providing the right amount of information to satisfy transparency demands and enhance public scrutiny while not being too onerous to provide and for users to understand.
What Assurance Do We Want	Website Annual report
What Assurance Do We Get	All reports are made available on the website for the public to access apart from anything confidential as laid down by the Local Government Act 1972 and subsequent enabling legislation and guidance The <a href="#">Corporate Plan</a> is published on an annual basis and made available on the website. All information is made available in accordance with the Transparency Agenda. Where Freedom of Information requests are made and it is beneficial to publish the data on the website, this is completed to ensure that the Authority is transparent and it also reduces the number of information requests received.
What is missing	Nothing identified
Supporting Principle	Reporting at least annually on performance, value for money and the stewardship of its resources.
What Assurance Do We Want	Formal annual report which includes key points raised by external scrutineers and service users' feedback on service delivery. Annual financial statements
What Assurance Do We Get	The <a href="#">Corporate Plan</a> is refreshed on an annual basis. The financial statements are produced in accordance with the laid down timetable and presented to the Audit & Governance Committee for approval. The External Auditors produce the Annual Audit Letter and the Audit Findings Report which is presented to the Audit & Governance Committee.
What is missing	Nothing identified
Supporting Principle	Ensuring members and senior management own the results.
What Assurance Do We Want	Appropriate approvals
What Assurance Do	Decisions approved by <a href="#">Cabinet</a> and <a href="#">Full Council as detailed within the Constitution</a>

We Get	Accounts (including AGS) approved by Audit & Governance Committee  Minutes of the meetings are made available on the website
What is missing	Nothing identified
Supporting Principle	Ensuring robust arrangements for assessing the extent to which the principles contained in the Framework have been applied and publishing the results on this assessment including an action plan for improvement and evidence to demonstrate good governance (annual governance statement).
What Assurance Do We Want	Annual Governance Statement
What Assurance Do We Get	Results and actions arising from this assessment will go in the Annual Governance Statement for approval by Audit & Governance Committee
What is missing	Nothing identified
Supporting Principle	Ensuring that the Framework is applied to jointly managed or shared service organisations as appropriate.
What Assurance Do We Want	Annual Governance Statement
What Assurance Do We Get	The Annual Governance Statement is prepared by the Governance Group which is made up of lead officers within the Authority. The revised Personal Development Review document will include reference to the core principles of Corporate Governance.
What is missing	Nothing identified
Supporting Principle	Ensuring the performance information that accompanies the financial statements is prepared on a consistent and timely basis and the statements allow for comparison with other similar organisations.
What Assurance Do We Want	Format follows best practice
What Assurance Do We Get	High level corporate plan projects/programmes and corporate risk register included in the <a href="#">Statement of Accounts</a> Financial statements prepared in line with the CIPFA Code of Practice (as all Councils should) including relevant performance information from the Corporate Plan.
What is missing	Nothing identified



Supporting Principle	Ensuring that recommendations for corrective action made by external audit are acted upon Ensuring an effective internal audit service with direct access to members is in place which provides assurance with regard to governance arrangements and recommendations are acted upon
What Assurance Do We Want	Recommendations have informed positive improvement Compliance with CIPFA's Statement on the Role of the Head of Internal Audit (2010) Compliance with Public Sector Internal Audit Standards
What Assurance Do We Get	All recommendations made by the External Auditors are acted upon. Compliant and supporting evidence in the review of arrangements in relation to compliance with the CIPFA Statement on the Role of the Head of Internal Audit and compliance to the Public Sector Internal Audit Standards which has been further demonstrated following and external assessment completed in 2017.
What is missing	Nothing identified
Supporting Principle	Welcoming peer challenge, reviews and inspections from regulatory bodies and implementing recommendations.
What Assurance Do We Want	Recommendations have informed positive improvement
What Assurance Do We Get	An LGA Peer Assessment was undertaken and action plan monitored
What is missing	Nothing identified
Supporting Principle	Gaining assurance on risks associated with delivering services through third parties and that this is evidenced in the annual governance statement.
What Assurance Do We Want	Annual Governance Statement
What Assurance Do We Get	Partnership Guidance Policy and Toolkit in place This is designed to help the Council work with its partners to ensure that all partnerships have good systems of governance. We define governance as the processes, procedures and policies that deal with important issues like accountability, probity and audit. It is crucial that all members of partnerships should conform to codes of practice for the good of all involved. Informed by Corporate Risk register.
What is missing	Nothing identified


Supporting Principle	Ensuring that when working in partnership, arrangements for accountability are clear and that the need for wider public accountability has been recognised and met.
What Assurance Do We Want	Community Strategy
What Assurance Do We Get	Partnership Guidance Policy and Toolkit in place This is designed to help the Council work with its partners to ensure that all partnerships have good systems of governance. We define governance as the processes, procedures and policies that deal with important issues like accountability, probity and audit. It is crucial that all members of partnerships should conform to codes of practice for the good of all involved.
What is missing	Nothing identified


## Action Plan Arising from the 2017/18 Assurance Process


**Report Type:** Actions Report


**Report Author:** Angela Struthers

**Generated on:** 27 April 2018

Action Code	Action Title	Current Status	Progress Bar	Due Date	Completed Date	Assigned To
AGS1819 1	E-Induction <b>Priority</b>		<input type="text" value="0%"/>	31-Mar-2019		Zoe Wolicki
<b>Description</b>	Review of E-induction programme					
<b>Desired Outcome</b>						
<b>All Notes</b>	Angela Struthers 27-Apr-2018 The review of the E-induction programme is currently being completed with roll out in 2018					

Action Code	Action Title	Current Status	Progress Bar	Due Date	Completed Date	Assigned To
AGS1819 2	PDR process <b>Priority</b>		<input type="text" value="0%"/>	31-Mar-2019		Zoe Wolicki
<b>Description</b>	Review of the PDR process					
<b>Desired Outcome</b>						
<b>All Notes</b>	Angela Struthers 27-Apr-2018 The PDR process is currently being reviewed					

Action Code	Action Title	Current Status	Progress Bar	Due Date	Completed Date	Assigned To
AGS1819 3	Scrutiny <b>Priority</b>		<input type="text" value="0%"/>	31-Mar-2019		Jane Hackett
<b>Description</b>	Review of Scrutiny Committees					
<b>Desired Outcome</b>						
<b>All Notes</b>	Angela Struthers 27-Apr-2018 On-going review of the effectiveness of the Scrutiny Committees. Training for members to improve effectiveness					

Action Code	Action Title	Current Status	Progress Bar	Due Date	Completed Date	Assigned To
AGS1819 4	Communication Strategy <b>Priority</b>		<input type="text" value="0%"/>	31-Mar-2019		Anica Goodwin
<b>Description</b>	Review of Communication Strategy					
<b>Desired Outcome</b>						
<b>All Notes</b>	Angela Struthers 27-Apr-2018 Communication Strategy currently being reviewed					

Action Code	Action Title		Current Status	Progress Bar	Due Date	Completed Date	Assigned To
AGS1819 5	Workforce plan	Priority		<input type="text" value="0%"/>	31-Mar-2019		Zoe Wolicki
<b>Description</b>	Review of workforce plan						
<b>Desired Outcome</b>							
<b>All Notes</b>	Angela Struthers 27-Apr-2018 Workforce plan to be presented to to CMT in June 2018						

Action Code	Action Title		Current Status	Progress Bar	Due Date	Completed Date	Assigned To
AGS1819 6	Organisational Development Plan	Priority		<input type="text" value="0%"/>	31-Mar-2019		Zoe Wolicki
<b>Description</b>	Review of organisational development plan						
<b>Desired Outcome</b>							
<b>All Notes</b>	Angela Struthers 27-Apr-2018 Organisational development plan to be presented to CMT in June 2018						

Page 100

Action Status	
	Cancelled
	Overdue; Neglected
	Unassigned; Check Progress
	Not Started; In Progress; Assigned
	Completed

## Audit & Governance Committee Self-Assessment 2017/18

	Area	Yes	No	Part
<b>1</b>	<b>Terms of Reference</b>			
1.1	Have the Committee's terms of reference been approved by the full Council and do they follow the CIPFA model?	Y		
1.2	Does the Committee report to the directly to the Full Council on an annual basis?	Y		
<b>2</b>	<b>Internal Audit Process</b>			
2.1	Does the Committee approve the strategic audit approach and the annual programme?	Y		
2.2	Is the performance of Internal Audit reviewed regularly?	Y		
2.3	Are summaries of quality questionnaires on the work of Internal Audit from managers reviewed?	Y		
2.4	Does the Committee receive the Internal Annual Report which includes an opinion and information on conformance with the Public Sector Internal Audit Standards?	Y		
2.5	Does the Committee ensure that officers are acting on and monitoring action taken to implement recommendations?	Y		
<b>3</b>	<b>External Audit Process</b>			
3.1	Are reports on the work of External Audit and other inspection agencies presented to the committee?	Y		
3.2	Does the Committee input into the external audit programme?	Y		
3.3	Does the Committee monitor management actions in response to the issues raised by the External Auditor?	Y		

	Area	Yes	No	Part
4	<b>Regulatory Framework</b>			
4.1	Does the Committee take a role in overseeing <ul style="list-style-type: none"> <li>• Risk management strategies and the actions taken to manage the risks</li> <li>• Annual Governance Statement</li> <li>• Counter-fraud arrangements – including the Counter Fraud Policy and Whistleblowing Policy</li> <li>• Financial Guidance – including Financial Regulations &amp; Contract Standing Orders</li> <li>• Constitution</li> <li>• Complaints handling/ombudsman's report</li> <li>• RIPA Policy and updates?</li> </ul>	Y Y Y Y Y Y Y		
5	<b>Accounts</b>			
5.1	Does the Committee take a role in overseeing the annual statement of accounts?	Y		
6	<b>Standards of Conduct</b>			
6.1	Does the Committee exercise all the functions of the Council relating to Codes of Conduct as provided by the Localism Act 2011 except for those that may only be exercised by Full Council?	Y		
7	<b>Membership</b>			
7.1	Has the membership of the committee been formally agreed and a forum set?	Y		
7.2	Is the chair free from executive or scrutiny (chair) functions?	Y		
7.3	Are members sufficiently independent of the other key committees of the council?	Y		

	Area	Yes	No	Part
7.4	Have all members' skills and experiences been assessed and training given for identifying gaps?  Training for the new committee in the new municipal year – next meeting discuss training required	Y		
7.5	Can the committee access other committees as necessary?	Y		
<b>8</b>	<b>Meetings</b>			
8.1	Does the committee meet regularly?	Y		
8.2	Are separate, private meetings held with the external auditor and internal auditor?  Suggestion that this is completed on an annual basis at the end of the agenda		N	
8.3	Are meetings free and open without political influence being displayed?	Y		
8.4	Are decisions reached promptly?	Y		
8.5	Are agenda papers circulated in advance of meetings to allow adequate preparation by members?	Y		
8.6	Does the committee have the benefit of attendance of appropriate officers at its meetings?	Y		
8.7	Can special meetings be organised to allow a quick response to emergencies?	Y		
8.8	Does External Audit regularly attend meetings and update members on their progress/external audit issues?	Y		
<b>9</b>	<b>Training</b>			
9.1	Is induction training provided to members?	Y		

	Area	Yes	No	Part
9.2	Is more advanced training available as required?	Y		
10	<b>Administration</b>			
10.1	Does the authority's s151 officer or deputy attend meetings?	Y		
10.2	Are key officers available to support the committee?	Y		
10.3	Do reports to the Committee communicate relevant information at the right frequency and in a format that is effective?	Y		



## AUDIT & GOVERNANCE COMMITTEE

THURSDAY 7 JUNE 2018

### REPORT OF THE HEAD OF INTERNAL AUDIT SERVICES

#### INTERNAL AUDIT UPDATE REPORT 2017/18 QUARTER 4 AND ANNUAL REPORT

##### EXEMPT INFORMATION

None

##### PURPOSE

To report on the outcome of Internal Audit's review of the internal control, risk management and governance framework in the 4th quarter and the 2017/18 financial year – to provide members with assurance of the ongoing effective operation of an internal audit function and enable any particularly significant issues to be brought to the Committee's attention.

##### RECOMMENDATION

**That the Committee considers the attached report and raises any issue it deems appropriate.**

##### EXECUTIVE SUMMARY

The Accounts and Audit Regulations 2015 require each local authority to publish an Annual Governance Statement (AGS) with its Annual Statement of Accounts. The AGS is required to reflect the various arrangements within the Authority for providing assurance on the internal control, risk management and governance framework within the organisation, and their outcomes.

One of the sources of assurance featured in the AGS is the professional opinion of the Head of Internal Audit Services on the outcome of service reviews. Professional good practice recommends that this opinion be given periodically throughout the year to inform the Annual Governance Statement. This opinion is given on a quarterly basis to the Audit & Governance Committee.

##### Annual Audit Opinion

"I am satisfied that sufficient internal audit work has been undertaken to allow us to draw a reasonable conclusion as to the adequacy and effectiveness of the organisation's risk management, control and governance processes. Overall in my opinion, based upon the reviews performed during the year, the Authority has:

- adequate and effective risk management arrangements;
- adequate and effective governance; and
- has adequate and effective control processes.

### Specific Issues

No specific issues have been highlighted through the work undertaken by Internal Audit during 2017/18.

### **RESOURCE IMPLICATIONS**

None

### **LEGAL/RISK IMPLICATIONS**

Failure to report would lead to non-compliance with the requirements of the Annual Governance Statement and the Public Sector Internal Audit Standards.

### **SUSTAINABILITY IMPLICATIONS**

None

### **BACKGROUND INFORMATION**

None

### **REPORT AUTHOR**

Angela Struthers, Head of Internal Audit Services

### **LIST OF BACKGROUND PAPERS**

None

### **APPENDICES**

**Appendix 1 Internal Audit Performance Report 2017/18**

**Appendix 2 Percentage of Management Actions Agreed 2017/18**

**Appendix 3 Implementation of Agreed Management Actions 2017/18**

## **INTERNAL AUDIT REPORT – 4th QUARTER - 2017/18**

### **1. INTRODUCTION**

Internal Audit is an independent, objective assurance and consulting activity designed to add value and improve an organisation's operations. It helps an organisation accomplish its objectives by bringing a systematic, disciplined approach to evaluate and improve the effectiveness of risk management, control and governance processes. (Public Sector Internal Audit Standards)

Internal Audit's role is to provide independent assurance to the Council that systems are in place and are operating effectively.

Every local authority is statutorily required to provide an adequate and effective internal audit function. The Internal Audit service provides this function at this Authority.

This brief report aims to ensure that Committee members are kept aware of the arrangements operated by the Internal Audit service to monitor the control environment within the services and functions of the authority, and the outcome of that monitoring. This is to contribute to corporate governance and assurance arrangements and ensure compliance with statutory and professional duties, as Internal Audit is required to provide periodic reports to "those charged with governance".

### **2. PERFORMANCE AND PROGRESSION AGAINST AUDIT PLAN**

The Internal Audit service aims as one of its main Performance Indicators (PI's) to complete work on at least 90% of applicable planned audits by the end of the financial year, producing draft reports on these where possible/necessary. **Appendix 1** shows the progress at the end of 4th quarter of the year of the work completed against the plan and highlights the work completed. The original audit plan identified 45 audits to be completed, the plan has been revised to include 2 additional audits not originally identified on the audit plan and 6 audits that needed to be cancelled for operational reasons. At the end of the 4th quarter of the year, internal audit have commenced/completed 39 audits. This equates to 95% of the revised annual plan (specific reviews). 18 implementation reviews were identified in the original audit plan, the service has completed 29 up to the end of the fourth quarter of the financial year.

The service also reports quarterly on the percentage of draft reports issued within 15 working days of the completion of fieldwork. All (100%) of the draft reports issued in this quarter of the year were issued within this deadline.

### **3. AUDIT REVIEWS COMPLETED 2017/18**

**Appendix 2** details the number of recommendations made. A total of 28 recommendations were made in the fourth quarter with 25 (89%) of the recommendations being accepted by management. There was one high priority recommendation not accepted, this related to emergency planning training records. Training completed had been recorded on HR files but not recorded on the

Emergency Planning Officer's records. The recommendation was that the records be maintained in one place and updated. Management rejected the recommendation as two records still need to be maintained, however they will ensure that both records will be correct.

The service revisits areas it has audited around 6 months after agreeing a final report on the audit, to test and report to management on the extent to which agreed actions have been taken. One implementation review and six 2<sup>nd</sup> implementation reviews were completed during the 4th quarter of 2017/18. **Appendix 3** details the implementation progress to date for the 4th quarter of the financial year with 18% (2/11) implemented/partially implemented at 1<sup>st</sup> implementation review and 24% (6/25) implemented/partially implemented at 2<sup>nd</sup> implementation review. Eight recommendations not implemented at 1<sup>st</sup> implementation review and 11 recommendations not implemented at 2<sup>nd</sup> implementation review were high priority and management have agreed revised implementation dates for all outstanding recommendations. The recommendations not implemented at 1<sup>st</sup> implementation review have arisen from the audit of Mobile Devices. The implementation of the recommendations has been delayed as they form part of the Local Governance Policy Framework review. Of the 11 recommendations not implemented at the 2<sup>nd</sup> implementation review, 7 related to the audit of IT disaster recovery and have been delayed until after significant ICT infrastructure changes have been made. In addition, significant resources within the team have been deployed on the implementation of GDPR compliance given the enforcement date of 25<sup>th</sup> May 2018. The remaining 4 related to policies to be implemented/updated (2 RIPA and 2 travel & subsistence).

Year End Summary Information 2017/18		Target
Percentage of Audit Plan completed	95%	90%
Draft reports issued within 15 working days	100%	100%
Percentage of recommendation accepted by management	97%	97%
Percentage of recommendations due implemented	72%	-

#### 4. INDEPENDENCE OF THE INTERNAL AUDIT ACTIVITY

Attribute Standards 1110 to 1130 in the Public Sector Internal Audit Standards require that Internal Audit have organisational and individual independence, and specifically state that the head of Internal Audit Services must confirm this to the Audit & Governance Committee at least annually. As performance is reported quarterly, this confirmation will be provided quarterly.

The Head of Internal Audit Services confirms that Internal Audit is operating independently of management and is objective in the performance of internal audit work.

#### 5 DEVELOPMENTS DURING 2017/18

During 2017/18, Internal Audit has carried out the following:

- Completed the annual risk based audit plan in accordance with the Public Sector Internal Audit Standards;
- Produced a Quality Assurance and Improvement Programme;
- Given an assurance opinion for each audit completed, and a revised opinion on the completion of implementation reviews based upon Internal Audit's assessment of the control environment;
- Reported quarterly to the Audit & Governance Committee on progress against the audit plan;
- Continued to work with management to develop risk management;
- Provided an opinion on the internal control environment for the Annual Governance Statement;
- Continued to complete service enhancements mainly through the use of the Pentana Audit Module;
- Continued to Provide Audit Management Services to Lichfield District Council.

## **6 DEVELOPMENTS FOR 2018/19**

The work of the Internal Audit Service will continue to be driven by the regulatory requirements of local government finance and the corporate and operational risks facing the Council. The Service is always looking to continuously improve its service and add value to management through regular audit to improve internal controls and identify efficiencies in their services. During 2018/19 we will complete the following:

- Comply with the Public Sector Internal Audit Standards; after the recently completed external assessment of the service, complete the service improvements identified;
- Complete the internal audit plan in accordance with the performance indicators;
- Continue to work with management to improve risk management;
- Continue to complete service enhancements to provide an efficient service;
- Continue to provide Internal Audit Management service to Lichfield District Council.

## **OVERALL CURRENT INTERNAL AUDIT OPINION**

"I am satisfied that sufficient internal audit work has been undertaken to allow us to draw a reasonable conclusion as to the adequacy and effectiveness of the organisation's risk management, control and governance processes. Overall in my opinion, based upon the reviews performed during the year, the Authority has:

- adequate and effective risk management arrangements;
- adequate and effective governance; and
- has adequate and effective control processes."

### Specific issues:

There were no specific issues highlighted through the work of Internal Audit in the fourth quarter of the 2017/18 financial year that would need to be highlighted as a corporate risk

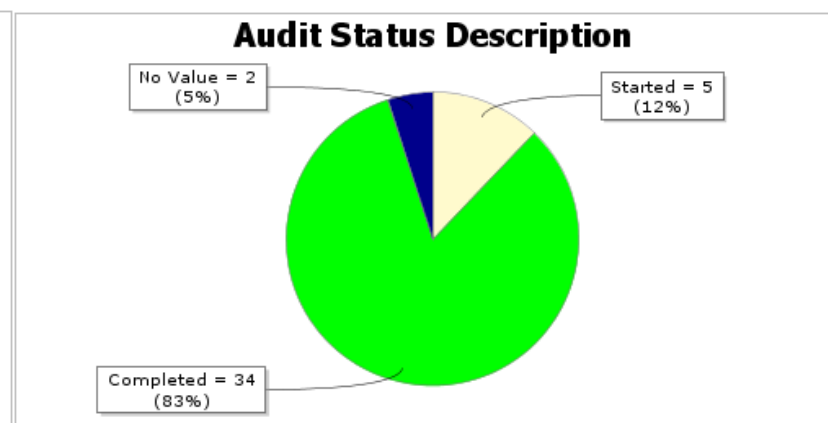
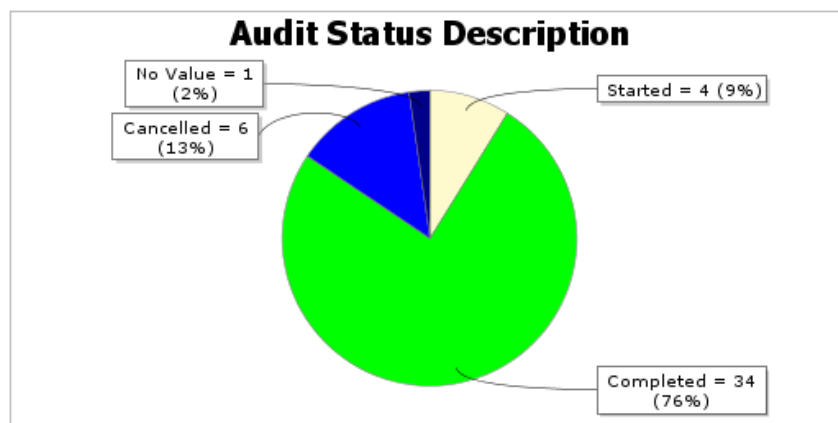
Angela Struthers,  
Head of Internal Audit Services

# Internal Audit Performance Report 2017/18

**Report Type:** Audit File Report  
**Report Author:** Angela Struthers  
**Generated on:** 18 May 2018

**Original Plan**

**Revised Plan**



Page 111

NB No value = not started

Title	Directorate Description	Audit Status Icon	Audit Status Description	Audit Assurance Type Title	Audit Assurance Level Status Icon
Housing Services	Housing & Health	✓	Started	Risk based review	
Insurance	Finance	✓	Completed	System based review	✓
Housing Repairs – Final Accounts	Housing & Health	✓	Completed	Main financial system – interim	

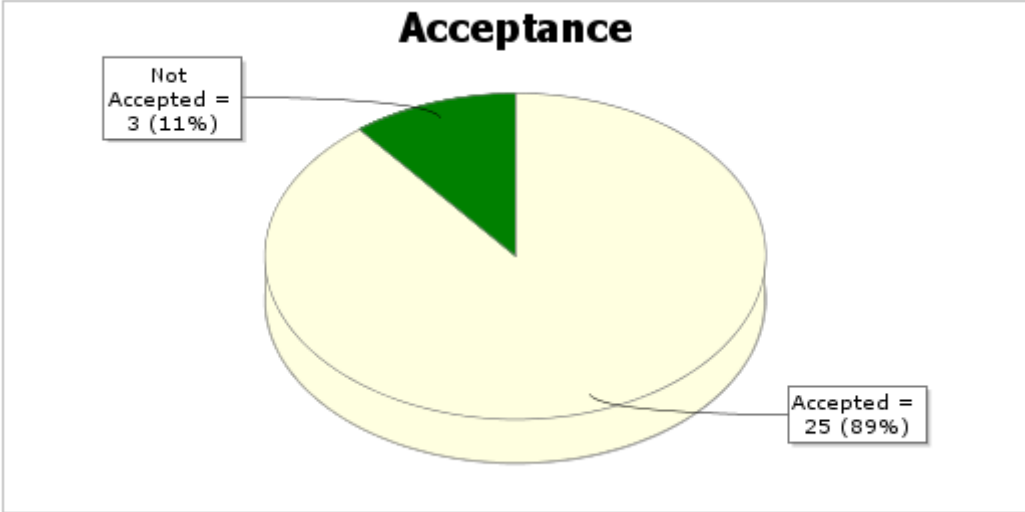
Title	Directorate Description	Audit Status Icon	Audit Status Description	Audit Assurance Type Title	Audit Assurance Level Status Icon
Main Accounting & Budgetary Control	Finance	✔	Completed	Main financial system – full	✔
Creditors & Procurement – Interim	Finance	✔	Completed	Main financial system – interim	✔
Debtors	Finance	✔	Completed	Main financial system – full	✔
Council Tax	Finance	✔	Completed	Main financial system – interim	✔
NNDR	Finance	✔	Completed	Main financial system – interim	✔
Payroll	Transformation & Corporate Performance	✔	Completed	Main financial system – interim	✔
Bank Reconciliation & Cash Collection	Finance	✔	Completed	Main financial system – interim	✔
Housing & Council Tax Benefits	Finance	✔	Completed	Main financial system – interim	✔
Capital Strategy & Programme Management	Finance	✔	Completed	Main financial system – full	✔
Housing Rents	Housing & Health	✔	Completed	Main financial system – interim	✔
Property Contracts QTR 1	Assets & Environment	✔	Completed	Main financial system – interim	✔
Property Contracts QTR 2	Assets & Environment	✔	Completed	Main financial system – interim	⚠
Property Contracts QTR	Assets & Environment	✔	Completed	Main financial system –	⚠



Title	Directorate Description	Audit Status Icon	Audit Status Description	Audit Assurance Type Title	Audit Assurance Level Status Icon
3				interim	
Property Contracts QTR 4	Assets & Environment	✔	Completed	Main financial system – interim	⚠
Housing Repairs – New Contract	Housing & Health	✔	Started	Additional System Based Review	
Scheme of Delegation	Solicitor & Monitoring Officer	✔	Completed	Risk based review	⚠
Democratic Services business continuity arrangements	Solicitor & Monitoring Officer	✔	Completed	System based review	
VAT	Finance	✔	Completed	Risk based review	✔
Time Recording & Absence Management	Transformation & Corporate Performance	✔	Completed	Risk based review	⚠
Community Wardens – Health & safety	Assets & Environment	✔	Completed	Risk based review	✔
Equalities	Transformation & Corporate Performance	✔	Started	System based review	
Safeguarding	Solicitor & Monitoring Officer	✔	Completed	System based review	⚠
Emergency Planning	Corporate	✔	Completed	System based review	⚠
Network Controls	Technology & Corporate Programmes	✔	Completed	Information Technology	✔
EFin Application Review	Technology & Corporate Programmes	✔	Started	Information Technology	
Websites	Technology & Corporate	✔	Completed	Information Technology	✔

Title	Directorate Description	Audit Status Icon	Audit Status Description	Audit Assurance Type Title	Audit Assurance Level Status Icon
	Programmes				
Orchard Application Review	Technology & Corporate Programmes	✔	Completed	Information Technology	✔
Pension Contributions End of year 2016/17	Transformation & Corporate Performance	✔	Completed	Transactional	✔
DFG Testing	Assets & Environment	✔	Completed	Transactional	✔
Municipal Charities	Corporate	✔	Completed	Transactional	
Treasury Management QTR 4 2016/17	Finance	✔	Completed	Main financial system – interim	✔
Treasury Management QTR 1 2017/18	Finance	✔	Completed	Main financial system – interim	✔
Treasury Management QTR 2 2017/18	Finance	✔	Completed	Main financial system – interim	✔
Treasury Management QTR 3 2017/18	Finance	✔	Completed	Main financial system – interim	✔
Pension Contributions Interim Testing	Transformation & Corporate Performance	✔	Completed	Transactional	✔
Street Scene	Assets & Environment	✔	Started	Risk based review	
Commercial & Industrial Properties	Assets & Environment			Consultancy	
GDPR	Technology & Corporate Programmes			Additional System Based Review	

### Percentage of Management Actions Agreed 2017/18 Quarter 4



Page 115

Audit Recommendation Code & Title	Audit Recommendation Priority	Audit Recommendation Acceptance
1718 EP 2.01 Website Checks	Medium Priority	Not Accepted
1718 EP 3.02 Training Records	High Priority	Not Accepted
1718 EP 6.01 Minutes	Medium Priority	Not Accepted

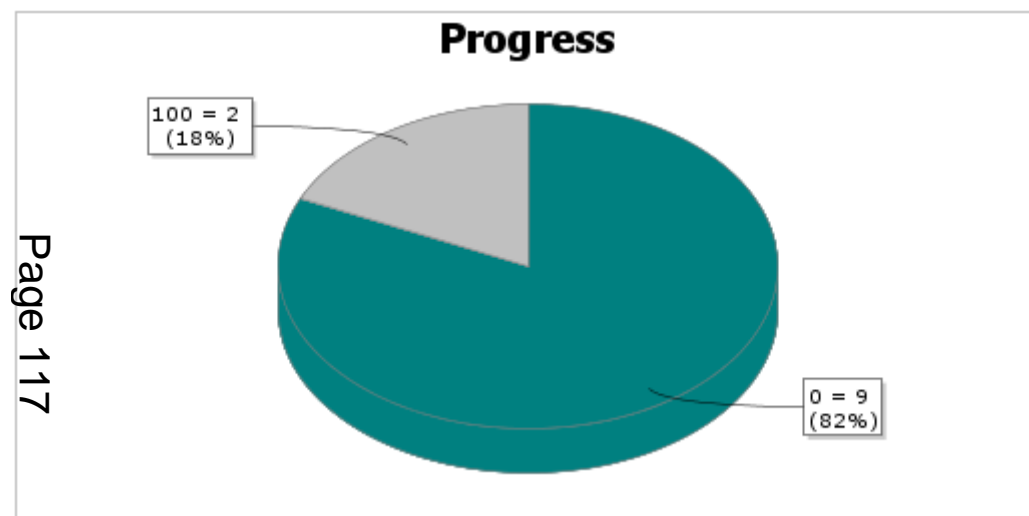
This page is intentionally left blank

## First Implementation Review 2017/18 Quarter 4

**Report Type:** Audit Recommendations Report

**Report Author:** Angela Struthers

**Generated on:** 24 April 2018



### Priority High Priority

Audit Recommendation Code & Title	Audit Recommendation Progress Bar	Audit Recommendation	Audit Implementation Review Note	Assigned To
1617 MD01 Management oversight	0%	Reports should be issued to management detailing the level of uptake, any devices lost that could potentially contain sensitive official data together	<b>February 2018 – Not Implemented</b> BYOD/Mobile Device policy is	Gareth Youlden

Audit Recommendation Code & Title	Audit Recommendation Progress Bar	Audit Recommendation	Audit Implementation Review Note	Assigned To
		with details of estimates of savings made through the programme.	being reviewed/updated as part of an ICT governance process review. As part of this we will implement a more formal approach to tracking BYOD use.  Previous implementation date October 2017	
1617 MD02 User Training	0%	The BYOD initiative does have specific training requirements with regard to the differential between personal and business use. End users should be informed of these differences and advised of changes as they materialise.	<b>February 2018 – Not Implemented</b>  BYOD/mobile device policy is being reviewed/updated as part of an ICT governance process review. As part of this we will be putting together the training presentation as per original response  Previous implementation date December 2017	Gareth Youlden
1617 MD03 Legal compliance	0%	Reference should be made in the policy that if for any reason data is held locally then it must comply with all legal and data protection legislation. Together with the authority having permission in respect of search and seizure law if required.	<b>February 2018 – Not Implemented</b>  BYOD/Mobile Device policy is being reviewed/updated as part of an ICT governance process review.	Nicola Hesketh; Gareth Youlden

Audit Recommendation Code & Title	Audit Recommendation Progress Bar	Audit Recommendation	Audit Implementation Review Note	Assigned To
1617 MD04 Risk assessment	0%	BYOD should be risk assessed and an entry recorded in the corporate risk register if required.	<p>Previous implementation date October 2017</p> <p><b>February 2018 – Not Implemented</b></p> <p>Information Services risk register will be updated as part of policy review</p>	Gareth Youlden
1617 MD05 BYOD Policy	0%	The policy should be reviewed to ensure that it is robust, fit for purpose, and formally approved. It should then be rolled out to all users and reviewed on an annual basis.	<p>Previous implementation date October 2017</p> <p><b>February 2018 – Not Implemented</b></p> <p>As per original response, governance review on-going</p>	Gareth Youlden
1617 MD09 Network access	0%	The policy in respect of mobile devices should be updated to include a requirement to attach to the network on a regular basis. With any that do not attach for a period of 90 days to be investigated further to ensure that they are still held by the individuals concerned	<p>Previous implementation date October 2017</p> <p><b>February 2018 – Not Implemented</b></p> <p>Looking at ways to best implement a process of patch management for mobile devices which do not connect regularly to the network. Once agreed, the approach/policy will be included</p>	Gareth Youlden

Audit Recommendation Code & Title	Audit Recommendation Progress Bar	Audit Recommendation	Audit Implementation Review Note	Assigned To
			<p>in governance review. In the interim we have been recalling laptops for essential security updates.</p> <p>Previous implementation date October 2017</p>	
<p>1617 MD10 Termination of Employment</p>	<p>0%</p>	<p>IT are included in the monthly HR notification issued in advance of all persons leaving the authority and this should be used as the basis to prompt the notification to line managers of devices held by those persons. A review of any mobile devices held can be made and copies of the declaration forms held forwarded to the relevant line manger to ensure the return of all items held.</p>	<p><b>February 2018 – Partially Implemented</b></p> <p>Has been included in the new starters and leavers policy/process currently being reviewed/signed off by ICT mgmt.</p> <p>Previous implementation date December 2017</p>	<p>Gareth Youlden</p>
<p>1617 MD11 Register of approved users</p>	<p>0%</p>	<p>A register of approved users to the scheme should be drawn up and updated on an ongoing basis. Together with a returned signed declarations of acceptance of the conditions of use.</p>	<p><b>February 2018 – Not Implemented</b></p> <p>BYOD register will be completed as part of policy review. This will include signed conditions of use agreement similar to the mobile device terms and conditions agreement already in place for corporately issued mobile devices.</p>	<p>Gareth Youlden</p>



Audit Recommendation Code & Title	Audit Recommendation Progress Bar	Audit Recommendation	Audit Implementation Review Note	Assigned To
			Previous implementation date October 2017	

**Priority** Medium Priority

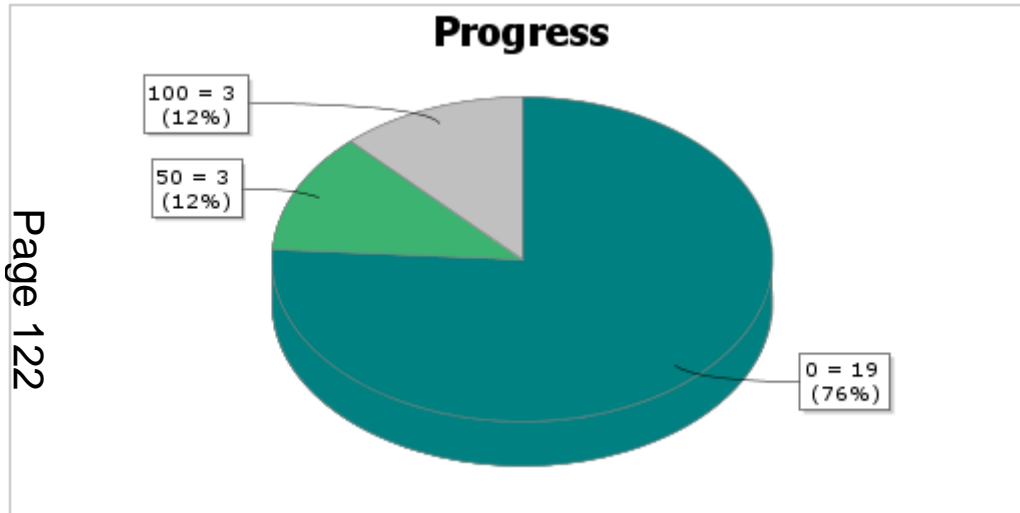
Audit Recommendation Code & Title	Audit Recommendation Progress Bar	Audit Recommendation	Audit Implementation Review Note	Assigned To
1617 MD07 Register of approved users	<input type="text" value="0%"/>	Once a register of BYOD users is drawn up this should be periodically reconciled to the devices officially supplied by the authority.	<b>February 2018 – Not Implemented</b>  As per original response, BYOD register will be completed as part of policy review.  Previous implementation date December 2017	Gareth Youlden

## Further Implementation Review 2017/18 Quarter 4

**Report Type:** Audit Recommendations Report

**Report Author:** Angela Struthers

**Generated on:** 24 April 2018



### Priority High Priority

Audit Recommendation Code & Title	Audit Recommendation Progress Bar	Audit Recommendation	Audit Implementation Review Note	Assigned To
1516 ICTDR 1.1 Business Impact Analysis	0%	The Business Impact Analysis (BIA) should be stored with other reviews. Additionally the BIA should be used to identify critical IT systems / data and priorities relating to the order and	<b>February 2018 – Not Implemented</b> DR testing and associated activities postponed due to significant ICT	Gareth Youlden

Audit Recommendation Code & Title	Audit Recommendation Progress Bar	Audit Recommendation	Audit Implementation Review Note	Assigned To
		<p>timescales for recovery. A recommendation is made below regarding recording the priority list and approval process.</p>	<p>infrastructure changes including new backup solution. BIA + DR/BC plans will all be reviewed and updated as part of the DR testing in April 2018</p> <p>Previous implementation date December 2017</p> <hr/> <p><b>May 2017 – Not Implemented</b></p> <p>The Civil Contingencies Officer is currently carrying out Business Impact Assessments with Heads of Service</p> <p>The current review of IT DR Plan will consider these BIA's and plans</p> <p>Previous implementation date March 2017</p>	
<p>1516 ICTDR 1.2 List of IT systems</p>	<p>0%</p>	<p>The list of critical IT systems / data should be approved by the Civil Contingencies &amp; Corporate Business Continuity Group. This should include timescales for recovery. This list should be reviewed formally at least annually.</p>	<p><b>February 2018 – Not Implemented</b></p> <p>DR testing and associated activities postponed due to significant ICT infrastructure changes including new backup solution. BIA plans will be reviewed and updated as part of the DR testing in April 2018</p> <p>Previous implementation date</p>	<p>Gareth Youlden</p>

Audit Recommendation Code & Title	Audit Recommendation Progress Bar	Audit Recommendation	Audit Implementation Review Note	Assigned To
			<p>December 2017</p> <p><b>May 2017 – Not Implemented</b></p> <p>Updated DR plan including critical system list from BIA and outcomes from the DR testing this year for system recovery timescales will be reviewed and approved by CC and CBCG</p> <p>Previous implementation date September 2016</p>	
<p>6 ICTDR 2.1 Errors in ICT DR plan</p>	<p>0%</p>	<p>Steps should be taken to correct the errors that exist in the current ICT DR plan (Document “E5 – TBCIUBCP20705 – Business Continuity Plan”). The inclusion of the following should also be actioned:</p> <ul style="list-style-type: none"> <li>- ICT staff contact details.</li> <li>- How access to the Walsall MBC site “out of hours” will be achieved.</li> <li>- How access to the off-site backup tape location (TIC) will be achieved.</li> </ul>	<p><b>February 2018 – Not Implemented</b></p> <p>DR testing and associated activities postponed due to significant ICT infrastructure changes including new backup solution. ICT DR plan will be reviewed and updated as part of the DR testing in April 2018</p> <p>Previous implementation date September 2017</p> <p><b>May 2017 – Not Implemented</b></p> <p>Walsall MBC contract currently under review, once complete the DR plan will be updated to correct errors/</p>	<p>Gareth Youlden</p>

Audit Recommendation Code & Title	Audit Recommendation Progress Bar	Audit Recommendation	Audit Implementation Review Note	Assigned To
			omissions as per recommendation.	
1516 ICTDR 2.2 Access to documents/ files	0%	Steps should be taken to ensure files / documents can be accessed in a genuine emergency. The use of encrypted memory sticks should be considered. Also the arrangements to gain access to the external data centre should be finalised.	<p>Previous implementation date December 2016</p> <p><b>February 2018 – Not Implemented</b></p> <p>Walsall contract now formalised with details of OOH access included. Essential DR/BC information will be stored in tape safe at Ankerside. Documentation needs to be updated after on-going infrastructure/backup changes due for completion March 2018</p> <p>Previous implementation date September 2017</p> <p><b>May 2017 – Not Implemented</b></p> <p>Walsall MBC contract/arrangements currently under review, access to be formally agreed as part of this. DR plan and associated documents will be stored (encrypted) in the cloud for accessibility.</p> <p>Previous implementation date</p>	Gareth Youlden

Audit Recommendation Code & Title	Audit Recommendation Progress Bar	Audit Recommendation	Audit Implementation Review Note	Assigned To
1516 ICTDR 2.4a Alternative site	0%	The use of the Depot as an alternative site will need to be fully reviewed / formalised post completion of the BIA work currently underway.	<p>October 2016</p> <p><b>February 2018 – Not Implemented</b></p> <p>Depot review will be carried out post DR testing/BIA update including options for internet provision</p> <p>Previous implementation date December 2017</p> <hr/> <p><b>May 2017 – Not Implemented</b></p> <p>Usage of the depot as a DR site will be formally reviewed and gap analysis produced after BIA complete</p> <p>Previous implementation date September 2016</p>	Gareth Youlden
1516 ICTDR 3.1 Testing DR Recovery	0%	<p>The approach to testing DR recovery should be re-visited to include the following:</p> <ul style="list-style-type: none"> <li>- DR testing should be an annual event. Rotating service involvement will ensure managers / service users gain some experience / knowledge.</li> <li>- Scope of testing to be completed by Service users and ICT.</li> <li>- ICT should sense check the testing completed by Service Users and comment accordingly.</li> </ul>	<p><b>February 2018 – Not Implemented</b></p> <p>DR testing and associated activities postponed due to significant ICT infrastructure changes including new backup solution. All recommendations will be included into plans for DR testing in April 2018</p>	Gareth Youlden

Audit Recommendation Code & Title	Audit Recommendation Progress Bar	Audit Recommendation	Audit Implementation Review Note	Assigned To
		<ul style="list-style-type: none"> <li>- Tests (Service / ICT) should be documented and signed off. This should be retained accordingly.</li> <li>- The tracking of issues and future actions should be formalised. Significant updates should be reported to the Civil Contingencies &amp; Corporate Business Continuity Group.</li> </ul> <p>This should be documented and agreed by the Civil Contingencies &amp; Corporate Business Continuity Group.</p>	<p>Previous implementation date December 2017</p> <hr/> <p><b>May 2017 – Not Implemented</b></p> <p>Previous implementation date March 2017</p>	
<p>16 ICTDR 5.1 IT Elements of service unit plans</p>	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0%</div>	<p>There is a need to ensure the IT elements of Service Unit plans are brought up to date and include sufficient detail.</p>	<p><b>February 2018 – Not Implemented</b></p> <p>Reviews of service continuity plans will be better carried out post DR testing given the significant changes to ICT infrastructure and backup solution since the last test.</p> <p>The Emergency Planning officer from CCU has started on business continuity and will be working on this area.</p> <p>Previous implementation date September 2017</p> <hr/> <p><b>May 2017 – Not Implemented</b></p>	<p>Nicki Burton</p>

Audit Recommendation Code & Title	Audit Recommendation Progress Bar	Audit Recommendation	Audit Implementation Review Note	Assigned To
			<p>The Civil Contingencies Officer is currently carrying out Business Impact Assessments with Heads of Service which will contribute to the revision and compilation of updated Business Continuity Plans. The current review of IT DR Plan will consider these BIA's and plans.</p> <p>Previous implementation date December 2016</p>	
1516 RIPA 2.3 Social Media	0%	Officers who use social media for identifying, monitoring or surveillance of individuals should be authorised to have the relevant access and record all use of the sites with relevant reasons as to why it has been used. This record should be forwarded to the Solicitor to the Council on a regular basis to ensure that there is no breach of legislation.	<p><b>January 2018 – Not Implemented</b></p> <p>To be taken to CMT to assign responsibility for policy development.</p> <p>Previous implementation date December 2017</p> <p><b>May 2017 – Not Implemented</b></p> <p>No policy in existence.</p> <p>Previous implementation date March 2017</p>	Jane Hackett
1516 RIPA 3.1 Surveillance outside RIPA	0%	The responsibility for developing a monitoring at work policy is assigned and the policy is written, approved and circulated.	<p><b>January 2018 – Not Implemented</b></p> <p>No action taken. To be taken to CMT for discussion.</p>	Jane Hackett



Audit Recommendation Code & Title	Audit Recommendation Progress Bar	Audit Recommendation	Audit Implementation Review Note	Assigned To
			<p>Previous implementation date December 2017</p> <hr/> <p><b>May 2017 – Not Implemented</b></p> <p>No action commenced in this area</p> <p>Previous implementation date – December 2016</p>	
1617 T&S 2.01 Policy	<input data-bbox="331 639 533 679" type="text" value="0%"/>	The policy is updated and distributed as detailed.	<p><b>January 2018 – Not Implemented</b></p> <p>There have been no changes since the previous audit.</p> <p>Previous implementation date December 2017</p> <hr/> <p><b>April 2017 – Not Implemented</b></p> <p>Although the policy has been distributed through NetConsent it has not been updated.</p> <p>Original due date December 2016</p>	<p><del>Christie Tims;</del> Zoe Wolicki</p>
1617 T&S 2.02 Policy	<input data-bbox="331 1139 533 1179" type="text" value="0%"/>	The policy is reviewed for accuracy and relevantly amended.	<p><b>January 2018 – Not Implemented</b></p> <p>It is understood that amendments have been made to the policy but as yet the policy has not been through the approval process.</p>	<p><del>Christie Tims;</del> Zoe Wolicki</p>

Audit Recommendation Code & Title	Audit Recommendation Progress Bar	Audit Recommendation	Audit Implementation Review Note	Assigned To
-----------------------------------	-----------------------------------	----------------------	----------------------------------	-------------

Previous implementation date  
December 2017

---

**April 2017 – Not Implemented**

No amendments have been made to the policy to correct the inaccuracies.

Original due date December 2016

---

**February 2018 – Partially implemented**

Updated policy currently being reviewed and signed off by ICT management team

Previous implementation date  
September 2017

---

Priority Medium Priority

Audit Recommendation Code & Title	Audit Recommendation Progress Bar	Audit Recommendation	Audit Implementation Review Note	Assigned To
1516 ICTDR 1.3 IT resource requirements	0%	The requirements for other IT resources i.e. workstations, printers, telephones etc. should be tracked and recorded as an action once the current BIA is completed.	<p><b>February 2018 – Not Implemented</b></p> <p>Gareth Youlden</p> <p>DR testing and associated activities postponed due to significant ICT infrastructure changes including new backup solution. BIA including IT resource requirements will be reviewed and updated as part of the DR testing in April 2018</p> <hr/> <p>Previous implementation date December 2017</p> <p><b>May 2017 – Not Implemented</b></p> <p>Will be considered on completion of the BIA's</p> <hr/> <p>Previous implementation date December 2016</p>	Gareth Youlden
1516 ICTDR 2.3 ICT DR Plan update	0%	The approval box for the ICT DR plan (Document "E5 – TBCIUBCP20705 – Business Continuity Plan") should be updated in line with reviews and changes to staff as necessary. This document should be reviewed / signed off annually as being accurate / approved.	<p><b>February 2018 – Not Implemented</b></p> <p>Nicki Burton</p> <p>Assigned to NB although DR testing and associated activities postponed due to significant ICT infrastructure changes including</p>	Nicki Burton

Audit Recommendation Code & Title	Audit Recommendation Progress Bar	Audit Recommendation	Audit Implementation Review Note	Assigned To
			<p>new backup solution. ICT DR plan will be reviewed and updated as part of the DR testing in April 2018.</p> <p>Previous implementation date September 2017</p> <p><b>May 2017 – Not Implemented</b></p> <p>This is being reviewed and updated as part of the wider information services governance review. Will also be reviewed and updated annually/in line with changes as per recommendation.</p> <p>Previous implementation date December 2016</p>	
<p>1516 ICTDR 2.4b Depot Internet Access</p>	<p>0%</p>	<p>Steps should be taken to ensure internet access for any critical activities / services are available should the Depot be used as an alternative location.</p>	<p><b>February 2018 – Not Implemented</b></p> <p>Internet options will be looked at as part of Depot review post DR testing</p> <p>Previous implementation date December 2017</p>	<p>Gareth Youlden</p>

Audit Recommendation Code & Title	Audit Recommendation Progress Bar	Audit Recommendation	Audit Implementation Review Note	Assigned To
			<p><b>May 2017 – Not Implemented</b></p> <p>Usage of the depot as a DR site will be formally reviewed and gap analysis produced after BIA complete.</p> <p>Previous implementation date September 2016</p>	
<p>1516 ICTDR 2.5 Recovery Procedures</p>	<p>0%</p>	<p>Recovery procedures should be documented for all key services / applications.</p>	<p><b>February 2018 – Not Implemented</b></p> <p>DR testing and associated activities postponed due to significant ICT infrastructure changes including new backup solution. Recovery procedures will all be reviewed and updated as part of the DR testing in April 2018</p> <p>Previous implementation date December 2017</p> <p><b>May 2017 – Not Implemented</b></p> <p>Recovery procedures will be updated as part of DR testing this year.</p>	<p>Gareth Youlden</p>

Audit Recommendation Code & Title	Audit Recommendation Progress Bar	Audit Recommendation	Audit Implementation Review Note	Assigned To
1516 ICTDR 5.2a Timetable of plans	0%	A schedule / timetable of plans, including review dates, should be documented and presented to the Civil Contingencies & Corporate Business Continuity Group.	Previous implementation date March 2017 <hr/> <b>May 2017 – Not Implemented</b>  Previous implementation date October 2016 <hr/> <b>February 2018 – Not Implemented</b>	Nicki Burton
			Reviews of service continuity plans will be better carried out post DR testing given the significant changes to ICT infrastructure and backup solution since the last test.	
			The Emergency Planning officer from CCU has started on business continuity and will be working on this area.	
			Previous implementation date June 2017 <hr/> <b>May 2017 – Not Implemented</b>	
			The Corporate Business Continuity Strategy has recently been endorsed by CMT, and contains a commitment to active	

Audit Recommendation Code & Title	Audit Recommendation Progress Bar	Audit Recommendation	Audit Implementation Review Note	Assigned To
			<p>testing of all plans. The strategy is being rolled out to the organisation as part of the Business Continuity Awareness Week campaign and will be formally discussed at the inaugural Corporate Business Continuity Group scheduled June 17 .</p> <p>Previous implementation date December 2016</p>	
16 ITrent 3.2 Audit log tables	0%	A periodic review of the sizes of the audit log tables should be completed. Evidence of such reviews should be evidenced and records of sizes recorded.	<p><b>February 2018 – Not Implemented</b></p> <p>No further progress, need to revisit this recommendation to understand if still relevant.</p> <p>Previous implementation date June 2017</p> <p><b>February 2017 – NOT IMPLEMENTED</b></p> <p>Need to review the audit log to see what information is logged in order to decide how often this would be reviewed.</p> <p>Original implementation date:</p>	Gareth Youlden

Audit Recommendation Code & Title	Audit Recommendation Progress Bar	Audit Recommendation	Audit Implementation Review Note	Assigned To
1516 ITrent 4.2 System Checker	0%	Steps should be taken to formalise the approach to application capacity and performance management. A review of the System Checker functionality should be completed to see how this can assist with this issue.	<p>31st March 2016</p> <p><b>February 2018 – Not Implemented</b></p> <p>No further progress, task raised on applications support team work plan covering a review of system checker functionality</p> <p>Previous implementation date June 2017</p> <p><b>February 2017 – NOT IMPLEMENTED</b></p> <p>Capacity management is being reviewed as part of ICT policy update. Will look into System Checker functionality to see what this can do.</p> <p>Original implementation date: 31st March 2016</p>	Gareth Youlden
1516 ITrent 6.1 Recovery procedures	0%	Restart / recovery procedures should be documented by ICT and Service Users.	<p><b>February 2018 – Not Implemented</b></p> <p>DR Test postponed due to IT infrastructure changes, now scheduled for April 2018. Documentation will be updated.</p> <p>Previous implementation date</p>	Gareth Youlden



Audit Recommendation Code & Title	Audit Recommendation Progress Bar	Audit Recommendation	Audit Implementation Review Note	Assigned To
			<p>December 2017</p> <hr/> <p><b>February 2017 – NOT IMPLEMENTED</b></p> <p>Another disaster recovery test is to be carried out, which iTrent is to be included. Once the testing has been completed, will seek to document the restart and recovery procedures.</p> <p>Original implementation date: 31st March 2017</p>	

This page is intentionally left blank

## AUDIT & GOVERNANCE COMMITTEE

7 June 2018

### Report of the Head of Internal Audit Services

#### INTERNAL AUDIT CUSTOMER SATISFACTION SURVEY 2017/18

##### EXEMPT INFORMATION

None

##### PURPOSE

To report on the outcome of Internal Audit's customer satisfaction survey.

##### RECOMMENDATION

**That the Committee considers this report and raises any issue it deems appropriate.**

##### EXECUTIVE SUMMARY

Public Sector Internal Audit Standard (PSIAS) 1300 requires the development and maintenance of a Quality Assurance and Improvement Programme (QAIP). The Institute of Internal Auditors (IIA) guidance for the development of a QAIP states that as part of the Quality Assurance process, on-going monitoring should be completed on an audit by audit basis (achieved by reviewing work completed by the auditor) supported by other additional mechanisms including acquiring feedback from audit clients and other stakeholders. To fulfil this requirement, we send out a short questionnaire at the end of each audit assignment. The results of the questionnaire are detailed in the table below. We wanted to keep the questionnaire short to gather the information that was important for us to know and to ensure that management time was not taken in completing them. In total, we received 28 questionnaires back.

The questionnaire asked three questions relating to the delivery of the internal audit service and details along with the average scores are shown below:

<b>Question</b>	<b>2017/18</b>	<b>2016/17</b>
	<b>Average score (Max 5)</b>	<b>Average score (Max 5)</b>
The scope of the audit reflected the risks in the area.	3.9	4.5
The audit added value to your departments operations by assisting in improving your business processes and internal controls.	3.9	4.1
The audit findings were accurate and led to constructive recommendations.	3.9	4.1

The results of the questionnaires show that the Internal Audit Service is performing well with all scores above average.

#### **RESOURCE IMPLICATIONS**

None

#### **LEGAL/RISK IMPLICATIONS**

Failure to report would lead to non-compliance with the requirements of the Annual Governance Statement and the Public Sector Internal Audit Standards.

#### **SUSTAINABILITY IMPLICATIONS**

None

#### **BACKGROUND INFORMATION**

None

#### **REPORT AUTHOR**

Angela Struthers, Head of Internal Audit Services ex 234

#### **LIST OF BACKGROUND PAPERS**

None

#### **APPENDICES**

THURSDAY, 7 JUNE 2018

**REPORT OF THE HEAD OF INTERNAL AUDIT SERVICES**

**PUBLIC SECTOR INTERNAL AUDIT STANDARDS/QUALITY ASSURANCE &  
IMPROVEMENT PROGRAMME**

**EXEMPT INFORMATION**

None

**PURPOSE**

To report on the compliance with the Public Sector Internal Audit Standards and the Quality Assurance & Improvement Programme (as required by the Public Sector Internal Audit Standards).

**RECOMMENDATIONS**

**That the Committee endorses:**

- **The compliance with the Public Sector Internal Audit Standards; and**
- **The Quality Assurance & Improvement Programme.**

**EXECUTIVE SUMMARY**

The Public Sector Internal Audit Standards (PSIAS) came in to force on the 1<sup>st</sup> April 2013. Compliance with the PSIAS is required under the Accounts & Audit Regulations 2015. The PSIAS require that Internal Audit comply with professional best practice and assess themselves against the requirements on an annual basis and that an External Quality Assessment (EQA) should be completed at least every five years. The EQA was completed in 2017 and reported to this Committee. An overview of Compliance with the PSIAS is attached at **Appendix 1**.

Part of the requirement of the PSIAS is for the Head of Internal Audit Services to develop a Quality Assurance & Improvement Programme (QAIP). Under the QAIP, quality should be assessed at both an individual audit engagement level as well as at the broader internal audit level. A well-developed QAIP will ensure that quality is built in to rather than on to, the way internal audit activity operates. In essence, Internal Audit should not need to assess whether each individual engagement conforms to the Standards, but that engagements should be undertaken in accordance with an established methodology that promotes quality and, by default, conforms to the Standards.

The QAIP should conclude on the quality of the Internal Audit activity and lead to recommendations for appropriate improvements. It enables an evaluation of:

- Conformance with Definition of Internal Auditing, the Code of Ethics and the Standards;
- The adequacy of the Internal Audit activity's charter, goals, objectives, policies and procedures;
- The contribution to the organisation's governance, risk management and control processes;
- Completeness of coverage of the entire audit universe;
- Compliance with applicable laws, regulations, and government or industry standards to which the Internal Audit activity may be subject;
- The risks affecting the operation of the Internal Audit activity itself;
- The effectiveness of continuous improvement activities and adoption of best practices; and
- Whether the Internal Audit activity adds value, improves the organisation's operations, and contributes to the attainment of objectives.

To achieve comprehensive coverage of all aspects of the Internal Audit activity, a QAIP must effectively be applied at three fundamental levels:

- Internal Audit Engagement Level – self assessment at the Audit Engagement or Operational Level;
- Internal Audit Activity Level – self assessment at the Internal Audit activity or Organisational Level; and
- External Perspective – independent external assessment of the entire Internal Audit activity including Individual Engagements.

Attached as **Appendix 2** is the Quality Assurance & Improvement Programme (QAIP) for the Authority's Internal Audit Service. This gives an overview of the QAIP in place.

## **RESOURCE IMPLICATIONS**

None

## **LEGAL/RISK IMPLICATIONS BACKGROUND**

There is a risk that non-compliance with the PSIAS will mean that an effective system of internal control is not in place and therefore we are not complying with the Accounts and Audit (England) Regulations 2015.

## **SUSTAINABILITY IMPLICATIONS**

None

## **BACKGROUND INFORMATION**

None

## **REPORT AUTHOR**

Angela Struthers, Head of Internal Audit Services

## **LIST OF BACKGROUND PAPERS**

None

## **APPENDICES**

**Appendix 1 Public Sector Internal Audit Standards Compliance Overview**

**Appendix 2 Quality Assurance & Improvement Programme**

This page is intentionally left blank



# Public Sector Internal Audit Standards Compliance Overview

## Mission Statement, Definition of Internal Auditing and Code of Ethics

Mission Statement & Definition of Internal Auditing



Integrity



Objectivity



Confidentiality



Competency



## Performance Standards

### 1000 – 1322 Attribute Standards

#### 1000 – 1110 Purpose, Authority and responsibility







Purpose, Authority, and Responsibility






Recognising Mandatory Guidance in the Internal Audit Charter






1110 – 1130 Independence and Objectivity

Organisational Independence	
Independence and Objectivity	
Direct Interaction with the Board	
Chief Audit Executive Roles Beyond Internal Auditing	
Individual Objectivity	
Impairment to Independence or Objectivity	

1210 – 1230 Proficiency and Due Professional Care

Proficiency	
Due Professional Care	
Continuing Professional Development	

1300 – 1322 Quality Assurance and Improvement Programme (QAIP)

Quality Assurance and Improvement Programme (QAIP)	
Requirements of the Quality Assurance and Improvement Programme	
Internal Assessments	

External Assessments



Reporting on the Quality Assurance and Improvement Programme



Use of Conforms with the International Standards for the Professional Practice of Internal Auditing



Disclosure of Non-conformance



2000 – 2600 Performance Standards

2000 – 2060 Managing the Internal Audit Activity

Managing the Internal Audit Activity



Planning



Communication and Approval



Resource Management



Policies and Procedures



Coordination



Reporting to Senior Management and the Board



2070 External Service Provider and Organisational Responsibility for Internal Audit

External Service Provider and Organisational Responsibility for Internal Audit



2100 – 2130 Nature of Work

Nature of Work



Governance



Risk Management



Control



2200 – 2240 Engagement Planning

Engagement Planning



Planning Considerations



Engagement Objectives



Engagement Scope



Engagement Resource Allocation



Engagement Work Programme



2300 – 2340 Performing the Engagement

Performing the Engagement



Identifying Information



Analysis and Evaluation



Documenting Information



Engagement Supervision



2400 – 2440 Communicating Results

Communicating the Results



Criteria for Communicating



Qualities of Communications



Errors and Omissions



Use of "Conducted in Conformance with the International Standards for the Professional Practice of Internal Auditing"



Engagement Disclosure of Non-conformance



Disseminating Results



2450 Overall Opinions

Overall Opinions



2500 Monitoring Progress

Monitoring Progress



2600 Communicating the Acceptance of Risks

Communicating the Acceptance of Risks



## Internal Audit Services Quality Assurance & Improvement Programme

### 1 Introduction

Internal Audit's Quality Assurance Improvement Programme (QAIP) is designed to provide reasonable assurance to the various stakeholders (the Board, Senior Management, the External Auditor and Operational Managers etc) that Internal Audit:

- Conforms with the Definition of Internal Auditing, the Code of Ethics and the Standards;
- Has an adequate Internal Audit Activity's Charter, Goals, Objectives, Policies and Procedures;
- Contributes to the organisation's governance, risk management and control processes
- Has complete coverage of the audit universe
- Complies with applicable laws, regulations and other standards that the internal audit activity may be subject to
- Has identified the risks affecting the operation of the internal audit activity itself
- Has an effective continuous improvement activity in place and adopts best practice
- Adds value to improve the organisation's operations and contributes to the attainment of the organisation's objectives.

The Chief Audit Executive (CAE) is ultimately responsible for the QAIP, which covers all types of Internal Audit activities, including consultancy. The QAIP must include both internal and external assessments. Internal assessments are both ongoing and periodical and external assessments must be undertaken at least once every five years.

The QAIP is reviewed on an annual basis.

### 2 Internal Assessments

Internal Assessments are made up of both ongoing reviews and periodic reviews.

#### Ongoing reviews

Ongoing reviews provide assurance that the processes in place are working effectively to ensure that quality is delivered on an audit by audit basis. This includes continuous monitoring of:

- Engagement planning and supervision (preapproval of the audit scope, innovative best practices, budgeted hours, and assigned staff),
- Standard working practices (including working paper procedures, sign off, report review, checklists to ensure that the audit process has been followed )
- Feedback from other clients and stakeholders
- Analysing performance metrics to measure audit plan completion and stakeholder value.

#### Periodic reviews

Periodic assessments are designed to assess conformance with Internal Audit's Charter, the Standards, Definition of Internal Auditing, the Code of Ethics, the quality of the audit work and supervision, policies and procedures supporting the internal audit activity, the added value to the organisation and the achievement of performance standards.

Periodic assessments will be conducted through:

- Working paper reviews for conformance to the definition of Internal Auditing, the Code of Ethics, the Standards, and internal audit policies and procedures
- Self-assessment of the internal audit activity with objectives established as part of the QAIP components – Governance, Professional Practice and Communication
- Review of internal audit performance measure and benchmarking of best practices. Periodic activity and performance reporting to the board and other stakeholders as deemed necessary.
- Annual self-review of conformance to the PSIAS.

The periodic self assessment should identify the quality of ongoing performance and opportunities for improvement and to check and validate the objectives and criteria used in the QAIP. The self assessment will be completed on an annual basis and the results reported to the Board and Senior Management.

### **3 External Assessment**

The External Assessment will consist of a broad scope of coverage that includes the following .

- Conformance with the Standards, Definition of Internal Auditing, the Code of Ethics, and internal audit's Charter, plans, policies, procedures, practices, and any applicable legislative and regulatory requirements
- Expectations of Internal Audit as expressed by the Board and Senior Management
- Integration of the Internal Audit activity into the governance process
- The mix of staff knowledge, experiences, and disciplines, including use of tools and techniques, and process improvements
- A determination whether Internal Audit adds value and improves the Council's operations.

An external assessment will be conducted every five years by a qualified, independent assessor from outside the Council. The assessment will be in the form of a full external assessment, or a self-assessment with independent external validation. The format of the external assessment will be agreed with the Board.

### **4 Assessment scale**

The scale to assess the level of conformance of the Internal Audit activity with the standards is as follows:

Generally Conforms/Partially Conforms/Does Not Conform  
(IIA Quality Assessment Manual Scale)

### **5 Reporting on the Quality Program**

Internal Assessments – reported to the Board and Senior Management on an annual basis. The internal assessment report will be accompanied by a written action plan in response to significant findings and recommendations contained in the report.

External Assessments – reported to the Board and Senior Management. The external assessment report will be accompanied by a written action plan in response to significant findings and recommendations contained in the report.

Follow up – The CAE will implement appropriate follow up actions to ensure that recommendations made in the reports and action plans developed are implemented in a reasonable timeframe.



<b>Quality Assurance &amp; Improvement Programme</b>			
<b>Ongoing Monitoring of Performance</b>			
<b>Activity</b>	<b>Frequency</b>	<b>Responsibility</b>	<b>Reporting</b>
Review of the audit universe to ensure complete	Annual	Head of Internal Audit Services	N/A
Identification of risks affecting the operation of the Internal Audit Service	Quarterly	Head of Internal Audit Services	N/A
Review of audit engagements	Each engagement	Head of Internal Audit Services/Principal Auditor	N/A
Progress against the audit plan	Monthly	Head of Internal Audit Services/Principal Auditor	Quarterly report to Audit & Governance Committee
Progress against Key Performance Indicators	Quarterly	Head of Internal Audit Services	Quarterly report to Audit & Governance Committee
Discuss performance of internal audit activity	Monthly	Head of Internal Audit Services and Executive Director Corporate Services	Annual report to Audit & Governance Committee
Customer survey/questionnaire	For each engagement	Principal Auditor	Annual report to Audit & Governance Committee
Review of Internal Audit Charter, goals, policies & procedures	Annual	Head of Internal Audit Services	Annual report to Audit & Governance Committee
Personal Development Review	Annual	Appropriate line manager	Documentation to HR
Continuous improvement activity and adoption of best practice	Continuous	Head of Internal Audit Services/Principal Auditor	Annual report to the Audit & Governance Committee
Identification of added value to the authority's operations	Continuous	Head of Internal Audit Services/Principal Auditor	Annual report to the Audit & Governance Committee

<b>Periodic Self Assessments</b>			
Self assessment against the Public Sector Internal Audit Standards (PSIAS)	Annual	Head of Internal Audit Services	Annual report to the Audit & Governance Committee
Compliance with applicable laws, regulations and other standards that the Internal Audit activity may be subject to	Continuous review	Head of Internal Audit Services	Report to Audit & Governance Committee when applicable
Benchmarking review of Internal Audit Services	Every 3 years	Head of Internal Audit Services	Report to Audit & Governance Committee
<b>External Assessments</b>			
Assessment against the PSIAS	Every 5 years	Head of Internal Audit Services and external reviewer	Report to the Audit & Governance Committee

**PLANNED REPORTS TO AUDIT AND GOVERNANCE COMMITTEE 2018 - 2019**

	<b>Report</b>	<b>Committee Date</b>	<b>Report Of</b>	<b>Comments</b>
1	Role of the Audit Committee	<b>June</b>	Grant Thornton	Presentation/training
2	Audit and Governance Committee Update	<b>June</b>	Grant Thornton	
3	Fee Letter	<b>June</b>	Grant Thornton	
4	Review of the Constitution and Scheme of Delegation for Officers	<b>June</b>	Solicitor to the Council and Monitoring Officer	
5	RIPA Quarterly Report	<b>June</b>	Solicitor to the Council and Monitoring Officer	
6	Members/Standards x 2	<b>June</b>	Solicitor to the Council and Monitoring Officer	
7	Internal Audit Annual and Quarterly Update	<b>June</b>	Head of Internal Audit	
8	Public Sector Internal Audit Standards/Quality Assurance and Improvement Programme	<b>June</b>	Head of Internal Audit	
9	Financial Guidance	<b>June</b>	Head of Internal Audit	
10	Annual Governance Statement and Code of Corporate Governance	<b>June</b>	Head of Internal Audit	

Page 155

1	Audit Findings Report	<b>July</b>	Grant Thornton	
2	Management Representation Letter	<b>July</b>	Grant Thornton	
3	Annual Statement of Accounts	<b>July</b>	Executive Director Corporate Services	
4	Annual Treasury Outturn	<b>July</b>	Executive Director Corporate Services	
5	RIPA Quarterly Report	<b>July</b>	Solicitor to the Council and Monitoring Officer	
6	Risk Management Quarterly Update	<b>July</b>	Head of Internal Audit	
7	Counter and Corruption Fraud Update	<b>July</b>	Head of Internal Audit	
8	Internal Audit Customer Satisfaction Survey	<b>July</b>	Head of Internal Audit	
9	Internal Audit Quarterly Update	<b>July</b>	Head of Internal Audit	
1	Local Government Ombudsman's Annual Review and Report 2016/17	<b>September</b>	Solicitor to the Council and Monitoring Officer	
1	RIPA Quarterly Update	<b>October</b>	Solicitor to the Council and Monitoring Officer	
2	Internal Audit Quarterly Update	<b>October</b>	Head of Internal Audit	
3	Risk Management Quarterly Update	<b>October</b>	Head of Internal Audit	

4	Annual Governance Statement Update	<b>October</b>	Head of Internal Audit	
1	Audit Report on Certification Work	<b>February</b>	Grant Thornton	
2	Audit Progress Report	<b>February</b>	Grant Thornton	
3	Annual Audit Letter	<b>February</b>	Grant Thornton	
4	RIPA Quarterly Report	<b>February</b>	Monitoring Officer Solicitor to the Council and	
5	Internal Audit Quarterly Update	<b>February</b>	Head of Internal Audit	
6	Risk Management Quarterly Update	<b>February</b>	Head of Internal Audit	
7	Counter Fraud Update	<b>February</b>	Head of Internal Audit	
1	Draft Audit Plan	<b>March</b>	Grant Thornton	
2	Draft Certification Work Plan	<b>March</b>	Grant Thornton	
3	Audit Committee Update	<b>March</b>	Grant Thornton	
4	Auditing Standards	<b>March</b>	Grant Thornton	
5	Informing the Audit Risk Assessment	<b>March</b>	Grant Thornton	
6	Review of the Treasury Management Strategy Statement, Minimum Revenue Provision Policy Statement and Annual Investment Statement	<b>March</b>	Executive Director Corporate Services	

	and the Treasury Management Strategy Statement and Annual Investment Strategy Mid-Year Review Report			
7	Final Accounts – Action Plan	<b>March</b>	Director of Finance	
8	Internal Audit Charter and Audit Plan	<b>March</b>	Head of Internal Audit	
9	Audit and Governance Committee Self-Assessment	<b>March</b>	Head of Internal Audit	
10	Review of Financial Guidance	<b>March</b>	Head of Internal Audit	

The Portfolio Holder for Assets and Finance